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Journal articles marked with an asterisk indicate an IWH scientist or adjunct scientist is included in the list of authors.

***Engel L, Rampling T, Brautigan EJ, Bazin T, Dilts K, Williams T, et al. Review and consultations of Canadian financial education programs for individuals with disabilities. *Canadian Journal of Occupational Therapy*. 2022; [epub ahead of print].**

<https://doi.org/10.1177/00084174221129947> [open access]

Abstract: Background. Individuals or persons who live with a disability (PWD) can experience unique financial occupation challenges. Financial education programs can address some challenges. Purpose. The aim of this study was to describe and critically appraise current financial education programs for PWD in Canada. Method. This environmental scan framed by scoping review methods included a critical appraisal of Canadian programs' online content and provider consultations. Researchers used four search methods to identify programs, interviewed service providers from four Canadian programs, and thematically analyzed interview transcripts. Findings. Researchers identified 134 programs; 50 (37.3%) included services. The online content of only 26 (19%) programs explicitly addressed accessibility; 106 (79%) programs' content was at least college reading level. The qualitative results include three themes: (a) individualized approach, (b) "getting the word out", and (c) service growth. Implications. There are financial education programs specific to PWD in Canada. Accessibility, individualization, advocacy, and development are needed

***O'Connor AW, Sears JM, and Fulton-Kehoe D. Overdose and substance-related mortality after release from prison in Washington State: 2014-2019. Drug and Alcohol Dependence. 2022; 241:109655.**

<https://doi.org/10.1016/j.drugalcdep.2022.109655>

Abstract: Background: Persons released from prison are at an increased risk of mortality compared to the non-incarcerated population, particularly from drug- and opioid-related overdose. Contributors to overdose mortality vary with changing patterns of substance use and updating overdose and mortality statistics may help focus resources for persons released from prison. Methods: In this retrospective cohort study, records for 33,811 people released from Washington State Department of Corrections prisons between 2014 and 2018 were linked to Washington State death records from 2014 to 2019. We calculated post-release mortality rates by cause of death, including overdose and substance-related mortality. Hazard ratios for risk factors for all-cause, non-overdose, and overdose mortality were estimated using Cox proportional hazards regression. Results: 862 deaths were identified among persons released from prison. The all-cause mortality rate was 747 per 100,000 person-years (95 % CI: 699-800), and drug overdose was the leading cause of death (216 per 100,000 person-years; 95 % CI: 190-244). Psychostimulant-related mortality (152 per 100,000 person-years; 95 % CI: 131-177) and opioid-related mortality (138 per 100,000 person-years; 95 % CI: 118-161) were the most prevalent among substance-related causes of death, with the greatest mortality risk occurring within two weeks after release. Older age at most recent release, previous incarceration, and drug-related convictions were significant risk factors for all-cause and overdose mortality within six years after release. Conclusions: Psychostimulants were the greatest contributors to substance-related mortality for persons released from Washington State prisons. Greater efforts to prevent psychostimulant- and opioid-related overdose are needed.

Adeyemo OO, Tu S, Falako S, and Keene D. Stressors on frontline healthcare workers during the COVID-19 pandemic: a focus on moral injury and implications for the future.

International Archives of Occupational & Environmental Health. 2022; 95(8):1755-1762.

<https://doi.org/10.1007/s00420-022-01867-3> [open access]

Abstract: Objective: The COVID-19 pandemic has placed a psychological strain on health care workers (HCWs). To provide effective support, it is important to explore the stressors that HCWs face that place them at risk of negative psychological outcomes. However, there is a limited number of systematic qualitative studies on the stressors that HCWs faced in the United States of America (USA) during the first wave of the pandemic. Therefore, we explored the stressors that frontline HCWs in the USA experienced during the initial phase of the pandemic. Methods: We performed a qualitative study based on open-ended, semi-structured, one-on-one interviews conducted virtually among HCWs from June 1st to July 18th, 2020. We interviewed frontline HCWs (N = 45) including physicians, nurses, respiratory therapists, and patient care assistants who worked in various specialties and roles in 3 health systems across Connecticut, USA. We offered participants a \$25 gift card as a token of

appreciation. We used inductive techniques derived from grounded theory to develop themes. Results: We identified 3 main themes related to stressors experienced by HCWs during the initial phase of the pandemic namely: (1) Stress of witnessing an unprecedented number of deaths and the impact on patient families; (2) Stress of changing work environment and unmet professional expectations and; (3) Concern for safety in personal life. Furthermore, we highlight experiences that HCWs faced that place them at risk of developing a moral injury. Conclusions: Our findings highlight stressors faced by HCWs that could aid in the provision of well-guided support to HCWs in the present and post-pandemic era.

Allison P, Tiesman HM, Wong IS, Bernzweig D, James L, James SM, et al. Working hours, sleep, and fatigue in the public safety sector: a scoping review of the research. American Journal of Industrial Medicine. 2022; 65(11):878-897.

<https://doi.org/10.1002/ajim.23407>

Abstract: Background: The public safety sector includes law enforcement officers (LEO), corrections officers (CO), firefighter service (FF), wildland firefighting (WFF), and emergency medical services (EMS), as defined in the National Occupational Research Agenda (NORA) of the National Institute for Occupational Safety and Health (NIOSH). Across these occupations, shiftwork, long-duration shifts, and excessive overtime are common. Our objective was to identify research gaps related to working hours, sleep, and fatigue among these workers. Methods: We used a scoping review study design that included searches of MEDLINE, Embase, CAB Abstracts, Global Health, PsychInfo, CINAHL, Scopus, Academic Search Complete, Agricultural and Environmental Science Collection, ProQuest Central, Cochrane Library, Safety Lit, Homeland Security Digital Library, and Sociological Abstracts using a range of occupational search terms and terms related to working hours, sleep, and fatigue. Results: Out of 3415 articles returned from our database search, 202 met all inclusion criteria. Six common outcomes related to working hours, sleep, and fatigue emerged: sleep, fatigue, work performance, injury, psychosocial stress, and chronic disease. Nearly two-thirds (59%, n = 120) of the studies were observational, of which 64% (n = 77) were cross sectional and 9% were (n = 11) longitudinal; 14% (n = 30) of the studies were reviews; and 19% (n = 39) were experimental or quasi-experimental studies. Only 25 of the 202 articles described mitigation strategies or interventions. FFs, LEOs, EMS, and WFFs were the most studied, followed by COs. Conclusions: In general, more longitudinal and experimental studies are needed to enrich the knowledge base on the consequences of long working hours, poor sleep, and fatigue in the public safety sector. Few experimental studies have tested novel approaches to fatigue mitigation in diverse sectors of public safety. This gap in research limits the decisions that may be made by employers to address fatigue as a threat to public-safety worker health and safety.

Brus I, Spekle E, Kuijer PP, Hardenberg M, and Coenen P. Occupational recovery of Dutch workers with low back pain. *Occupational Medicine*. 2022; 72(7):462-469.

<https://doi.org/10.1093/occmed/kgac067> [open access]

Abstract: Background: Low back pain (LBP) is a world leading cause of disability and has substantial impact on individuals and society as a whole. The largest part of the societal burden of LBP is caused by indirect costs, including sick leave. Aims: We aimed to describe occupational recovery and associated costs for workers consulting an occupational physician (OP) with LBP, and to determine to what extent this differs by diagnoses: non-specific favourable LBP, non-specific unfavourable LBP, lumbosacral radicular syndrome (LRS) and specific LBP. Methods: We analysed longitudinal dynamic cohort data from an occupational health service, representing ~1.2 million workers from various companies and sectors throughout the Netherlands. The OP registered data on sick leave and LBP diagnoses. A survival analysis was performed on sick leave duration to determine recovery and a linear regression analysis on cost per episode, adjusting for sex, age and working hours. Results: We analysed 5951 LBP episodes from 5472 workers who consulted an OP, with a median and mean duration sick leave of 95 and 151 days, respectively. The probability of not recovering was 82% at 30 days and 10% at 1 year. The mean cost per episode was €15 350. Specific LBP (€22 999; beta (95% confidence interval [CI]): 16 278 (13 325-19 165)) and LRS (€20 111; beta (95% CI): 13 589 (12 527-14 659)) had the longest and most costly episodes, compared to non-specific favourable LBP (€6745; reference group). Conclusions: With LRS and non-specific unfavourable LBP accounting for over 83% of LBP-associated sick leave costs, the work-directed care of workers with these two diagnoses deserves increased attention.

Coutu MF, Durand MJ, Cote D, Tremblay D, Sylvain C, Guin MM, et al. Building a common language to facilitate discussion among stakeholders in work disability: a consensus group approach. *Journal of Occupational Rehabilitation*. 2022; 32(3):529-537.

<https://doi.org/10.1007/s10926-022-10022-1>

Abstract: Purpose: Work disability stakeholders may not share the same understanding and solutions among themselves or with researchers, causing misunderstandings and hindering collaboration regarding solutions for preventing work disability. To reduce such differences, this study sought to build a common vocabulary among stakeholders and researchers, using a transdisciplinary research framework. Methods: A consensus method based on a constructivist approach was used. A theoretical sampling method was applied to identify researchers or stakeholders representing one of the four systems in the work disability paradigm. A preliminary set of definitions for key terms was assessed using a Web-based questionnaire. It documented participants' level of agreement with each term's inclusion and relevance in the field, and the clarity of the definition, while soliciting suggestions for other terms or clearer definitions. Disagreements were discussed at group meetings, yielding consensus on the final terms and definitions. Results: Eleven stakeholders representing patients, employers, unions, healthcare professionals, and legislative and insurance systems, along with 10 multidisciplinary researchers, participated. The questionnaire yielded initial

consensus on the inclusion and definitions of 49 terms, and 109 suggestions mostly for modified definitions (average = 6 suggestions/term). Two preliminary terms were excluded and three terms were added. Ultimately, 80 terms and their definitions yielded consensus. Conclusions: The process we used to build a common vocabulary was carried out within a transdisciplinary framework. It required a constructivist approach, promoting idea exchanges among participants and co-construction of generally agreed results. The results were rooted in local contexts, thus ensuring the same reference points, regardless of participants' different understandings.

Derdowski LA and Mathisen GE. Psychosocial factors and safety in high-risk industries: a systematic literature review. *Safety Science*. 2023; 157:105948.

<https://doi.org/10.1016/j.ssci.2022.105948> [open access]

Abstract: Most large-scale industrial catastrophes (like the Deepwater Horizon oil spill, or Fukushima-Daiichi nuclear disaster) result from a combination of faults in technical arrangements and neglected social structures featuring a workplace. Whereas it has been acknowledged that human-factor causes can be attributed to accidents in high-risk industries, research in this domain remains scattered and in need of integration. Considered from a psychological perspective, the primary objective of this study is therefore to systematically review existing associations between psychosocial work characteristics and safety in high-risk industries. While grounded in the Job Demands-Resources (JD-R) theoretical model, this study adopts a systematic literature methodology and synthesizes identified empirical evidence through a framework synthesis approach. Results indicate that there is preliminary evidence of a link between the exposure to workplace psychosocial factors and safety in high-risk industries. Studies of the linkages between psychosocial factors and safety behavior are more prevalent and do more often find significant associations between the variables than studies that investigate associations between psychosocial factors and safety outputs. Moreover, results indicate that job demand factors are likely to trigger employees' health-impairing mental/physical conditions that can constitute a precursor of unsafe behavior. Results imply as well the existence of a link between work-induced psychosocial states (typically in a form of stress or exhaustion) and safety. Limitations in the existing evidence base are recognized, thoroughly discussed with several suggestions for further development of the research field being offered. Practical and theoretical implications of the results are presented.

Fadel M, Gilbert F, Legeay C, Dubee V, Esquirol Y, Verdun-Esquer C, et al. Association between COVID-19 infection and work exposure assessed by the Mat-O-Covid job exposure matrix in the CONSTANCES cohort. *Occupational and Environmental Medicine*. 2022; 79:782-789.

<https://doi.org/10.1136/oemed-2022-108436> [open access]

Abstract: Objectives: The COVID-19 pandemic has brought to light a new occupational health threat. We aimed to evaluate the association between COVID-19 infection and work

exposure to SARS-CoV-2 assessed by a job-exposure matrix (JEM), in a large population cohort. We also estimated the population-attributable fraction among exposed subjects. Methods: We used the SAPRIS-SERO sample of the CONSTANCES cohort, limited to subjects actively working, and with a job code available and a questionnaire on extra work activities. The following outcomes were assessed: COVID-19 diagnosis was made by a physician; a seropositivity to the ELISA-S test ('serology strict') and ELISA-S test intermediate with positive ELISA-NP or a positive neutralising antibodies SN ('serology large'). Job exposure was assessed using Mat-O-Covid, an expert-based JEM with an Index used as a continuous variable and a threshold at 13/1000. Results: The sample included 18 999 subjects with 389 different jobs, 47.7% were men with a mean age of 46.2 years (± 9.2 years). The Mat-O-Covid index taken as a continuous variable or with a threshold greater than 13/1000 was associated with all the outcomes in bivariable and multivariable logistic models. ORs were between 1.30 and 1.58, and proportion of COVID-19 attributable to work among exposed participants was between 20% and 40%. Discussion: Using the Mat-O-Covid JEM applied to a large population, we found a significant association between work exposure to SARS-CoV-2 and COVID-19 infection, though the estimation of attributable fraction among exposed people remained low to moderate. Further studies during other exposed periods and with other methods are necessary.

Fedyk M, Dewar B, Jurkovic L, Chevrier S, Kitto S, Rodriguez R, et al. How are randomized clinical trials ethically justified? A systematic scoping review and thematic analysis of reasons that ethically justify randomized clinical trials. *Journal of Clinical Epidemiology*. 2022; 147:160-167.

<https://doi.org/10.1016/j.jclinepi.2022.04.005> [open access]

Abstract: OBJECTIVES: We set out to identify and count the types of reasons that are used in contemporary scholarship about the ethical permissibility of randomized trials, with the goal of developing a finer grained taxonomy of reasons than what is currently used by most participants in this literature. Because of its central role in justifying normative conclusions about randomized clinical trials (RCTs), we paid particular attention to both uses of the keyword "equipoise" and to the different concepts associated with it. METHODS: We conducted a scoping review to identify articles that included arguments that were likely to express reasons justifying RCTs. Text excerpts that expressed reasoning about the ethical permissibility of RCTs were extracted from relevant papers, and our data were generated by coding these excerpts using a mixed-methods protocol that fused elements of a grounded analysis and thematic coding. In our study, each theme corresponded to a specific type of reason that was contentful and stable when applied to our corpus of text extracts. RESULTS: Our search, screening, and text extraction process yielded 1,335 unique text excerpts, which then formed the basis of our coding. Although we found that 16 themes were sufficient to saturate this corpus, slightly less than 100% of our excerpts were covered by just 10 themes. We also tracked uses of 16 keywords in the text excerpts to explore whether there was any relationship between the keywords and our themes and found that keywords frequently did

not cooccur with the presence of our themes. CONCLUSIONS: Our data and analysis support the conclusion that there is significant diversity in the types of reasons offered to justify RCTs; 10 themes effectively captured all the text excerpts we analyzed, and these themes cannot be reduced to the occurrence of relevant keywords. This result highlights how individuals and organizations may use different reasons to consider randomized trials to be justified and even when they use similar language the concepts they are referencing may not be consistent

Gray WB and Mendeloff J. Preventing construction deaths: the role of public policies. Regulation & Governance. 2022; [epub ahead of print].

<https://doi.org/10.1111/rego.12486> [open access]

Abstract: Are stronger direct financial incentives or regulatory enforcement effective in reducing fatalities in the construction industry? We examine two important policies—state workers' compensation (WC) programs and federal and state Occupational Safety and Health Administration (OSHA) activities—which embody those strategies. We examine their impact by looking at state-level fatality rates in the construction industry from 1992 to 2016. Setting aside highway crashes and violence, the majority of employee deaths occur in construction. We find that states which exempt small firms from the requirement to buy WC insurance have higher fatality rates. When eligibility for compensation is restricted by longer waiting periods, fatality rates are substantially higher. More frequent federal or state OSHA inspections and, especially, consultation visits are associated with lower fatality rates, but higher average penalties are not. Limited variation in these policies over our sample period, especially for WC, makes these results suggestive rather than definitively causal.

Kader M, Selander J, Andersson T, Albin M, Bodin T, Harma M, et al. Night and shift work characteristics and incident ischemic heart disease and atrial fibrillation among healthcare employees: a prospective cohort study. Scandinavian Journal of Work, Environment & Health. 2022; 48(7):520-529.

<https://doi.org/10.5271/sjweh.4045> [open access]

Abstract: OBJECTIVE: This study aimed to examine the effects of various aspects of night and shift work on the risk of incident ischemic heart disease (IHD) and atrial fibrillation (AF) using detailed and registry-based exposure data. METHODS: This prospective cohort study included >30 300 healthcare employees (eg, nurses, nursing assistants) employed for at least one year in Region Stockholm 2008-2016. Information on daily working hours was obtained from a computerized administrative employee register and outcomes from national and regional registers. Using discrete-time proportional hazard models, we analyzed the outcomes as functions of working hour characteristics the preceding year, adjusted for sex, age, country of birth, education, and profession. RESULTS: We observed 223 cases of IHD and 281 cases of AF during follow-up 2009-2016. The risk of IHD was increased among employees who the preceding year had permanent night shifts compared to those with permanent day work [hazard ratio (HR) 1.61, 95% confidence interval (CI) 1.06-2.43] and among employees

working night shifts >120 times per year compared to those who never worked night (HR 1.53, 95% CI 1.05-2.21). When restricted to non-night workers, the risk of IHD was increased for employees having frequent quick returns from afternoon shifts. No increased risks were observed for AF. **CONCLUSIONS:** Night work, especially working permanent night shifts and frequent night shifts, is associated with an increased risk of incident IHD but not AF. Moreover, frequent quick returns from afternoon shifts (among non-night workers) increased IHD risk. Organizing work schedules to minimize these exposures may reduce IHD risk

Larsson K, Hurtigh AL, Andersen AMV, and Anderzen I. Vocational rehabilitation professionals' perceptions of facilitators and barriers to return to work: a qualitative descriptive study. *Rehabilitation Counseling Bulletin*. 2022; 66(1):66-78.

<https://doi.org/10.1177/00343552211060013> [open access]

Abstract: This is a qualitative descriptive study of professionals' perceptions of facilitators and barriers for returning to work for women on long-term sick leave due to musculoskeletal pain and/or common mental disorder who participated in a vocational rehabilitation project. Data were collected through semi-structured interviews with 13 purposefully selected professionals from the Swedish Social Insurance Agency, the Swedish Public Employment Service, the health care services, and the municipal services. The interviews were analyzed with a manifest content analysis. The main facilitators were the close cooperation between the professionals and the individual support that was offered to the project participants. The main barriers were differences among the stakeholders' missions and goals, limitations in project duration and within the labor market, and the project participants' personal factors. These results emphasize the importance of cooperation between the various stakeholder professionals and a focus on the individual's resources and needs. The study highlights the value of including health care professionals in vocational rehabilitation to benefit from their specific knowledge of the target group and that group's strengths and needs. Moreover, the study highlights the need to incorporate collaboration with employers and align with the local labor market in the development of vocational rehabilitation interventions.

Nowobilski T and Hola B. Methodology based on causes of accidents for forecasting the effects of falls from scaffoldings using the construction industry in Poland as an example. *Safety Science*. 2023; 157:105945.

<https://doi.org/10.1016/j.ssci.2022.105945> [open access]

Abstract: Every year, there are several thousand occupational accidents on Polish construction sites. Many of them are related to the use of building scaffolding. Depending on the type of injury, accidents are classified as light, severe or fatal. This article presents a methodology, which is based on identified causes, for predicting the effects (severity) of falls from building scaffolding. The basis for the research was a set of 200 accidents that occurred on Polish construction sites in 2011. Information on the accidents was obtained from the archives of the National Labor Inspectorate. For each fall from scaffolding, the following were identified (in accordance with the Polish TOH methodology): technical (T), organizational (O)

and human (H) causes of the accident, as well as its effects. The significance of the causes was assessed in each group using Pareto-Lorenz analysis and the ABC classification. Significant causes include those that were identified in over 80% of accidents. These causes were taken into account in the further analyzes. In order to define the relationship between the identified significant causes of an accident, and its effect, an original methodology of screening was proposed. It involved the assigning of the possible effects of accidents to each theoretical combination of accident causes. For this purpose, computational scripts in the Python programming language were developed. The test results allowed for the percentage determination of the probability of light, severe and fatal consequences of an accident for each of the combinations of significant causes. The conducted research is of great importance for science and engineering practice. The obtained test results can be used to estimate the occupational risk of work carried out on building scaffoldings. The developed computational models enable the consequences of accidents to be easily and quickly forecast, depending on the deficiencies and shortcomings identified "in situ" in the area of scaffolding assembly, work organization and human factors. Good identification of the factors influencing the severity of accidents allows high-risk factors to be distinguished and specific preventive measures to be developed.

Pulford A, Thapa A, Thomson RM, Guilding A, Green MJ, Leyland A, et al. Does persistent precarious employment affect health outcomes among working age adults? A systematic review and meta-analysis. *Journal of Epidemiology and Community Health*. 2022; 76(11):909-917.

<https://doi.org/10.1136/jech-2022-219292> [open access]

Abstract: OBJECTIVE: To evaluate the impact of persistent precarious employment (lasting 12+ months) on the health of working age adults, compared with more stable employment. Persistent precarity reflects a shift towards less secure forms of employment and may be particularly important for health. METHODS: Nine databases were systematically searched to identify quantitative studies that assessed the relationship between persistent precarious employment and health outcomes. Risk of bias (RoB) was assessed using an adaptation of the Effective Public Health Practice Project tool. Narrative synthesis and random effects meta-analysis were conducted. Certainty of evidence was assessed using the Grades of Recommendations, Assessment, Development and Evaluation (GRADE) approach. RESULTS: Of 12 940 records screened, 50 studies met the inclusion criteria and 29 were included in meta-analyses. RoB was generally high (n=18). The most reported outcome domain was mental health; with evidence also reported relating to general health, physical health, and health behaviours. Of GRADE assessed outcomes, persistent precarious employment was associated with increased risk of poor self-rated health (OR 1.53, 95% CI 1.09 to 2.14, I(2)=80%) and mental health symptoms (OR 1.44, 95% CI 1.23 to 1.70, I(2)=65%). The association with all-cause mortality was imprecisely estimated (OR 1.10, 5% CI 0.91 to 1.33, I(2)=73%). There was very low GRADE certainty across all outcomes. CONCLUSIONS: Persistent precarious employment is associated with poorer health, particularly for outcomes

with short time lags, though associations are small and causality is highly uncertain. Further research using more robust methods is needed but given potential health harms of persistent precarious employment, exploration of precautionary labour regulations and employment policies is warranted

Rohrbacher M and Hasselhorn HM. Social inequalities in early exit from employment in Germany: a causal mediation analysis on the role of work, health, and work ability. *Scandinavian Journal of Work, Environment & Health*. 2022; 48(7):569-578.

<https://doi.org/10.5271/sjweh.4043> [open access]

Abstract: OBJECTIVE: The aim of this study was to investigate the contribution of work factors, health, and work ability to social inequalities in early exit from employment among older employees in Germany. METHODS: Longitudinal data from the representative German IliD Cohort study was linked with employment register data to obtain maximum information on exit routes out of paid employment. Information of N=2438 respondents, aged 46 and 52 at baseline, were obtained for a follow-up of six years (2011-2017). Causal mediation analysis with inverse odds weighting was conducted using discrete-time survival outcomes and baseline measurements of the socioeconomic status (SES: education), work factors, health, and work ability. RESULTS: Older employees with low SES were at an increased risk of exiting employment early by receiving disability pension and through long-term unemployment but not through an unspecified labor market exit when compared to those with high and moderate SES. Low work ability accounted for up to 38% of the social inequalities in work exits into disability pension. Less-than-good physical health accounted for up to 59% of inequalities in work exits into long-term unemployment. Work factors contributed considerably to inequalities in exits through unemployment but not disability pension. CONCLUSIONS: This study finds social inequalities in early exits through disability pension and long-term unemployment among older employees in Germany, predominantly attributable to differences in work ability (disability pension) and physical health (unemployment). Investments in work ability and promotion of physical health may constitute promising approaches to counteract an increase of these inequalities

Shields M, Spittal MJ, Dimov S, Kavanagh A, and King TL. Employment and disability among young Australians and associations with psychological distress during the COVID-19 pandemic. *SSM - Population Health*. 2022; 19:101140.

<https://doi.org/10.1016/j.ssmph.2022.101140> [open access]

Abstract: BACKGROUND: Emerging global data indicates that the employment status and mental health of young people is being adversely impacted by the COVID-19 pandemic. However, little research has focused on young people with disabilities, despite their lower pre-pandemic employment rates and poorer mental health. We quantified the association between employment status and mental health among young Australians, and tested for effect modification by disability status. METHODS: Linear regression analysis of Wave 9 (October-December 2020) of the Longitudinal Study of Australian Children (LSAC) assessing

the association between employment status (employed, unemployed) on psychological distress (Kessler-10) and including an interaction term for employment status and disability. RESULTS: The association between employment status and psychological distress differed by disability status. Young adults with disabilities had higher adjusted mean K10 scores indicating greater psychological distress both when they were employed (mean 22.99, 95% CI 21.41, 24.58) and unemployed (mean 29.19, 95% CI 25.36, 33.03) compared to their peers without disabilities (employed mean 18.72, 95% CI 17.75, 19.70; unemployed mean 20.45, 95% CI 18.60, 22.29). CONCLUSION: Young Australians in general may benefit from additional supports to improve their employment and mental health outcomes. Young people with disabilities may particularly benefit from targeted supports to gain and maintain employment and improve mental health

Shim Y, Dik BJ, and Banning JH. Experiencing meaningful work as a lower socioeconomic status worker: an interpretative phenomenological analysis. *Journal of Career Assessment*. 2022; 30(4):697-718.

<https://doi.org/10.1177/10690727221074891>

Tomas V, Ahmed H, and Lindsay S. Unravelling the complexities of workplace disclosure among persons with non-visible disabilities and illnesses: a qualitative meta-ethnography. *Journal of Occupational Rehabilitation*. 2022; 32(3):538-563.

<https://doi.org/10.1007/s10926-022-10023-0>

Abstract: BACKGROUND: Deciding whether and how to disclose a disability at work for persons with non-visible disabilities and illnesses involve complex processes. Research has focused on antecedents and outcomes of disclosure. More research is needed to understand the lived experiences related to disclosure decision-making and actual navigation of disclosure and concealment at work. PURPOSE: To understand the experiences of persons with non-visible disabilities and illnesses regarding workplace disclosure decision-making, navigating disclosure and/or concealment, and experiential differences across disability and illness types, ages, geographic locations, and genders. METHODS: We conducted a qualitative meta-synthesis using Noblit and Hare's seven steps of meta-ethnography. Searches were conducted via six databases. Studies were analyzed to develop conceptual categories, third-order constructs (themes), and a line-of-argument with comparisons drawn from the disclosure decision making model, disclosure process model, and consideration of disability and illness types, genders, ages, and geographic locations. RESULTS: Twenty-four studies were included involving 489 participants, aged 16 to 81, from nine countries, focusing on one non-visible disability or illness, or multiple. We developed four themes for the disclosure decision-making process (self- and other-focused, experiential, and environmental/workplace factors) and two themes for the disclosure/concealment event (disclosure/concealment logistics and timing) and noted emerging trends across ages, genders, disability and illness types, and geographic locations. CONCLUSIONS: Knowledge obtained could be used among professionals who support persons with non-visible disabilities and illnesses to help them

navigate disclosure at work, and to consider the role of age, genders, disability and illness types, and geographic locations on disclosure

Weale V, Stuckey R, Kinsman N, and Oakman J. Workplace musculoskeletal disorders: a systematic review and key stakeholder interviews on the use of comprehensive risk management approaches. International Journal of Industrial Ergonomics. 2022; 91:103338. <https://doi.org/10.1016/j.ergon.2022.103338>

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