Methods: We interviewed narrative psychotherapists and practitioners identifying as narrative psychoanalysts about their philosophical foundations in order to explore this apparent convergence. We used constructivist grounded theory to produce common themes. We also put the interviews through an AI program -- Perplexity to explore how well it correlated with our non-AI analysis.

Results: Both groups of practitioners believed that that we construct stories to give us identity and meaning in our lives. The practitioners who came from a psychoanalytic perspective described their coming to understand that psychoanalysis is embedded in stories that ciients and therapists tell. Patients and analysts bring, create, and modify stories in analytic work. Both types of practitioners described the importance of cultivating an active listening attitude on the part of the clinician. Jacques Lacan was often quoted as saying that the greatest gift we can give our clients is to listen without judgment or interpretation. Narrative therapists were more inclined to mention Hermans' dialogical self-theory while psychoanalytically trained therapists spoke of object relations theory with both supporting a philosophy of making meaning together. Both groups of practioners mentioned the importance of meaning being constructed within a particular context. Both groups mentioned the importance of reflective practices, Buddhism, and Indigenous philosophies to support the introspective elements of this technique along with therapy being grounded in our relationships with others. Both groups emphasized the importance of showing how creating new life narratives over time transforms our sense of self, relationship, and meaning.

Conclusions: Qualitative analysis of these two groups of practitioners' philosophies of psychotherapy supports the idea of a convergence between narrative psychotherapy and psychoanalysis which may promise to enrich both groups.

Disclosure of Interest: None Declared

EPV1402

Perspectives on Approaches in Psychiatry: A Resident Survey in Tunisia

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Introduction: The field of psychiatry encompasses a range of approaches that guide both clinical practice and training.
This study aims to explore residents' views on these diverse approaches, identifying trends and preferences that could inform the development of psychiatric education and clinical practice in the region.

Objectives: The objective of this study is to assess the perspectives of psychiatry and child psychiatry residents in Tunisia on different approaches to mental health care and to identify their preferences and attitudes towards evidence-based psychiatry.

Methods: A cross-sectional survey was conducted among 31 psychiatry and child psychiatry residents in Tunisia through an online survey.
The survey utilized a combination of yes/no questions and gradual questions to gather data on residents' perspectives regarding various psychiatric approaches.

Data collection was carried out throughout the month of july 2024.

Results: This study included 31 participants with an average age of 28.1 years.
Less than half of the participants (45.2%) reported that they believe the brain is the sole source of mental disorders, with a notable proportion identifying as non-theist.
A majority of residents (80.5%) agreed that medicine should be grounded in the scientific method. However, only 14 participants agreed that "Evidence-based approaches should be the only approaches in psychiatry," and 15 participants agreed that "The biological approach should be the primary focus in psychiatry."
Most residents considered most approaches to be evidence-based. In contrast, the psychodynamic approach was less frequently viewed as evidence-based.
Nearly all residents (n=27) believed that an integrative approach is beneficial in psychiatric practice.
More than half of the participants (54.8%) rated their training in Evidence-Based Psychiatry as limited. Despite this, 24 participants reported that they often try to adhere to evidence-based guidelines when treating patients.
The main barriers to implementing Evidence-Based Psychiatry were identified as a lack of resources in psychiatric departments or hospitals (41.9%) and insufficient training (38.7%).

Conclusions: The results indicate that while there is strong support for evidence-based medicine and the integration of multiple theoretical models, there are differing views on the predominance of specific approaches in clinical practice.
The majority of residents acknowledge the importance of grounding psychiatric practice in empirical evidence, yet there is less consensus on making evidence-based approaches the exclusive or primary focus.
Despite recognizing the benefits of integrating diverse approaches, many residents perceive limitations in their training and resources, which affect their ability to adhere fully to evidence-based practices. The findings underscore the need for enhanced training in Evidence-Based Psychiatry and improved resources within psychiatric departments and hospitals.

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EPV1403

Lonely but not alone: integrating social alienation and mental health in urban environments

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Introduction: The modern urban landscape is increasingly characterized by the paradox of social isolation in physical proximity. Research consistently reveals a troubling link between social alienation and mental health issues, including a heightened risk for psychosis among vulnerable groups. As cities expand and diversify, understanding and mitigating the detrimental effects of urban alienation becomes crucial. This presentation explores the complex relationship between urban living, social alienation, and mental health, emphasizing the need for psychiatrists to have a more holistic understanding of socio-urban phenomena.