

(20.06 ± 6.38), friend support (18.17 ± 6.47), significant other support (21.2 ± 6.22), and overall social support (59.42 ± 15.26). Significant associations were found between resilience and marital status ($p = 0.019$), with married women showing lower rates of low resilience (21.3%) than single women (31.9%). Women with children also demonstrated higher resilience ($p = 0.002$), while employment status had a notable impact ($p = 0.005$), with low resilience rates highest among unemployed women (36.3%) and lowest among public sector workers (19.6%). Resilience positively correlated with social support across all sources: familial ($p < 0.001$, $r = 0.269$), friend ($p < 0.001$, $r = 0.260$), significant other ($p < 0.001$, $r = 0.289$), and overall social support ($p < 0.001$, $r = 0.338$).

Conclusions: Our findings underscore the crucial role of social support and family connections in enhancing the psychological resilience of Tunisian women. Therefore, targeted social interventions are needed to support women experiencing loneliness or lacking social networks, aiming to strengthen their resilience and overall well-being.

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EPV0978

Resilience among Tunisian women: Exploring the impact of coping Strategies and sociodemographic influences

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Introduction: Tunisian women, seen as symbols of freedom, have achieved social equality despite various challenges. This study examines the role of sociodemographic factors and coping strategies in shaping psychological resilience among Tunisian women.

Objectives: To investigate how sociodemographic factors and coping styles influence resilience in Tunisian women.

Methods: This cross-sectional study targeted Tunisian women aged 18 and above through an online survey between June and August 2024. Sociodemographic data were collected, coping styles were measured using the Brief COPE inventory, and resilience was assessed via the 25-item Connor-Davidson Resilience Scale (CD-RISC 25).

Results: Data from 695 women (mean age = 36.72 ± 12.23) showed that 90.9% had university education and 34.1% were unemployed. Personal income was the main income source for 61.7%. The mean resilience score was 68.26 ± 14.09, with 26.3% exhibiting low resilience. Higher resilience was significantly associated with university education ($p < 0.001$) and higher economic status; 34.3% of those in lower brackets showed low resilience ($p = 0.007$). Personal income also predicted resilience ($p < 0.001$). Regarding coping, resilience positively correlated with problem-focused ($r = 0.496$, $p < 0.001$) and emotion-focused coping ($r = 0.271$, $p < 0.001$), but was negatively associated with avoidance coping ($r = -0.093$, $p < 0.05$).

Conclusions: This study reveals that resilience among Tunisian women is linked to education, economic status, and income, with effective coping strategies (problem- and emotion-focused) enhancing resilience. Findings underscore the importance of economic

empowerment and effective coping skills in strengthening resilience among women.

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Factor Models as an Important Tool in Creating the Effective Quality Management System in Psychiatric Institutions

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Introduction: Medical staff is one of the main participants in psychiatric care quality management system. At the same time, it is not enough to ensure high level of staff qualifications only. It is also necessary to determine staff satisfaction with their professional activities, levels of staff well-being and of professional burden. That's why, using factor analysis in the process of identification of factors affecting these parameters of psychiatric staff is an important task.

Objectives: To work out factor models determining the main components affecting psychiatric staff professional burden and satisfaction of staff with provided psychiatric care; to justify proposals for improving medical staff professional activities and quality of care.

Methods: Adapted questionnaire «Assessment of the burden of psychiatric staff working in psychiatric institution» (WHO, 1994); Questionnaire «Assessing the satisfaction with quality of care by medical staff of psychiatric institution» (Solokhina et al., 2014). Factor analysis (principal component analysis with quattrimax rotation and factor selection according to the Cattell criterion) was used in the IBM SPSS Statistics 27 software environment. The study involved 73 nurses (age 44,55±11,56) of Moscow psychiatric hospitals № 1 and № 4. The nurses were included in the analyses as the most representative staff category closely contacting with patients.

Results: Using factor analysis, a model identifying the most significant components affecting of the professional burden of the nurses and reflecting 50.9% of the sample variance was worked out. The parameters include: “physical and emotional problems”, “interpersonal problems”, “intrapersonal problems”, “stigmatization”, “experiencing difficult situations related to patients” (16.86%, 11.67%, 9.52%, 6.61%, 6.34 of the sample variances correspondingly).

The factor model of nurse's satisfaction with psychiatric institutions activities includes “organizational” (33.66%), “procedural” (7.44%), “logistical” (6.92%), “support” (5.14%), “alternative forms of assistance” (5.05%) factors, which in total make up 58.8% of the sample variance.

Conclusions: Factor models are a powerful tool which permits to analyze complex information and to identify factors affecting important indicators in a quality management system. Therefore, factor analysis should be carried out regularly in order to prevent different risks of care quality violation. It is also important to introduce psychological support to medical staff and to improve team methods of work.

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