

Methods: This was a cross-sectional study, approved by the Ethical Committee of the Universidad de los Andes, Santiago Chile (CEC201984). Undergraduate students completed an online survey between August and September 2020. Mental health was assessed using The Depression, Anxiety and Stress Scale-21; suicidality, using the Columbia Suicide Severity Rating Scale; insomnia using the Insomnia Severity Index; and several individual, family, and university factors. Variables regarding the Covid-19 were also assessed, such as personal and family history of covid-19 contagion and death of family members due to Covid-19. A multivariate logistic analysis was performed.

Results: 5,037 students responded to the survey. 70.4% were female, mean age, 21 years. 37.1% had depression; 38%, anxiety; 54.6%, stress; 32.6%, insomnia; and 20.5%, suicidal ideation (last month). The most important risk factors were non-medical use of benzodiazepine and fear of contracting Covid-19; the most relevant protective factors were high family functionality and a high sense of university belonging.

Conclusions: This is one of the first studies that has evaluated mental health among undergraduate students in the context of the Covid-19 pandemic in Chile. The findings showed concerning levels of mental health problems.

Disclosure: No significant relationships.

Keywords: mental health; Undergraduate students; substance use; Covid-19

EPP0683

Thwarted belongingness as a factor of lower anxiety of being infected and power adherence to recommendations in pandemic in female adolescents

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Introduction: Poor adherence with recommendations during pandemic is wide-spread and increases populational risk of being infected (Smith et al., 2020, Webster et al., 2020, Freeman et al., 2020). Revealing psychological factors of low adherence in adolescents is important for interventions planning. This study tests the role of perceived social support and belongingness in COVID-related anxiety and adherence.

Objectives: The aim was to reveal relationships between COVID-related anxiety, monitoring of information about pandemic, adherence to recommendations and interpersonal needs in female adolescents.

Methods: 183 female adolescents (13-21 years old) filled Anxiety Regarding Pandemic Scale, Information Monitoring and Adherence To COVID-related Recommendations Scales (Tkhostov, Rasskazova, 2020), Interpersonal Needs Questionnaire (Van Orden et al., 2012).

Results: Female adolescents moderately ($m \pm sd = 3.32 \pm 1.40$ of 1-6-point scale) worried about negative consequences of pandemic on

their life and lowly worried about risk of being infected ($m \pm sd = 2.53 \pm 1.15$). Their adherence to recommendations was upper medium ($m \pm sd = 3.42 \pm 1.18$). Neither worries nor adherence were related to age. Perceived burdensomeness was unrelated to COVID-related anxiety and adherence while thwarted belongingness was related to lower anxiety of being infected ($r = -.23$, $p < .01$) and poorer adherence to recommendations ($r = .19$, $p < .05$).

Conclusions: In female adolescents thwarted belongingness is a risk factor of poor adherence to COVID-related recommendations because of lower anxiety of being infected. Research is supported by the Russian Foundation for Basic Research, project No. 20-04-60072.

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Keywords: pandemic; Thwarted belongingness; Anxiety

EPP0684

The early Impact of stress related to COVID-19 Pandemic on physicians in Tunisia

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Introduction: Contagious disease outbreaks can have major repercussions on medical staff. Doctors in Tunisia were requested to act as the first-line filter in managing active cases during the beginning of COVID19 pandemic.

Objectives: This study aims to assess perceived stress in Tunisian doctors during COVID19 pandemic early stages and to identify factors associated to stress in order to guide prevention strategies.

Methods: This was a cross-sectional study conducted through an online survey, from April 18th 2020 to June 6th 2020. A 62-item semi-structured survey was created, consisting of 5 series of questions and scales. Linear regression models were performed to identify the associations between the study variables and the perceived stress score of the participants.

Results: We included 203 physicians in this study. Stress levels were high among Tunisian doctors with a mean perceived stress score (PSS) of 28.6. One hundred fifteen participants (56.3%) scored for high PSS. This study identified vulnerable subgroups too stress. The female gender, working in the capital and working in critical medicine units were risk factors for high PSS. Managing COVID19 patients was not itself correlated to stress, however social isolation, stigma and lack of access to information were correlated to high stress levels.

Conclusions: Several stressors can affect the well-being of doctors during the COVID-19 pandemic, which can lead to adverse psychosocial outcomes. The findings of this study may guide decision-makers to implement early mental health interventions for doctors.

Disclosure: No significant relationships.

Keywords: Preventative Medicine; pandemic; Stress; Covid-19

Epidemiology and Social Psychiatry 02 / Mental Health Policy

EPP0685

Ethnic inequalities in multiple comorbidities among people with psychosis

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Introduction: Studies have shown ethnic inequalities in health, with a higher incidence of illnesses among people of some minoritised ethnic groups. Furthermore, it has been observed that people with severe mental illnesses have a higher risk for multimorbidity. However, no study has investigated ethnic disparities in comorbidity in people with a schizophrenia spectrum disorder.

Objectives: This study investigates potential ethnic disparities in physical health comorbidity in a cohort of people with psychosis.

Methods: Using a cross-sectional design, we identified service-users of the South London and Maudsley NHS Trust who were diagnosed with a schizophrenia spectrum disorder between 2007 and 2020. We assessed the prevalence of asthma, bronchitis, diabetes, hypertension, low blood pressure, overweight or obesity, and rheumatoid arthritis. Latent class analyses were used to investigate distinct profiles of comorbidity. Multinomial regression was then used to investigate ethnic disparities in these profiles. The regression model was adjusted for gender, age, neighbourhood deprivation, smoking and duration of care.

Results: On a sample of 23,418 service-users with psychosis, we identified two classes of comorbidity: low comorbidity and multiple comorbidities. Compared to the White British ethnicity, a higher risk for multiple comorbidities was observed for people with any Black background, Indian, Pakistani, Asian British, and mixed-race ethnicities. Furthermore, Black African women had a significantly higher risk for multiple comorbidities than their male counterparts.

Conclusions: Ethnic disparities are observed in multiple comorbidities among people with psychosis. Further research is needed to understand the impact of these disparities, especially in relation to mortality.

Disclosure: No significant relationships.

Keywords: multimorbidity; Psychosis; health inequalities; ethnicity

EPP0686

Parallel latent trajectories of mental health and employment earnings among 16- to 20-year-olds entering the US labor force: A 20-year longitudinal study

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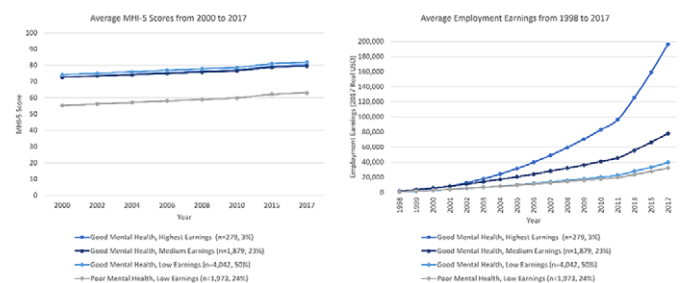
Introduction: Depression and anxiety-related mental health and employment earnings are complexly intertwined but have rarely been studied as parallel processes.

Objectives: Determine the number of latent parallel trajectories of mental health and employment earnings over two decades among a cohort of American youth entering the labor force, and estimate the association between baseline sociodemographic/health factors and latent trajectory class membership.

Methods: This study included 8,173 participants from the American National Longitudinal Survey of Youth 1997, who were 13–17 years old in 1997. The survey occurred annually until 2011 then biennially until 2017. Mental health was measured eight times using the Mental Health Inventory-5 between 2000–2017. Employment earnings were measured annually between 1998–2017, where participants were 33–37 years old. Latent parallel trajectories were estimated using latent growth modeling. The association between baseline predictors and trajectory membership was explored using multinomial logistic regression.

Results: Four latent trajectory classes were identified: good mental health, high earnings (3% of sample, average 2017 earnings ~\$196,000 USD); good mental health, medium earnings (23%, average 2017 earnings ~\$78,100); good mental health, low earnings (50%, average 2017 earnings ~\$39,500); and poor mental, low earnings (24%, average 2017 earnings ~\$32,000). Multinomial models revealed participants who were younger, female, Black, Hispanic, who had lower socioeconomic status, and had used marijuana at baseline had higher odds of belonging to the poor mental health, low earnings class.

Conclusions: Findings highlight the stagnated, parallel course of poor mental health and earnings, and the influence of gender, race, adolescent socioeconomic status, and health behaviors on these trajectories.



Disclosure: No significant relationships.

Keywords: MHI-5; latent parallel trajectory analysis; Depression; Anxiety; Psychological Distress; employment earnings