

Methods A research was carried out on the historical line on the stigma also on the guidelines of public assistance to mental health in the units of care for the patient with mental disorders and the database on disease and concession of social security benefit due to mental disorder in Brazil

Results Stigma is prejudice itself, causing irreparable losses to patients and their many aspects. In addition, it is intended to emphasise the need to combat prejudice to the mentally ill, showing that our main weapon is correct information. The public mental health assistance policy is ineffective. In 2014 there were 12.235 concession of social security benefits due to mental disorder in Brazil, with 28% for Depressive episodes. **Discussion** Much of this process occurs because of the inherent characteristics of the disease process, such as psychotic episodes, dissociative episodes, among others, that end up labelling and making life difficult for those with mental illness with no mental health assistance causing work absenteeism and high costs to the Security and Social National Institute.

1038 **THE THRIVE PROGRAM FOR ACHIEVING HOLISTIC WELLBEING & WORK-LIFE BALANCE. SHARING EXPERIENCE FROM HINDUSTAN UNILEVER LIMITED, INDIA**

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Introduction As employees are its greatest asset, Hindustan Unilever Limited (HUL) launched THRIVE PROGRAM in 2016 for achieving their holistic well-being to thrive in this VUCA world with aim of strengthening Wellbeing. Mental Health is given same priority as Physical health vide HUL's Mental Wellbeing Standards (Policy).

Methodology Thrive Program is structured for HUL workforce comprising of Managers, Executives and factory workers (n=18558). Managers and Executives completed on-line training modules and subsequently attended THRIVE WORKSHOPS, conducted by Trainers (from HR and MOH) who were trained by Expert Faculty on a globally uniform curriculum. THRIVE is designed on 4 Pillar Wellbeing Framework (4PWF): mental, physical, emotional and purposeful providing practical solutions to sustain each wellbeing area to cope with pressures, while feeling focused, energised and maintaining work-life balance. All employees' including factory workers had access to EAP counselling line 24 × 7 manned in nine languages by qualified counsellors. Subsequently, WELLBENG WEEK was initiated showcasing different ways to leverage (4PWF), following which Wellbeing Wednesdays were launched with 40 activations where 7000 employees participated in key events on Fitness, Ergonomics, healthy nutrition choices and recreation.

Results In 2016, 6257 employees completed modules 0.11160 attended Thrive sessions [5264 factory workers and 5896 white collar with following feedback (n=866 participants); 98% could understand Unilever Wellbeing Framework, of which 37% rated it above average; 93% rated course content, material delivery, instructor skills and knowledge above average, 72% felt that instructor presented the material clearly indicating effectiveness of the program model. 65% are confident of applying what they had learnt and 58% would recommend this course to colleagues.

Discussion Every organisation must have a MENTAL HEALTH POLICY for achieving holistic wellbeing and work-life balance. Initiatives like THRIVE PROGRAM and WELL-BEING EVENTS are successful with good participation because of uniform curriculum for worker groups, followed globally in every country.

1044 **PSYCHOSOCIAL CONSTRAINTS AMONG MEDICAL AND PARAMEDICAL CAREGIVERS ON INTENSIVE CARE UNITS**

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Introduction Health care professionals, particularly intensive care teams, are exposed to psychosocial constraints. This study aims to identify socio-demographic and occupational determinants of work-related stress and workplace harassment.

Methods A three months cross-sectional exhaustive study conducted among medical and paramedical staffs of intensive care units in two university hospitals in the centre of Tunisia. Four validated scales were used (Karaseck's Job Content questionnaire, Negative Acts Questionnaire, Rosenberg, Beck and Hamilton Anxiety scale).

Results Moral harassment was objective among 38.33% of caregivers and 15% of them were in situation of job strain. Moreover, 61.7% of them were depressed, anxiety disorders were detected in 49.9% of cases, and low or very low self-esteem was noted among 40% of respondents. According to multivariate analysis, job strain was correlated with young age (p=0.005) and shorter work seniority (p=0.001). Workplace harassment was more prevalent among females (p=0.009), resident physicians (p=0.021), those affected to atypical schedules (p=0.008), anxious subjects (p=0.004) and those with low to moderate self-esteem (p=0.002).

Discussion Psychological and social constraints among intensive care staff should be preventive in order not to affect health and wellbeing of caregiver or security or quality of care.

1058 **CLINICAL OCCUPATIONAL MEDICINE: A METHODOLOGICAL FRAME FOR DAILY PRACTICE IN OCCUPATIONAL HEALTH**

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Objectives Work-related mental disorders are often spontaneously described by workers as the result of bullying. In France, this phenomenon has emerged in 1998 parallel to the concept of perverse-narcissistic personality. Considering these situations only as the result of an intersubjective experience puts the working conditions themselves far away. But the working conditions may be responsible for such disorders in a three-dimensional view of activity (the self, the others and the work object) as described by Clot and Kostulski (2011). Our aim is to describe a method, using a relevant case-report, to