Psychosocial and Mental Health

RF-130 WORKPLACE PSYCHOSOCIAL HAZARDS ARE ASSOCIATED WITH EMOTIONAL DISTRESS AND BURNOUT IN CIVIL AVIATION PILOTS

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Introduction Pilots have been deemed as safety-sensitive personnel, and they face work patterns of long working hours and jet lag. Failure to properly recover from fatigue may cause adverse health effects, affecting flying public flying safety.

Objectives This study explores the distribution of national civil aviation pilots' work stress and its association with health impacts.

Methods In cooperation with the Taoyuan Union of Pilot, we had issued structured online questionnaires to member pilots as part of the survey. The questionnaire records the respondent's seniority, flight time, and flight characteristics. We assessed workplace psychosocial hazards with the Chinese version of the Job Content Questionnaire (C-JCQ). Mental health conditions were measured with the Brief Symptom Rating Scale (BSRS-5), sleep status with the Epworth Sleepiness Scale (ESS), and burnout with the Chinese version of the Copenhagen Burnout Inventory (C-CBI). Fatigue symptoms on duty were also recorded. The correlation between workplace psychosocial hazards and health effects were analyzed by the regression model.

Results 160 pilots had filled out the questionnaire, with an average age of 40, ten years of work experience, and an average flight time of 753.3 hours per year. The standardized scores for work demand and work control were 57.8 and 54.7, respectively, higher than the national norm. 28.76% of pilots had emotional distress. Daytime sleepiness was observed among 23.13% of pilots. 25.63% of pilots had work-related burnout with moderate or higher severity. High work demand, low work control, and numbers of red-eye flights were predictors of emotional distress and work-related burnout, and the average flight time is also significantly positively correlated with work-related burnout.

Conclusion Characteristics of active work with high work demand and high work control were observed in national civil aviation pilots. A considerable proportion of pilots experience emotional distress, daytime sleepiness, and burnout.

RF-232 THE POPULATION MAJOR DEPRESSIVE DISORDER IN THE YEARS AFTER SEVERE WILDFIRES IN PORTUGAL CENTRO REGION: THE ROLE OF PERCEIVED HEALTH STATUS, HEALTH VULNERABILITY, RESILIENCE AND SENSE OF COHERENCE

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Objective The aim of this study was to identify the effects of severe wildfires on the population's mental health in the long term and the role of perceived health status, health vulnerability, resiliency and sense of coherence.

Methods A longitudinal survey with 3 waves (9, 19 and 24 months after the wildfire) was carried out in a representative sample of the municipalities' population affected by the 2017 severe wildfires in the central region of Portugal with data collection by questionnaire on CAPI mode. PHQ 8 (major depressive disorder-MDD), sense of coherence (SOC) and resiliency (CD-RISC) scales were included along with 4 questions related to perceived health status and demographic variables. Statistical analysis was performed using generalized estimating equations approach.

Results 312 individuals (95% of the sample) participated in the set of the 3 waves. The prevalence of MDD was higher than the overall value of the country (9.1%) and of the region (9.75%) with higher values in the 1st and 3rd waves (21% and 20%, respectively) and a decrease in the 2nd wave (11.6%). No significant relation between resiliency and MDD over time was observed, but SOC, perceived health status and the expected health worsening showed a negative relation with MDD, except for individual disease vulnerability.

Conclusion The higher prevalence of MDD 24 months after wildfires exposure is a great concern. The influence over time of perceived health status and expected health worsening points to the need for a more integrated approach of mental and GP care. The SOC influence shows that participants still have personal resources to face adversity but personal disease vulnerability along with the lack of resiliency effect suggests a low adaptation ability in this population that should be enhanced.

RF-267 AGE AND GENDER DIFFERENCES IN PERCEIVED WORK-RELATED MENTAL HEALTH IN NEW ZEALAND

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Introduction Work-related mental health has increased considerably and become a major health and safety concern in New Zealand. It could affect work performance and productivity, and lead to a number of serious work-related injury and other illnesses. This study aims to explore impact of age and gender on self-reported work-related mental health among workers across all industries in New Zealand.

Methods Over 4,000 participants were recruited to the survey. Both online and telephone interviews were undertaken. A small number of face-to-face interviews were taken in high deprivation areas. Weighting age by gender within industry was applied to prevent bias and ensure the population representativeness.

Results Overall, 62% of workers mentioned experiencing at least one of work-related mental health issues (either depression or anxiety or stress) within 12 months prior the study time. The prevalence of work-related stress, anxiety and depression reported by workers was 59.8%, 31.2% and 19.7%, respectively. Work-related mental illnesses were reported statistically more prevalently in females compared to males (64.3% vs. 59.8%). Elderly workers aged 60 years and above were statistically less likely to report work-related mental health issues compared to other age groups. When stratified gender by age group, young female workers from 18 to 29 years of age were statistically more likely to report experiencing work-related mental health issues than any other groups of workers.