first period in Italy. They are given hospitality until the possibility of their permanence is verified. We created a survey asking for general information. Participants also received PTSD Checklist (PCL-C). In our analysis, we adopted 45 as cut-off for diagnosis. Questionnaires have been delivered house-to-house and collected when completed.

Results In this pilot study, we collected 61 questionnaires. The majority of answers came from male subjects (46). The prevalence of PTSD was 44% (47% among men and 53% among women, not statistically different).

Conclusions So high rate of PTSD depicts a reality that cannot be left apart. Our attention toward immigrants must focus also on their mental health. European Union should consider new solutions to take care of these critical aspects of those.

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The impact of EU political ambiguity towards migrant crisis on the mental health of migrants

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For last couple of years, EU is facing migrant crisis that is challenging its capacity to help and its unity to decide the modes of assistance. Such political context brings additional uncertainty and insecurity into migrants' lives which causes extreme experiences that are often damaging migrants' mental health. In humanitarian plans regarding assistance for migrants, mental health is a cross cutting issue. Status of mental health is a result of complex intertwining of genetics, developmental and current life experiences. The experience of migration is a current life event which highly determines migrants' mental health. Hardships of travel along migration route are worsened by often hostile reception by authorities at borders of countries that are on the way to desired rich EU countries. On migrants' way to desired safety, there are countries like Slovenia and Hungary which protect their borders with wire. Therefore, migrants are stuck in countries, like Greece and Croatia, which are not their desirable destination. While waiting to get free passage, migrants are exposed to various political rhetoric of politicians of EU countries who hold their destiny in their hands. Migration experience does not make migrants mentally ill but it does make them vulnerable in that respect. Migrants' vulnerability is highly challenged by ambiguity of political decisions, media coverage influenced by the same policies and concomitant changes in immediate surrounding. It is crucial to make publicly clear that political decisions mean life or death, health or mental disorder to migrants and that therefore they at least carry ethical responsibility.

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Mental health paraprofessional training for filipina foreign domestic workers in Singapore: Feasibility and effects on knowledge about depression and cognitive behavioral therapy skills

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Introduction Approximately one in every five Singaporean households employs Foreign Domestic Workers (FDWs) (Humanitarian Organization for Migration Economics [Home], 2015). Mental health problems, especially depression, are prevalent among FDWs in Singapore (HOME, 2015). Yet, there is a lack of empirically-supported interventions to address their mental health needs.

Objective To train FDWs as mental health paraprofessionals with selected CBT skills for depression, which may enable them to provide basic assistance to their fellow domestic workers with depressive symptoms.

Aims To present and assess the effectiveness and acceptability of a 4 weekly 3-hour group CBT-based paraprofessional training program for FDWs.

Methods Participants were randomized into either an intervention or a wait-list control group. Participants in the wait-list group received the training after the intervention group completed the training. Both groups completed questionnaires assessing attitudes towards seeking psychological help; stigma towards people with depression; self-confidence in delivering CBT; general self-efficacy; knowledge of depression and CBT before, immediately after, and two months following the training.

Results Thirty-eight out of 40 participants completed the program. Both groups did not differ on changes in any of the outcome variables. However, within-group analyses showed improved attitudes towards seeking professional health for mental health issues; greater depression literacy; and CBT knowledge following the training. These changes were sustained at 2-month follow-up. All participants indicated high level of satisfaction with the program. Conclusions These preliminary results highlight the potential effectiveness and feasibility of implementing the training as a stepped-care mental health service to address the high rate of depression among the FDW community.

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EV0685

Identity, culture and psychosis: A non-systematic review

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Introduction Given the results of multiple epidemiological studies showing a greater incidence of schizophrenia in migrants, especially in second-generation migrants, many researchers tried to investigate which factors could be associated to these findings, in order to have a better understanding of the migration process itself and simultaneously to contribute to improve knowledge about schizophrenia. In line with the research suggesting that social factors are important contributors to psychological suffering and vulnerability to psychosis, several authors pointed cultural identity as a possible mediator between migration and psychosis.

Objectives To review different perspectives on the current literature about the relationship between cultural identity and psychosis.

Methods Non-systematic review searching on the database MED-LINE and additional searches through secondary references.