OP34

INVESTIGATING THE EFFECTS OF LABOUR MARKET POSITION ON MINOR PSYCHIATRIC MORBIDITY ACROSS THE BUSINESS CYCLE: LONGITUDINAL ANALYSIS OF THE BRITISH HOUSEHOLD PANEL SURVEY, 1991–2007

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Objective Existing longitudinal evidence suggests that the link between joblessness and minor psychiatric morbidity (MPM) is likely to be causal, but that many complex processes are at play. This study seeks to contribute to the field by assessing the relationship between labour market position and MPM across the business cycle, looking at the effects of permanent sickness and other economic inactivity as well as registered unemployment.

Methods This study is based on working-age (16-65 years), original sample members of the British Household Panel Survey (BHPS). All seventeen currently available waves of the study are used (1991-2007). MPM is measured in the BHPS using the 12-item version of the General Health Questionnaire (GHQ-12). The analysis presented uses a binary outcome (MPM caseness). A series of nested random effects logit models are presented, showing the association between labour market position and MPM before and after adjustment for confounding and mediating factors. Covariates included macroeconomic conditions, educational attainment, physical health problems, spousal GHQ-12 and unemployment, perceived job security level of the employed, housing tenure, substance abuse, equivalised household income and subjective assessment of financial situation. The models also adjust for lagged GHQ12 score, to control for any propensity towards MPM and are stratified by sex.

Results Prevalence of MPM is significantly greater among the jobless than the employed. In the fully adjusted model, compared to the employed: the unemployed were more likely to be MPM cases (Odds Ratio (OR)=1.66, p<0.001), as were the permanently sick (OR=2.30, p<0.001) and the 'other inactive' category (OR=1.21, p<0.026). Stratification by sex shows that it is important to treat male and females separately with regards to labour market exposure. Males who were permanently sick were more likely to be MPM cases than their female counterparts (OR= 2.58, p<0.001 and OR=1.99, p<0.001 respectively). Unemployed women were at higher risk of MPM than their

male counterparts (OR=1.77, p<0.001 and OR=1.44, p=0.005 respectively). Adjustment for macroeconomic conditions across the business cycle produced no difference in the odds ratios reported.

Conclusion This study shows that joblessness is significantly associated with minor psychiatric morbidity even after full adjustment for a wide range of confounders.