

Objectives: The aim of the study was to assess the relation between the internet usage for communication and the quality of the social adaptation in men with mental disorders.

Methods: 82 male patients with schizophrenia spectrum disorder (F20) were involved into the study (mean age 22 ± 4.3). Methods: SCL-90R, "social circle" inventory (Susan L., Phillips), semi-structured interview of "internet usage" ("communicative internet usage" consists of communication in on-line games, use of the internet social networks for communication, use the internet to find new friends, maintaining relationships with relatives, friends, colleagues).

Results: Two groups of patients were considered: those who use internet for communicative purposes (N=61) and those who do not (N=21). According to the analysis (Mann-Witney U-test, hereinafter significance level $*p < 0.05$), those who use the internet for communication have lower levels of psychotic symptoms (PSY) ($U=446^*$), lower levels of "depression" ($U=453^*$). Those who use the internet for communication have more people in social circle to spend free time ($U=910,5^*$), having the same occupation ($U=860^*$), having the same interests ($U=867,5^*$) and sharing the same values ($U=873^*$). They have more friends ($U=804^*$), peers ($U=814^*$), more women among friends ($U=793^*$), more people to provide instrumental support ($U=761,5^*$).

Conclusions: Patients, who use the internet for communications, have a lower levels of psychopathological symptoms and higher quality of social adaptation. This indicates a possible potential of the internet for mental health rehabilitation.

Disclosure: No significant relationships.

Keywords: Internet; social adaptation; communication; Mental disorders

EPV0579

Predictors of psychosocial adaptation and mental wellbeing among people with chronic illness and disabilities in a chinese context

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doi: 10.1192/j.eurpsy.2021.2094

Introduction: The process of adjustment to disability and illness among people with chronic illness and disabilities (CID) impacts on motivation for rehabilitation illness self-management, and psychological well-being. It involves a complex interplay of biopsychosocial factors, and was seldom examined in the Chinese context.

Objectives: Identify the predictors of mental well-being of people with from a set of variables including illness and social support, functional abilities, coping strategies, resilience. Examine how these factors interact in determining psychosocial adaptation and mental well-being by structural equations modelling (SEM).

Methods: We conducted a survey of people with CID, who were recruited from community-rehabilitation settings and self-help groups (N = 244). The research questionnaire collected basic demographic information, illness-related variables (e.g. pain, fatigue, functional limitations), and RIDI), social support, measures of resilience, coping, psychosocial ad as predictors, and mental well-being.

Results: Of General Linear Model (GLM) revealed that males have better adaptation than females. Resilience, social coping, & active problem solving are significant predictors of adaptation (Table 1), while age, breathing, pain, resilience, avoidance coping, are predictors of maladaptation (Table 2). A SEM was tested to examine the interaction among the predictors and outcome of adaptation and mental well-being (Figure 1), and the model fit was fair (CFI = 0.89; RMSEA = 0.09)

Conclusions: The results indicated that there are gender differences in adaptation. While all the hypothesized groups of variables contributed to mental well-being of people with CID. Resilience, illness variables, and some forms of coping are closely linked to adaptation and maladaptation.

Disclosure: No significant relationships.

Keywords: mental well-being; Chronic illness and disability; Psychosocial adaptation; Chinese

EPV0580

Translation and validation of the reaction to impairment and disability inventory in a chinese context

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doi: 10.1192/j.eurpsy.2021.2095

Introduction: People with chronic illness and disabilities (CID) often need to adjust to changes in self-concept, cope with their grief from the loss of functional abilities, and to "live with the illness". Emotional adjustment to disabilities is a major challenge in rehabilitation, but there is no validated Chinese instrument for assessing psychosocial adaptation of people with CID.

Objectives: This study translated the Reaction to Impairment and Disability Inventory (RIDI) into Chinese and validated the Chinese version (C-RIDI), for assessing emotional adjustment in people with CID. We examined the factor structure, internal consistency, convergent validity, and criterion-related validity of the C-RIDI.

Methods: We conducted a survey of people with CID who were recruited from community-rehabilitation settings and self-help groups (n = 244). The research questionnaire collected demographic information, illness-related variables, the C-RIDI, and measures of resilience and well-being.

Results: The C-RIDI has good content validity and no major changes to the translated items were needed for the use with Chinese population. For factor structure, we replicated the results of Livneh, Martz, & Boder (2006). The C-RIDI has two second-order factors of adaptive and non-adaptive scales, which interact with the two denial subscales. Internal consistency of the subscales is satisfactory except for the 3-item denial subscales. Correlations of the C-RIDI subscales with illness-related variables, resilience, and