

system ($p=0.005$) and the impression by the model of other doctors who left Tunisia ($p=0.01$).

Conclusions: The rate of migration intentions expressed in this study highlights the emergent need of interventions emanating from the Tunisian health-care system's problems in order to stop the flow of young doctors towards developed countries in quest of better conditions.

Disclosure: No significant relationships.

Keywords: causes; immigration; young doctors

EPV0879

Insomnia and the role of postmigration stress among Syrian refugees

M. Straiton^{1*} and A. Nissen²

¹Norwegian Institute of Public Health, Department Of Mental Health And Suicide, Oslo, Norway and ²Norwegian Centre for Violence and Traumatic Stress Studies, N/a, Nydalen, Norway

*Corresponding author.

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Introduction: Research on the prevalence of and risk factors for insomnia among refugee populations is limited and tends to focus on pre-migratory trauma. Yet, post migratory stressors are just as important for mental health and may also relate to insomnia.

Objectives: Objective: To determine the association between different post-migration stressors and insomnia among Syrian refugees living in Norway.

Methods: We used data from the REUFGE study, a cross-sectional survey with 902 Syrian refugees who arrived in Norway between 2015 and 2017. Insomnia was measured with the Bergen Insomnia Scale and post-migrant stress with the Refugee Post-Migration Stress Scale (RPMS). We applied logistic regression analyses to investigate the association between seven different postmigration stressors and insomnia after controlling for demographics, traumatic experiences and post traumatic stress symptoms.

Results: Of the 873 participants who completed questions on insomnia, 515 (41%) reported insomnia. There was no significant difference between men and women. The most commonly reported postmigration stressors were *Competency Strain* [SML1], *Family and Home Concerns*, and *Loss of Home Country*. After controlling for demographics, traumatic experiences and post-traumatic stress symptoms, *Financial Strain*, *Loss of Home Country*, *Family and Home Concerns* and *Social Strain* were still associated with higher odds of insomnia.

Conclusions: Resettlement difficulties are related to poorer sleep among refugees. Measures to improve the social conditions and financial concerns of refugees in receiving countries could potentially reduce insomnia among refugees which in turn, may benefit mental and physical health.

Disclosure: No significant relationships.

Keywords: Refugees; Insomnia; Postmigration stress; Forced migration

EPV0880

Equality in healthcare: transcultural psychiatry

C. Alvarez Garcia* and A. Gomez Martín

Hospital Universitario Príncipe de Asturias, Psychiatry, Alcalá de Henares, Spain

*Corresponding author.

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Introduction: Migratory flows are increasing more and more, especially regarding the refugee crisis during the last years. There are around 86,7 million migrants in Europe. Migrants share similar experiences that may affect their physical and mental health, such as loss of a social network, lack of economical support or high levels of stress and discrimination.

Objectives: To analyze the obstacles that migrants must face to obtain a mental health assistance and the importance of an intercultural approach.

Methods: A narrative review of the existing literature on the subject. **Results:** Although there exists evidence that shows that migrants tend to have more health needs, they usually seek less medical advice and receive a poor-quality attention, fulfilling the inverse-care law. This is due to several reasons. Many migrants are excluded of the health care system due to bureaucratic impediments. Also, the language has a determining role, since a higher quality of communication could lead to a better understanding of the symptoms, reducing the risk of erroneous evaluations. Besides, different background and culture between the patient and the doctor can result in lack of communication, mistrust, mistreatment, poor adherence, and worse prognosis.

Conclusions: Despite the exponential growth of migration in the last decade and the continue progression, migrants still face many barriers to receive healthcare. It is necessary to do more research on the mental health of migrants and ethnic minorities to ensure quality care to different cultures.

Disclosure: No significant relationships.

Keywords: migrants; transcultural; mental healthcare

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Cultural syndromes in the era of globalization.

M.D.C. Molina Liétor^{1*} and I. Cuevas Iñiguez²

¹Hospital Universitario Príncipe de Asturias, Psiquiatría, Alcalá de Henares, Spain and ²Hospital Príncipe de Asturias, Psiquiatría, Alcalá de Henares, Spain

*Corresponding author.

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Introduction: Cultural syndromes are pathologies that cannot be understood outside the cultural or subcultural context of the person who suffers from it, since both their etiology and symptoms are symbolized by the patient and by the environment in fields of significance inherent to their culture. The globalization process in which we are involved affects the presentation, understanding, diagnosis and treatment of cultural syndromes as they were traditionally understood.

Objectives: The objective of this work is to review the current state of cultural syndromes, the evolution of incidence and prevalence in recent years, as well as whether the globalization process has affected their understanding.

Methods: A bibliographic review has been carried out on cultural syndromes and case reports in both endemic and foreign populations. Likewise, a reflection is made on the possible evolution of these syndromes.

Results: Globalization has been understood as a natural process of integration of nations and their cultures, incorporating the diversity and specificity of the other without forgetting their own and traditional characteristics. Within the globalization process,