### EV0595

# German mental health care in people with intellectual and developmental disabilities (idd) in comparison to other European countries

S. Elstner

Ev. Krankenhaus Königin Elisabeth Herzberge, Psychiatry, Psychotherapy and Psychosomatics, Berlin, Germany

*Introduction* In Germany, mental health care in people with IDD is mostly determined by experts' opinions. Particularities of the psychiatric assessment and treatment of people with IDD and a comorbid psychiatric disorder are taught neither at medical schools nor in the scope of the medical training of psychiatrists.

*Objectives* The present study examined the influence of sociopolitical aspects of health care on quality and organisation of mental health care in people with IDD.

*Methods* Various aspects of health care systems in Germany and three other European countries were explored and juxtaposed subsequently with a special developed questionnaire.

*Results* The health care systems of four different European countries differ in socio-economical, educational and system-financed aspects.

*Conclusions* Differing organisational levels of national health care systems and socio-economical aspects within these countries contribute to the organisation of the mental health care system in people with IDD. Suggestions for a better harmonisation of European mental health care in people with IDD are offered.

*Disclosure of interest* The author has not supplied his declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.925

### EV0596

## Preliminary study on the analysis of cognitive profile in subjects with ASD: WISC-IV

D. Galletta

University of Naples Federico II, Neuroscience, Naples, Italy

Autism spectrum disorder (ASD) is a neurodevelopmental disorder, observed in several contexts and characterized by persistent deficits in the communication, social interaction and behavioral areas (DSMV, 2013). ASD includes a wide range, "a spectrum," of symptoms, skills, and levels of disability. In the last years, we have noticed a substantial change in the diagnostic criteria due to the fact that, although the huge heterogeneity shown by the disorder, in the majority of autistic subjects, both those with high and low IQ, we can identify a common profile of functioning, as regards communicative, social, motor and behavioral skills (Sharma et al., 2012). As reported by Frith (1989; 2003), this kind of functioning is based on a different cognitive style, characterized by a strong prevalence of "bottom-up" elaboration processes, coexistent with the inability of the subject to integrate perceptual data into a global and coherent representation (weak central coherence theory). In this study, we have administered WISC IV to two adolescents (16 years old), already diagnosed for ASD with a low functioning. As expected, results have evidenced the presence of a rigid cognitive style with impaired conceptualization abilities and high attention to details. Specifically main falls have occurred in the area of visual-perceptual reasoning, underlining a lack of visual-spatial processing skills, as well as a lack of fluid reasoning skills. Particularly deficit resulted in the categorization capabilities and abstraction.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.926

#### EV0597

# Occupational activation centers as a solution to improve vocational rehabilitation of patients with intellectual disabilities in Poland

J. Krysta<sup>1</sup>, K. Krysta<sup>2,\*</sup>

<sup>1</sup> Polish Association for Persons with Mental Handicap, PSOUU, Branch in Bytom, Bytom, Poland

<sup>2</sup> Medical University of Silesia, Department of Rehabilitation Psychiatry, Katowice, Poland

\* Corresponding author.

*Introduction* Since the 1990's the main form of vocational rehabilitation centers in Poland were occupational therapy workshops (OTW), but the low ratio of the employment of the participants of OTW's led to the creation of newer, more effective institutions called Occupational Activation Centers (OAC). They were expected to be professional activity establishments, aimed at launching new career paths of people with intellectual disabilities, enabling the candidates to pass through various stages of rehabilitation and vocational activation.

*Materials and methods* The analysis of available statistical data concerning the activity of OAC's in Poland was done.

*Results* In the whole country the number of these facilities is 53, while the number of occupational therapy workshops is 665. The Law on OAC's restricts the employment of people with moderate disability in total employment to 35%, this indicator covering not only the persons with mental retardation, but also people with autism and mental illness. In addition the OAC's activity generates the cost of creating them inadequate for the quantity and quality of jobs being created.

*Conclusion* It turned out that the creation of OAC's occurred too slowly in relation to the already operating OTW's and the weak-nesses in the Polish system of rehabilitation and employment of people with intellectual disabilities necessitates the need to find innovative ways to solve this problem.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.01.927

### EV0598

## Managing challenging behavior in people with intellectual disabilities in communities and reducing hospital stays: Current and future challenges from an European perspective

B. Perera <sup>1,\*</sup>, K. Courtenay <sup>1</sup>, S. Elstner <sup>2</sup>, K. Krysta <sup>3</sup> <sup>1</sup> Barnet- Enfield and Haringey Mental health trust, Learning Disability Partnership, London, United Kingdom

<sup>2</sup> Mental health services- Berlin, Learning Disabilities, Berlin, Germany

<sup>3</sup> Learning disability services, Katowice Poland, learning Disabilities, Katowice, Poland

\* Corresponding author.

Prevalence of intellectual disability (ID) ranges from 0.05 to 1.55%. A total of10–15% of the people with ID present with challenging behavior (CB). This causes a significant strain on mental health services. People with ID; end up staying in psychiatric inpatient units for longer periods. Most people with ID move out of their family home to various care settings due to severity of their behavior difficulties. Few European countries have specialist services for people with ID whereas most countries manage people with ID and CB using adult mental health services. There is ongoing debate whether patients with ID and CB need to be managed by specialist services. There are significant financial implications looking after people with ID and CB. This has often led to over prescribing of psy-