SUN EXPOSURE IN OUTDOOR WORKERS: KEY CONSIDERATIONS FOR AN OCCUPATIONAL SURVEILLANCE SYSTEM

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Introduction Outdoor workers are exposed to a variety of hazards, including solar ultraviolet radiation (UVR). Identifying, reporting, analyzing, and tracking the exposures or health outcomes of outdoor workers specifically have not generally been considered in a formalized way.

Objectives Our objective was to identify the key characteristics and the barriers and facilitators of occupational surveillance systems in order to make recommendations for a system for outdoor workers that includes consideration of sun exposure and skin cancer.

Methods A traditional literature review (peer-reviewed and grey literature) was performed using search terms relevant for surveillance, outdoor workers, and best practices. Additionally, 22 qualitative key informant interviews were conducted with a variety of experts. The audio recorded interviews were transcribed verbatim and coded for broad themes and specific barriers and facilitators using NVivo 12.

Results The literature review found no occupational surveillance programs focused solely on outdoor workers. Five occupational surveillance strategies were summarized to obtain a better understanding of occupational surveillance systems and how they might be applied to keratinocyte carcinoma (KC) or solar UVR exposure in outdoor workers. The key informant interviews revealed ten key considerations for the design of a surveillance system, including identifying a clear goal, a defined target population and stakeholder involvement. Additionally, five critical barriers including underreporting and funding, and five vital facilitators including communication/collaboration and a simple reporting process were identified.

Conclusion Our study demonstrated that barriers and facilitators to an occupational surveillance system for outdoor workers exist and thoughtful design and implementation are key. Some specific suggestions for a successful occupational surveillance program for outdoor workers include the recognition of KC as an occupational disease, designing and implementing a notification/data collection mechanism for KC, continuing to build primary prevention initiatives, educating workers/employers on the risks of skin cancer and other outdoor hazards, and investing long-term into surveillance.

COMPENSATION OF OCCUPATIONAL DISEASES: A RETROSPECTIVE STUDY DURING FIFTEEN YEARS IN A UNIVERSITY OCCUPATIONAL MEDICINE DEPARTMENT IN TUNISIA

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Introduction Human heavy costs of Occupational Diseases (OD) are associated with significant economic ones estimated, in some countries at 2 or even 3% of the gross domestic product.

Objective This study aims to identify epidemiological profile of Tunisian patients concerned by OD and their associated professional factors.

Methodology A retrospective study was carried out in one of the seven Tunisian occupational medicine university departments, with data collected between 2005 and 2017, based on the medical files and declaration forms.

Results In total, 351 patients had been declared victims of at least one OD. The sex ratio was 0.21 and the average age was 40.51 ± 8.36 years. The average professional seniority was 18.2 ± 7.8 years. Among concerned workers, 69.23% were actives in clothes-textile sector; 7.97% in hotel-catering sector and 6.84% of them in the health sector. Machine operator (63.53%), followed by cleaning worker (6.55%), were most concerned work situations. Musculoskeletal disorders (MSDs) represented 86.61% of declared OD, followed by respiratory pathologies, and occupational dermatitis in 7.41% and 2.56% of cases respectively. The average files’ processing time by compensation commission was 15.15 ± 8.8 months (3 - 36 months). Demands of compensation were refused in 6.3% of cases. The average permanent partial disability (PPD) rate was 22.54 ± 10.13% (6 to 50%). Statistical analysis concluded that MSDs, the most reported OD, were more common among female patients (p = 10^-3); those active in the clothing-textile sector (p = 0.005); machine operators (p = 0.003) and those who received a compensation pension (PPD > 5%) (p = 0.02).

Conclusion Occupational diseases are a real issue of health and safety at work, particularly in some sectors characterized by multiple risks exposition and needs specific preventive actions.

RELATIONSHIP BETWEEN LABOR PRECARIOUSNESS AND HEALTH IN A SAMPLE OF UNIONIZED FEMALE DOMESTIC WORKERS IN URUGUAY

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Introduction A little more than a decade after regulating paid domestic work in Uruguay, a mixed study was carried out to know about workers’ employment and health conditions in this sector. This study offers unprecedented evidence on these aspects of domestic work in Uruguay.

Objectives The study aims to find out the relationship between labor precariousness and the health of domestic workers, incorporating the analysis of some characteristic and frequent variables of work in this sector.

Methods A non-probabilistic sample of unionized female domestic workers from different departments of Uruguay was considered for this research. In the quantitative study, a self-administered standardized questionnaire was applied, which included questions about their employment and health conditions, among other characteristics of work in the home. The qualitative approach contributes to the interpretation and contextualization of the results presented below, based on the fieldwork carried out through interviews and discussion groups with these workers.

Results The results obtained reflect a relationship between a higher level of labor precariousness and worse level of health of domestic workers, and being exposed to putting their time.