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Introduction: Anesthesia and critical care professionals are particularly vulnerable to burnout due to the demanding nature of their work, including long hours, night shifts, high-stress situations, and the constant risk of medical errors. Emotional intelligence (EI) has emerged as a crucial factor in fostering positive professional relationships and mitigating burnout.

Objectives: To study the association between EI and burnout among healthcare workers in anesthesia and critical care settings.

Methods: This is a cross-sectional descriptive and analytical study conducted over a period of 3 months in 2024. It included 72 healthcare workers in the anesthesia and critical care departments at the Sahloul University Hospital in Sousse. The survey was based on a self-administered questionnaire, including data on socio-demographic and professional characteristics, the Maslach Burnout Inventory (MBI), and the Schutte Self-Report Emotional Intelligence Test (SSEIT).

Results: The majority of participants were female (58.3%) with an average age of 33 years. Most participants (61.1%) were nurses, and 40.3% worked in the surgical critical care unit. The average EI score was 103.26. Among the EI factors, emotion perception was the most affected, with a score of 30.69 ± 9.34 . EI levels were low in 11.1% of cases. Severe burnout was present in 19.4% of participants, and 65.3% had a high emotional exhaustion (EE) score. Additionally, 70.8% had a high depersonalization score, and 58.3% exhibited low personal accomplishment. EI levels were statistically associated with time spent with family and friends ($p = 0.027$). Among the professional factors, job satisfaction was significantly associated with EI level ($p = 0.001$). The factors significantly associated with severe burnout were the absence of alcohol consumption ($p = 0.000$) and the absence of time spent with loved ones ($p = 0.033$). A significant relationship between EI and self-emotion management and EE was reported ($p = 0.040$).

Conclusions: EI is crucial for preventing burnout among healthcare workers in anesthesia and critical care. By enhancing positive attitudes, managing stress, and improving interpersonal skills, EI can improve work life and patient care. Incorporating EI training into health science curricula can equip future providers with essential tools for well-being.

Disclosure of Interest: None Declared

EPV0935

The Impact of Psychosocial Factors on the Work Capacity of Healthcare Workers

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Introduction: Healthcare workers, faced with increasingly demanding professional requirements, are particularly exposed to psychosocial risks. These psychosocial factors have direct repercussions on their work capacity, potentially compromising their professional performance and increasing the risk of medical errors.

Objectives: To study the influence of psychosocial factors on the work capacity of healthcare workers.

Methods: This is an analytical cross-sectional study conducted among healthcare staff at Sahloul University Hospital in Sousse over a 3-month period. Our study was based on a questionnaire that included socio-professional characteristics, Karasek's model, and the Work Ability Index (WAI).

Results: One hundred and thirty-seven staff members were included in this study, with a response rate of 72.4%. The mean age was 48.7 years, with a sex ratio of 0.57. A low work ability (WAI) was reported in 37.1% of cases. A high psychological demand at work was noted in 24.8% of cases. Job strain was reported in 18.1% of cases. Low WAI scores were statistically associated with age ($p < 10^{-3}$), female gender ($p < 10^{-3}$), lack of physical activity ($p = 0.03$), professional seniority ($p < 10^{-3}$), and high psychological demand at work ($p < 10^{-3}$). No association was found between low decision latitude, low social support, and WAI scores.

Conclusions: The results of this study highlight the significant impact of psychosocial factors on the work capacity of healthcare staff. Preventive measures in healthcare settings to improve working conditions and preserve the mental health of caregivers are essential.

Disclosure of Interest: None Declared

EPV0936

Attitudes of Psychiatric Hospital Staff Toward Restraint and Influencing Factors

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Introduction: There has been an increasing socio-medical discourse on the humanitarian approach to the use of restraint in psychiatric inpatient units.

Objectives: It is necessary to investigate the attitudes of psychiatric hospital staff toward the use of restraint in psychiatric inpatient units and to identify the factors influencing these attitudes.

Methods: This study examined the attitudes of psychiatric hospital staff toward the use of restraint in situations involving physical violence toward other patients, verbal violence toward other patients, physical violence toward staff, verbal violence toward staff, and disruption of the treatment environment. The study also investigated factors related to the considerations and perceived burdens (both legal and medical) associated with the use of restraint, comparing

these findings with data from a survey conducted 10 years ago. Attitudes toward restraint were not significantly associated with gender, age, or years of service. However, staffs who exhibited less prejudice toward mental illness-related crime were less likely to find restraint necessary. Compared to 10 years ago, there was little change in the need for restraint in cases of physical violence (both toward patients and staff), but the need for restraint in response to verbal violence (toward both patients and staff) had decreased. The perceived burden, both legal and medical, associated with the use of restraint had increased.

Results: Attitudes toward restraint were not significantly associated with gender, age, or years of service. However, staff who exhibited less prejudice toward mental illness-related crime were less likely to find restraint necessary. Compared to 10 years ago, there was little change in the need for restraint in cases of physical violence (both toward patients and staff), but the need for restraint in response to verbal violence (toward both patients and staff) had decreased. The perceived burden, both legal and medical, associated with the use of restraint had increased.

Conclusions: Psychiatric hospital staffs with less prejudice toward mental illness-related crime were less likely to perceive a need for the use of restraint. Compared to 10 years ago, the necessity of restraint in cases of verbal violence has decreased, which may be attributed to ongoing human rights education and increased legal and medical concerns. These findings provide important insights for future policy development aimed at promoting humanitarian approaches, such as non-restraint treatments.

Disclosure of Interest: None Declared

EPV0937

The Impact of Night Shift Work on Mental Health Outcomes in a Tunisian Industrial Setting

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Introduction: The increasing prevalence of shift work, particularly night shifts, in modern industrial settings has raised concerns about its potential detrimental effects on workers' health. Disruptions to circadian rhythms, sleep deprivation, and social isolation associated with night shift work have been linked to a range of physical and mental health problems.

Objectives: This study aims to investigate the specific impact of night shift work on the mental health outcomes of Tunisian industrial workers.

Methods: This is a cross-sectional study carried out during 3 years among active workers working in the inter-company occupational

health services of Sousse. All participants had a fixed night work schedule. Data collection was based on a pre-established anonymous questionnaire. Job strain was assessed with Karazek questionnaire.

Results: A total of 453 employees were included in our study. Mean age was 32.12 ± 7.68 years. Half of the participants were women (52%). Sixty percent of participants were not married. Tobacco consumption was identified among 26% of the participants. The most affected sector of activity was the electronic one (63%). The average occupational seniority was 7.78 ± 6.407 . Job strain was revealed in 23.4% of employees. High psychological demand was noted among 46.5% of cases. Low job control was identified among 57.4% of participants. Low social support was noted among 68% of participants.

Conclusions: These results underscore the need for targeted interventions to protect the health and well-being of night shift workers. Future research should explore the effectiveness of various strategies, such as scheduling modifications, workplace accommodations, and health promotion programs, in mitigating the negative impacts of night shift work.

Disclosure of Interest: None Declared

EPV0938

Mental well-being of medical students and the need for mental health care in the dynamics of 2020-2024 years

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Introduction: Research has consistently highlighted the vulnerability of medical students to poor mental health and wellbeing. The COVID-19 pandemic has further exacerbated this issue. However, there is limited understanding of medical students' mental well-being dynamics after the pandemic.

Objectives: The aim of the study was to comparatively analyse the mental wellbeing and mental health needs of medical students in comparison with those during the COVID-19 pandemic.

Methods: An anonymous structured online survey was conducted among students of a medical institute in St. Petersburg, Russia. The sample included responses from 152 students (76.3% women) of all courses of study. The results were compared with the data of a survey conducted at the same institute in 2020 (Chumakov *et al.* Middle East Curr Psychiatry 2021;28, 38).

Results: The majority of respondents (n=145; 95.4%) reported experiencing significant stress in their lives (95.8% in 2020). The main sources of stress included education-related factors (83.6%), uncertainty about the future (72.4%), financial problems (48.0%), intimate/family relationships (46.7%), work (27.6%), and housing problems (19.1%). Thirteen students (8.6%) reported that they had been diagnosed with a mental health disorder prior to enrolling in the institute (6.1% in 2020; p=0.393). Twice as much students (n=27; 17.8%) were diagnosed with mental disorders during institute studies (15.2% in 2020; p=0.53). The mental disorders reported by the respondents were dominated by depressive disorders (n=7), anxiety disorders (5), mixed anxiety and depressive disorder (5), ADHD (5), bipolar disorder and cyclothymia (3). At the time of the study, 26 students (17.1%) were being seen by a mental health