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**January 24, 2020**

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**\*Allen M, Sproule B, Macdougall P, Furlan A, Murphy L, Debono VB, et al. Identifying appropriate outcomes to help evaluate the impact of the Canadian Guideline for Safe and Effective Use of Opioids for Non-Cancer Pain. BMC Anesthesiology. 2020; 20(1):6.**

<https://doi.org/10.1186/s12871-020-0930-4> [open access]

**Abstract:** **BACKGROUND:** The Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain (COG) was developed in response to increasing rates of opioid-related hospital visits and deaths in Canada, and uncertain benefits of opioids for chronic non-cancer pain (CNCP). Following publication, we developed a list of evaluable outcomes to assess the impact of this guideline on practice and patient outcomes. **METHODS:** A working group at the National Pain Centre at McMaster University used a modified Delphi process to construct a list of clinical and patient outcomes important in assessing the uptake and application of the COG. An advisory group then reviewed this list to determine the relevance and feasibility of each outcome, and identified potential data sources. This feedback was reviewed by the National Faculty for the Guideline, and a National Advisory Group that included the creators of the COG, resulting in the final list of 5 priority outcomes.

**RESULTS:** Five outcomes were judged clinically important and feasible to measure: 1) Effects of opioids for CNCP on quality of life, 2) Assessment of patient's risk of addiction before starting opioid therapy, 3) Monitoring patients on opioid therapy for aberrant drug-related behaviour, 4) Mortality rates associated with prescription opioid overdose and 5) Use of treatment agreements with patients before initiating opioid therapy for CNCP. Data sources for these outcomes included patient's medical charts, e-Opioid Manager, prescription monitoring programs and administrative databases.

**CONCLUSION:** Measuring the impact of best practice guidelines is infrequently done. Future research should consider capturing the five outcomes identified in this study to evaluate the impact of the COG in promoting evidence-based use of opioids for CNCP

**\*Trudel X, Brisson C, Gilbert-Ouimet M, Vezina M, Talbot D, and Milot A. Long working hours and the prevalence of masked and sustained hypertension. *Hypertension*. 2020; 75(2):532-538.**

<https://doi.org/10.1161/HYPERTENSIONAHA.119.12926>

**Abstract:** Previous studies on the effect of long working hours on blood pressure have shown inconsistent results. Mixed findings could be attributable to limitations related to blood pressure measurement and the lack of consideration of masked hypertension. The objective was to determine whether individuals who work long hours have a higher prevalence of masked and sustained hypertension. Data were collected at 3-time points over 5 years from 3547 white-collar workers. Long working hours were self-reported, and blood pressure was measured using Spacelabs 90207. Workplace clinic blood pressure was defined as the mean of the first 3 readings taken at rest at the workplace. Ambulatory blood pressure was defined as the mean of the next readings recorded every 15 minutes during daytime working hours. Masked hypertension was defined as clinic blood pressure < 140/90 mm Hg and ambulatory blood pressure  $\geq$  135/85 mm Hg. Sustained hypertension was defined as clinic blood pressure  $\geq$  140/90 mm Hg and ambulatory blood pressure  $\geq$  135/85 mm Hg or being treated hypertension. Long working hours were associated with the prevalence of masked hypertension (prevalence ratio 1.70 [95% CI, 1.09-2.64]), after adjustment for sociodemographics, lifestyle-related risk factors, diabetes mellitus, family history of cardiovascular disease, and job strain. The

association with sustained hypertension was of a comparable magnitude (prevalence ratio 49+=1.66 [95% CI, 1.15-2.50]). Results suggest that long working hours are an independent risk factor for masked and sustained hypertension. Workplace strategies targeting long working hours could be effective in reducing the clinical and public health burden of hypertension

**Agarwal B, Brooks SK, and Greenberg N. The role of peer support in managing occupational stress: a qualitative study of the sustaining resilience at work intervention. Workplace Health & Safety. 2020; 68(2):57-64.**

<https://doi.org/10.1177/2165079919873934>

Abstract: Background: Peer support at work may support psychological resilience by enhancing coping skills and providing social support. The current study aimed to examine how a workplace peer support program, "Sustaining Resilience at Work" (StRaW), may support employee mental health from the perspective of the trained peer supporter. Method: Nine individuals from various public and private organizations who had completed StRaW peer supporter training participated in semi-structured interviews to explore their views on the StRaW program. Data were analyzed using inductive thematic analysis. Findings: Three main themes emerged: the impact of workplace stressors on employee mental health, the impact of StRaW, and feedback on StRaW. The results suggested positive effects of StRaW training on practitioners' ability to support colleagues and maintain their own psychological well-being. Discussion/Application to Practice: Our results indicated that peer support programs in the workplace may improve employees' well-being and relationships between employees. As such, occupational health professionals should recommend that their organizations invest in these types of programs to improve organizational resilience. They should encourage employees they consider to be capable of supporting their colleagues to undergo this training as evidence suggests this is beneficial to the trained employees' own well-being, rather than making them feel burdened or under pressure. Occupational health professionals should also view such programs as useful ways of improving attitudes toward mental health within their organizations

**Bjork BE, Jensen I, and Kwak L. Nationwide implementation of a national policy for evidence-based rehabilitation with focus on facilitating return to work: a survey of perceived use, facilitators, and barriers. Disability and Rehabilitation. 2020; 42(2):219-227. <https://doi.org/10.1080/09638288.2018.1496151>**

**Abstract:** Aim: The aim is to assess whether the national policy for evidence-based rehabilitation with a focus on facilitating return-to-work is being implemented in health-care units in Sweden and which factors influence its implementation. Methods: A survey design was used to investigate the implementation. Data were collected at county council management level (process leaders) and clinical level (clinicians in primary and secondary care) using web surveys. Data were analyzed using SPSS, presented as descriptive statistics.

**Results:** The response rate among the process leaders was 88% (n = 30). Twenty-eight percent reported that they had already introduced workplace interventions. A majority of the county councils' process leaders responded that the national policy was not clearly defined. The response rate among clinicians was 72% (n = 580). Few clinicians working with patients with common mental disorders or musculoskeletal disorders responded that they were in contact with a patient's employer, the occupational health services or the employment office (9-18%). Nearly, all clinicians responded that they often/always discuss work-related problems with their patients.

**Conclusions:** The policy had been implemented or was to be implemented before the end of 2015. Lack of clearly stated goals, training, and guidelines were, however, barriers to implementation. Implications for rehabilitation Clinicians' positive attitudes and willingness to discuss workplace interventions with their patients were important facilitators related to the implementation of a nationwide policy for workplace interventions/rehabilitation. A lack of clearly stated goals, training, and guidelines were barriers related to the implementation. The development of evidence-based policies regarding rehabilitation and its implementation has to rely on very structured and clear descriptions of what to do, preferably with the help of practice guidelines. Nationwide implementation of rehabilitation policies has to allow time for preparation including communication of goals and competence assurance in a close collaboration with the end users, namely clinicians and patients.

**Abbreviations** CBT Cognitive behavioral therapy CFIR Consolidated

framework for implementation research CMD Common mental disorders IPT Interpersonal psychotherapy MMR Multimodal rehabilitation RG Rehabilitation guarantee RTW Return to work SPSS Statistical package for the social sciences

**Chander H, Turner AJ, Swain JC, Sutton PE, McWhirter KL, Morris CE, et al. Impact of occupational footwear and workload on postural stability in work safety. *Work*. 2019; 64(4):817-824. <https://doi.org/10.3233/WOR-193043>**

Abstract: **BACKGROUND:** The impact of occupational footwear and workload on postural stability has been studied previously to prevent fall-related workplace injuries. **OBJECTIVE:** The purpose of this study was to assess the impact of two types of occupational footwear [steel-toed (SB) and tactical (TB) work boots] on human balance, when exposed to physical workload. **METHODS:** Postural stability was evaluated in eighteen male participants in the following conditions: eyes open (EO), eyes closed (EC), eyes open unstable surface (EOU) and eyes closed unstable surface (ECU). Postural sway parameters were analyzed using a 2x3 repeated measures analysis of variance design [prior to (PRE) and twice post-workload (POST1 & POST2) separated by 10 minutes of rest]. **RESULTS:** Findings revealed that the use of SB resulted in greater postural stability, which could be attributed to the design characteristics of these footwear and that postural stability was negatively impacted immediately after the workload which could be attributed to the physical exertions during the workload. However, significant differences were limited to ECU with no visual and altered somatosensory feedback. **CONCLUSION:** Design features on occupational footwear can aid postural stability while physical exertional tasks can be detrimental. Findings can offer design and work-rest scheduling suggestions to improve work safety

**Dhiman P, Lee H, Kirtley S, and Collins GS. A systematic review showed more consideration is needed when conducting nonrandomized studies of interventions. *Journal of Clinical Epidemiology*. 2020; 117:99-108.**

**<https://doi.org/10.1016/j.jclinepi.2019.09.027>**

Abstract: **OBJECTIVE:** The objective of this study was to evaluate the methodological conduct, reporting, and risk of bias of nonrandomized

studies of interventions (NRSIs) funded by UK National Institute for Health Research Biomedical Research Centres (NIHR-BRCs).  
**STUDY DESIGN AND SETTING:** We conducted a systematic review, searching the Medline and Web of Science databases between 2012 and 2018, for NRSIs funded by NIHR-BRCs. Eligible studies were published between April 2012 and December 2017. We selected a contemporary subset of NRSIs published in 2017. We extracted study design, methods for overcoming confounding bias from nonrandomization, analysis methods, and items for assessing risk of bias. Risk of bias was the primary outcome, assessed using Risk Of Bias In Non-randomised Studies-of Interventions (ROBINS-I).  
**RESULTS:** Fifty-two NSRI publications were included, of which over half were cohort studies and 29% before-and-after studies. Seventy-seven percent analyzed nonpurposefully collected data. All had serious or critical risk of bias. Regression adjustment was most commonly used to address confounding bias (50%). Few (12%) studies accounted for missing data and 42% reported different numbers of outcomes in their methods and results.  
**CONCLUSION:** Most reviewed NRSIs had serious or critical risk of bias. Although NRSIs can evaluate treatment effects when appropriately conducted, this review shows that their design, analysis, and reporting require more consideration

**Johannesen CDL, Flachs EM, Ebbelohj NE, Marott JL, Jensen GB, Nordestgaard BG, et al. Sedentary work and risk of venous thromboembolism. *Scandinavian Journal of Work, Environment & Health*. 2020; 46(1):69-76.**

<https://doi.org/10.5271/sjweh.3841>

**Abstract:** Objective Prolonged seated immobility during long-distance flights is related to an increased risk of venous thromboembolism (VTE), but little, if anything, is known about the risk related to sedentary work. The objective of this paper was to examine the risk of VTE according to sitting posture at work. **Methods** This prospective study includes a total of 78 936 participants from the Copenhagen City Heart Study and the Copenhagen General Population Study, all without previous thromboembolic events and aged <65 years. An assessment of the number of hours spent in sitting position at work was assigned each participant at baseline using a job exposure matrix. VTE was identified through national patient registries. Survival

analyses were performed to determine the risk of VTE according to sedentary position at work with adjustment for a range of known determinants including lifestyle and coagulation factors. Results During the follow-up period of 582 411 person years (mean follow-up, 7.4 years) 911 participants experienced their first VTE event. Multivariable adjusted analyses showed no difference in risk of VTE between occupational sitting  $\geq 6.5$  hours/day and occupational sitting  $\leq 3.5$  hours/day (hazard ratio 1.11, 95% confidence interval 0.92-1.34). Conclusion This study does not support the hypothesis that sedentary work is a risk factor for VTE in the general population. Whether certain occupations with particularly high exposure to immobilized sitting positions are associated with thromboembolic events is not addressed

**Jung J, Choi HR, Cho BS, Park S, Myong JP, Kang MY, et al. Establishment and operation of a cooperative program to identify work-related acute myeloid leukemia in a general hospital. *Annals of Occupational and Environmental Medicine*. 2019; 31:e33.**

<https://doi.org/10.35371/aoem.2019.31.e33> [open access]

Abstract: Background: The purpose of this report is to introduce the occupational cancer surveillance system, implemented in June 2018, and to share the results of our cooperative program. Methods: The cooperative program begins when the patient is diagnosed with acute myeloid leukemia (AML). Newly diagnosed AML patients are admitted to the internal medicine hematology department, then attending hematology physician requests a consultation from the occupational and environmental medicine (OEM) department. The OEM doctor next visits the hospitalized patient and interviews them to take their occupational history, and preliminarily evaluates the likelihood that the condition is associated with occupation. If the patient wants to apply for compensation through the Korea Workers' Compensation & Welfare Service, the patient was informed to visits the outpatient clinic of the OEM department and requests a 'work-relatedness evaluation report' for use in applying for compensation. Results: Among the 103 patients, who received an OEM departmental work history evaluation, 18 patients were considered to have a work-related incidence and 12 patients were registered in the Industrial Accident Compensation Insurance system. Conclusions: The present

report provides data on a sustainable model for identifying occupational disease in a general hospital setting, while also informing patients about their occupational rights

**Kuronen J, Winell K, Riekkilä S, Hartsenko J, and Rasanen K. Networking of occupational health care units promotes reduction of permanent disability pensions among workers they care: a register-based study controlled by benchmarking with a 5-year follow-up. Journal of Occupational Health. 2019; [Epub ahead of print].**

<https://doi.org/10.1002/1348-9585.12087> [open access]

**Abstract:** **OBJECTIVES:** Early retirement due to disability is a problem in Finland. That causes pension costs that are heavy for the society. This study was designed to find out whether a quality network can support the reduction in incident disability pensions and promote a shift from full to partial disability pensions. **METHODS:** The study population (N = 41 472 in 2016) consisted of municipal employees whose occupational health care (OHC) was provided by the members of the Finnish Occupational Health Quality Network (OQN). The comparison population consisted of all municipality employees whose OHC was provided by non-members of the OQN (N = 340 479 in 2016). The outcomes were measured by comparing the trends in incident disability pensions of full and partial permanent pension and full and partial provisional pension, partial/full pension indexes from 2011 to 2016 according to the principles of Benchmarking Controlled Trials. Linear regression models were used to explore the dynamics of different pension forms. Regression coefficients were calculated to show the average change per year. **RESULTS:** The incidence of permanent disability pensions decreased faster in the study population (P for trend .03) and the study group showed a stronger shift from full to partial permanent pensions (P for trend <.001). **CONCLUSION:** Quality networking between OHC units including common goal setting, systematic quality improvement, and repeated quality measurements decreased new permanent disability pensions and increased partial permanent pensions. Such changes are important while thriving for increased work participation

**Lee W, Migliaccio GC, Lin KY, and Seto EYW. Workforce development: understanding task-level job demands-resources, burnout, and performance in unskilled construction workers. Safety Science. 2020; 123:104577.**

<https://doi.org/10.1016/j.ssci.2019.104577>

**Ludwikowski WMA, Schechinger HA, and Armstrong PI. Are interest assessments propagating gender differences in occupations? Journal of Career Assessment. 2019; 28(1):14-27.**

<https://doi.org/10.1177/1069072718821600> [open access]

Abstract: The current study focused on the effect of assessment methods on estimates of gender differences in interests across Holland's themes. College students (121 women, 76 men) rated their interests in Holland-based activities and occupations using Likert-type scales, and they also completed a card sorting assessment of Holland interests using occupation-based items. Gender differences were consistently observed for realistic and social interests with the magnitude of the observed gender differences varying by measure type. A Gender  $\times$  Measure interaction accounted for 33% of the variance observed in interest scores: Occupation-based scales produced larger differences than activity-based scales, and the card sorting assessment produced larger gender differences than the Likert-type rating scales. Therefore, the choice of interest measure used in career counseling may influence the extent to which gender affects the career decision-making process, which may be particularly important when exploring nontraditional career choices for women and men.

**Mayne J. Revisiting contribution analysis. Canadian Journal of Program Evaluation. 2019; 34(2):171-191.**

<https://doi.org/10.3138/cjpe.68004> [open access]

Abstract: The basic ideas behind contribution analysis were set out in 2001. Since then, interest in the approach has grown and contribution analysis has been operationalized in different ways. In addition, several reviews of the approach have been published and raise a few concerns. In this article, I clarify several of the key concepts behind contribution analysis, including contributory causes and contribution claims. I discuss the need for reasonably robust theories of change and the use of nested theories of change to unpack complex settings.

On contribution claims, I argue the need for causal narratives to arrive at credible claims, the limited role that external causal factors play in arriving at contribution claims, the use of robust theories of change to avoid bias, and the fact that opinions of stakeholders on the contribution made are not central in arriving at contribution claims.

**Momeni Z, Choobineh A, Razeghi M, Ghaem H, Azadian F, and Daneshmandi H. Work-related musculoskeletal symptoms among agricultural workers: a cross-sectional study in Iran. Journal of Agromedicine. 2020; [Epub ahead of print].**

<https://doi.org/10.1080/1059924X.2020.1713273>

**Abstract:** Objective: In Iran, as in most developing countries, agriculture is considered a hazardous industry. Musculoskeletal disorders (MSD) have been shown to be the most common occupational injury among farmers. The present study was carried out among agricultural workers of Fars province, Iran to determine the prevalence of musculoskeletal symptoms and to assess working postures and ergonomic working conditions to identify the major risk factors associated with MSD. Methods: This cross-sectional study was conducted on 1501 randomly selected Iranian agricultural workers with at least 1 year of job tenure. Data were collected using demographic/occupational questionnaire, Nordic Musculoskeletal Questionnaire (NMQ), Quick Exposure Check (QEC) technique, and ergonomic working conditions checklist. Results: The mean age of the participants was 41.39 +/- 13.64 years. The results of NMQ showed the highest prevalence of MSD symptoms was related to lower back (59.3%), knees (36.9%), and upper back (36.6%). Indeed, the QEC score was high or very high (action levels 3 and 4) in 83.1% of the farmers. Moreover, the ergonomic working conditions checklist revealed that the participants' "working postures" index had the lowest mean, indicating poor ergonomic conditions, while "hand tools" had the highest mean, indicating proper ergonomic conditions. Conclusions: The results demonstrated the high prevalence of MSD symptoms among Iranian agricultural workers. Elimination of harmful working postures was recommended to improve working conditions

**Monaco MGL, Uccello R, Muoio M, Greco A, Spada S, Coggiola M, et al. Work-related upper limb disorders and risk assessment among automobile manufacturing workers: a retrospective**

**cohort analysis. Work. 2019; 64(4):755-761.**

<https://doi.org/10.3233/WOR-193037>

Abstract: OBJECTIVE: To estimate the three-year cumulative risk of work-related upper limb disorders (WRULDs) in a cohort of automotive industry workers and to provide a first test of the ability of the European Assembly Worksheet (EAWS) methodology to predict WRULDs. METHODS: 292 workers were investigated by reviewing workers' medical records during the period from 2012-2015 to determine their exposure to biomechanical overload according to EAWS risk scores (0-25, low risk, Green zone; 26-50, medium risk, Yellow zone; >50, High risk; Red zone). RESULTS: The risks were 0.83%, 5.71%, and 11.88% for the Control (unexposed), Green and Yellow Groups, respectively. Only the comparison between the Yellow/Control Groups was significant ( $p = 0.0014$ ). In total, we observed 17 cases of musculoskeletal disorders (MSDs) (14 symptomatic and 3 cases detected by physical examination). CONCLUSIONS: The EAWS is a useful tool for the preliminary risk assessments of biomechanical overload among automotive industry workers. The finding of mainly non-specific disorders highly suggests that health surveillance should aim to identify not only full-blown diseases but also symptomatic cases

**Ottewell N. The association between employers' mental health literacy and attitudes towards hiring people with mental illness. Work. 2019; 64(4):743-753.**

<https://doi.org/10.3233/WOR-193036>

Abstract: BACKGROUND: Research has shown that employers' negative attitudes about hiring people with mental illness is due to stigma. While social contact has been proved to be effective for improving prejudicial attitudes, the influence of knowledge about mental illness on attitudes has been unclear. OBJECTIVE: To investigate the relationship between employers' mental health literacy and their experience or intention of hiring people with mental illness. METHODS: A web-based survey was conducted with Japanese employers. The survey included questions regarding participants' knowledge about mental illness and whether they had hired those with mental illness. RESULTS: Seven hundred employers participated in the survey. Among participants, while depression was widely recognized and understood according to medical criteria,

schizophrenia was not well known. Thirty-five per cent of participants had hired people with mental illness. Those having experience of employing them were more knowledgeable about mental illness. Participants wanting to employ people with mental illness also possessed greater mental health literacy than those who did not want to do so. CONCLUSIONS: Employers' better mental health literacy could lead to hiring people with mental illness. However, as the relationships between the literacy and employment attitudes are complex, further research is needed

**Rocholl M, Ludewig M, John SM, Bitzer EM, and Wilke A. Outdoor workers' perceptions of skin cancer risk and attitudes to sun-protective measures: a qualitative study. Journal of Occupational Health. 2019; [Epub ahead of print].**

<https://doi.org/10.1002/1348-9585.12083> [open access]

Abstract: OBJECTIVES: Since January 2015, squamous cell carcinoma or multiple actinic keratosis of the skin caused by natural ultraviolet irradiation (UVR) is recognized as occupational disease in Germany. Interventions which improve the sun protection behavior of outdoor workers are urgently needed. When developing preventive interventions, the attitudes of target groups need to be taken into consideration. Therefore, outdoor workers' perceptions and attitudes were investigated. METHODS: Seven guided, problem-centered qualitative interviews with healthy male outdoor workers were conducted. A qualitative content analysis was used to analyze the data. RESULTS: We found an underestimation of the perceived skin cancer risk in the seven outdoor workers and heterogeneous attitudes toward the usage of sun-protective measures. Participants stated that the feasibility of technical sun-protective measures depends on the size of the working area. While using a headgear seemed common, none of the participants stated using additional neck protection. Wearing long-sleeved shirts and long trousers were considered problematic. The interviews revealed important requirements for sun-protective clothes, especially in terms of different materials. Although the usage of sunscreen was common, our interviewees seemed to apply it wrongly. CONCLUSION: Risk perceptions of outdoor workers and their attitudes toward sun protection measures may influence the factual UV protection behavior in the workplace. Structures to facilitate the implementation of

technical and organizational sun-protective measures seem to be necessary. Educational interventions and clear instructions which are tailored to the individual needs and attitudes of outdoor workers are required to improve the UV protection behavior and to avoid common mistakes

**Sherbourne CD, Ryan GW, Whitley MD, Gutierrez CI, Hays RD, Herman PM, et al. Coping and management techniques used by chronic low back pain patients receiving treatment from chiropractors. Journal of Manipulative and Physiological Therapeutics. 2019; 42(8):582-593.**

<https://doi.org/10.1016/j.jmpt.2019.07.002>

Abstract: OBJECTIVES: The purpose of this study was to describe coping strategies (eg, mechanisms, including self-treatment) that a person uses to reduce pain and its impact on functioning as reported by patients with chronic low back pain who were seen by doctors of chiropractic and how these coping strategies vary by patient characteristics. METHODS: Data were collected from a national sample of US chiropractic patients recruited from chiropractic practices in 6 states from major geographical regions of the United States using a multistage stratified sampling strategy. Reports of coping behaviors used to manage pain during the past 6 months were used to create counts across 6 domains: cognitive, self-care, environmental, medical care, social activities, and work. Exploratory analyses examined counts in domains and frequencies of individual items by levels of patient characteristics. RESULTS: A total of 1677 respondents with chronic low back pain reported using an average of 9 coping behaviors in the prior 6 months. Use of more types of behaviors were reported among those with more severe back pain, who rated their health as fair or poor and who had daily occurrences of pain. Exercise was more frequent among the healthy and those with less pain. Female respondents tended to report using more coping behaviors than men, and Hispanics more than non-Hispanics. CONCLUSION: Persons with chronic back pain were proactive in their coping strategies and frequently used self-care coping strategies like those provided by chiropractors in patient education. In alignment with patients' beliefs that their condition was chronic and lifelong, many patients attempted a wide range of coping strategies to relieve their pain

**Smeets J, Hoefsmit N, and Houkes I. Self-directing return-to-work: employees' perspective. Work. 2019; 64(4):797-807.**

<https://doi.org/10.3233/WOR-193041>

Abstract: BACKGROUND: Dutch legislation stimulates active participation of employees in their own return-to-work (RTW). In addition, RTW professionals encourage sick-listed employees to self-direct RTW. It remains unclear, however, how employees give meaning to and shape their self-direction. OBJECTIVE: This study aims to conceptualize self-direction using the components of Self-Determination Theory (autonomy, competence, and relatedness) as a framework. METHODS: Semi-structured interviews were conducted with three long-term sick-listed employees. These results were combined with 14 existing transcripts of semi-structured interviews with long-term sick-listed employees and employees who experienced long-term sick leave during the previous calendar year. All interview transcripts were analyzed thematically. RESULTS: Employees generally think of self-direction as making their own decision regarding RTW. They wish to decide by themselves how to shape their RTW-process. Several environmental factors play a role in employees' self-direction. Proximal factors are satisfaction of the need for autonomy, competence, and relatedness. Distal factors are legislation regarding RTW, organizational culture and clarity regarding the roles of various stakeholders in the process of sickness absence and RTW. CONCLUSIONS: Exercising self-direction in RTW seems to contribute to a personalized RTW-process that takes into account individual needs and wishes. Preconditions for effective self-direction are a supportive environment and good cooperation between employee, employer, and occupational physician

**Sveinsdottir V, Lie SA, Bond GR, Eriksen HR, Tveito TH, Grasdal AL, et al. Individual placement and support for young adults at risk of early work disability (the SEED trial). A randomized controlled trial. Scandinavian Journal of Work, Environment & Health. 2020; 46(1):50-59.**

<https://doi.org/10.5271/sjweh.3837>

Abstract: Objectives Individual placement and support (IPS) is an effective approach for helping people with severe mental illness gain employment. This study aimed to investigate if IPS can be effectively repurposed to support young adults at risk of early work disability due

to various social and health related problems. Methods A randomized controlled trial including 96 young adults (18-29 years; 68% men) was conducted in Norway. Participants were not in employment, education, or training, received temporary benefits due to social or health-related problems, and were eligible for traditional vocational rehabilitation (TVR). Participants were randomized to IPS (N=50) or TVR (N=46). Self-reported data were collected at baseline and at 6- and 12-months follow-up. The primary outcome was obtaining any paid employment in the competitive labor market during follow-up. Secondary outcomes were physical and mental health, well-being, coping, alcohol consumption, and drug use. Results Significantly more IPS participants obtained competitive employment compared to TVR participants during 12-months follow-up (48% versus 8%; odds ratio 10.39, 95% confidence interval 2.79-38.68). The IPS group reported significantly better outcomes than the TVR group in subjective health complaints, helplessness, and hopelessness. In post hoc analyses adjusted for baseline and missing data, the IPS group reported significantly better outcomes on these measures in addition to level of disability, optimism about future well-being, and drug use. Conclusions IPS is effective for young adults at risk of early work disability. IPS was superior to TVR in increasing competitive employment and promoted improvements in some non-vocational outcomes. IPS services should be offered to improve employment rates in this vulnerable group

**Witavaara B and Heiden M. Content and psychometric evaluations of questionnaires for assessing physical function in people with low back disorders. A systematic review of the literature. Disability and Rehabilitation. 2020; 42(2):163-172.**

<https://doi.org/10.1080/09638288.2018.1495274>

Abstract: Purpose: The purpose was to investigate how physical function is assessed in people with musculoskeletal disorders in the low back. Specifically: Which questionnaires are used to assess physical function in people with musculoskeletal disorders in the low back? What aspects of physical function do those questionnaires measure? What are the measurement properties of the questionnaires? Materials and methods: A systematic review was performed to identify questionnaires and psychometric evaluations of them. The content of the questionnaires was categorised according to

the International Classification of Function, Disability and Health, and the psychometric evaluations were categorised using the COnsensus-based Standards for the selection of health Measurement Instruments (COSMIN) checklist. Results: The questionnaires measured disability or ability to cope in everyday life, rather than physical function as such. Different aspects of a person's mobility and ability to attend to one's personal care were most often included regarding activity and participation. For body functions, items about sleep and pain were most often included. The Oswestry Disability Index and the Quebec Back Pain Disability Scale showed adequate psychometric properties in most evaluations. Conclusions: The extent of psychometric evaluations differed substantially, as did the items included. Focus of measurement was predominantly on activities in daily life. Implications for rehabilitation Valid and reliable instruments that measure relevant aspects of low back disorders are needed to provide early diagnostics and effective treatment. Most questionnaires need more psychometric evaluations to establish the quality. The Oswestry Disability Index and the Quebec Back Pain Disability Scale showed adequate psychometric properties in most evaluations. The results may be useful when making decisions about which measurement instruments to use when evaluating low back disorders

\*IWH authored publications.