E.P. Benavides Rivero, G. Belmonte García, M. Sánchez Revuelta, J. Matsuura and A. De Graaff*, M. Sijbrandij and P. Cuijpers (PM+)

The peer-refugee delivered Problem Management Plus (PM+) intervention in the Netherlands

**Introduction:** In the past decade, millions of Syrians have sought refuge in neighboring countries and Europe. Refugees are at increased risk for the development of common mental disorders (CMD), such as depression and posttraumatic stress disorder (PTSD), but only a small percentage access mental health services. Problem Management Plus (PM+) is a brief, scalable intervention targeting symptoms of CMDs that can be delivered by non-specialist helpers in communities affected by adversity, such as refugees.

**Objectives:** The aim of this randomized controlled trial (RCT) is to evaluate the effectiveness of PM+ among Syrian refugees in the Netherlands.

**Methods:** Adult Syrian refugees and other Arabic-speaking refugees of 18 years and older with self-reported psychological distress (K10 >15) and functional impairment (WHODAS 2.0 >16) are included. Participants are randomized into PM+ or care as usual. Follow-up assessments are conducted at one-week, three-month and twelve-month follow-ups. Clinical outcomes are symptoms of depression/anxiety (HSCL-25), PTSD (PCL-5), and functional impairment (WHODAS 2.0).

**Results:** By November 2021 [recruitment ends by December 2021], 214 participants were screened for eligibility and 184 participants were included. Participants are M=36.5yrs old (range 18-69yrs), and 73 participants are female (39.7%). We will present preliminary results for the effects of PM+ on depression, anxiety, PTSD, and functional impairment at one-week follow-up, as well as barriers and facilitators for implementing PM+ in a European country.

**Conclusions:** After positive evaluation of peer-refugee delivered PM+, the Arabic manual and training materials will be made available through WHO to encourage scaling-up.

**Disclosure:** No significant relationships.

**Keywords:** depressive disorder; posttraumatic stress disorder; Randomized Controlled Trial; Refugees

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**Introduction:** The odyssey of one of many patients with a mental illness where their life journey leads them to marginal situations and where elements of a legal nature are intermingled; either by the stay in prison itself or by the need for an admission against their will for psychopathological stabilization and to redirect this shipwrecked life course.

**Disclosure:** No significant relationships.

**Keywords:** Sevilla; Psychosis; immigration; journey

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**EPV0886**

Transcultural approach to psychotic episodes. About a case.

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**Introduction:** Cultural differences influence understanding and therapeutic adherence of migrant patients, therefore it is very important to acquire cultural competence.

**Objectives:** The objective of this paper is to study, from the following case, the effect of cultural competence in approach to psychosis in migrant patients.

**Methods:** A bibliographic search was performed from different database (Pubmed, TripDatabase) about the influence of culture on psychosis and its resolution. A 25-year-old Moroccan man who came to Spain two years ago fleeing his country and suffered violence in different countries until he arrived. He lived on the street until they offered him a sheltered house with other Moroccans. He felt lack of acceptance and loss of his roots. In this context, he developed a first psychotic episode in which he described “the presence of a devil”.

**Results:** He distrusted antipsychotic treatment and believed “that devil” was still inside him, being convinced that he needed a Muslim healer to expel him. We followed up with the patient and a cultural mediator, better understanding his cultural reality, uprooting and traumas, and he could feel understood and trust us. During the process, he decided to go to the Muslim healer who performed a symbolic rite for which he felt he expelled the devil, while accepting antipsychotics. With all this, the psychotic symptoms and their acculturation process improved.

**Conclusions:** It is very important that psychiatrists have cultural competence to understand the context of migrant patients, and to be able to provide them with the best treatment.

**Disclosure:** No significant relationships.

**Keywords:** psychosis; migration; acculturation; Cultural competence

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**EPV0887**

Scalable psychological interventions for Syrian refugees: Preliminary results of a randomized controlled trial on the peer-refugee delivered Problem Management Plus (PM+) intervention in the Netherlands

A. De Graaff*, M. Sijbrandij and P. Cuijpers

**Introduction:** Refugees have been shown to be a vulnerable population with increased psychiatric morbidity and lack of access to adequate mental health care. By establishing cooperations between psychosocial centers and psychiatric clinics the state funded project refuKey by NTFN e.V. and DGPPN aims to improve access to and quality of mental health care for traumatized refugees pursuing a stepped-care model.

**Objectives:** As part of a larger project evaluation study four focusgroups among experts were conducted to explore the impact of refuKey on refugees’ mental health care.

**Disclosure:** No significant relationships.

**Keywords:** depression; posttraumatic stress disorder; Randomized Controlled Trial; Refugees

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**EPV0888**

Psychiatric-psychotherapeutic and psychosocial care for refugees: effects and future prospects of the refuKey project - perspective of experts

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**Introduction:** Increased psychiatric morbidity and lack of access to adequate mental health care for refugees has been shown. By establishing cooperations between psychosocial centers and psychiatric clinics the state funded project refuKey by NTFN e.V. and DGPPN aims to improve access to and quality of mental health care for traumatized refugees pursuing a stepped-care model.

**Objectives:** As part of a larger project evaluation study four focusgroups among experts were conducted to explore the impact of refuKey on refugees’ mental health care.