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EPV1475

Specifics of anticipatory competence of adolescents with intellectual disabilities

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Introduction: Anticipation forms the basis of all human activity, enabling people to plan and carry out their activities, as well as to communicate and interact with others. Well-developed anticipatory abilities allow adolescents to successfully adapt to society, establishing effective communication with adults and peers.

Objectives: To study the specifics of anticipatory competence in adolescents with intellectual disabilities.

Methods: The study involved 40 adolescents (aged 12-15) attending educational institutions for children with disabilities and intellectual impairments (6A00.0, ICD-11). The research employed the following methods: the "Achenbach's Questionnaire," V.D. Mendelevich's "Test of Anticipatory Competence," V.P. Ulyanova's "Anticipation of the Outcome of a Situation with Norm Violations," and the authors' method "Study of Anticipatory Competence of Adolescents" by A.I. Akhmetzyanova and T.V. Artemyeva.

Results: The study results show that adolescents with intellectual disabilities are capable of predicting future situations. However, these children exhibit insufficient development in the key components of anticipatory competence: personal-situational, spatial, and temporal anticipation. Adolescents in this group experience difficulties in anticipating conflict situations in interpersonal relationships and in predicting others' responses to their own behavior. The methods' results indicate that adolescents with intellectual disabilities often exhibit spatial anticipatory incompetence: common traits in this group include general motor awkwardness and difficulties in spatial orientation ($M=41.65$; $N=52$); sometimes they cannot predict the timing of a stressful situation in advance and struggle with time orientation ($M=39.45$; $N=42$). While most adolescents with intellectual disabilities recognize and understand societal norms and rules, they face significant difficulties in accepting them ($M=11.05$; $MAX=32$).

Conclusions: The data obtained in this study allow for the development of programs aimed at adapting adolescents to society, taking into account their ability to predict future situations and their anticipatory competence in various spheres: family relationships, virtual reality, and academic and extracurricular activities. This paper has been supported by the Kazan Federal University Strategic Academic Leadership Program (PRIORITY-2030).

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Assessment of the needs and demand for psychiatric care among medical students: cross-sectional study

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Introduction: Studying medicine is a demanding and time-consuming course of study, which can be a major stress factor and affect quality of life (QOL). Medical students are at high risk of developing mood disorders. This could lead to a need for psychiatric care (PC) that is not necessarily equivalent to the demand.

Objectives: Determine the prevalence of depression, anxiety and stress in medical students, assess their QOL and subjective need for PC.

Methods: This was a descriptive cross-sectional study conducted over a 5-month period in a Tunisian medical school. Sampling was stratified random. Sociodemographic and clinical data were collected using a questionnaire. Depression, anxiety and stress were assessed using the Depression Anxiety and Stress Scale: DASS-21. QOL was assessed using the generic 36-item Short-Form Health Survey (SF-36). Subjective assessment of difficulties and need for help was carried out using the "KIT ELADEB: Lausanne Self-Assessment Scales for Difficulties and Needs".

Results: The study included 308 students with a median age of 21. Some (18.8%) were smokers, 15.9% drank alcohol, and 5.2% used psychoactive substances (PAS). A Family psychiatric history (PH) was present in 15.4% of cases, and 14.3% of students had personal PH. Median DASS scores were: depression 18 (interquartile range (IQR) = 16-27), anxiety 20 (IQR = 18), and stress 16 (IQR = 42). The rates of extremely severe and severe depression were 27.6% and 12.3% respectively, while 50.6% had extremely severe and 12% severe anxiety. Some 29.2% of students had severe to extremely severe stress. Mean SF-36 scores were 61.19 ± 16.83 , referring to the Léan cut-off value (66.7), 58.1% had impaired QOL, 15.9% of participants had consulted a psychiatrist, 78.9% had felt the need to do so, and 59% had foregone such help. Factors associated with severe depression included advanced age ($p=0.007$), graduate education ($p<10-3$), PAS use ($p<10-3$), and PH ($p<10-3$). Anxiety was predicted by female gender (FG) ($p=0.04$), SPA use ($p=0.03$), and PH ($p<10-3$). Stress was associated with age ($p=0.039$), course of study ($p=0.008$), lack of leisure activities ($p=0.003$), smoking ($p=0.004$), alcoholism ($p=0.009$), use of PAS ($p=0.003$), and PH ($p=0.000$). Students who consulted a psychiatrist were more likely to have depression ($p<10-3$), stress ($p<10-3$), and impaired QOL ($p<10-3$). Participants who expressed a subjective need to consult a psychiatrist were significantly associated with FG ($p<10-3$), depression ($p<10-3$), anxiety ($p<10-3$), stress ($p<10-3$), and alterations in the mental health ($p=0.008$), vitality ($p=0.006$), social functioning ($p=0$), and general QOL ($p=0.002$) dimensions of the SF-36.

Conclusions: The obvious deterioration in the mental health and QOL of medical students, and the mismatch between the need for and demand for PC, should initiate a debate on recommendations to improve the well-being of our future doctors.

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EPV1479

Promoting mental health in Portuguese college students - A pilot study with Yoga-based relaxation techniques

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