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**Delegach M, Kark R, Katz-Navon T, and van Dijk D. A focus on commitment: the roles of transformational and transactional leadership and self-regulatory focus in fostering organizational and safety commitment. *European Journal of Work and Organizational Psychology*. 2017; 26(5):724-740.**  
<http://dx.doi.org/10.1080/1359432X.2017.1345884>

**Gould R, Harris SP, and Fujiura G. Systematic review and knowledge translation: a framework for synthesizing heterogeneous research evidence. *Work*. 2017; 57(4):485-499.**  
<http://dx.doi.org/10.3233/WOR-172577>

Abstract: BACKGROUND: Participatory methodologies in disability and rehabilitation research are used to capture the perspectives of people with disabilities and to recognize the agency of stakeholder groups. Existing resources for conducting systematic reviews seldom provide details about how to integrate stakeholder input into the methodological process. OBJECTIVES: This article considers how knowledge translation strategies can support and advance systematic reviews that include diverse types of research. METHODS: Lessons learned from conducting a systematic review of Americans with Disabilities Act (ADA) employment research are explained and contextualized within research on barriers and facilitators to successful knowledge translation. RESULTS: Steps from the research protocol are described to provide a procedural framework for integrating stakeholder feedback into the review process. Descriptive mapping, an analytical technique most commonly used in scoping reviews, was deemed necessary to provide a clearer understanding and overview of the diverse body of research evidence. CONCLUSIONS: Stakeholder feedback can address barriers to knowledge translation by engaging end-users of research products

throughout the review process. Given the growing scholarly recognition of qualitative and mixed-methods techniques as suitable approaches for systematic review, there is further need for consideration on how these approaches can benefit from more participatory research processes

**Harrison S, Jones HE, Martin RM, Lewis SJ, and Higgins JPT. The albatross plot: a novel graphical tool for presenting results of diversely reported studies in a systematic review. Research Synthesis Methods. 2017; 8(3):281-289.**

<http://dx.doi.org/10.1002/jrsm.1239> [open access]

Abstract: Meta-analyses combine the results of multiple studies of a common question. Approaches based on effect size estimates from each study are generally regarded as the most informative. However, these methods can only be used if comparable effect sizes can be computed from each study, and this may not be the case due to variation in how the studies were done or limitations in how their results were reported. Other methods, such as vote counting, are then used to summarize the results of these studies, but most of these methods are limited in that they do not provide any indication of the magnitude of effect. We propose a novel plot, the albatross plot, which requires only a 1-sided P value and a total sample size from each study (or equivalently a 2-sided P value, direction of effect and total sample size). The plot allows an approximate examination of underlying effect sizes and the potential to identify sources of heterogeneity across studies. This is achieved by drawing contours showing the range of effect sizes that might lead to each P value for given sample sizes, under simple study designs. We provide examples of albatross plots using data from previous meta-analyses, allowing for comparison of results, and an example from when a meta-analysis was not possible

**Heerkens YF, de Brouwer CPM, Engels JA, van der Gulden JWJ, and Kant I. Elaboration of the contextual factors of the ICF for Occupational Health Care. Work. 2017; 57(2):187-204.**

<http://dx.doi.org/10.3233/WOR-172546>

Abstract: BACKGROUND: Many work-related items are not included in the current classification of environmental factors from the International Classification of Functioning, Disability and Health (ICF). Furthermore, personal factors are not classified and the ICF only provides a very limited list of examples. These facts make the ICF less useful for occupational health care and for research in the field of occupation and health. OBJECTIVE: The objective of this discussion paper is to introduce an elaboration of contextual factors, focussing on factors that influence work participation. METHODS: During the last 12 years, we developed two concept lists from the bottom up. These lists are based on our experiences in teaching and research, suggestions from students and other researchers, and factors found in the literature. In the fall of 2015 a scoping literature review was done to check for missing factors in these two concept lists. RESULTS: An elaboration of contextual factors, consisting of a list of work-related

environmental factors and a list of personal factors. CONCLUSIONS: Important contextual factors that influence work participation are identified. Researchers, teachers, students, occupational and insurance physicians, allied health care professionals, employers, employees, and policy makers are invited to use the elaboration and to make suggestions for improvement. The elaboration and the suggestions received can be used in the ICF revision process. The development of an ICF ontology must be given priority, to give room to this elaboration, which will increase the applicability of the ICF and enable mapping with other terminologies and classifications

**Hiilamo A, Lallukka T, Manty M, and Kouvonen A. Obesity and socioeconomic disadvantage in midlife female public sector employees: a cohort study. BMC Public Health. 2017; 17(1):842.**

<http://dx.doi.org/10.1186/s12889-017-4865-8> [open access]

**Abstract:** BACKGROUND: The two-way relationship between obesity and socioeconomic disadvantage is well established but previous studies on social and economic consequences of obesity have primarily focused on relatively young study populations. We examined whether obesity is associated with socioeconomic disadvantage through the 10-12-year follow-up, and how obesity-related socioeconomic inequalities develop during midlife among women. METHODS: Baseline data were derived from the female population of the Helsinki Health Study cohort, comprising 40-60 -year-old employees of the City of Helsinki, Finland in 2000-2002 (n = 6913, response rate 69%). The follow-up surveys were carried out in 2007 (n = 5810) and 2012 (n = 5400). Socioeconomic disadvantage was measured by five dichotomous measures. Repeated logistic regression analyses utilising generalized estimating equations (GEE) were used to test the association between baseline self-reported obesity and the likelihood of socioeconomic disadvantage through all phases. The effect of time on the development of inequalities was examined by time interaction terms in random effect logistic regression models. RESULTS: After adjustment for educational level, baseline obesity was associated with repeated poverty (OR = 1.23; 95% CI; 1.05-1.44), frequent economic difficulties (OR = 1.74; 95% CI; 1.52-1.99), low household net income (OR = 1.23; 95% CI; 1.07-1.41), low household wealth (OR = 1.90; 95% CI; 1.59-2.26) and low personal income (OR = 1.22; 95% CI; 1.03-1.44). The differences in poverty rate and low personal income between the participants with obesity and participants with normal weight widened during the follow-up. Living without a partner and early exit from paid employment explained the widening of inequalities. CONCLUSIONS: Weight status inequalities in socioeconomic disadvantage persisted or widened during the late adulthood

**Koning P and van Sonsbeek JM. Making disability work? The effects of financial incentives on partially disabled workers. Labour Economics. 2017; 47(Supplement C):202-215.**

<http://dx.doi.org/10.1016/j.labeco.2017.05.008>

**Kramer DM, Holness DL, Haynes E, McMillan K, Berriault C, Kalenge S, and Lightfoot N. From awareness to action: Sudbury, mining and occupational disease in a time of change. Work. 2017; 58(2):149-162.**

<http://dx.doi.org/10.3233/WOR-172610>

**Abstract:** **BACKGROUND:** Miners work in highly hazardous environments, but surprisingly, there are more fatalities from occupational diseases, including cancers, than from fatalities from injuries. Over the last few decades, the mining environment has become safer with fewer injuries and less exposure to the toxins that lead to occupational disease. There have been improvements in working conditions, and a reduction in the number of workers exposed, together with an overall improvement in the health of miners. **OBJECTIVES:** This study attempted to gain a deeper understanding of the impetus for change to reduce occupational exposures or toxins at the industry level. It focuses on one mining community in Sudbury, Ontario, with a high cancer rate, and its reduction in occupational exposures. It explored the level of awareness of occupational exposures from the perspective of industry and worker representatives in some of the deepest mines in the world. Although awareness may be necessary, it is often not a sufficient impetus for change, and it is this gap between awareness and change that this study explored. It examined the awareness of occupational disease as an impetus to reducing toxic exposures in the mining sector, and explores other forces of change at the industrial and global levels that have led to an impact on occupational exposures in mining. **METHODS:** From 2014 and 2016, 60 interviews were conducted with individuals who were part of, or witness to the changes in mining in Sudbury. From these, 12 labour and 10 industry interviews and four focus groups were chosen for further analysis to gain a deeper understanding of industry and labour's views on the changes in mining and the impact on miners' health from occupational exposures. The results from this subsection of the data is the focus for this paper. **RESULTS:** The themes that emerged told a story about Sudbury. There is awareness of occupational exposures, but this awareness is dwarfed in comparison to the attention that is given to the tragic fatal injuries from injuries and accidents. The mines are now owned by foreign multinationals with a change from an engaged, albeit paternalistic sense of responsibility for the health of the miners, to a less responsive or sympathetic workplace culture. Modernization has led to the elimination, substitution, or reduction of some of the worst toxins, and hence present-day miners are less exposed to hazards that lead to occupational disease than they were in the past. However, modernization and the drop in the price of nickel has also led to a precipitous reduction in the number of unionized miners, a decline in union power, a decline in the monitoring of present-day exposures, and an increase in non-unionized contract workers. The impact has been that miners have lost their solidarity and power to investigate, monitor or object to present-day exposures. **CONCLUSIONS:** Although an increase in the awareness of occupational hazards has made a contribution to the reduction in occupational exposures, the improvement in health of miners may be considered more as a "collateral benefit" of the changes in the mining sector. Multiple forces

at the industrial and global level have differentially led to an improvement in the working and living environment. However, with the loss of union power, the miners have lost their major advocate for miner health

**Larsen AD, Hannerz H, Moller SV, Dyreborg J, Bonde JP, Hansen J, Kolstad HA, Hansen AM, and Garde AH. Night work, long work weeks, and risk of accidental injuries. A register-based study. Scandinavian Journal of Work, Environment, & Health. 2017; 43(6):578-586.**

<http://dx.doi.org/10.5271/sjweh.3668>

**Abstract:** Objectives The aims of this study were to (i) investigate the association between night work or long work weeks and the risk of accidental injuries and (ii) test if the association is affected by age, sex or socioeconomic status. Methods The study population was drawn from the Danish version of the European Labour Force Survey from 1999-2013. The current study was based on 150 438 participants (53% men and 47% women). Data on accidental injuries were obtained at individual level from national health registers. We included all 20-59-year-old employees working  $\geq 32$  hours a week at the time of the interview. We used Poisson regression to estimate the relative rates (RR) of accidental injuries as a function of night work or long work weeks ( $>40$  hours per week) adjusted for year of interview, sex, age, socioeconomic status (SES), industry, and weekly working hours or night work. Age, sex and SES were included as two-way interactions. Results We observed 23 495 cases of accidental injuries based on 273 700 person years at risk. Exposure to night work was statistically significantly associated with accidental injuries (RR 1.11, 99% CI 1.06-1.17) compared to participants with no recent night work. No associations were found between long work weeks ( $>40$  hours) and accidental injuries. Conclusion We found a modest increased risk of accidental injuries when reporting night work. No associations between long work weeks and risk of accidental injuries were observed. Age, sex and SES showed no trends when included as two-way interactions

**Luckhaupt SE, Alterman T, Li J, and Calvert GM. Job characteristics associated with self-rated fair or poor health among U.S. workers.**

**American Journal of Preventive Medicine. 2017; 53(2):216-224.**

<http://dx.doi.org/10.1016/j.amepre.2017.03.023>

**Abstract:** INTRODUCTION: Approximately 60% of the U.S. adult population is employed. Many aspects of a person's job may influence health, but it is unclear which job characteristics are most strongly associated with health at a population level. The purpose of this study was to identify important associations between job characteristics and workers' self-rated health in a nationally representative survey of U.S. workers. METHODS: Data from the 2010 National Health Interview Survey were used to calculate weighted prevalence rates for self-reported fair/poor health for five categories of job characteristics: occupation; pay/benefits (economic); work organization; chemical/environmental hazards; and psychosocial factors. Backward elimination methods were used to build a regression model for self-reported health with the significant job characteristics,

adjusting for sociodemographic variables and health behaviors. Data were collected in 2010 and analyzed in 2012-2016. RESULTS: After adjusting for covariates, workers were more likely to have fair/poor health if they were employed in business operations occupations (e.g., buyers, human resources workers, event planners, marketing specialists; adjusted prevalence ratio [APR]=1.85, 95% CI=1.19, 2.88); had no paid sick leave (APR=1.35, 95% CI=1.11, 1.63); worried about becoming unemployed (APR=1.43, 95% CI=1.22, 1.69); had difficulty combining work and family (APR=1.23, 95% CI=1.01, 1.49); or had been bullied/threatened on the job (APR=1.82, 95% CI=1.44, 2.29). CONCLUSIONS: Occupation, lack of paid sick leave, and multiple psychosocial factors were associated with fair/poor health among U.S. workers at the population level in 2010. Public health professionals and employers should consider these factors when developing interventions to improve worker health

**Milner A, Aitken Z, Kavanagh A, LaMontagne AD, and Petrie D. Status inconsistency and mental health: a random effects and instrumental variables analysis using 14 annual waves of cohort data. Social Science and Medicine. 2017; 189:129-137.**

<http://dx.doi.org/10.1016/j.socscimed.2017.08.001>

Abstract: Status inconsistency refers to a discrepancy between the position a person holds in one domain of their social environment comparative to their position in another domain. For example, the experience of being overeducated for a job, or not using your skills in your job. We sought to assess the relationship between status inconsistency and mental health using 14 annual waves of cohort data. We used two approaches to measuring status inconsistency: 1) being overeducated for your job (objective measure); and b) not using your skills in your job (subjective measure). We implemented a number of methodological approaches to assess the robustness of our findings, including instrumental variable, random effects, and fixed effects analysis. Mental health was assessed using the Mental Health Inventory-5. The random effects analysis indicates that only the subjective measure of status inconsistency was associated with a slight decrease in mental health (beta-1.57, 95% -1.78 to -1.36,  $p < 0.001$ ). This size of these coefficients was maintained in the instrumental variable analysis. We suggest that status inconsistency might explain some of the relationship between social determinants (such as work and education) and health outcomes

**Nigatu YT, Liu Y, Uppal M, McKinney S, Gillis K, Rao S, and Wang J. Prognostic factors for return to work of employees with common mental disorders: a meta-analysis of cohort studies. Social Psychiatry and Psychiatric Epidemiology. 2017; 52(10):1205-1215.**

<http://dx.doi.org/10.1007/s00127-017-1402-0>

Abstract: PURPOSE: To examine prognostic factors for return to work (RTW) of employees with common mental disorders (CMDs). METHODS: A systematic review and meta-analysis were performed using data from 18 published cohort studies with 24,579 participants. The studies were identified from

MEDLINE/PubMed, PsycINFO, EMBASE, SocINDEX, and Human resource management databases from 1995 to 2016. Two authors independently screened selected studies and assessed the quality of the studies as well as the extracted data. RESULTS: We screened 7755 abstracts, from which 211 full text articles were reviewed. Eighteen cohort studies met the inclusion criteria and were included in the analysis. Significant prognostic factors for RTW included age, contact with medical specialists, RTW-self-efficacy, and work ability. The pooled hazard ratios and 95% confidence interval (CI) for age, RTW-SE, contact with medical specialists, and high work ability/low work demands in relation to RTW were 0.77 (95% CI 0.65-0.88), 1.79 (95% CI 1.24-2.33), 0.64 (95% CI 0.49-0.80) and 1.08 (95% CI 1.06-1.11), respectively. CONCLUSIONS: Self-efficacy (SE) is a key factor in the enhancement of work ability and RTW. Improving employee's SE and collaborating with employers to enhance work ability may help to facilitate RTW. As the RTW process is complex, exploring theoretical frameworks for RTW in individuals with a CMD is also needed

**Puddy RW and Hall DM. Translating economic evidence for public health: knowledge brokers and the interactive systems framework. American Journal of Preventive Medicine. 2017; 53(5):e185-e189.**  
<http://dx.doi.org/10.1016/j.amepre.2017.06.015>

**Rahman MNA and Mohamad SS. Review on pen-and-paper-based observational methods for assessing ergonomic risk factors of computer work. Work. 2017; 57(1):69-77.**  
<http://dx.doi.org/10.3233/WOR-172541>

Abstract: BACKGROUND: Computer works are associated with Musculoskeletal Disorders (MSDs). There are several methods have been developed to assess computer work risk factor related to MSDs. OBJECTIVE: This review aims to give an overview of current techniques available for pen-and-paper-based observational methods in assessing ergonomic risk factors of computer work. METHODS: We searched an electronic database for materials from 1992 until 2015. The selected methods were focused on computer work, pen-and-paper observational methods, office risk factors and musculoskeletal disorders. This review was developed to assess the risk factors, reliability and validity of pen-and-paper observational method associated with computer work. Two evaluators independently carried out this review. RESULTS: Seven observational methods used to assess exposure to office risk factor for work-related musculoskeletal disorders were identified. The risk factors involved in current techniques of pen and paper based observational tools were postures, office components, force and repetition. From the seven methods, only five methods had been tested for reliability. They were proven to be reliable and were rated as moderate to good. For the validity testing, from seven methods only four methods were tested and the results are moderate. CONCLUSION: Many observational tools already exist, but no single tool appears to cover all of the risk factors including working posture, office component, force, repetition and office environment at office

workstations and computer work. Although the most important factor in developing tool is proper validation of exposure assessment techniques, the existing observational method did not test reliability and validity. Furthermore, this review could provide the researchers with ways on how to improve the pen-and-paper-based observational method for assessing ergonomic risk factors of computer work

**Ripat JD and Woodgate RL. The importance of assistive technology in the productivity pursuits of young adults with disabilities. Work. 2017; 57(4):455-468.**

<http://dx.doi.org/10.3233/WOR-172580>

Abstract: BACKGROUND: Young adults with disabilities often use assistive technology (AT) to address personal needs, engage in communities and pursue educational and vocational goals. Little is known about their personal experiences and challenges of accessing and using AT for productivity-related activities. OBJECTIVE: This study aimed to learn from young adults about their experiences and use of AT in supporting their productivity. METHODS: Using a qualitative approach, 20 young adult AT users engaged in semi-structured interviews and a photovoice process. Data were analysed inductively. RESULTS: Three primary themes were identified: I Have to Figure it out Myself, With the Right AT, and Relational Aspects of AT Use. Although participants were experienced AT users, they were often left alone to figure out their emerging needs. They relied on AT to participate in productivity pursuits however stigma around AT use in unsupportive work environments were new concerns. CONCLUSIONS: Young adults with disabilities draw on their experiences of AT use but may need to develop advocacy skills to ensure their needs are met in productivity-related environments. Employers and supervisors should recognize AT as essential to young adult's engagement with productivity-related activities and have an important role in developing inclusive work environments

**Sadeghi S, Sadeghi L, Tricot N, and Mathieu L. Design and application of a tool for structuring, capitalizing and making more accessible information and lessons learned from accidents involving machinery. International Journal of Occupational Safety & Ergonomics. 2017; 23(4):457-471.**

<http://dx.doi.org/10.1080/10803548.2016.1231785>

Abstract: Accident reports are published in order to communicate the information and lessons learned from accidents. An efficient accident recording and analysis system is a necessary step towards improvement of safety. However, currently there is a shortage of efficient tools to support such recording and analysis. In this study we introduce a flexible and customizable tool that allows structuring and analysis of this information. This tool has been implemented under TEEXMA(R). We named our prototype TEEXMA(R)SAFETY. This tool provides an information management system to facilitate data collection, organization, query, analysis and reporting of accidents. A predefined information retrieval module provides ready access to data which allows the user to quickly identify

the possible hazards for specific machines and provides information on the source of hazards. The main target audience for this tool includes safety personnel, accident reporters and designers. The proposed data model has been developed by analyzing different accident reports

**Schuring M, Robroek SJ, and Burdorf A. The benefits of paid employment among persons with common mental health problems: evidence for the selection and causation mechanism. *Scandinavian Journal of Work, Environment, & Health*. 2017; 43(6):540-549.**

<http://dx.doi.org/10.5271/sjweh.3675>

**Abstract:** Objectives The aims of this study were to (i) investigate the impact of paid employment on self-rated health, self-esteem, mastery, and happiness among previously unemployed persons with common mental health problems, and (ii) determine whether there are educational inequalities in these effects. Methods A quasi-experimental study was performed with a two-year follow-up period among unemployed persons with mental health problems. Eligible participants were identified at the social services departments of five cities in The Netherlands when being diagnosed with a common mental disorder, primarily depression and anxiety disorders, in the past 12 months by a physician (N=749). Employment status (defined as paid employment for  $\geq 12$  hours/week), mental health [Short Form 12 (SF-12)], physical health (SF-12), self-esteem, mastery, and happiness were measured at baseline, after 12 months and 24 months. The repeated-measurement longitudinal data were analyzed using a hybrid method, combining fixed and random effects. The regression coefficient was decomposed into between- and within-individual associations, respectively. Results The between-individuals associations showed that persons working  $\geq 12$  hours per week reported better mental health ( $b=26.7$ , SE 5.1), mastery ( $b=2.7$ , SE 0.6), self-esteem ( $b=5.7$ , SE 1.1), physical health ( $b=14.6$ , SE 5.6) and happiness (OR 7.7, 95% CI 2.3-26.4). The within-individual associations showed that entering paid employment for  $\geq 12$  hours per week resulted in better mental health ( $b=16.3$ , SE 3.4), mastery ( $b=1.7$ , SE 0.4), self-esteem ( $b=3.4$ , SE 0.7), physical health ( $b=9.8$ , SE 2.9), and happiness (OR 3.1, 95% CI 1.4-6.9). Among intermediate- and high-educated persons, entering paid employment had significantly larger effect on mental health than among low-educated persons. Conclusions This study provides evidence that entering paid employment has a positive impact on self-reported health; thus work should be considered as an important part of health promotion programs among unemployed persons

**Smith DL, Atmatzidis K, Capogreco M, Lloyd-Randolfi D, and Seman V. Evidence-based interventions for increasing work participation for persons with various disabilities. *OTJR*. 2017; 37(2\_suppl):3S-13S.**

<http://dx.doi.org/10.1177/1539449216681276>

**Abstract:** Title I of the Americans With Disabilities Act prohibits discrimination in employment; however, 26 years later, employment rates for persons with disabilities hover at 34%. This systematic review investigates the effectiveness of

evidence-based interventions to increase employment for people with various disabilities. Forty-six articles met the inclusion criteria for evidence-based interventions. The majority of studies assessed interventions for persons with mental health disabilities. Strong evidence was found for ongoing support and work-related social skills training prior to and during competitive employment for persons with mental health disabilities. Moderate evidence supported simulation and use of assistive technology, especially apps for cueing and peer support to increase work participation for persons with intellectual disabilities, neurological/cognitive disabilities, and autism spectrum disorder. Many of the strategies to increase work participation were appropriate for occupational therapy intervention. Suggestions were made for research, specifically looking at more rigorous evaluation of strategies in the long term

**Sullivan M, Adams H, Thibault P, Moore E, Carriere JS, and Lariviere C. Return to work helps maintain treatment gains in the rehabilitation of whiplash injury. Pain. 2017; 158(5):980-987.**

<http://dx.doi.org/10.1097/j.pain.0000000000000871>

Abstract: This study examined the relation between return to work and the maintenance of treatment gains made over the course of a rehabilitation intervention. The study sample consisted of 110 individuals who had sustained whiplash injuries in rear collision motor vehicle accidents and were work-disabled at the time of enrolment in the study. Participants completed pre- and post-treatment measures of pain severity, disability, cervical range of motion, depression, posttraumatic stress symptoms, and catastrophizing. Pain severity was assessed again at 1-year follow-up. At 1-year follow-up, 73 participants had returned to work and 37 remained work-disabled. Analyses revealed that participants who returned to work were more likely to maintain treatment gains (77.5%) than participants who remained work-disabled (48%),  $\chi^2 = 6.3$ ,  $P < 0.01$ . The results of a regression analysis revealed that the relation between return to work and the maintenance of treatment gains remained significant ( $\beta = 0.30$ ,  $P < 0.01$ ), even when controlling for potential confounders such as pain severity, restricted range of motion, depression, and pain catastrophizing. The Discussion addresses the processes by which prolonged work-disability might contribute to the failure to maintain treatment gains. Important knowledge gaps still remain concerning the individual, workplace, and system variables that might play a role in whether or not the gains made in the rehabilitation of whiplash injury are maintained. Clinical implications of the findings are also addressed

**Watson B and Osberg L. Healing and/or breaking? The mental health implications of repeated economic insecurity. Social Science and Medicine. 2017; 188:119-127.**

<http://dx.doi.org/10.1016/j.socscimed.2017.06.042>

Abstract: Current literature confirms the negative consequences of contemporaneous economic insecurity for mental health, but ignores possible implications of repeated insecurity. This paper asks how much a person's history

of economic insecurity matters for psychological distress by contrasting the implications of two models. Consistent with the health capital literature, the Healing model suggests psychological distress is a stock variable affected by shocks from life events, with past events having less impact than more recent shocks. Alternatively, the Breaking Point model considers that high levels of distress represent a distinct shift in life state, which occurs if the accumulation of past life stresses exceeds some critical value. Using five cycles of Canadian National Population Health Survey data (2000-2009), we model the impact of past economic insecurity shocks on current psychological distress in a way that can distinguish between these hypotheses. In our sample of 1775 males and 1883 females aged 25 to 64, we find a robust healing effect for one-time economic insecurity shocks. For males, only a recent one-time occurrence of economic insecurity is predictive of higher current psychological distress (0.19 standard deviations). Moreover, working age adults tend to recover from past accumulated experiences of economic insecurity if they were recently economically secure. However, consistent with the Breaking Point hypothesis, males experiencing three or four cycles of recent insecurity are estimated to have a level of current psychological distress that is 0.26-0.29 standard deviations higher than those who were employed and job secure throughout the same time period. We also find, consistent with other literature, distinct gender differences - for working age females, all economic insecurity variables are statistically insignificant at conventional levels. Our results suggest that although Canadians are resilient to one-time insecurity shocks, males most vulnerable to repeated bouts suffer from elevated levels of psychological distress

**Wittmer JS and Lin C. Valuing employees with disabilities: a chain effect of pro-disability climate on organizational commitment. Disability Studies Quarterly. 2017; 37(3).**

<http://dx.doi.org/10.18061/dsq.v37i3.5555>