attempted to examine relationship between perception of work-related stress and ill-health symptoms among the study sample.

Methods Responses from 81 nurses from three hospitals in Mumbai were studied.

‘Stress Scale’ was developed with the help of two survey instruments – ‘Nurses Stress Scale’ developed in 1981 by Grey-Toft and ‘A to Z test on the occupational sources of stress’ developed by Asis K.Chakrabarti, ex-Director (Industrial Psychology) at Central Labour Institute, Mumbai.

Questionnaire method of data collection was adopted ensuring absolute confidentiality to protect identity, to ensure honesty in responding, and to obtain a reasonable response rate. Statistical analysis of correlation was utilised to verify the results to prove the relationship between the perception of stress and ill-health symptoms among hospital nurses.

Results There exists a significant positive correlation between perception of occupational stress and psychosomatic symptoms among nurses. Psychosomatic disorders like backache, neck stiffness, and increased consumption of caffeinated products significantly increased in nurses having higher stress scores.

Discussion Moderate levels of stress were seen in a majority of nurses. It has been established that incidence of psychosomatic illness increases with the level of stress. Healthcare organisations need to urgently take preemptive steps to counter this problem in view of acute shortage of trained nurses. Without a comprehensive plan to deal with the issue, the problem may escalate into risks to patients and other consumers.

**Abstracts**

**418 PSYCHOSOCIAL FACTORS IN MEDICAL STUDENTS PREDICT HIGHER BURNOUT LEVELS**

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Introduction The aim of the study was to determine stress factors related to medical education as predictors of burnout in medical students (MS) in the 5th year of studying, just before entering the world of work.

Methods Actual cross-sectional study was conducted by the Institute of Occupational Health of RM, including 165 MS in the 5th year of medical studies. Medical Student Stressor Questionnaire, Maslach Burnout Inventory, and Socio-economic and Studying Conditions Questionnaire were used. Multiple regression models were tested to examine the associations of stress factors related to medical education to burnout dimensions controlling for age, learning hours/week, and interpersonal relationships with parents/friends.

Results Bivariate analyses showed significant positive correlations of burnout dimensions with all domains of MS stressors. Emotional exhaustion demonstrated significant positive correlations with learning hours/week (r=0.234, p=0.003), and poorer interpersonal relationships with parents (r=0.193, p=0.014) and friends (r=0.343, p<0.001), while depersonalization only with poorer interpersonal relationships with friends (r=0.258, p=0.001). Multiple regression analyses revealed that domain Academic related stressors (examination systems, academic schedule, getting poor marks, lack of motivation, etc.) (Standardised Beta=0.359, p=0.006), poorer interpersonal relationships with friends (Standardised Beta=0.244, p=0.001), and learning hours/week (Standardised Beta=0.140, p=0.044) were significant predictors of higher emotional exhaustion (R²=0.418). On the other hand, only poorer interpersonal relationships with friends positively predicted depersonalization (Standardised Beta=0.197, p=0.019) (R²=0.159).

Discussion Actual study shows that psychosocial factors in MS entering the world of work are related to higher burnout scores. Preventive strategy oriented towards improvement of health and safety at work in physicians should involve measures for tackling academic related stressors in MS in order to reduce later burnout development.

**42 EVIDENCE THAT A STATE-WIDE PAID SICK LEAVE POLICY REDUCES OCCUPATIONAL INJURIES AND ILLNESSES**

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Introduction Unlike almost all other developed countries, paid sick leave is not mandatory for employers in the United States. Several states and municipalities have introduced paid sick leave policies. The first states to introduce such a policy was Connecticut, which passed a law requiring that employers offer ‘service workers’ one hour of paid sick leave for every
40 hours worked beginning in 2012. One previous study using a national survey found that workers who had paid sick leave were less likely to sustain nonfatal occupational injuries compared to those without paid sick leave. This study seeks to determine whether there has been a decrease in the rate of occupational injuries and illnesses in Connecticut following the introduction of their paid sick leave policy.

Methods Data about the overall rate of occupational illnesses and injuries and occupation and industry specific rates were obtained from the Bureau of Labour Statistics’ Survey of Occupational Injuries and Illnesses for Connecticut and compared to rates for the United States overall and five other northeastern states. For all of the states and for the United States, the change in the average annual rate of occupational injuries and illnesses was compared for the four years before and after the introduction of Connecticut’s paid sick leave policy.

Results The decline in the rate of occupational injuries and illnesses per 100 full-time workers was greater in Connecticut (17.1%, 95% Confidence Interval=9.5% to 24.6%) than the decline in any of the other states or the United States overall. The percent decline differed by occupation and industry.

Conclusion There seems to have been an impact of Connecticut’s paid sick leave policy on the rate of occupational injuries and illnesses pointing to potential additional benefits of these policies. Studying the impact of other states’ paid sick leave policies will be important in the future.

INTRODUCTION

Psychosocial Safety Climate (PSC) – a specific dimension of organisational climate – refers to shared perceptions regarding policies for the protection of worker psychological health and safety (Hall, Dollard & Coward, 2010) and is considered to comprise four content domains. The objective of the current study is to further develop the PSC instrument by investigating its validity, i.e. the comprehensibility of the PSC items, in another culture and language than where it was originally developed.

Methods The study follows a mixed-method approach. After translating the original English PSC items into German, they were revised by experts on work and health, focusing on the meaning and practical use of terms, the frame of reference and differences in legislation. To obtain a wider coverage of the underlying dimensions, further items were added.

Cognitive interview techniques (think-aloud, probing) with 25 employees of different occupations, tenure and age were applied on this enhanced version of the PSC instrument, leading to a preliminary revised PSC tool.

In the quantitative main study currently underway, this revised PSC tool is applied in a sample of more than 2000 employees from different organisations and branches to test the structure of the instrument, its assumed multi-level nature and its relations with other psychosocial working conditions and relevant health measures.

Result The cognitive interviews indicated that the term „psychological health’ is not well understood by German employees and requires a definition. Moreover, several items required adaptations in wording to ensure similar understanding among employees with different backgrounds. Preliminary results from the main study support the tool’s reliability and validity in the German context.

Discussion This study demonstrates the benefits of applying both cognitive interview techniques and a quantitative survey in instrument adaptation and testing. The revised PSC tool will allow for a stronger cross-cultural use of the PSC concept.