

### 03E.4 LAYOFFS AND THE MENTAL HEALTH AND SAFETY OF REMAINING WORKERS: A QUASI-EXPERIMENTAL STUDY OF THE U.S. ALUMINUM INDUSTRY

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**Background** Relatively few studies have examined the effects of layoffs on remaining workers, although the effects of layoffs and downsizing events may extend beyond those employees who lose their jobs.

**Methods** We examined the effects of layoffs on mental healthcare utilization and injury risk among workers at 30 U.S. plants between 2003 and 2013. We defined layoffs as reductions in the hourly workforce of 20% or more at each plant. Using a difference-in-differences approach, we compared the change in outcomes during layoffs versus the same three-month period one year previously, accounting for secular trends with control plants.

**Results** Our study population included 15 502 workers and seven layoff events between 2003 and 2012. Layoffs were associated with decreases in reported injuries (−0.006, 95% CI −0.013, 0.001), and increased probability of outpatient visits (0.010, 95% CI 0.003, 0.017) and prescriptions (0.014, 95% CI −0.0006, 0.027) for mental health. Among men, injury risk decreased more substantially (−0.010, 95% CI −0.018, −0.001) and among women the increase in outpatient visits was more pronounced (0.017, 95% CI 0.003, 0.031). Most notably, the observed increase in prescription utilization appeared attributable primarily to increased frequency of opioid prescriptions (0.016 95% CI 0.005–0.027).

**Conclusion** Our results indicate an association between layoffs and remaining workers' mental health and safety. However, decreased injury may reflect changes in reporting practices, and changes mental healthcare utilization may reflect changes in care-seeking. Future research on concordance of service utilization and underlying health and safety may yield valuable insight into the experiences employed workers in the wake of layoffs.

### 03E.5 MILITARY VETERANS PATHWAYS TO MENTAL HEALTH SUPPORT: THE NEED FOR NEW SOLUTIONS

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Military service can place personnel at a greater risk of developing mental health issues yet both serving personnel and military veterans are reluctant to seek help for mental health issues. Delay in seeking support for mental health distress can result in reduced quality of life as well as a worse treatment prognosis. This research aims to explore the barriers and facilitators to care for the UK veteran population, identifying the relationship between these factors and help seeking behaviour.

Sixty-two in-depth qualitative interviews were conducted with male UK military veterans who had left the Armed Forces in the last five years and screened positive for a degree of mental health distress on self-report questionnaires covering common mental disorders (anxiety or depression), post-traumatic stress disorder or alcohol misuse. Thematic analysis was utilised to identify core themes which were developed into an illustrative journey to mental health support, outlining the key stages through which a veteran may travel on their journey to engaging in effective mental health treatment.

Veterans' decision to seek care was mainly concentrated on the perceived need for treatment. Those not in mental health treatment failed to identify problems they were having as being indicative of a 'mental health disorder' as they had not yet reached a crisis point where they could no longer cope. Those veterans who were in mental health treatment typically had reached a point where the severity of their condition meant that their need for treatment was highlighted regardless of their intention, either due to a crisis event or to another's intervention.

Interventions are needed to target early identification and management of mental health distress and encourage veterans to seek support before reaching a crisis event. The implications for this research to other high stress, masculine occupations will be explored within the talk.

### 03E.6 ASSOCIATION BETWEEN WORKPLACE BULLYING AND COMMON MENTAL DISORDERS IN JUDICIARY BRAZILIAN CIVIL SERVANTS FROM SOUTHERN BRAZIL

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**Introduction** Bullying has been described as a risk factor for mental disorders, however there is a lack of evidence on this subject in low- and middle-income countries. Therefore we aimed to evaluate the association between workplace bullying and common mental disorders in a sample of Judiciary Brazilian civil servants.

**Methods** Cross-sectional study with a sample of 1667 workers from the Brazilian Federal Judiciary in southern Brazil. The Negative Acts Questionnaire (NAQ-r) was used to measure bullying at work and the Self Report Questionnaire (SRQ-20) was used to evaluate Common Mental Disorders (CMD). Poisson regression was used to test associations of interest, controlling for confounders.

**Results** The overall prevalence of CMD was 33.5%. The prevalence of workplace bullying was 17.7%. In the crude analysis, exposure to bullying (at least one negative act in a weekly basis in the last six months) was associated with a 2.07-fold (CI 1.81–2.36,  $p < 0.001$ ) higher prevalence of CMD. After controlling for sociodemographic and occupational confounders, workers exposed to bullying presented a 1.51-fold (CI 1.31–1.73,  $p < 0.001$ ) higher prevalence of CMD.

**Discussion** Judiciary Brazilian civil servants may be at a high risk of being exposed to bullying and having common mental disorders. Our findings corroborate the results of studies from high-income countries, where bullying is considered an