



Objectives: Art-based therapies, as nondirective methods, attempt to visualize past traumatic experiences and harmonize the individual with himself and with others.

Methods: In the preventive activities we include all activities involving nonverbal communication and holistic engagement. "Beneficiaries can create their own images with which they want to interact, to arrange their environment... We experiment with art-specific ways to make interdisciplinary exchanges and cultural interferences using the universal language of visual arts along with intercultural elements and religious ecumenism ... Sometimes, common themes with schools and higher education are addressed as an extra-curricular complement. Benefits are multiple, diverse and complex, appear on the paths that offer inter/pluri/transcultural learning opportunities and exchange of knowledge, making space and time connections between different cultures. [2]

Results: The creative process and the interaction increases self esteem, courage, taking of risks, the learning of new skills.

Conclusions: New ideas, conceptions and ways of expression emerge, enriching the patient's life according with the therapeutic purposes. [3].

Disclosure: REFERENCES [1] Chirila, Emilia (2011), PhD Thesis, Educație artistică și art-terapie cu mijloace specifice ceramicii

[Artistic Education and Art-therapy within the Specific Means of Ceramics], University of Art and Design, Cluj-Napoca, Romania, p. 390

Keywords: art therapy; play /occupational therapy; multimedia technology; physical and metaphysical environmen

EPV0225

Art therapy with children surviving cancer used to relieve symptoms associated with death, loss and pain

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Introduction:



Since dying is inevitable, it is part of life, children need to be able to deal with the feelings and emotions associated with death, loss and pain. When the grievien child move among the art modalities, he or she is able to deepen understanding of his or her lived experiences.

Objectives:

Our aim is to uncover these new perspectives and sources of inspiration in order to advance in defining the importance of resilience in personal development.

Methods: We made use of the following techniques: ceramic, drawing, modeling, painting, assemblage of unconventional materials, multimedia techniques, animation. Performing artworks, artefacts, or using craft arts are test activities for art therapy and occupational therapy. „...Contemporary visual arts bring together, in different degrees of relationship and fusion, fields of art that until now were understood and practiced more individually. The most suitable territory for this partnership is that of the physical and metaphysical environment, provided by the installationist and shareholder arts.” [2] A medical project was transformed into an artistic project [4]

Results: Given the diversity of non-verbal communication of the child, art therapy is not a simple accessory method in the therapeutic process of emotional disorders caused by grief of children, but a mandatory condition of it.

Conclusions: Given the diversity of non-verbal communication of the child, art therapy is not a simple accessory method in the therapeutic process of emotional disorders caused by grief of children, but a mandatory condition of it.



Disclosure: REFERENCES [1] Drăgan-Chirilă, Diana.(24-26.05 2018), Associate Professor Ph.D., University of Art and Design Cluj-Napoca, Romania, visual artist, Coordinator of the multimedia installation “Diagnostique” new media and multimedia performance instal

Keywords: dying is inevitable; emotional disorders; non-verbal communication; art therapy an resilience in per

EPV0226

Negative impact of family religious and spiritual beliefs in schizophrenia – a 2 year follow-up case

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Introduction: For individuals with mental disorders and their families, religion and spirituality may have a significant influence over how these conditions are understood, managed and treated. Family can act as a moderator in which psychotic patients interpret and explain internalized events. However, they can have a negative impact when discouraging diagnosis and treatment adherence.

Objectives: Explore the impact of family religious and spiritual beliefs on clinical outcomes among a schizophrenic patient. Investigate the psychiatrist’s role in addressing barriers to treatment adherence.

Methods: Data retrieved from clinical interview. Subsequent non-systematic review of the most relevant literature on the topic.

Results: We report a case of a 30-year-old single catholic woman, living with her parents. She had a past history of psychotic symptoms that were interpreted in a context of a depressive episode. After some months she fulfilled the criteria for Schizophrenia and anti-psychotic was prescribed. Family always demonstrated doubts about the disease and negatively influenced the treatment adherence. They believed she was possessed by demons and she was submitted to exorcisms and spiritual therapies. After a 2-year follow-up with erratic treatment regimens and worsening symptoms they accepted her hospitalisation. The majority of symptoms were controlled allowing complete adherence to the same treatment proposed before.

Conclusions: The disease acceptance is a complex process, influenced by multiple beliefs that play different roles in each patient and family, that can adversely influence clinical management. It is essential to understand the family sociocultural environment, by gauging the most influential elements aiming to enhance their compliance with treatment.

Disclosure: No significant relationships.

Keywords: religious beliefs; treatment adherence; schizophrenia; cultural

EPV0227

Transcultural validation of the “regulation of emotions questionnaire” among Tunisian university students

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Introduction: The regulation of emotions is a psychological process covering the capacity of inhibiting, maintaining or modulating emotions to create a coherent psychological functioning and to