was frequently questioned by supporting staff. Lack of trained social workers caused additional distress, as participants could not receive access to additional resources. Only four patients said that their psychiatrists acknowledged poor clinic environment and encouraged remaining in treatment. For 18 respondents, family demanded that they receive treatment in rural clinic so that no one finds out about their mental disease.
Conclusion In large urban clinics, stigma in psychiatry comes in many flavors, especially projected by unprofessional clinic staff and ashamed family. Lack of support forces patients to travel to rural premises to receive unbiased, stress-free care.
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EV1036

Training occupational therapists in how to use cognitive behavioral therapy in their practice

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Introduction Cognitive behavior therapy (CBT), which is used by mental health professionals including occupational therapists (OT) is a time-sensitive, structured, present-oriented therapy directed toward solving current problems and teaching clients skills to modify dysfunctional thinking and behavior.
Objectives Supporting the development of CBT theory and efficient use by mental health professionals are vital.
Aim To present the results of CBT training for OTs, which was funded by "European Union technical assistance for increasing the employability of people with disabilities" project (Europe Aid/136449/IH/SER/TR).
Methods Using a basic CBT theoretical framework the participants attended 96 hour face to face training modules with written materials including fundamental features, preconditions and methods used in CBT. A Turkish CBT book was published for course. Participants trained their skills under supervision and send the results to educators. Pre-post of training CBT knowledge and quality of training (plan-contents, educators, and environment) were evaluated by 5-Likert scale.
Results Thirty OTs (f = 23, m = 7) mostly 43.3% PhD; 20–25 (30%) and 45–50 (26.7%) years age period were included. Total mean score for quality of education was 109.4 ± 29.4 with 23.63 ± 4.34, 47.36 ± 6.41, 38.40 ± 21.61 for plan-contents, educators, and environment subscores, respectively. CBT knowledge was increased from 15.70 ± 6.08 to 45.06 ± 4.59 ($P < 0.001$).
Conclusion Training increased CBT awareness and practice skills of OTs. Teaching OTs CBT may increase their understanding of person-environment-occupation approach, psychological problem solving, occupational engagement and participation of individuals. Our result supports that mental health professionals should collaborate to share ideas, develop guidelines and promote good practice examples in client-centered and holistic rehabilitation care.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1037

Patient education for behavior change: Harm reduction and hypertation control

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Background Chronic non-communicable diseases (NCD) are a public health problem in Brazil. In addition, NCDs is more strongly associated with common mental disorders than was each NCD individually. This study is about the implementation and execution through the university extension project "harm reduction and mental health: hypertation control and health education" developed at Images of the Unconscious Museum, Brazil.
Aims Measure the prevalence of hypertation, verify the association with chronic NCDs, educate about risk behavior and improve to psychosocial rehabilitation.
Methods A socio-demographic and blood pressure profile was constructed. We identify hypertation on 33 patients. After the diagnosis, the family health unit was contact to construct a clinical care plan. We distribute health educational material about clinical diseases.
Results Thirty-six percent patients was identify with hypertation; once had high blood pleasure and rejected any intervention; 68% have family rates of hypertation and 100% referred low salt on diet. A book storytelling was constructed to give orientations about health lifestyle. We conducted therapeutic workshop to highlighting the creative, imaginative and expressive potential of the users on health behavior.
Conclusion We identify low blood pressure after the activities and a new health style after the orientation process.
Disclosure of interest The authors have not supplied their declaration of competing interest.

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EV1038

Demonstrating the methodology of a pilot programme for establishing a system for mental health promotion in Hungary

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Introduction A 12 month long mental health promotion pilot programme in Hungary, funded by the Norway Grants, will finish on 30th April 2017.
Aims To launch six community mental health promotion centers (MHPCs) located in various economic environments, supervised by one Methodological Center plus expert teams and carrying out studies on the effectiveness of the launch of the system. The final recommendations will constitute a basis for setting up a national network for mental health promotion.
Objectives To develop a sustainable model for establishing a national network of MHPCs; to map and record the mental health problems and the stakeholders of the area; to find and assess the local best practices; and to raise public awareness in the following mental health problems: depression, suicide, stress and dementia.
Methods (1) Models for inducing changes in the knowledge and attitudes upon mental health in the communities were reviewed in a systematic literature search. (2) Based on the results, a model of mental health promotion centers was outlined for problem identification, stakeholder mapping, assessing local best practices, organizing and supporting local networking activities for synergis-

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