The SARS-CoV-2 virus pandemic has raised several challenges at the workplace. Within the omega-net COVID-19 taskforce, we developed standardized COVID-19 questionnaires for occupational research, a multi-country COVID-19 Job Exposure Matrix, and research on COVID-19 as an occupational disease. The compiled questionnaire resource covers all key aspects of the COVID-19 pandemic, including: COVID-19 diagnosis & prevention; Health and demographic; Use of personal protective equipment; Health effects, Work-related effects; Financial effects, Work-based risk factors; Psychosocial risk factors; Lifestyle risk factors; and Personal evaluation of the impact of COVID-19. For each of the domains additional questions are available. A second questionnaire (in a short and long version) focuses on occupational risk factors for SARS-CoV-2 infection and COVID-19 disease. The questionnaires are available online at https://omeganetcohorts.eu/news/covid19-questionnaires-omeganet/. The JEM was developed by experts from three European countries (Denmark, the Netherlands, UK), who defined the relevant exposure and workplace characteristics with regard to the possible exposure to SARS-COV 2 infection. The COV-19 JEM contains four determinants of transmission risk (number of people, type of people, indirect contact and location), two mitigation measures (social distance and face covering), and two social factors (income insecurity and migrant workers). Finally, we developed and piloted a questionnaire on COVID-19 as occupational disease, which provide data on 1) COVID-19 as occupational disease or injury, 2) criteria for recognition and compensation regarding exposure, disease, role of use of PPE and of competing non-occupational exposure; and 3) what can be compensated. Results are available from 36 largely European countries. Through the development and implementation of tools we not only provide instruments, but also insights on the occupational risks and diseases in relation to SARS-COV 2.

**S-73** ARE EARLY WORKING LIFE PATTERNS RELATED TO THE COURSE OF FUTURE SICKNESS ABSENCE DUE TO COMMON MENTAL DISORDERS?

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**Introduction** In recent decades, the labour market has evolved into temporary employment, part-time work, and long-term unemployment, especially affecting young population and women. Transitions between states during working life could affect mental health.

**Objectives** To assess the relationship between early working life (EWL) patterns and the future course of sickness absence (SA) due to mental disorders.

**Methods** Cohort study of a working sample between 18 and 28 years of age, residents in Catalonia, with at least one episode of SA due to a mental disorder between 2012 and 2014. Reconstruction of individual working life trajectories previous to the SA were carried out by sequence analysis based on four work-related states (permanent, temporary contract, unemployment, and without social security coverage). By optimal matching, patterns were identified out of clustering similar working trajectories. Identification of SA trajectories were made by latent class growth modelling analysis. Adjusted multinomial logistic regression models were applied to assess the relationship between early working life patterns and SA trajectories.

**Results** Among men, fluctuating (aOR 1.25 [95% CI: 0.57–2.74]) or delayed (aOR 1.79 [95% CI: 0.59–5.41]) entry into the labour market showed a trend towards a middle stable accumulation of SA days. In women, an increasing permanent and fluctuating employment pattern (aOR 2.41 [95% CI: 1.01–5.75]) at the beginning of their EWL was related to a decreased accumulation of future days on SA due to mental disorders (aOR 2.08 [95% CI: 1.18–3.66]) rather than to a low stable trajectory.

**Conclusions** An unstable early working life built on a high number of transitions between temporary contracts, unemployment and lack of social security coverage states is related to a future worse SA course due to mental diagnosis.