

Image:

		Sum of Squares	df	Mean Square	F	Sig.
task-oriented coping	Between Groups	118,622	1	118,622	1,820	.180
	Within Groups	7040,869	108	65,193		
	Total	7159,491	109			
emotion-focused coping	Between Groups	181,932	1	181,932	1,882	.173
	Within Groups	10437,523	108	96,644		
	Total	10619,455	109			
avoidance-oriented coping	Between Groups	414,002	1	414,002	4,147	.044
	Within Groups	10781,671	108	99,830		
	Total	11195,673	109			

Table 1: Results of analysis of variance, locus of control and coping strategy

Image 2:

		N	Mean	Std. Deviation	Std. Error	95% Confidence Interval for Mean		Minimum	Maximum
						Lower Bound	Upper Bound		
task-oriented coping	internal locus control	51	61,61	8,395	1,176	59,25	63,97	35	80
	external locus control	59	59,53	7,787	1,014	57,50	61,55	41	75
	Total	110	60,49	8,105	,773	58,96	62,02	35	80
emotion-focused coping	internal locus control	51	43,98	8,705	1,219	41,53	46,43	25	65
	external locus control	59	46,56	10,707	1,394	43,77	49,35	25	68
	Total	110	45,36	9,870	,941	43,50	47,23	25	68
avoidance-oriented coping	Internal locus control	51	53,94	9,052	1,268	51,40	56,49	30	79
	External locus control	59	50,05	10,736	1,398	47,25	52,85	23	72
	Total	110	51,85	10,135	,966	49,94	53,77	23	79

Table 2: Descriptive data, locus of control and coping strategies

Image 3:

		N	Mean	Std. Deviation	Std. Error	95% Confidence Interval for Mean		Minimum	Maximum
						Lower Bound	Upper Bound		
task-oriented coping	male	47	61,51	8,137	1,187	59,12	63,90	35	75
	female	63	59,73	8,061	1,016	57,70	61,76	41	80
	Total	110	60,49	8,105	,773	58,96	62,02	35	80
emotion-focused coping	male	47	43,72	10,170	1,483	40,74	46,71	25	67
	female	63	46,59	9,539	1,202	44,18	48,99	25	68
	Total	110	45,36	9,870	,941	43,50	47,23	25	68
avoidance-oriented coping	male	47	52,13	10,288	1,501	49,11	55,15	23	72
	female	63	51,65	10,097	1,272	49,11	54,19	30	79
	Total	110	51,85	10,135	,966	49,94	53,77	23	79

Table 3: Descriptive data, gender differences, and stress coping strategies, p je 1.00

**Conclusions:** This research actually confirmed the importance of individuality and various factors that can affect a person, and because of this, it was very likely that not all hypotheses could be answered in the way the author expected before the research began. With this, it can be assumed that the personality of a person can hardly be related to broad styles of coping with stress, and that generalizations regarding gender, age, education and work experience cannot be made, because there are predominantly individual differences in the development of an individual.

**Disclosure of Interest:** None Declared

EPP0161

Factors associated with insomnia and aggression among healthcare workers during the COVID-19 pandemic

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**Introduction:** Healthcare workers are exposed to increased risks of insomnia and aggression during the COVID-19 pandemic.

**Objectives:** The aim of the study was to estimate the prevalence rate of insomnia and aggression and identify associated risk factors among healthcare workers during the COVID-19 pandemic

**Methods:** A total of 264 healthcare workers participated in the study. The study was conducted with the diagnostic survey method, using the Buss-Perry Aggression Questionnaire, the Athens Insomnia Scale, the Pittsburgh Sleep Quality Index, and a questionnaire of our authorship.

**Results:** The vast majority of the respondents (81.06%) suffered from insomnia and had poor sleep quality (78.03%). Education (p=0.038), marital (p=0.043) and parental status (p=0.004), and contact with patients suffering from COVID-19 (p=0.024) were statistically significant contributors to insomnia. Working time was found to significantly correlate with insomnia (r=0.124 p=0.044) and a physical aggression (r=0.168 p=0.006), anger (r=0.121 p=0.05), a verbal aggression (r=-0.132 p=0.032). Age was found to significantly correlate with total aggression (r=-0.133 p=0.031), verbal aggression (r=-0.138 p=0.025), anger (r=-0.151 p=0.014). Sex was found to be statistically significantly related to physical aggression (p=0.017), anger (p=0.032), and hostility (p=0.002).

**Conclusions:** A considerable proportion of HCWs experienced sleep disorders during the pandemic, emphasizing the need to establish ways to reduce long-term adverse outcomes associated with chronic insomnia and adjust interventions under pandemic conditions. Our findings confirm that insomnia and poor sleep quality are consistently associated with aggression.

**Disclosure of Interest:** None Declared

EPP0162

The impacts of the COVID-19 pandemic on adults who experience imprisonment in Greece – A qualitative study

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