

Inventory. Narrative interviews generated qualitative data. We compared patients who met their goals to those who did not.

**Results:** Forty-one people eliminated medication. Another 16 managed well on low-dose medications. Five patients had psychotic episodes that led them to return to higher levels of medication. This group functioned at higher levels than the comparison population with much lower doses of medications. The five readmissions to hospital were significantly lower than the number of readmissions in the comparison and the control groups. The cost for one year of care was higher for our people; the costs over subsequent years were less related to fewer hospitalizations, crises, and diminished suicidality.

**Conclusions:** The results suggest the need for individualized client-centered psychosocial approaches that build upon the person's previous successes, enroll family and friends in a community effort, and collaborate with those communities to apply those approaches desired by the people themselves. In this dialogical approach to psychosis, lived experience is granted full ontological reality, which appears to facilitate recovery. Lifestyle management and embeddedness in a community facilitate recovery.

**Disclosure of Interest:** None Declared

## EPV1682

### Correlations between Psychopathological Symptoms and Self-stigmatization of Patients with Bipolar Affective Disorder at the Initial Stage of the Disease

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**Introduction:** It was demonstrated in the number of studies that patients with bipolar affective disorder (BD) at the initial stage of the disease are characterized by the high level of self-stigmatization (Latalova K., Kamaradova D., Prasko J., 2014; Solokhina T.A., Oshevsky D.S., Barkhatova A.N., et al., 2023). However, relationship of patients' self-stigmatization with their psychopathological symptoms wasn't analyzed, what determined the theoretical and practical significance of our study.

**Objectives:** To reveal correlations between psychopathological symptoms and self-stigmatization of patients with BD at the initial stage of the disease and to work out the integrated approach to their psychosocial treatment.

**Methods:** Questionnaire for assessing the phenomenon of self-stigmatization of mentally ill people (Mikhailova et al., 2005), SCL-90-R were used. A group of 17 patients (12 women and 5 men) with diagnosis of bipolar affective disorder (BD, F31.xxx according to ICD-10) was examined. The average age of the patients was 25.52±4.55 years. The duration of the disorder varied within 0.5 -3 years.

**Results:** Patients with BD demonstrated high overall level of self-stigmatization (1.22±0.73 points). This parameter was significantly higher than average values. As a result of correlation analysis, multiple dependable ( $p<0.01$ ) moderate relationships between SCL-90-R indicators and parameters of several scales of the self-stigmatization questionnaire were established. So, perception of changes associated with the disease as irreversible, depriving opportunities in various spheres of life (scales «Overestimation of self-realization», «Overestimation of internal activity») led to somatization of patients and the formation of hypochondriac experiences (SOM,  $r=0.58$  and  $r=0.54$ ,

respectively). In turn, this reduces self-esteem and causes an increase in the overall level of experienced distress (GSI,  $r=0.61$  and  $r=0.53$ , respectively). Self-doubt, the expectation of a negative attitude towards oneself (the scale «De-identification from others in the social sphere») leads to increased anxiety (ANX,  $r=0.64$ ), hostility (HOS,  $r=0.53$ ), vulnerability in communication and restriction of social contacts (INT,  $r=0.51$ ).

**Conclusions:** The obtained results permitted to work out proposals on psychosocial treatment of patients with BD at the initial stage of the disease. It is necessary to carry out psychoeducation programs as well as trainings aimed at forming a positive self-perception, activating personal resources, increasing communicative competence and maintaining social interaction.

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## EPV1683

### Fake Therapists: How Short Courses Lead to Long-Term Mental Health Issues

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**Introduction:** In Kyrgyzstan and other Central Asian countries, there has been a surge in advertisements for psychological services from underqualified practitioners. These individuals, often with only short-term training, market themselves as professionals while the cost of their services has risen dramatically. Vulnerable populations may be exploited financially without receiving effective care, leading to worsened outcomes.

**Objectives:** This paper explores how the rise in underqualified practitioners and unchecked price increases for psychological services in Kyrgyzstan lead to harmful mental health outcomes. It also compares the regulatory frameworks in neighboring countries, highlighting Kazakhstan's more structured approach.

**Methods:** This study utilizes a comparative analysis of the regulatory frameworks for psychological services in Kyrgyzstan, Tajikistan, Uzbekistan, and Kazakhstan. Data is sourced from governmental reports, academic studies, and analyses of online advertisements for psychological services. The focus is on licensing systems, training requirements, and the impact of rising consultation prices.

**Results:** Kyrgyzstan, Tajikistan, and Uzbekistan lack adequate regulatory systems for licensing psychologists. The surge in online advertisements by underqualified practitioners has flooded the market, with many offering their services at increasingly inflated rates. These individuals often charge exorbitant prices while lacking the proper training, exacerbating mental health challenges for vulnerable populations. In contrast, Kazakhstan has introduced a structured National Qualifications Framework (SQF), which ensures that psychological services are provided by properly trained and certified professionals.

**Conclusions:** The unchecked rise of advertisements by unqualified therapists and the unlimited escalation of consultation fees in Kyrgyzstan and neighboring countries pose serious risks to public mental health. Without proper licensing and price regulation, individuals seeking help may face harmful consequences. Adopting a regulatory system similar to Kazakhstan's, with strict licensing and certification requirements, would help ensure that psychological services are both safe and affordable. Such reforms are

essential to protect the public from the exploitation and risks posed by untrained “therapists.”

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## EPV1684

### Unconscious processes in psychotherapy and supervision: Difficulties in the supervisory relationship

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**Introduction:** Supervision is recognized as having a vital role in the professional development of psychotherapists. The way it is implemented has a direct impact on the quality of the educator’s learning process, as well as on the quality of psychotherapy provided to clients. Supervision is a complex and dynamic practice, requiring supervisors to conceptualize the thoughts, feelings and behavior of their educators and the educator’s clients, as well as selective attention to the complexly layered interpersonal dynamics between clients, educators and themselves.

**Objectives:** Emphasizing the possibility of the appearance of difficulties and their aspects and increasing awareness of these concepts can greatly help supervisors and educators in the formation of ways and approaches that can facilitate better communication and the formation of a more professional relationship as significantly influencing the main result of the quality of psychotherapy and the process of professional development.

**Methods:** During the training of mental health professionals, it is crucial to ensure that the supervision process is carried out according to a legal, ethical and competent approach, such as informed consent and a supervision contract, and it is necessary to take into account elements such as supervisor and educator competencies, awareness of the challenges of diversity and multiculturalism, personal and professional boundaries, multiple contexts of relationship between supervisor and educator, evaluation and feedback. Through the supervisor’s dilemmas, ambiguities in the perceptions of supervision educators, success is reflected through the analysis of personal contribution, of unconscious interpersonal and developmental dynamics, and access to one’s own limits.

**Results:** The importance of clinical supervision is evidently recognized by almost all licensing boards and accrediting bodies for the mental health professions, requiring that educators receive psychotherapeutic, clinical supervision as part of their training, and ongoing supervision is often necessary to maintain professional licensure. An integrative approach of incorporating innovative research results, as well as consolidating them with already established factors, is key in leading psychotherapeutic training, research, supervision, as well as the client’s treatment itself towards increased effectiveness. A significant contribution to the literature would be enabled by future research dealing with issues of difficulties in supervision through the prism of educators.

**Conclusions:** This paper focuses on understanding the significance of the supervision process through the theoretical perspective, approaching the concept of difficulties by the prism of supervisors and educators, and the practical implications of successful supervision.

**Disclosure of Interest:** None Declared

## EPV1685

### Gilles de la Tourette Syndrome and Habit-Reversal: A Case Report

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**Introduction:** Gilles de la Tourette Syndrome (GTS) is characterised by tics which appear as sudden, rapid, purposeless motor movements and vocalisations. In contrast to other movement disorders, temporary and purposeful suppressibility for a few minutes at a time can be achievable. However, this is ineffective over time. Apart from the physical consequences incurred, tics and their associated neuropsychiatric symptoms can diminish individual quality of life.

**Objectives:** To present an adult single case study of the implementation of Habit Reversal Training (HbRT) for the treatment of a motor tic and to determine the clinical efficacy of the intervention over time (i.e., post-intervention and at a one-, three- and six-month follow-up).

**Methods:** A twenty-six-year-old male patient with a well-established diagnosis of GTS was referred to a tertiary-care neuropsychiatry outpatient clinic. Prior to the HbRT intervention, the patient had well-tolerated a continuous tetrabenazine prescription (25mg twice a day). His tic consisted of twitching of his nostrils and sudden and repeated head nods. The tic was reported to being experienced throughout the day and almost always being preceded by a premonitory sensation. The patient’s history was unremarkable with respect to pre, peri-, and postnatal development. There was no family history of tics nor any other movement disorders. Formal measures revealed the following: Clinical Outcomes in Routine Evaluation-Outcome Measure (11), Frost Multidimensional Perfectionism Scale (117), Autism-Spectrum Quotient (2), Adult Attention Deficit Hyperactivity Disorder Scale (1), and Yale-Brown Obsessive Compulsive Scale (15).

**Results:** By the end of a five-week fifty-minute one-to-one intervention window and at a one-, three-, and six-month follow-up appointment, the following main results are reported: [i] at post-intervention, a self-reported tic improvement score (measuring effectiveness of competing response on tic management since the first appointment) of eighty percent was achieved, [ii] self-reported tic improvement scores carried over to all three follow-up appointments, and [iii] week-to-week monitoring revealed that tic management improved by fifty percent by the third week of the intervention.

**Conclusions:** This study has accomplished its objectives of offering additional support for the implementation of HbRT for the treatment of a motor tic and to establish the clinical efficacy of the intervention over time. With these objectives in mind, TD and GTS continues to provide clinicians, clinician-scientists, and researchers with an abundance of possibilities for future research. For instance, on a clinical level, it is essential to further characterize variations in motor tic phenotype so that the factors that modify tic behaviour can be clarified. It would also be fascinating to longitudinally study and explore changes in tic frequency and intensity over time following a behavioural intervention such as HbRT.

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