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*Corresponding author.

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EPP0379

Socio-psychological characteristics of persons who had attempted suicide (Minsk, Belarus)

P. Lapanau^{1*} and S. Davidovsky²

¹Belarusian State Pedagogical University, Institute Of Psychology, Minsk, Belarus and ²Belarusian Medical Academy for Postgraduate Training, Psychotherapy, Minsk, Belarus

*Corresponding author.

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Introduction: Mortality from intentional self-harm is an urgent medical and social problem in most countries of the world. According to the World Health Organization, suicide mortality is the second leading cause of death among young people aged 15-29 years globally. In the Republic of Belarus, this is one of the main causes of death from external causes.

Objectives: To identify statistically significant social factors and individual characteristics of people who had attempted suicide.

Methods: Three patient groups were formed: persons who had suicidal attempt with high probability of death (mainly hanging) (GSAD), persons who had suicidal attempt in other ways (GSAO), and persons who had diagnosed adjustment disorder and did not have suicidal attempts (comparison group CG). The groups consisted of 40, 80 and 40 people, respectively. Socio-demographic data were determined, the level of stress was assessed according to the Holmes and Rahe Stress Scale, depressive symptoms on the Montgomery-Åsberg Depression Rating Scale, individual features were determined using the Eysenck personality questionnaire and the Leonhard-Shmishek personality characteristics questionnaire. The obtained data were analyzed using the Spearman linear correlation coefficient.

Results: Statistical analysis revealed one significant factor interconnected with a high level of motivation for committing suicide - the method of suicide ($r_s = -0.68$) and 2 factors were at the significance boundary: the presence of a diagnosis of mental disorder ($r_s = 0.28$), and the education factor ($r_s = -0.28$).

Conclusions: The method of suicide, the presence of a mental disorder and the level of education are the most significant factors interrelated with a pronounced motivation for committing suicide.

Disclosure: No significant relationships.

Keywords: suicidal and self-harming behavior; suicidal intentions; borderline personality disorder

EPP0380

Mentalization deficits and entrapment moderate the association between complicated grief and suicide ideation among suicide-loss

L. Lev-Ari^{1*} and Y. Levi-Belz²

¹Ruppin Academic Center, Clinical Psychology, Emek Hefer, Israel and

²Ruppin Academic Center, Behavioral Sciences, hadera, Israel

Introduction: Suicide-loss survivors (SLs) are recognized as an at-risk population for several psychiatric complications, including complicated grief (CG) and suicide ideation (SI). However, limited data are available concerning the contribution of CG to SI among suicide survivors. Moreover, knowledge about possible psychological processes which may increase SI levels following CG is rare.

Objectives: In this study, we aim to examine the role of two important emotion regulation variables—mentalization deficits and entrapment—as possible moderators of the association between CG and SI in the aftermath of suicide loss.

Methods: Participants were 152 suicide-loss survivors, aged 18-70, who completed questionnaires tapping CG, SI, mentalization deficits, and entrapment.

Results: The findings revealed SI to have high and positive associations with CG, entrapment, and mentalization deficits. Regression analysis showed mentalization deficits and entrapment contributing to SI beyond the contribution of CG. Notably, a significant interaction was found, indicating that CG and SI became more strongly associated at higher levels of mentalization deficits.

Conclusions: The study's findings highlight the critical link between complicated grief and suicide ideation among SLs and the role of mentalization deficits as a possible facilitator of this link. Practical implications relating to suicide risk among SLs are discussed, as well as focused clinical recommendations. The importance of mentalization-based interventions for decreasing SI levels in the aftermath of suicide loss is highlighted.

Disclosure: No significant relationships.

Keywords: suicide-loss survivors; complicated grief; mentalization; suicide ideation

COVID-19 and Related Topics 04

EPP0381

Psychosocial risks among the healthcare workforce working in COVID services: findings from a cross-sectional study on psychosocial risks

P.A. Gouveia^{1*}, D. Lopes², A.R. Henriques², P. Moura¹ and A. Pires¹

¹Local health Unit of Lower Alentejo, Psychiatry, Beja, Portugal and ²Comprehensive Health Research Centre; & EpiDoC Unit, CEDOC, Nova Medical School, Universidade Nova De Lisboa, LISBOA, Portugal

*Corresponding author.

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Introduction: Poor management in healthcare can have significant consequences in the workers' health, performance, and quality of care. Several risks worsened during the COVID-19 pandemic, namely among the workforce caring for patients with suspected/confirmed COVID-19 infection.