that work may have on the transition between one’s work and non-work domains (i.e., commuting). We sought to examine the impact of work-related rumination (WRR) as a cognitive distracting mechanism on employee’s commuting safety behaviours (CSBs) and the potential buffering effects of personal-protective factors (commute-as-relaxation) as employee’s commute from work to home.

**Methods** Data were collected via a baseline and 10 day daily diary study (two weeks, Monday – Friday) from employees (n=106) who worked full-time and commuted via private vehicle on a daily basis between March – April 2015. Data were analysed using Mplus version 7.3.1. and results were limited to the baseline and first week of daily diary collection.

**Result** On average, employees experience a decrease in risky CSBs over the work week, with a rise in risky CSB occurring from Thursday to Friday. Travel-speed disruptions and WRR significantly impacted the trajectory of risky CSBs, such that travel-speed disruptions and engaging in WRR resulted in riskier CSBs. Additionally, employees who view the commute as time for relaxation engaged in less risky CSBs than their counterparts. The final model fit the data well $\chi^2(53)=67.81$, $p=0.08$, RMSEA=0.058, CFI=0.94, TLI=0.93, SRMR=0.07].

**Discussion** Results indicated that employees who engage in WRR engage in riskier CSBs over the course of the working week. However, employees who view their commutes as time for relaxation engage in less risky CSBs over their counterparts. The findings of this study indicate the need for workplace intervention techniques that target the negative spill-over of WRR into employees’ commute time, as well as highlights the need for work-recovery mechanisms.

**Abstracts**

**QUALITY OF WORK LIFE AMONG DOCTORS IN THE UNIVERSITY HOSPITALS IN HEALTH AREA 7 OF THAILAND**

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**Introduction** Despite extensive information regarding quality of work life in medical residents in Thailand, however no study has examined the quality of work life (QoWL) amongst hospital doctors in Thailand. The aim of study is to evaluate the QoWL of hospital doctors in the university hospitals in the health area 7.

**Methods** A descriptive study was conducted among all 910 doctors in the university hospitals in health area 7 of from May to June 2017. The data was collected by web-based Thai Work-Related Quality of Life Scale – 2 (Thai WRQoL-2).

**Results** Response rate was 39.1% (356/910). The mean rating of qowl was 106.36 out of 155 (SD 16.09). 61.0% of doctors rated their QoWL as moderate scale. The eight sub-factors were rated as moderate to high for control at work, homework interface, and working conditions; moderate and high for general well-being; high down to moderate for employee engagement, job and career satisfaction, and overall QoWL; and moderate down to low for stress at work. Details of factors which might influence their QoWL is being analysed and will be updated soon.

**Conclusion** This is the first study that assessed the QoWL among doctors in the university hospitals in health area 7.
The aim of the study was evaluating social determinants and gender differences in WLC.

Methods The study has been carried out in three workplaces (Call centre, plastic and metal industry) in 807 workers between 01.08.2016 and 01.01.2017. Independent variables were age, gender, marital status, educational status and occupational class. Dependent variable was WLC. Copenhagen Psychosocial Questionnaire-3 were used to evaluate work life conflict. We analysed the association between social determinants and work life conflict by using chi-square test and logistic regression.

Results Mean age of men and women were 32.1±7.4, 27.2±6.6, respectively. 43.0% were women. WLC was found higher in women (55.9%) than men (42.4%) (p<0.001). White collar, younger and high educated workers had higher risk of having WLC than their reference groups (p<0.05 for all comparisons). Logistic regression analysis revealed that, being younger and married were independently associated with WLC (p<0.05) in women. Being younger was independently associated with WLC (p<0.05) in men. There were no association between educational status or occupational class and WLC in both gender.

Conclusion In this study, an inverse relationship was found between age of the employees and WLC. Marital status is important factor in women but not men in terms of WLC.

1409 INFLUENCE OF FACTORS OF WORK-LIFE BALANCE ON WORK ENGAGEMENT AMONG JAPANESE WORKERS

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Introduction Studies on work engagement (WE) tend to be related to work factors. Few studies exist on non-work factors such as work-life balance(WLB), living condition in family, and leisure time. Currently, Japan has experienced changes in demographic factors due to the declining birthrate and ageing population and in psychological factors due to diversification of sense of values. Moreover, as the time outside of working hours increases due to national policies on working style and job stressors (Brief Job Stress Questionnaire, BJSQ), and sleep quality among Japanese workers.

Methods The database used in the study was from a 2 year prospective cohort study. In the baseline survey (T1) in 2011, questionnaires were sent to 1356 workers living in two wards of Tokyo, and 753 (56%) responded, and 489 completed all scales and items used the study. A follow-up survey was conducted in 2013, with 224 (46%) respondents out of the 489 completers at T1; 176 completed all scales. The questionnaire (both T1 and T2) included self-reported instruments of work-family spillover (the Survey Work-home Interaction-NijmGen, SWING), sleep quality (Pittsburgh Sleep Quality Index, PSQI), and job stressors (Brief Job Stress Questionnaire, BJSQ), and demographic variables (age, sex, education, marital status, and work styles). Multiple linear regression analysis was employed on PSQI scores on SWING scale scores, adjusting for demographic variables and PSQI score at T1. (SPSS version 22).

Results Among the 176 completers, 36% were men; the average age was 39 years old. Work to family negative spillover (beta=0.20) significantly and positively correlated with sleep quality, and impaired work performance of workers, previous findings were inconsistent on, the association between work-family spillover and sleep quality. No study was conducted in non-western countries. The objective of this study was to investigate the prospective association between work-family spillover and sleep quality among Japanese workers.

Conclusion Quality of Sleep has been linked to poor health. While work-family spillover is associated with health problems and impaired work performance of workers, previous findings were inconsistent on, the association between work-family spillover and sleep quality. No study was conducted in non-western countries. The objective of this study was to investigate the prospective association between work-family spillover and sleep quality among Japanese workers.

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