over a three-year period. Audiograms were made to all employees, at the same time with official determination of the noise level, carried out by the Public Health Authority of the county. In selected cases, the workers were also led to specialised examinations (cardiology, neurological, psychiatric, ENT).

Results Official noise level determinations have shown overtaking in many of the technological process points (ironing presses, buttonhole machines, edge banding, staple machines etc.). In situations where workers were rotated at short intervals (30 days), they showed minimal symptoms of high-loud exposure. In situations where workers had fixed workstations, after three years of exposure, a decrease with 5–10 dB(A) in auditory acuity was observed, associated with sleep disturbances, nervousness and irritability, a slight increase in blood pressure, at about 20% of the employees (especially if they were over 50 years old and worked in the noise before). During week-ends and holidays, everyone was feeling good.

Discussion The textile industry is an important sector of concentration of professional high-noise exposure pathology. Technical and organisational measures (risk recognition, wearing individual hearing protection equipment, resting in quiet rooms, separation of noise-generating technology processes, high-tech equipment), as well as medical ones (decrease in headphones use, health education, thorough medical checks), lead to better management of the negative impact of human health noise.

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FEELING STRAINED BY THE EXPECTATION TO BE AVAILABLE – GENDER DIFFERENCES OF EMPLOYEES IN SMALL AND MEDIUM-SIZED ENTERPRISES

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10.1136/oemed-2018-ICOHabstracts.1522

Introduction The increasing use of digital media such as mobile phone, e-mail, messenger services etc. enable a permanent availability of employees, which may lead to mental strain. This study focuses on possible gender-specific differences in feeling strained by the expectation to be permanently available for colleagues, superiors, or customers.

Methods A psychological risk assessment has been carried out with 933 employees within the framework of a collaborative project ('RegioKMUnet'), funded by the German Federal Ministry of Education and Research. Data were collected from October 2016 to June 2017 in 10 small and medium-sized enterprises by paper and online surveys. The basic question was if the respondents had to be short-termed available during their free time or working time and whether that led to mental strain. Data were analysed using IBM SPSS 24.

Results The sample consisted of 569 male and 364 female respondents. 85.6% of the males and 80.1% of the females reported they had to be available during their working time. The expected availability led to mental strain for 59.2% of the men and 50.3% of the women. During free time 32% males and 17.5% females stated they had to be available. For 51.8% of the men and 37.5% of the women this led to a feeling of being strained.

A chi-square test confirmed the gender difference of strain during free time ($p=0.042$).

Conclusion In general the mental strain caused by the expectation of availability is stronger for men, with a significantly higher share during working time. In the free time the distance is even greater but inconclusive due to low case numbers. Additional research is needed to clarify if mental strain caused by availability is confirmedly greater for men. Furthermore possible influence by part-time and full-time working as well as the kind of work activity should be considered.

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BREAST FEEDING PRACTICES AMONG WORKING MOTHERS ATTENDING 'POSTNATAL' CLINICS IN TWO HOSPITAL IN KAMPALA, UGANDA

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10.1136/oemed-2018-ICOHabstracts.1523

Introduction Breast milk is critical for proper development of an infant during the first two years of life. The increased rate of women's participation in the labour force has resulted in a 'double work day' which results in a burden of having to accomplish both reproductive and productive roles. The Employment Act 2006, maternity leave is 12 weeks. This is insufficient as it's below recommended 6 months of exclusive breastfeeding thus maternity protection is left to the discretion of the employer and breastfeeding working mothers.

Method A mixed study design using both quantitative and qualitative data collection and analysis methods was used.

Results 232 questionnaires were administered to working mothers attending 'postnatal clinics'. 23 KI guides were administered to key decision managers purposively selected from 23 institutions where primary respondents worked. Whereas 224 (96.5%) were granted maternity leave a proportion of 8 (3.5%) were not granted maternity leave. During day time, on demand breastfeeding (over 10 times) was practiced by 225 (97%) respondents before resuming full time work. This reduced drastically on resuming full time work to half (between 5 to 7 times during the day) for those in self-employed and service sectors and only twice for those in Government Ministries, Departments, Agencies, NGO, Schools and banks. 53 (22.8%) breastfed their babies at workplace of these 46 (86.8%) said that the babies were simply laid within working station not designated as a workplace day care centre.

Discussion Whereas we continue to advocate for exclusive breastfeeding, we need to consider the effect of productive roles experienced by working mothers who resume work before their babies are 6 months thus interrupt breastfeeding pattern. Work places in informal and formal sectors had no provisions for nursing mothers to care for their babies nor express their breast milk.

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HOUSEWIVES AND MEXICAN WOMEN AT WORK: HEALTH AND PSYCHOLOGICAL FACTORS

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10.1136/oemed-2018-ICOHabstracts.1524