

Introduction: The COVID-19 pandemic has positioned health professionals around the world in an unprecedented situation, having to work in extreme conditions.

The reactions of healthcare personnel that concern us most are the negative psychological effects of the pandemic, such as exhaustion, moral injury, acute stress reactions, anxiety, depression or post-traumatic stress disorder.

Objectives: To assess the impact of the COVID19 crisis on mental health of Spanish health professionals during the start of the pandemic.

Methods: A descriptive, cross-sectional study is carried out, in which the population sample to be studied was the health professionals who responded to the online questionnaire designed to assess the emotional impact caused by the COVID-19 health crisis. The questionnaire collects sociodemographic and labor data, which correspond to the independent variables of the study. The dependent variables correspond to the two scales used in the questionnaire (SAS and SASRQ scales)

Results: The population sample was 473 people.

Analyzing the results of the SAS scale, 26.5% of the sample had anxiety symptoms in a normal range, 44.3% had mild-moderate anxiety levels, 24.4% marked-severe anxiety and 4, 9% had extreme anxiety levels.

The SARQ questionnaire assesses the presence of an acute stress disorder. In our study, 31.6% of those surveyed had this type of disorder.

Conclusions: Immediate interventions and support for health professionals are essential to improve psychological resilience and avoid the appearance of mental health problems.

Disclosure: No significant relationships.

Keywords: Emotional impact; Health professional; COVID19

EPP0413

Psychological impact of COVID19 outbreak and coping strategies among Tunisian medical students

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Introduction: The COVID19 pandemic came with unprecedented measures that impacted every aspect of the student's life making them vulnerable to psychological distress.

Objectives: The aim of this study was to assess anxiety and depressive symptoms in relation to the coping strategies during the COVID19 pandemic among medical students.

Methods: We conducted a web-based cross-sectional study among Tunisian medical students. We used an anonymous survey comprising sociodemographic characteristics, the Hospital Anxiety and Depression scale and the brief COPE.

Results: A total of 216 students participated in the study; 78% were female and most respondents were enrolled in first and second year of medical studies (53%). The frequency of depressive and anxiety symptoms were respectively 28% and 40%; females experienced

significantly higher depression and anxiety scores ($p < 10^{-3}$ and $p = 0.02$ respectively). Most used coping strategies were self-blame, planning, acceptance, distraction, positive reframing, active coping and religion (99%-96%). The least used coping strategies were substance use (13%) and denial (52%). We found that gender was associated with a significant difference in the coping styles where females scored higher on religious coping and denial whereas males used more humor coping. Depression and anxiety were significantly associated with denial coping. Humor, acceptance, positive reframing and active coping were significantly associated with lower depression rates. Humor coping and active coping were associated with lower anxiety rates.

Conclusions: Our study shows alarming rates of depression and anxiety among Tunisian medical students during the COVID19 pandemic. A targeted intervention to promote mental health using the coping styles might be useful in this population.

Disclosure: No significant relationships.

Keywords: Anxiety and depression; medical students; covid 19; coping strategies

EPP0414

Grief during the COVID-19 pandemic: A cross-sectional online survey in university students

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Introduction: Almost 5 million people worldwide have lost their lives due to SARS-CoV-2 (source: WHO coronavirus (COVID-19) dashboard, data of 1.10.2021; <https://covid19.who.int/>) and therefore, globally, there is an increase of people in grief due to the death of a significant other.

Objectives: To study psychological correlates of grief during the COVID-19 pandemic.

Methods: 591 university students, with a mean age of 23.84 ± 7.95 years (range 18-65 years; 76.8% women; 91.2% Portuguese) completed an online questionnaire during the second COVID-19 confinement (from 15.02 to 13.03.2021), with socio-demographic questions, the Pandemic Stress Index, the Mental Health Inventory, Insomnia Scale, questions on physical/ psychological health, and social isolation.

Results: Students bereaving the death of a significant other ($n=93$, 15.7%; $n=25$, 26.9% reported cause was SARS-CoV-2; time since death: < 3 months to 1-year), compared to those who did not ($n= 498$; 84.3%), described poorer psychological health, higher psychological distress (depression, anxiety, lack of control) and sleep difficulties, higher levels of stress (higher impact of COVID pandemic in daily life, and higher behavior changes in response to COVID-19) and more social isolation.

Conclusions: COVID-19 pandemic-related stress is a source of additional stress for bereaved students. Grief is also associated with social isolation, poor mental health (depression, anxiety, lack of control) and sleep difficulties. Screening efforts, guidance, and counseling from professionals of mental health care, primary health care, and universities health care services during and after the COVID-19 pandemic could be extremely beneficial for bereaved students, particularly for those at higher risk of developing prolonged grief disorder.

Disclosure: No significant relationships.

Keywords: grief; students; Covid-19

EPP0416

Adherence Scale to the Recommendations for Mental Health during the COVID-19 pandemic from the Portuguese General Directorate of Health (ASR-MH-COVID19) - Development and validation

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Introduction: The COVID-19 crisis has generated an increasing stress throughout the population.

Objectives: To develop and validate the Adherence Scale to the Recommendations for Mental Health during the COVID-19 pandemic from the Portuguese General Directorate of Health (GDH) (ASR-MH-COVID19).

Methods: The items content was based on the GDH guides for the prevention of mental health and psychosocial well-being of the general population during the COVID-19 outbreak. After content and facial validity analysis, the preliminary version of the ASR-MH-COVID19 (8 items to be answered on a Likert scale) was completed by 413 individuals (69.2% female; mean age=31.02±14,272), in September-December 2020 (Sample1) and then by 967 (70.9% female; mean age=34.02±14,272), in February-May 2021 (Sample2). Sample1 was randomly divided in two sub-samples. Sample1A was used for exploratory factor analysis/EFA and Sample1B for confirmatory factor analysis/CFA; CFA was then replicated with Sample2. The online surveys also included the Adherence Scale to the Recommendations of Portuguese GDH to minimize the impact of COVID-19 (ASR-COVID-19; Pereira et al. 2020).

Results: CFAs were informed by EFA and showed that the unidimensional model presented acceptable-good fit indexes (Sample1B: $\chi^2/df=2.747$; RMSEA=.0980, $p<.001$; CFI=.973; TLI=.918, GFI=.972; Sample2: $\chi^2/df=3.327$; RMSEA=.0490, $p<.001$; CFI=.993; TLI=.983, GFI=.990). Cronbach's alphas were $\alpha<.850$. Pearson correlations between ASR-MH-COVID19 and ASR-COVID19 were significant ($p<.01$) and moderate-high for the total ($r=.753$) and dimensional

scores (Distance and respiratory hygiene, $r=.739$; House and personal hygiene, $r=.584$; Use of remote services and isolation $r=.425$).

Conclusions: The new ASR-MH-COVID19 has shown validity and reliability, allowing the investigation of this (mental) health behaviour.

Disclosure: No significant relationships.

Keywords: Covid-19; Adherence Scale to the Recommendations for Mental Health during the COVID-19

EPP0417

Adherence Scale to the Recommendations for Mental Health during the COVID-19 pandemic from the Portuguese General Directorate of Health (ASR-MH-COVID19) - Development and validation

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Introduction: The COVID-19 crisis has generated an increasing stress throughout the population.

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Results: CFAs were informed by EFA and showed that the unidimensional model presented acceptable-good fit indexes (Sample1B: $\chi^2/df=2.747$; RMSEA=.0980, $p<.001$; CFI=.973; TLI=.918, GFI=.972; Sample2: $\chi^2/df=3.327$; RMSEA=.0490, $p<.001$; CFI=.993; TLI=.983, GFI=.990). Cronbach's alphas were $\alpha<.850$. Pearson correlations between ASR-MH-COVID19 and ASR-COVID19 were significant ($p<.01$) and moderate-high for the total ($r=.753$) and dimensional scores (Distance and respiratory hygiene, $r=.739$; House and personal hygiene, $r=.584$; Use of remote services and isolation $r=.425$).

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Disclosure: No significant relationships.

Keywords: Covid-19; mental health; Psychometry