

sample was randomly selected from the National Population Register in Finland for the Regional Health and Well-being Survey (ATH) (N = 65 000, response rate 53%). Respondents with children under the age of 18 were selected to this study (n = 6290). Associations between intimate partner violence and socio-economic factors, depression, alcohol use, and suicidal intention were analysed using logistic regression.

Results Among those living with children 10.8% of men and 11.2% of women reported experiences of intimate partner violence. Experiences of violence were most prevalent in the age group of less than forty years, among those who were married or cohabited (81%) compared to single parent, and who had basic education or secondary vocational level training compared to polytechnic or higher level training. In the univariate analysis factors which were statistically significantly associated with the experience of violence were cohabited (OR 1.0), having suicidal intentions (OR = 3.24) and reporting melancholic feelings or depression during last 12 months (OR = 2.48). Those with polytechnic or higher level education had slightly smaller odds for experiencing violence than those having basic education or less secondary level education. Alcohol consumption was not associated with experience of violence in this sample.

Conclusions This national survey shows the necessity to recognise intimate partner violence and its associations to alcohol use, low mood, depression and suicidal intentions. These associations should be addressed when developing health and social services and health promotion.

Occupational Safety

Post Wed 3.8

992 TIME TRENDS IN WORK-RELATED INJURIES IN QATAR: AN ANALYSIS OF HOSPITAL TRAUMA REGISTRY DATA

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Background Work-related injuries (WRIs) are a leading cause of hospital visits in Qatar. Little is known about the burden of hospital admissions due to work related injuries. This study analysed hospital based trauma registry data for past seven years to understand the burden and outcome of these patients.

Methods A retrospective analysis of data from 2008-2014 was conducted on patients admitted to the Hamad Medical Corporation (HMC) Trauma Centre, the national trauma referral centre, and its mortuary with severe WRIs. These were defined as those suffered during working hours or while travelling to or from work and severe enough to need admission to the hospital; poisoning or heat related illnesses were excluded. Temporal trends in the burden, external causes of injuries and mortality rates were analysed.

Results A total of 3,980 severe WRIs were recorded during the study period. Most workers were males (93.4%) with a mean age of 29.3 years. Almost all workers (98%) were expatriates. Occupation was known for only 37.5% of cases, and out of those 80% were general labourers. Over 39% of all WRIs were transport injuries. Other important causes were falls (25%) and exposure to inanimate mechanical forces (14%). During the study

period, severe WRI rates declined from 50.24 to 31.64 per 100,000 registered workers. Overall in-hospital mortality was 12.9%, with a decline from 15.5% to 9.6% between 2008 and 2014. The most common cause of WRI fatality was falls (49.5%).

Conclusions Severe WRI incidence and in-hospital mortality rates have been reduced by almost 40% in the past 7 years in Qatar. However, we need to also document the burden and outcomes of less severe WRIs and those seen and treated by other providers. Further studies are needed to determine the true burden of work-related injuries in Qatar, with a focus on unifying national WRI data in order to better inform strategies for occupational safety and injury prevention. Road safety for workers must be a priority in Qatar.

993 NURSES WELLBEING – EXPOSING FACTOR TO VIOLENT ASSAULTS BY PATIENTS

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Background Over 64% of nurses are exposed to violent assaults by patients worldwide. This creates costs for organisations and effect on nurses' health. To prevent assaults, the causes should be known. It has been suggested, that patient characteristics explain only a proportion of assaults, while nurses' wellbeing related factors might contribute to assaults. However, little is known about the specific wellbeing related factors exposing nurses to assaults. The objective of the abstract is to describe these factors exposing nurses to violent assaults by patients in healthcare.

Methods Review of the literature with search terms violence, assaults, aggression, nurse and patient was conducted. Databases used were Cinahl, Pubmed, PsychInfo and Cochrane (2004–2015). Also manual searches were used. Studies were excluded if: they were conducted in other setting than healthcare, perpetrators were not patients or something else than quantitative research design was used. Searches resulted in 2368 citations, from which 14 studies met the inclusion criteria.

Results Nurses' anxiety, depression, fatigue, psychological distress, burn-out, stress and decreased psychological quality of life seem to expose them to assaults. Also nurses' experiences of increased job demands, poor job control, job strain, time pressure, physical strain and excessive amount of work seem to be their exposing factor to violent assaults by patients. Further, nurses' feelings of fear and guilt, as well as lowered job satisfaction might expose them to assaults.

Conclusions Several wellbeing-related factors seem to expose nurses' to violent assaults realised by patients. These are related to both psychological health and working conditions. Nurses' psychological health and working conditions should be evaluated, monitored and supported as to reduce assaults towards them by patients. Longitudinal research is also needed to verify the results due to mainly cross-sectional nature of the studies.

994 THE FINNISH TRANSPORT AGENCY'S AND INFRA CONTRACTORS ASSOCIATION'S JOINT VENTURES IN FINLAND

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