effects of overtime work hours and exercise habits on psychological distress.

Methods We used data from a health examination of 1082 workers in FY 2013. We obtained information on working hours in the most recent month from the personnel records of the surveyed company. Overtime work hours per month were classified into three groups: short (<45 hours), medium (45–79 hours), and long (≥80 hours). Exercise habits were classified into two groups using a self-administered questionnaire: yes or no. Odds ratios (ORs) of psychological distress, defined as scores ≥4 on the 12-item General Health Questionnaire, were calculated using multiple logistic regression analyses adjusting for age, gender, marital and residence status, occupation, drinking habits, smoking history and psychosocial work characteristics.

Results Compared to the short overtime with exercise habits group, the ORs (95% confidence intervals) for psychological distress were significant for the medium overtime with exercise habits group (OR=1.81 [1.20–2.75]), medium overtime without exercise habits group (OR=2.11 [1.37–3.25]), and long overtime without exercise habits group (OR=3.03 [1.64–5.58]). No significant ORs were observed for any other group combinations.

Discussion In the medium overtime group, overtime work hours were significantly associated with psychological distress regardless of exercise habits. However, in the long overtime group, this significant association disappeared among those with exercise habits. Our findings suggest that exercise habits reduce psychological distress in relation to long (i.e., ≥80 hours) overtime work hours.

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WHICH STRESS-RELATED FACTORS AFFECT THE MENTAL HEALTH OF NUCLEAR EMERGENCY WORKERS OVER A LONG PERIOD?

¹H Hiro*, ¹A Hino, ¹K Mafune, ²A Inoue, ³J Shigemura, ⁴M Yamada, ⁴T Okubo. ¹University of Occupational and Environmental Health, Japan, Kitakyushu, Japan; ²Kitasato University School of Medicine, Japan; ³National Defense Medical College; ⁴Radiation Effect research Foundation

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Introduction Fukushima Daiichi Nuclear Power Plant suffered serious damage the Great East Japan Earthquake and Tsunami of 2011. This study examines the association between mental health status and stress-related factors in the nuclear emergency workers 4–5 years after the disaster.

Methods In total, 1572 workers completed a self-administered questionnaire by mail. Mental health status was measured by the K6. The stress-related factors we evaluated life events, stress coping, sense of coherence, self-esteem, self-efficacy, resilience, social support, life satisfaction, job satisfaction and slanderous defamation. Multiple regression analysis was performed with the K6 score as the explained valuable and stress-related factors as the explanation valuables.

Result The K6 score was significantly high in the workers who had worked for a long period of time. It was also related to the scores of life events, stress coping, self-esteem, life satisfaction, work satisfaction and slanderous defamation. The slanderous defamation score most strongly related to the K6 score.

Discussion Long term follow-up is for nuclear emergency workers who work for long period of time, and slanderous defamation is one of the most important measures support the mental health of these workers

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DEVELOPING A CULTURALLY RELEVANT WORKPLACE MENTAL HEALTH E-HEALTH APPLICATION FOR THE CANADIAN INDIGENOUS POPULATION

^{1,2,3,4}VL Kristman*, ⁵A Gilbeau. ¹Department of Health Sciences, Lakehead University, Thunder Bay, Ontario, Canada; ²Division of Human Sciences, Northern Ontario School of Medicine, Thunder Bay, Ontario, Canada; ³Institute for Work and Health, Toronto, Ontario, Canada; ⁴Dalla Lana School of Public Health, University of Toronto, Toronto, Ontario, Canada; ⁵Nokiiwin Tribal Council, Thunder Bay, Ontario, Canada

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Introduction Workplace stress stemming from lateral violence in the workplace is problematic for Indigenous workers. Unlike workplace bullying, lateral violence differs due to the root cause. Canadian Indigenous people are abusing their own people in similar ways to how they have been abused. It is a cycle of abuse and its roots lie in factors of colonisation, oppression, intergenerational trauma and the ongoing experiences of racism and discrimination. Information on mental health and mental health resources within Indigenous workplaces is lacking. Therefore, our objective was to develop an e-health intervention for Indigenous mental health in the workplace.

Methods We participated in a CIHR ‘Work Stress and Well-being Hackathon’ to achieve our objective. The Hackathon was a two and a half day event where participants work with an e-health team to devise a solution to their problem. The event was collaborative and involved multiple perspectives in the development of the e-mental health solution. In addition to the principal investigator and knowledge user, the team included an individual with lived experience and technical expertise, including designers and programmers.

Results At the end of the Hackathon we had developed a prototype of a working e-mental health application based on the medicine wheel and Indigenous cultural teachings. We also developed a relationship with an e-health company, Cossette Health, who will be working with us over the next year to turn the prototype into a viable working e-health application. We will demonstrate our working app at the conference.

Conclusion Future goals of the project will be to evaluate the effectiveness of the completed e-mental health application, in the communities affiliated with the Nokiiwin Tribal Council, with respect to improving access to relevant mental health information and reducing workplace lateral violence.

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TEACHER'S PREVALENCE OF DEPRESSIVE SYMPTOMS IN KOREA

¹YR Lee*, ¹HR Kim, ¹SY Lee, ²HH Kim, ²WY Lee. ¹Seoul St. Mary's Hospital of the Catholic University of Korea, Seoul, Republic of Korea; ²Chamgyoyook Research Institute, Seoul, Republic of Korea

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Introduction Mental health problems of teachers have been raised due to increased workload, violence, emotional labour in students and parents response processes. The purpose of this study is to investigate the mental health status and to find way to improve teacher's working environment.

Methods Total 79 schools in 8 groups were randomly selected considering level(elementary, middle, academic high, vocational high) and area(urban, rural) using National Educational Statistics 2015. The questionnaire including CES-D was mailed to