mental disorders are admitted to a psychiatric unit against their own will to receive treatment. In Europe, as public attitudes and practices shifted, compulsory admission procedures were reformed to ensure patient rights and safety. Differences however exist for compulsory admission procedures between countries. In 2018, a survey was created and disseminated by the European Psychiatric Association Ethics Committee to National Psychiatric Associations within 40 European countries to learn more about the legislation, key actors involved, and reasons for admission. Results showed that approximately half of the responding countries required an independent medical expert, typically a psychiatrist, to be involved in the procedure. Most countries by law required the involvement of a court-appointed judge in making the decision about compulsory admission and to review the case after a certain period of time. All but one country have time limits on legal decisions for compulsory admission. Further, patients have the right to obtain legal counsel to assist them through the process of appeal or the decision in most countries. The primary reasons for admission were the patient being a danger to themselves or others. Despite continued efforts, stigma still surrounds mental health disorders. Public awareness and increased knowledge are needed to improve the perception of compulsory admissions. Moving forward, it is necessary to create educational courses, as well as written guidelines for key actors, to stimulate good practice and promote voluntary treatment (Wasserman et al. 2020; https://doi.org/10.1192/j.eurpsy.2020.79).

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European

The Role of Stigma for Early Career Psychiatrists

ECP0007

Could Computational Approaches Challenge How we Understand and Tackle Mental Disorders Stigma?

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Most psychiatric disorders (between 50% and 90%) remain untreated although effective treatments exist (Kohn et al., 2004). Stigma is frequent toward patients and mental health professionals (Rüsch et al., 2005). It impairs access to care especially during the early signs, amplifying the treatment gap, mainly due to a shortage of resources. How the brain makes prior internal models of the world could explain why we all stigmatize. The Bayesian brain hypothesis describes the optimal combination of priors, coming from our evolution, our memory and our perceptions, to make decisions (Parr et al., 2018). This can be intuitively understood by visual illusions, but also medical categorical diagnostic reasoning (Medow, 2011). These priors allow to simplify the world and categorize people (Sherman et al., 1998). Beyond cognitive modelling, Computational approaches also led to the development of several electronic devices, from apps to social robots, (Gargot et al., 2021). Patients reported that it was easier to self-disclose toward an avatar, that cannot judge, than toward a therapist (Hang and Gratch, 2010). These technologies could improve early, scalable as well as efficient access to care (Andersson et al., 2019). Empathy is the best strategy to tackle stigma. What is it exactly? Good therapist-patient synchronization of brains (Czeszumski et al., 2020) and bodies (Ramseyer et Tschacher, 2011) could foster better communication and thus empathy. There is an urgent need to promote research in empathy (Belzung, 2017), non-specific factors in psychotherapy mechanisms (Miller et Moyers, 2021) and psychotherapy online training resources (Gargot et al., 2020).

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Educational

How to Thrive Early in your Career?

ECP0008

Do Women have More Barriers for Professional Development?

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Women consistently fare worse than men in different professional metrics in terms of salary, promotions, grant money, and scholarly publishing. In clinical and management leadership roles, a similar trend of underrepresentation for women exists. It has been shown in academic publishing that women progressed to senior author positions at a slower pace, resulting in their ongoing underrepresentation as senior writers. Previous literature has shown that one of the most effective strategies for promoting women to leadership positions is the collaboration with men to identify attitudinal and institutional barriers, since gender equality is not only a "women's concern." To address this, a cross-sectional, multinational survey was disseminated in English (SurveyMonkey) to psychiatric trainees and psychiatrists across Europe. This study aims to explore the perspectives of female and male psychiatrists on the obstacles they face in their careers. The survey covered items on self-promotion, current institutional environment, and networking along with contextual information- age, gender, professional degree, current field, and years of professional experience in the current field. We hope that the presentation of these findings will serve as a springboard for future educational activities to address concerns connected to the gender gap. The speaker will present the comparison of female and male psychiatrists' barriers and challenges they face during their professional development. This talk is hoped to elicit discussion in preparation for future action and inform a roadmap for addressing issues related to the gender gap with subsequent educational events.

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