

Disclosure of Interest: X. Ling: None Declared, S. Wang: None Declared, N. Li: None Declared, Q. Zhang: None Declared, H. Li Grant / Research support from: This study was supported by National Key R & D Program of China [grant number 2022YFC3302001], National Natural Science Foundation of China [grant number 81801881], Science and Technology Committee of Shanghai Municipality [grant numbers 20DZ1200300, 21DZ2270800, 19DZ2292700].

EPP038

Self-harm and suicide risk amongst attendees at five lower courts in London, England

J. McCarthy^{1*}, E. Chaplin¹, C. Allely² and A. Forrester³

¹London South Bank University, London; ²University of Salford, Manchester and ³Cardiff University, Cardiff, United Kingdom

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.398

Introduction: Individuals in contact with the criminal justice system are at higher risk of suicide than the general population (Carter et al. *EClinicalMedicine* 2022, 44, 101266). Research to date has concentrated on the prison population with little evidence on the risk of suicide and self-harm for those defendants within the Court system including those referred to the Court Mental Health Liaison and Diversion Services. Court Mental Health Liaison and Diversion services were developed in England to support vulnerable people when they first come into contact with the criminal justice system.

Objectives: The main aim of the study was to analyse the existing service data to examine rates of self-harm behavior and suicide ideation of those defendants presenting to the Court Mental Health Liaison and Diversion Services across five Magistrates Courts (lower courts) in London, England. In addition, a further aim was to establish if risk factors such as mental illness and substance misuse but also other vulnerabilities such as neurodevelopmental disorders are associated with the risk for self-harm behaviour or suicide along with demographic factors of age, gender and ethnicity.

Methods: The study analysed service level data of five London Magistrates' Courts covering a timeframe from September 2015 to April 2017. During this time 9088 attendees were referred to the Court Mental Health & Liaison Diversion service covering the five courts. Attendees were screened for current risk of suicide ideation and self-harm behaviour as part of the mental health assessment. Data examined was from the National Health Service (NHS) minimum mental health data set which reflects current clinical and custody records and is obtained from frontline court and health service staff.

Results: An overall rate of 14.2% for self-harm behaviour and/or suicide ideation was found for attendees presenting to five London Court Liaison and Diversion Services over a 20-month time frame. Aside from autism and bipolar affective disorder, the current large study showed a significant association between self-harm behaviour and suicide ideation with several mental disorders. The study found no significant differences for risk of self-harm behaviour and suicide ideation relating to gender or ethnicity.

Conclusions: This group of defendants presented with high levels of severe mental illness, substance and alcohol misuse and

neurodevelopmental disorder which increased the individual vulnerability to express suicidal ideation as has been found in smaller studies. The wider criminal justice services need to examine the current approach to screening for risk of suicide ideation and self-harm behaviour given the high rates of completed suicide within the prison population compared to the general population.

Disclosure of Interest: J. McCarthy Grant / Research support from: £674,000 , E. Chaplin Grant / Research support from: £674,000 , C. Allely: None Declared, A. Forrester Grant / Research support from: £674,000.

EPP039

Mapping Forensic Psychiatry Education Across Europe: Insight from EFPT members

F. M. Monshizadeh Tehrani^{1*}, B. Akan¹, B. Özel¹, S. Kukurt¹, E. Ilgin¹, V. H. Santos¹, M. Nouri², D. Zani¹, K. Krasteva¹, P. Viktorova¹, M. Godschalk¹, G. Autissier¹, A. Compaired¹, F. Mustac¹, L. Sanduleac¹, O. Nikolaieva¹, D. A. Zaharie¹, J. Halili¹, A. Avalishvili¹, G. Longo¹, N. De Ridder¹, A. Braicu¹ and S. Shokatpour³

¹Forensic Psychiatry Working Group, European Federation of Psychiatric Trainees, Brussels, Belgium; ²Zanjan University of Medical Science, Zanjan and ³Faculty of Psychology and Educational Sciences, Islamic Azad University, Islamshahr Branch, Tehran, Iran, Islamic Republic Of

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.399

Introduction: Forensic psychiatry transcends legal and cultural boundaries across Europe, but specialization and training remain inconsistent. With freedom of movement in most European countries, psychiatrists accredited in one country can practice in others if they meet language requirements. Therefore, harmonizing psychiatric education and practice is crucial and aligns with the European Federation of Psychiatry Trainees (EFPT)'s goals.

Objectives: This study aims to map the current state of forensic psychiatry education across Europe, focusing on its recognition as a specialty on its own or subspecialty, training structure, and financial implications. It also assesses whether general adult psychiatry (GAP) and child and adolescent psychiatry (CAP) trainees receive adequate forensic psychiatry education, identifying gaps and variations across countries.

Methods: Data was collected via an online survey distributed to European National Trainee Association (NTA) representatives in the EFPT through Google Forms in August 2024. Responses from non-European countries and incomplete entries were excluded. The final dataset was analyzed using SPSS 24.

Results: A total of 29 participants, including 24 GAP trainees (82.8%), 2 CAP trainees (6.9%), and 3 specialists (10.3%), from 20 European countries responded to the survey. Forensic psychiatry was recognized either as a specialty or subspecialty in 13 countries (65%) with 20 (69%) of participants confirming its recognition. 38% reported forensic training lasts less than 1 year or lacks a formal program. Financial support varied as well, with some countries offering full subsidies, while others required trainees to cover costs. Forensic psychiatry was included in the training of 66.7% of GAP trainee and 50% of CAP trainees, though the depth of

exposure differed. Notable gaps were found particularly in risk assessment, expert witness training, and competency evaluations.

Conclusions: This study reveals significant variation in the recognition, structure, and delivery of forensic psychiatry training across Europe. While some countries offer well-defined programs, discrepancies in accessibility and comprehensiveness persist. These findings highlight the need for standardized curricula to ensure consistent training. Enhancing forensic psychiatry education is crucial for preparing future psychiatrists and ensuring high-quality psychiatric contributions in legal contexts and harmonization of forensic training across Europe.

Disclosure of Interest: None Declared

Climate Change - Migration and Mental Health of Immigrants

EPP041

Biological pathways mediating the relationship between climate change, environmental pollutants, and severe mental disorders: a systematic review

P. Catapano^{1*}, S. Cipolla¹, N. P. Sallusto¹, C. Lamberti¹, R. Murolo¹, G. Sampogna¹ and M. Luciano¹

¹Department of Psychiatry, University of Campania "Luigi Vanvitelli", Naples, Italy

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.400

Introduction: Climate change and pollution are deeply interconnected phenomena that pose significant risks to overall health, given their proven impact on the functionality of various human organs and systems. With increasing urbanization, global toxicity is expected to rise in the near future. It is therefore crucial to understand how environmental pollution affects mental health, particularly in rapidly growing urban areas.

Objectives: This systematic literature review aims to explore the biological mechanisms linking exposure to environmental pollutants, climate change, and the onset and/or exacerbation of severe mental disorders.

Methods: A search was conducted in the PubMed, Scopus, and APA PsycInfo databases, following PRISMA guidelines. Studies on humans and animal models examining the association between environmental pollutants, climate change, and mental disorders were included. A total of 48 articles were considered, comprising studies on humans (16 studies) and animal models (31 studies), along with one article that included both models.

Results: Human studies revealed that exposure to particulate matter (PM 2.5 and PM10) increases the risk of depression and psychotic relapses through mechanisms involving inflammation, oxidative stress, and disruption of the hypothalamic-pituitary-adrenal axis. In animal models, pollution was shown to impact brain function by activating inflammatory responses, causing oxidative stress, damaging the hippocampus, and dysregulating neurotransmitters. Additionally, one study highlighted that climate change is associated with mood disorders by inducing changes in gene expression and psychophysical adaptation responses.

Conclusions: The findings indicate that environmental pollutants and climate change can affect human mental health through

complex biological pathways. Understanding these mechanisms is essential for developing prevention and intervention strategies. The One Health approach, which recognizes the interconnectedness of human, animal, and environmental health, is crucial for addressing the challenges posed by climate change and pollution.

Disclosure of Interest: None Declared

EPP043

Migrants in Psychiatric Care: A Retrospective Study from a Psychiatric Unit in Tunisia

D. Mezri^{1*}, A. Gharbia¹, S. Hamzaoui¹, U. Ouali¹, A. Aissa¹ and R. Jomli¹

¹Avicenne, Razi hospital, Mannouba, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2025.401

Introduction: Migration, whether legal or illegal, is a growing phenomenon in Tunisia and can bring significant mental health challenges. Migrants often experience a decompensation of pre-existing psychiatric disorders, the development of new mental health issues, or travel driven by a delusion, known as "pathological travel." These concerns emphasize the need for specialized psychiatric and social care for this vulnerable group, who endure considerable stress throughout their migration. However the quality of care can also depend on the support from their home countries, where stigma and identification issues with consulates can limit their access to help.

Objectives: To study the different psychiatric pathologies observed among this population and to determine the number of cases of pathological travel.

Methods: It's a retrospective study. We reviewed the files of all patients who were hospitalized in the Avicenne Psychiatric Department of Razi Hospital between January 2022 and December 2023.

Results: We identified 19 patients and found 17 files. There were 11 men and 6 women, with an average age of 33 years (ranging from 20 to 54 years). The majority have a university-level education (52%) and with a history of psychiatric illness (58%). In total, 41.2% were from the Maghreb, 41.2% from Africa, 11.7% from Europe, and 5.9% from the Americas. The causes of migration to Tunisia were, for economic reasons (29%), for studies (11%), for seeking treatment for a pre-existing psychiatric condition (11%), marriage to a Tunisian partner (11%) and as part of a pathological travel (34%). In 35% of cases, the migration was clandestine and illegal. The reason for hospitalization was behavioral disorder in 64.8%, incoherent speech in 29.4% and suicide attempt in 5.8%. Among our patients, 28% have bipolar disorder, 17% have schizophrenia, 11% have brief psychotic disorder, 5% have depression, 5% have schizoaffective disorder, 5% have delusional disorder, and 5% alcohol use disorder. The diagnoses for the rest of patients were unspecified. In terms of social support we were able to contact the families in 62% of the cases. We succeeded in getting a response from the consulate of the native country in 17% and we collaborated with an International Organization in 5%.

Conclusions: Our study shows the complex psychiatric needs of migrants in Tunisia, with a range of mental health disorders, including cases of pathological travel. Economic reasons and clandestine migration were common factors. Despite efforts, social