

O0027

The effects of compassion and fears of compassion on mental health during the COVID-19 pandemic: A multinational study across 21 countries

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Introduction: The COVID-19 pandemic is having an unprecedented detrimental impact on mental health in people around the world. It is therefore important to examine factors that may buffer or heighten the risk of mental health problems in this context.

Objectives: This study explores the buffering effects of different flows of compassion (for self, for others, from others) and the magnifying effects of fears of compassion on the impact of perceived threat of COVID-19 on depression, anxiety and stress, and social safeness.

Methods: 4057 adult participants collected from the general community population across 21 countries from Europe, Middle East, North America, South America, Asia and Oceania, completed self-report measures of perceived threat of COVID-19, compassion, fears of compassion, depression, anxiety, stress, and social safeness.

Results: Self-compassion moderated the impact of perceived threat of COVID-19 on depression, anxiety and stress, whereas compassion from others moderated the effects of fears of COVID-19 on social safeness. Fears of compassion moderated the impact of perceived threat of COVID-19 on psychological distress. Only fears of compassion from others moderated the effects of fears of COVID-19 on social safeness. These effects were consistent across countries.

Conclusions: Our findings highlight the universal protective role of compassion, in particular self-compassion and compassion from others, in promoting resilience by buffering against the harmful effects of the COVID-19 pandemic on mental health and social safeness. Furthermore, our results reveal that fears of compassion have a magnifying effect on the damaging impact of the COVID-19 pandemic on mental health and social safeness.

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Keywords: Compassion; mental health; Multinational study; Covid-19

O0028

Belief in false information regarding the COVID-19 pandemic and a tendency to conspiracy thinking as factors that may exacerbate symptoms of anxiety and depression among Polish citizens

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Introduction: The COVID-19 pandemic has become the subject of intense discussion on social media platforms. Fake news and conspiracy theories about the SARS-CoV-2 virus, in particular its origin, spread, impact on health and prevention, have become especially popular. The social crisis triggered by the COVID-19 pandemic is associated with a growing tendency to believe in conspiracy theories, which in turn may contribute to an increase in anxiety tension and thus deteriorate the psychological health of citizens.

Objectives: The aim of the study was to determine the relationships between the tendency to believe in false information about the COVID-19 pandemic and the severity of symptoms of anxiety and depression among the surveyed Polish citizens.

Methods: The study included 700 Polish people aged 24.7 ± 6.34 years. We used questionnaires such as: COVID-19 Conspiratorial Beliefs Scale to measure the level of belief in false information regarding the COVID-19 pandemic, Generic Conspiracist Beliefs Scale to measure tendencies to believe in conspiracy theories, and Hospital Anxiety and Depression Scale.

Results: Belief in false information about the COVID-19 pandemic may be associated with a slight increase in the severity of both anxiety symptoms ($b=0.044$; $p=0.021$) and depression ($b=0.048$; $p=0.004$). A factor known as belief in the criminal activity of government organizations may also contribute to predicting the increase in the severity of symptoms of anxiety ($b=0.172$; $p=0.001$) and depression ($b=0.169$; $p=0.000$) during the COVID-19 pandemic.

Conclusions: Belief in false information about the COVID-19 pandemic, as well as belief in general conspiracy theories, can contribute to the psychological deterioration of citizens during the COVID-19 pandemic.

Disclosure: No significant relationships.

Keywords: Covid-19; conspiracy thinking; Depression; Anxiety

O0029

COVID-19 infection, hospitalisation and mortality rates in people with severe mental illness: findings from two UK cohort studies

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Introduction: Recent systematic reviews have highlighted that people with Severe Mental Illness (SMI) have higher risks of infection, hospitalisation and death from COVID-19, although the full extent of these disparities are not yet established.

Objectives: Utilising electronic health records, we investigated COVID-19 related infection, hospitalisation and mortality among people with schizophrenia/psychosis, bipolar disorder (BD) and/or major depressive disorder (MDD) in two large UK samples: the UK Biobank (UKB) cohort study and GP-registered patients in Greater Manchester (GM).

Methods: We sampled 447,296 adults with and without SMI from UKB (inc. schizophrenia/psychosis = 1,925, BD = 1,483 and MDD = 41,448, non-SMI = 402,440) and 1,152,831 adults from GM (inc. schizophrenia/psychosis = 46,859, BD = 3,461, recurrent MDD = 134,661, non-SMI = 922,264). Primary care, hospital and death