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doi: 10.1192/j.eurpsy.2022.524

Introduction: There is increased migration of patients and physicians worldwide. In Norway, psychiatry is the medical discipline with highest proportion of foreign doctors (24%). We need empirical studies on transcultural clinical challenges among doctors training in psychiatry.

Objectives: What perceived clinical challenges do foreign and native Norwegian young doctors meet when they treat patients from another culture, and what independent factors are associated with such challenges?

Methods: We developed a new 6-item instrument ($\alpha=0.80$), Clinical Transcultural Challenges (CTC), with items about assessing psychosis, risk of suicide, violence etc. The doctors were recruited at mandatory training courses, and they filled in questionnaires about individual factors (age, gender, foreign/native) and work-related factors (training stage, frequency of transcultural meetings, number of working hours, work stress). Associations with CTC were analyzed by linear multiple regression.

Results: The response rate was 93% (216/233), of whom 83% were native and 17% were foreign doctors, 68% were women. Native doctors reported higher levels of CTC than did foreign doctors, 28.8 (6.2) vs 23.8 (7.2), $p<0.001$, $d=0.73$. Both native and foreign doctors rated “assessing psychosis” and “lack of helping tools” as most demanding. Independent factors associated with CTC were being a native doctor, Beta 3.9, $p<0.01$, and high levels of work-home stress, Beta 0.29, $p<0.05$.

Conclusions: Native doctors training in psychiatry report higher levels of transcultural clinical challenges than foreign doctors do. Both groups of doctors may need more training in transcultural assessment of psychotic disorders. They also report needs for more helping tools, and we should explore this further.

Disclosure: No significant relationships.

Keywords: Postgraduate training; Assessment in psychiatry; Transcultural psychiatry; Physician role

COVID-19 and Related Topics 03

EPP0221

Age and gender differences in coping and mental health during and post COVID-19 lockdown

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doi: 10.1192/j.eurpsy.2022.525

Introduction: As a reaction to growing number of COVID-19 cases in Quebec, the government issued a lockdown to prevent further spread of the virus in March 2020. The novelty of the imposed restrictions warranted an assessment of adult coping and potential effects on anxiety and depressive symptoms.

Objectives: The purpose of the present study was to evaluate methods of coping employed during Quebec's lockdown and their

potential ramifications on anxiety and depressive symptoms post-lockdown in Quebec.

Methods: In a retrospective longitudinal design, two-hundred and twenty-three ($n = 223$) adults (65.5% female; 34.5% male) completed the study online. They were asked to fill out several questionnaires and provide demographic information.

Results: Analysis revealed significant improvement in anxiety symptoms post-lockdown relative to during lockdown across the entire sample. Depressive symptoms also improved significantly across the sample, but the difference was less pronounced among 18–34-year-olds than those 35 and above. Male adults aged 18–34 utilized maladaptive coping strategies to the greatest extent. Moreover, maladaptive coping was significantly associated with anxiety and depressive symptoms and predicted depressive symptoms post-lockdown. Further investigation revealed that young adult males differed from females in their use of substances and self-blame to cope.

Conclusions: Overall, the data suggest that the lockdown adversely affected anxiety and depressive symptoms among the general population. Furthermore, young adults, particularly males, were most susceptible to depressive symptomatology due in part to their methods of coping with the novel context. A follow-up study is warranted. Future studies should also seek to recruit individuals whose self-identified gender is non-traditional (e.g., non-binary).

Disclosure: No significant relationships.

Keywords: Gender differences; coping strategies; Anxiety; Depression

EPP0222

The psychological well-being of family caregivers of autistic people during the COVID-19 lockdown in Italy

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doi: 10.1192/j.eurpsy.2022.526

Introduction: People with autism spectrum disorder (ASD) frequently need support due to the elevated prevalence of psychiatric and medical comorbidities. The Covid-19 outbreak has severely affected the routinary functioning of healthcare services, thus causing severe consequences for autistic people and their caregivers, an already fragile population prone to mental health diseases.

Objectives: 1. To compare the levels of psychological well-being, insomnia, and family distress perceived by caregivers of autistic people to those perceived by caregivers of people with other types of disability. 2. To evaluate predictors of individual and family distress reported by caregivers of autistic individuals.

Methods: We collected data through a cross-sectional web-based observational study from April 19 to May 3, 2020. Socio-demographic information were collected, and psychopathological variables were assessed using the General Health Questionnaire-12, the Insomnia Severity Index, the Brief Resilient Coping Scale, and the Family Distress Index.