

EPP0420

Relationship between personality, adherence to (mental) health behaviours and psychological distress during the COVID-19 pandemic

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Introduction: Public health authorities around the world have been disseminating messages to support mental health and psychosocial well-being during the COVID-19 pandemic. Based on the Portuguese guidelines, we have developed the Adherence Scale to the Recommendations for Mental Health during the COVID-19 Pandemic (ASR-MH-COVID19) to better understand this health behaviour.

Objectives: To analyse the relationship between sociodemographics, personality traits, Adherence (to the Recommendations for Mental Health during the COVID-19 Pandemic) and psychological distress.

Methods: 413 individuals (69.2% female; mean age=31.02±14,272) completed an on-line survey, in September-December 2020, including sociodemographic questions, ASR-MH-COVID19, NEO-FFI-20 and Depression Anxiety Stress Scale (DASS-21) and Health Perception Scale.

Results: Adherence scores did not significantly differ by gender, age and years of education. Women presented higher DASS and Neuroticism scores ($p<.01$). Adherence were negatively correlated with Neuroticism ($r=-.247$) and with Depression/Anxiety/Stress (all $r>-.200$), positively with Openness to Experience ($r=.174$), Conscientiousness ($r=.194$) and Perceived Health (Physical, $r=.173$ and Psychological, $r=.215$) (all $p<.01$). Mediation analysis (Hays' Macro Process - Model 4) revealed that Adherence is a partial mediator between Openness and DASS and Conscientiousness and DASS; when considering Neuroticism, only the direct effect was significant. The effect of Perceived Health (both Physical and Psychological) on DASS was also mediated by Adherence.

Conclusions: The Health Behaviour Model proposes a pathway linking personality and health that applies to these results about adherence and psychological distress during the COVID-19 pandemic. Personality and perceived health (also a trait) influence both adherence to mental health behaviours and psychological distress. Understanding personality is vital for health care providers.

Disclosure: No significant relationships.

Keywords: Health behaviours; Covid-19; personality

EPP0419

From Perceived Vulnerability to Disease to Psychological Distress in times of COVID19 pandemic

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Introduction: Perceived vulnerability to disease/PVD may influence psychological reactions to COVID-19 pandemic.

Objectives: To analyse the role of PVD in psychological distress/PD during the COVID-19 pandemic, testing whether it is mediated by perceived risk of COVID-19, fear of COVID-19 and repetitive negative thinking/RNT.

Methods: Participants (N=413 adults; 69.2% women) were recruited from September until December 2020, via social networks. They completed the following self-report validated questionnaires: Perceived Vulnerability to Disease Questionnaire/PVDQ; Perceived Risk of COVID-19 Scale, Fear of COVID-19 Scale; Perseverative Thinking Questionnaire and Depression Anxiety and Stress Scale. As women had significantly higher levels of PVD, COVID-19 perceived risk and fear, RNT, and psychological distress/PD, gender was controlled in mediation analysis (using PROCESS macro for SPSS; Hayes 2018).

Results: All the variables significantly ($p<.01$), moderately ($r>.20$) and positively correlated. The serial mediation model 6 with the three sequential mediators resulted in significant total effect ($c=.326$, $se=.0791$, $p<.001$, CI:.1702-.4814), non-significant direct effect ($c'=.111$, $se=.065$, $p=.087$, CI:-.0162 to .2380), significant total indirect effect (.2149, $se=.065$, CI:.1079-.3278); most indirect effects were significant, including the indirect 7 (.0144, $se=.0077$, CI=.0017-.0320), that goes through all mediators (PVD->COVID19 perceived risk->COVID19 fear->RNT->PD), meaning full mediation.

Conclusions: The effect of PVD on psychological distress operates by increasing the perception of risk and the fear of COVID-19, which intensify related worries and ruminations in times of pandemic. People with high perceived threat, aversion and discomfort in situations associated with increased risk of infection should be helped to decrease dysfunctional cognitive contents and processes in times of pandemic.

Disclosure: No significant relationships.

Keywords: disease; COVID19 pandemic; psychological distress; vulnerability

EPP0420

Loneliness in elderly in the covid-19 pandemic

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Introduction: Loneliness and social isolation condition the health of those over 65 years of age, increasing morbidity and mortality. The pandemic caused by Covid-19 has been a health emergency in which the negative effects have been increased by loneliness. We can define several types of loneliness: physical loneliness, moral loneliness and social isolation.

Objectives: The objective was to analyze the impact of Covid-19 on the feeling of loneliness in those over 65 years of age during the last year of the pandemic.

Methods: A bibliographic search was carried out in Pubmed with the terms “loneliness in elderly in the covid-19 pandemic” with the filters “abstract” and “in the last 1 year”, selecting the studies whose title included the terms “loneliness”, “elderly” or “older people” and “Covid-19” or “SARS-Cov-2”. The search gave rise to 13 results, of which the content of the abstracts was qualitatively analyzed.

Results: All studies found an increase in loneliness in the elderly, and more than 50% reported a decrease in this feeling in the elderly trained in new technologies. Other aspects that stood out to influence were comorbidity, resilience, economic situation, social support and subjective feeling of vulnerability.

Conclusions: Older adults avoid direct social contact to protect themselves. This may result in loneliness, that can have serious consequences in terms of morbidity and mortality. To mitigate loneliness they can use online social media, but older adults need to be trained. Institutions and public powers have the obligation to ensure individual and collective security, and protect the integrity of people from dangers.

Disclosure: No significant relationships.

Keywords: Covid-19; Elderly; Geriatric Psychiatry; Loneliness

EPP0421

The implementation of teletherapy with patients with Severe Mental Illness during the COVID-19 first wave and its longitudinal association with hospitalisations: A retrospective multicenter study from Spain

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Introduction: The COVID-19 related restrictions such as social distancing forced the search for feasible alternatives to the provision of care for patients with severe mental illness (SMI), with services opting for teletherapy as an substitute of face-to-face treatment.

Objectives: To examine the implementation of teletherapy (telephone, videoconference) with patients with SMI during the COVID-19 first wave, and explore its associations with reduced hospitalisations after the first wave was over.

Methods: We performed a retrospective assessment of 270 records of patients visiting fifteen outpatient mental health services across Spain during 2020. We retrieved sociodemographic and clinical data, including modality of received therapy (in-person, telephone, videoconference) in three time points (before, during and after the first COVID-19 wave) and hospitalisation rates two, four and six months later.

Results: During the first wave, services implemented teletherapy (telephone and videoconference) extensively, whilst they reduced face-to-face therapy, though this returned to previous levels after

the first wave. Hospitalisations two months later did not differ between patients who received teletherapy, and those who did not ($p=0.068$). However, hospitalisations were lower for the first group of patients four ($p =.004$) and six months later ($p <.001$). Multilevel analyses suggested that receiving teletherapy by videoconference during the first wave was the factor that protected patients most against hospitalisations six months later (OR=0.25; $p=.012$).

Conclusions: Our findings suggest that teletherapy plays a protective role against hospitalisations, especially when face-to-face therapy is not feasible. Therefore, it can be considered a valid alternative to ensure continuity of care to patients with SMI.

Disclosure: No significant relationships.

Keywords: teletherapy; severe mental illness (SMI); outpatient mental health; Covid-19

EPP0422

Prevalence and covid 19 vaccination rate in a population of patients with schizophrenia and a substance use disorder

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Introduction: As of August 27th, 2021, the diagnosed cases of COVID 19 in Spain are 4 758 003 with a prevalence of 10.03%. 68.4% of the Spanish population is fully vaccinated

Objectives: Primary: To compare the prevalence of COVID infection in a cohort of patients with schizophrenia to patients with a dual diagnosis of schizophrenia and substance use disorder Secondary: To compare the rate of fully vaccinated patients diagnosed with schizophrenia with and without a coexisting substance use disorder.

Methods: Retrospective descriptive study. The population in study is made up of patients with schizophrenia (46) and dual diagnosis schizophrenia (28) (following DSM 5 criteria) Confirmed cases were those cases with positive PCR

Results: There was not a statistically significant difference in the prevalence of COVID 19 infection between both groups of patients. The prevalence of COVID infection among the dual diagnosis schizophrenia was 3.57% compared to 6.5% in those without coexisting substance abuse disorder. Relative to vaccination rate, we didn't find a statistically significant difference between both groups. However, there was a higher vaccination rate in the dual diagnosis schizophrenia group (82.12%) compared to the non-dual diagnosis schizophrenia group (69.56%)

Conclusions: The prevalence of COVID 19 infection in the dual diagnosis schizophrenia cohort is 3.57% and in the group of patients with schizophrenia without substance abuse disorder is 6.5%. In those with dual diagnosis schizophrenia the vaccination rate was un 82.12%. It was 69.56% in those without coexisting substance abuse disorder.

Disclosure: No significant relationships.

Keywords: schizophrenia; vaccination rate; covid 19; Prevalence