orientation and evaluation of individual cases are necessary to guide families about the resources available in the social and health network, thus avoiding a high overload of caregivers and improving the quality of life of families.

Disclosure of Interest: None Declared

## **EPV0219**

## Separation-Individuation in Patterns in Turkey: An Investigation of Developmental, Gender and Contextual Differences

T. Bildik\*, B. Şentürk Pilan, B. Özbaran, Z. Yüncü and S. Köse

Child and Adolescent Psychiatry, Ege University Medical School, Izmir, Türkiye \*Corresponding author.

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**Introduction:** There is still a *paucity* of *studies* exploring the impacts of teenage employment on mental health and development. In many developing countries, youths participate intensively in the teenage labor force. The involvement of adolescent in the world of work would promote the development of responsibility and prepare the young person to function more effectively in adult roles.

**Objectives:** The purposes of the present study were to examine the adolescent separation-individuation among an understudied and vulnerable population; and to examine the Separation-Individuation Test of Adolescence (SITA) for revealing the differentiation working male group from student male group.

**Methods:** Participants completed the SITA. The group of study 1 consisted of 618 high school and 252 university students between the ages of 14 and 24, 489 of which were girls and 381 were boys. In Study 2, participants were 269 male adolescents between the ages of 15 and 17, 141 of which were full-time worker and 128 high school students. In study 1, these results were consistent with the *rapprochement subphase* of the separation-*individuation process in adolescence* -the striking desires for intimacy and independence.

Results: Our results support the gender specific patterns of identity formation and the argument that connectedness in close relationships plays a central role in the female identity development. Interestingly, there were no significant gender differences in the tendency to view close interpersonal relationships as threatening to their sense of independence and selfhood, and to deny or avoid dependency needs. The reason for this might be the cultural differences between the individualistic and collectivistic cultures. In study 2, working males could be distinguished from student counterparts by their increased tendency to seek close interpersonal ties with caretakers. The finding also suggested that student males reflected characteristics of the traditional view of adolescents' independence striving. Across both studies it was found that the traditional Turkish child-rearing patterns have been characterized by an emphasis on interpersonal relationships and close ties with family than individualistic cultures

**Conclusions:** Our results revealed that the subscales of SITA – especially dependency denial, rejection expectancy, nurturance seeking, engulfment anxiety, and teacher enmeshment- can help clinicians for assessing the adolescent separation-individuation process in a reliable way. We suggested that adolescent employment would lead to the *difficulties* in developing bonds with parents

because of the adolescents' long work hours, the early involvement with the world of work would lead to the *withdrawal from the more dependent, preadultlike student role, and* student adolescents would reflect characteristics of the traditional view of adolescents' independence striving.

Disclosure of Interest: None Declared

## **EPV0220**

## Major depressive disorder (MDD) in adolescents with Borderline (BPD) and Shyzotypal personality disorder (STPD)

V. Kaleda\*, E. Krylova and A. Kuleshov

Department of youth psychiatry, Federal State Budgetary Scientific Institution Mental Health Research Center, Moscow, Russian Federation

\*Corresponding author.

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**Introduction:** MDD is a chronic illness characterized by complex patterns of persistence, remission and relapse. Personality disorder (PD) is a negative prognostic marker MDD and its chronicity, and dynamics of STPD and BPD in adolescence occurs most severely. **Objectives:** The purpose of this study was to study the effect of STPD and BPD on the course of MDD in comparative groups in youth.

Methods: Clinical psychopathological interview and follow-up assessment, SCID-II, Hamilton Depression Rating Scale (HDRS). Sample: N=102 male and female with MDD in STPD and BPD into two equal groups of 51 people respectively. MDD was assessed in each of both PD groups in two time frames: current and during depressive the last 12 months in adolescence; three and more years later during adolescence. Outcome predictors included: clinical characteristics of MDD, duration of current episode, relapse rate. The average age of first MDD in both groups was  $18.9 \pm 3.2$  years. Results: The first MDD with both PD in adolescence characterized by psychopatological variety due to type PD and age factor. Depressive was more variability of affect, and shorter duration (less then 6 months N=28 (55%)) in group BPD as opposed to the sustained mood problems seen in STPD - (6-12 months N=19 (37%); 12 months and more N=21(41%)) with MDD (p=0,004;  $\chi$ 2= 14,997). During the subsequent follow-up assessment among patients with BPD had the highest percent recurrences once every 6 months or more (N=36 (71%)) and those with STPD significantly rarer recurrences, every 6 to 12 months (N=21(41%)), Less than once a year N=17 (33%)), (p=0,001; χ2= 23,252). Diagnosis of PD in adolescence is based on pathological traits, and impairment in the affective disorder is measurement separately. When measuring impulsivity in the BPD group, significantly higher rates BIS-11 scale were noted  $(74\pm1)$  than in the SPD group  $(61\pm1)$ .

**Conclusions:** Diagnosis of PD in adolescence is based on pathological traits, and impairment in the affective disorder is measurement separately. It has been confirmed that PDs are a negative prognostic marker of the manifestation of a MDD in adolescence, and the presence of BPD is a serious prognostic predictor of its persistence.

Disclosure of Interest: None Declared