

of the TCI-R ($p=0.054$). Logistic regression analysis showed to ascertain the effects of all TCI-R subscales, on the likelihood of developing legal problems. The logistic regression model was statistically significant, $\chi^2(1)=4.020$, $p=0.045$. The model explained 14.6% (Nagelkerke R^2) of the variance in patients with ADHD who have legal problems and correctly classified 91.9% of cases. Having legal problems was significantly predicted by TCI-R spiritual acceptance subscale ($\exp(B)=1.150$, $p=0.045$).

Conclusions: The study highlights the significant psychosocial burden of ADHD in adulthood, particularly the increased likelihood of legal problems. Key risk factors include lower educational attainment, substance use, and specific temperamental traits, such as elevated problem-solving and self-transcendence tendencies, alongside lower self-acceptance.

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EPV1035

Integration of mental healthcare into primary healthcare: a European perspective

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Introduction: The 2009 WHO and WONCA report (Integrating Mental Health in Primary Care: A Global Perspective) outlined best policies and practices for the integration of mental health into primary care. The arguments in favor are reduced stigma, improved access to care, holistic management of comorbidities, improved prevention and early detection of mental disorders, reduced losses to follow-up, lower costs, easier communication, improved social integration, protection of human rights, and improved uptake of the healthcare system (Greenhalgh T, 2009; Petersen et al, 2016). Nevertheless, mental health care in many countries remains separate from primary care, limiting access and equitable distribution. However, since the COVID-19 pandemic, the global need for mental health services has surged, causing a 25 to 27 per cent increase in the prevalence of depression and anxiety around the world, accelerating the demand for integrated care (Bower et al, 2023). So, the process of integration outlined in the 2009 WHO and WONCA report warrants an updated discussion.

Objectives: International experts from Hungary, Greece, and Cyprus and of WHO, WONCA and WPA present different models of integration of mental health into primary care with special respect to public health crises.

Methods: Challenges, opportunities and best practices of each country will be presented, including policy recommendations, capacity building and advocacy strategies for mental health integration and public health crises, and monitoring, evaluation, and research for integrated services.

Results: In all three countries, stigma, insufficient training of primary care providers, and inadequate policy frameworks present

problems. In Greece, the dominance of a medically oriented health policy has hindered interdisciplinary integration (Lionis et al., 2019). Cyprus grapples with stigma surrounding mental health issues, which affects service utilization (Nikolaou & Petkari, 2021). Opportunities are leveraging community resources and enhancing collaboration among stakeholders to foster inclusive health services (Pinaka et al., 2022). Best practices involve training programs for primary care providers, promoting awareness, and developing evidence-based policies that prioritize mental health (Ashcroft et al., 2021). Advocacy strategies should focus on engaging policymakers and the community to address mental health needs, particularly in light of public health crises like COVID-19, which have exacerbated mental health issues (Galanis et al., 2020; Maulik et al., 2020). Monitoring and evaluation are crucial for assessing the effectiveness, ensuring accountability, and adapting strategies based on research findings (Glover-Wright et al., 2023; Saxena & Kline, 2021).

Conclusions: The need of updating the 2009 WHO and WONCA report is considered to include the latest evidence, experiences, and recommendations on mental health integration into primary care.

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Barriers to Effective Implementation of Mental Health Policies in India: A Comprehensive Analysis of Challenges and Solutions

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Introduction: India is facing a growing mental health burden, with significant disparities in access to services despite the introduction of the National Mental Health Program (NMHP) and the Mental Healthcare Act (MHA). While these policies aim to improve mental health care, their implementation remains inconsistent due to a range of challenges. Understanding these barriers is crucial to enhancing mental health services across the country.

Objectives: This study aims to identify the key challenges impeding the effective implementation of existing mental health policies in India, with a focus on rural-urban disparities, resource constraints, and sociocultural factors.

Methods: A comprehensive literature review was conducted, examining peer-reviewed articles from databases such as PubMed, Scopus, and WHO policy documents, and reports from government and non-governmental organizations. Data was analysed to assess the primary obstacles related to funding, workforce shortages, stigma, policy integration, and infrastructure issues. Qualitative insights from key stakeholders in mental health services were also included.

Results: The review revealed five primary challenges. Firstly, the insufficient financial allocation for mental health programs, leading to limited-service availability; secondly, a shortage of trained mental health professionals, particularly in rural areas; thirdly, a pervasive stigma surrounding mental health, hindering service uptake; fourthly, the poor integration of mental health care into primary health systems; and lastly, the bureaucratic inefficiencies and lack of infrastructure. These challenges disproportionately affect rural