

Conclusions: Social inequalities in mental health may have an onset already in childhood. Therefore, future interventions should focus on reducing social inequalities in childhood in order to improve the mental health in young people.

Disclosure: No significant relationships.

Keywords: Low parental income; migrants; mental disorder; Outpatient mental healthcare

EPV0875

Global world, global hospitals. Ethnic differences and psychotic symptoms presentation – a review

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Introduction: We live in a global world, where immigration is no longer just an escape, but also a demand and a desire. Globalization imposes the challenge of recognizing psychiatric illness in the most diverse of patients.

Objectives: To review the literature about the documentation of ethnic differences and the psychotic symptoms presentation.

Methods: We performed a MEDLINE search using the key words: ethnic differences and psychotic symptoms. We only included studies with full text published in English.

Results: Since the 1970s, some studies have shown that there are differences in the manifestation of psychiatric illness in ethnic minorities. Most recent studies confirm this statement, mainly with an increase in immigration in the 20th century, with the receiving countries having an increase in the number of cases of psychosis (affective and non-affective). Belonging to an ethnic minority increases the risk of psychotic symptoms and experiences, which is related to the patients' perception of discrimination, social differences, family separation and the stress associated with immigration. On the other hand, these groups also have less access to health care.

Conclusions: Currently, professionals are more aware of the global world and what this implies in the manifestations of psychiatric illnesses. However, more studies will be needed to identify these natural differences. In this way, we will be able to help our patients anywhere and support their families.

Disclosure: No significant relationships.

Keywords: ethnic differences; psychotic symptoms

EPV0876

Role of migration in the development of a first episode of psychosis

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Introduction: Currently, there is scientific evidence supporting the relationship between socio-environmental factors and the onset of a first episode of psychosis (FEP). In this context, the phenomenon of migration, seen as a negative life experience, may become an

important risk factor in developing a psychotic disorder (PD). In Europe, the impact of this phenomenon is growing and, therefore, it's necessary to provide a proper answer to these individual's mental health problems.

Objectives: Identify which phases of this migration process are most important in the development of a FEP and what are the more significant socio-environmental factors in each phase.

Methods: Bibliographic research in Pubmed database using the terms "Migration" and "First Episode Psychosis".

Results: Research confirms that migrants have a 2 to 3-fold increased risk of developing a PD. This risk will be even higher in the refugee population. Pre- and post-migration factors demonstrated to be more important than factors related with the migration process itself. In the pre-migration phase highlight factors like the lower parental social class and a previous trauma. In the post-migration phase highlight factors like discrimination, social disadvantage and a mismatch between expectations and reality.

Conclusions: Literature is unanimous in considering migrant status as an independent risk factor for the development of FEP, possibly due to the outsider's role in society. Thus, despite the growing interest in Biological Psychiatry, this work demonstrates that socio-environmental factors are very preponderant in the development of these disorders and because of that further investigation is still necessary.

Disclosure: No significant relationships.

Keywords: First Episode Psychosis; migration

EPV0878

Immigration projects among young doctors in Tunisia: Prevalence, destinations and causes.

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Introduction: The shortage of doctors has become a worrying problem in Tunisia. It is influenced by the phenomenon of immigration which remains poorly studied despite its magnitude.

Objectives: To describe the migration intentions of Tunisian young doctors and to identify the associated factors that influence their decisions.

Methods: This is a cross-sectional, analytical survey conducted between January and June 2019. It included all young doctors practicing in academic hospitals of Sousse (Tunisia). Data collection was based on a standardized self-administered questionnaire.

Results: A total of 182 valid questionnaires were collected. The median age was 26.9±2.5 years and the sex-ratio was 0.47. Immigration projects were reported by 38.5% of participants. The main destination was France (36.3%). The main contributing factors were marital status (p<10-3), resident status (p=0.002), surgical specialty (p<10-3), personal dissatisfaction (p=0.003), underpayment (p<10-3), workload and difficult work conditions (p<10-3), lack of appropriate training (p<10-3), financial crisis and economic instability (p<10-3), lack of a clear strategy for the healthcare

system ($p=0.005$) and the impression by the model of other doctors who left Tunisia ($p=0.01$).

Conclusions: The rate of migration intentions expressed in this study highlights the emergent need of interventions emanating from the Tunisian health-care system's problems in order to stop the flow of young doctors towards developed countries in quest of better conditions.

Disclosure: No significant relationships.

Keywords: causes; immigration; young doctors

EPV0879

Insomnia and the role of postmigration stress among Syrian refugees

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Introduction: Research on the prevalence of and risk factors for insomnia among refugee populations is limited and tends to focus on pre-migratory trauma. Yet, post migratory stressors are just as important for mental health and may also relate to insomnia.

Objectives: Objective: To determine the association between different post-migration stressors and insomnia among Syrian refugees living in Norway.

Methods: We used data from the REUFGE study, a cross-sectional survey with 902 Syrian refugees who arrived in Norway between 2015 and 2017. Insomnia was measured with the Bergen Insomnia Scale and post-migrant stress with the Refugee Post-Migration Stress Scale (RPMS). We applied logistic regression analyses to investigate the association between seven different postmigration stressors and insomnia after controlling for demographics, traumatic experiences and post traumatic stress symptoms.

Results: Of the 873 participants who completed questions on insomnia, 515 (41%) reported insomnia. There was no significant difference between men and women. The most commonly reported postmigration stressors were *Competency Strain* [SML1], *Family and Home Concerns*, and *Loss of Home Country*. After controlling for demographics, traumatic experiences and post-traumatic stress symptoms, *Financial Strain*, *Loss of Home Country*, *Family and Home Concerns* and *Social Strain* were still associated with higher odds of insomnia.

Conclusions: Resettlement difficulties are related to poorer sleep among refugees. Measures to improve the social conditions and financial concerns of refugees in receiving countries could potentially reduce insomnia among refugees which in turn, may benefit mental and physical health.

Disclosure: No significant relationships.

Keywords: Refugees; Insomnia; Postmigration stress; Forced migration

EPV0880

Equality in healthcare: transcultural psychiatry

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Introduction: Migratory flows are increasing more and more, especially regarding the refugee crisis during the last years. There are around 86,7 million migrants in Europe. Migrants share similar experiences that may affect their physical and mental health, such as loss of a social network, lack of economical support or high levels of stress and discrimination.

Objectives: To analyze the obstacles that migrants must face to obtain a mental health assistance and the importance of an intercultural approach.

Methods: A narrative review of the existing literature on the subject.

Results: Although there exists evidence that shows that migrants tend to have more health needs, they usually seek less medical advice and receive a poor-quality attention, fulfilling the inverse-care law. This is due to several reasons. Many migrants are excluded of the health care system due to bureaucratic impediments. Also, the language has a determining role, since a higher quality of communication could lead to a better understanding of the symptoms, reducing the risk of erroneous evaluations. Besides, different background and culture between the patient and the doctor can result in lack of communication, mistrust, mistreatment, poor adherence, and worse prognosis.

Conclusions: Despite the exponential growth of migration in the last decade and the continue progression, migrants still face many barriers to receive healthcare. It is necessary to do more research on the mental health of migrants and ethnic minorities to ensure quality care to different cultures.

Disclosure: No significant relationships.

Keywords: migrants; transcultural; mental healthcare

EPV0881

Cultural syndromes in the era of globalization.

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Introduction: Cultural syndromes are pathologies that cannot be understood outside the cultural or subcultural context of the person who suffers from it, since both their etiology and symptoms are symbolized by the patient and by the environment in fields of significance inherent to their culture. The globalization process in which we are involved affects the presentation, understanding, diagnosis and treatment of cultural syndromes as they were traditionally understood.

Objectives: The objective of this work is to review the current state of cultural syndromes, the evolution of incidence and prevalence in recent years, as well as whether the globalization process has affected their understanding.

Methods: A bibliographic review has been carried out on cultural syndromes and case reports in both endemic and foreign populations. Likewise, a reflection is made on the possible evolution of these syndromes.

Results: Globalization has been understood as a natural process of integration of nations and their cultures, incorporating the diversity and specificity of the other without forgetting their own and traditional characteristics. Within the globalization process,