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

***Frank J, Mustard C, Smith P, Siddiqi A, Cheng Y, Burdorf A, et al. Work as a social determinant of health in high-income countries: past, present, and future. *Lancet*. 2023; 402(10410):1357-1367.**

[https://doi.org/10.1016/S0140-6736\(23\)00871-1](https://doi.org/10.1016/S0140-6736(23)00871-1)

Abstract: This paper, the first in a three-part Series on work and health, provides a narrative review of research into work as a social determinant of health over the past 25 years, the key emerging challenges in this field, and the implications of these challenges for future research. By use of a conceptual framework for work as a social determinant of health, we identified six emerging challenges: (1) the influence of technology on the nature of work in high-income countries, culminating in the sudden shift to telework during the COVID-19 pandemic; (2) the intersectionality of work with gender, sexual orientation, age, race, ethnicity, migrant status, and socioeconomic status as codeterminants of health disparities; (3) the arrival in many Organisation for Economic Co-operation and Development countries of large migrant labour workforces, who are often subject to adverse working conditions and social exclusion; (4) the development of precarious employment as a feature of many national labour markets; (5) the phenomenon of working long and irregular hours with potential health consequences; and (6) the looming threat of climate change's effects on work. We conclude that profound changes in the nature and availability of work over the past few decades have led to widespread new psychosocial and physical exposures that are associated with adverse health outcomes and contribute to increasing disparities in health. These new exposures at work will require novel and creative methods of data collection for monitoring of their potential health

impacts to protect the workforce, and for new research into better means of occupational health promotion and protection. There is also an urgent need for a better integration of occupational health within public health, medicine, the life sciences, and the social sciences, with the work environment explicitly conceptualised as a major social determinant of health

***Mustard CA, Orchard C, Dobson KG, Carnide N, and Smith PM. An observational study of pain severity, cannabis use, and benefit expenditures in work disability. Canadian Journal of Public Health. 2023; [epub ahead of print].**

<https://doi.org/10.17269/s41997-023-00821-1> [open access]

Abstract: Objective: This study pools two cohorts of workers in Ontario interviewed 18 months following a disabling work-related injury to estimate the association between pain severity, cannabis use, and disability benefit expenditures. Methods: Among 1650 workers, disability benefit expenditures obtained from administrative records were combined with self-reported measures of pain symptoms and cannabis use. Disability benefit expenditures comprised wage replacement benefits and expenditures on healthcare services. Results: Past-year cannabis use was reported by 31% of participants, with approximately one third of cannabis use attributed to the treatment of conditions arising from the work-related injury. Condition-related cannabis use was elevated among the 34% of participants reporting severe pain symptoms. In regression models adjusted for age, sex, nature of injury, opioid prescription, and pre-injury chronic conditions, participants reporting condition-related cannabis use had equivalent wage replacement benefit expenditures ($\beta = 0.254$, ns) and higher healthcare benefit expenditures ($\beta = 0.433$, $p = 0.012$) compared to participants who did not use cannabis. Participants reporting cannabis use unrelated to conditions arising from their work-related injury had lower wage replacement benefit expenditures ($\beta = -0.309$, $p = 0.002$) and equivalent healthcare benefit expenditures ($\beta = -0.251$, ns) compared to participants not using cannabis. Conclusion: This novel study of workers' compensation claimants interviewed at 18 months post-injury did not observe a substantial relationship between cannabis use and disability benefit expenditures, suggesting that neither harm nor significant benefit is associated with cannabis use. These findings contribute to understanding the potential benefits and risks associated with cannabis use in settings that have legalized cannabis use.

Aasdahl L, Standal MI, Hagen R, Solbjør M, Bagoien G, Fossen H, et al. Effectiveness of 'motivational interviewing' on sick leave: a randomized controlled trial in a social insurance setting. Scandinavian Journal of Work, Environment & Health. 2023; 49(7):477-486.

<https://doi.org/10.5271/sjweh.4117> [open access]

Abstract: Objective: This study aimed to evaluate the effectiveness of motivational interviewing (MI) - a counselling approach offered by caseworkers at the Norwegian Labor and Welfare Administration (NAV) - on return to work (RTW) for individuals sick-listed for =8 weeks due to any diagnoses. MI was compared to usual case management and an active control during 12 months of follow-up. Methods: In a randomized clinical trial with three

parallel arms, participants were randomized to MI (N=257), usual case management (N=266), or an active control group (N=252). MI consisted of two MI sessions while the active control involved two sessions without MI, both were offered in addition to usual case management. The primary outcome was number of sickness absence days based on registry data. Secondary outcomes included time to sustainable RTW, defined as four consecutive weeks without medical benefits. Results: The median number of sickness absence days for the MI group was 73 days [interquartile range (IQR) 31-147], 76 days (35-134) for usual care, and 75 days (34-155) for active control. In total 89%, 88% and 86% of the participants, respectively, achieved sustainable RTW. The adjusted hazard ratio (HR) for time to sustainable RTW was 1.12 (95% CI 0.90-1.40) for MI compared to usual case management and HR 1.16 (95% CI 0.93-1.44) compared to the active control. Conclusions: This study did not provide evidence that MI offered by NAV caseworkers to sick-listed individuals was more effective on RTW than usual case management or an active control. Providing MI in this context could be challenging as only half of the MI group received the intervention.

van Beukering IE, Sampogna G, Bakker M, Joosen MCW, Dewa CS, van Weeghel J, et al. Dutch workers' attitudes towards having a coworker with mental health issues or illness: a latent class analysis. *Frontiers in Psychology*. 2023; 14:1212568.

<https://doi.org/10.3389/fpsy.2023.1212568> [open access]

Abstract: INTRODUCTION: Workplace mental health stigma is a major problem as it can lead to adverse occupational outcomes and reduced well-being. Although workplace climate is largely determined by managers and co-workers, the role of co-workers in workplace stigma is understudied. Therefore, the aims are: (1) to examine knowledge and attitudes towards having a coworker with Mental Health Issues or Illness (MHI), especially concerning the desire for social distance, (2) to identify distinct subgroups of workers based on their potential concerns towards having a coworker with MHI, and (3) to characterize these subgroups in terms of knowledge, attitudes, and background characteristics. MATERIALS AND METHODS: A cross-sectional survey was conducted among a nationally representative internet panel of 1,224 Dutch workers who had paid jobs and did not hold management positions. Descriptive statistics and a three-step approach Latent Class Analysis (LCA) were used to address the research aims. RESULTS: Concerning the desire for social distance, 41.9% of Dutch workers indicated they did not want to have a close colleague with MHI, and 64.1% did not want to work for a higher-ranking manager who had MHI. In contrast however, most workers did not have negative experiences with interacting with coworkers with MHI (92.6%). Next, five distinct subgroups (SG) of workers were identified: two subgroups with few concerns towards having a coworker with MHI (SG1 and SG2; 51.8% of the respondents), one subgroup with average concerns (SG3; 22.7% of the respondents), and two subgroups with more concerns (SG4 and SG5; 25.6% of the respondents). Four out of five subgroups showed a high tendency towards the desire for social distance. Nevertheless, even in the subgroups with more concerns, (almost) half of the respondents were willing to learn more about how to best deal with coworkers with MHI. No significant differences were found between the subgroups on

background characteristics. DISCUSSION: The high tendency to the desire for social distance seems to contrast with the low number of respondents who personally had negative experiences with workers with MHI in the workplace. This suggests that the tendency to socially exclude this group was not based on their own experience. The finding that a large group of respondents indicated to want to learn more about how to deal with a co-worker with MHI is promising. Destigmatizing interventions in the workplace are needed in order to create more inclusive workplaces to improve sustained employment of people with MHI. These interventions should focus on increasing the knowledge of workers about how to best communicate and deal with coworkers with MHI, they do not need to differentiate in background variables of workers

Bogaers R, Geuze E, van Weeghel J, Leijten F, van de Mheen D, Greenberg N, et al. Mental health issues and illness and substance use disorder (non-)disclosure to a supervisor: a cross-sectional study on beliefs, attitudes and needs of military personnel. *BMJ Open*. 2023; 13(4):e063125.

<https://doi.org/10.1136/bmjopen-2022-063125> [open access]

Abstract: Objectives: Research suggests that military personnel frequently delay disclosing mental health issues and illness (MHI), including substance use disorder, to supervisors. This delay causes missed opportunities for support and workplace accommodations which may help to avoid adverse occupational outcomes. The current study aims to examine disclosure-related beliefs, attitudes and needs, to create a better understanding of personnel's disclosure decision making. Design: A cross-sectional questionnaire study among military personnel with and without MHI. Beliefs, attitudes and needs regarding the (non-)disclosure decision to a supervisor were examined, including factors associated with (non-)disclosure intentions and decisions. Descriptive and regression (logistic and ordinal) analyses were performed. Setting: The study took place within the Dutch military. Participants: Military personnel with MHI (n=324) and without MHI (n=554) were participated in this study. Outcome measure: (Non-)disclosure intentions and decisions. Results: Common beliefs and attitudes pro non-disclosure were the preference to solve one's own problems (68.3%), the preference for privacy (58.9%) and a variety of stigma-related concerns. Common beliefs and attitudes pro disclosure were that personnel wanted to be their true authentic selves (93.3%) and the desire to act responsibly towards work colleagues (84.5%). The most reported need for future disclosure (96.8%) was having a supervisor who shows an understanding for MHI. The following factors were associated both with non-disclosure intentions and decisions: higher preference for privacy (OR (95% CI))=(1.99 (1.50 to 2.65)intention, 2.05 (1.12 to 3.76)decision) and self-management (OR (95% CI))=(1.64 (1.20 to 2.23)intention, 1.79 (1.00 to 3.20)decision), higher stigma-related concerns (OR (95% CI))=(1.76 (1.12 to 2.77)intention, 2.21 (1.02 to 4.79)decision) and lower quality of supervisor-employee relationship (OR (95% CI))=(0.25 (0.15 to 0.42)intention, 0.47 (0.25 to 0.87)decision). Conclusion: To facilitate (early-)disclosure to a supervisor, creating opportunities for workplace support, interventions should focus on decreasing stigma and discrimination and align with personnels' preference

for self-management. Furthermore, training is needed for supervisors on how to recognise, and effectively communicate with, personnel with MHI. Focus should also be on improving supervisor-employee relationships.

Brossoit RM, Hammer LB, Crain TL, Leslie JJ, Bodner TE, and Brockwood KJ. The effects of a Total Worker Health intervention on workplace safety: mediating effects of sleep and supervisor support for sleep. *Journal of Occupational Health Psychology*. 2023; 28(4):263-276.

<https://doi.org/10.1037/ocp0000357>

Abstract: We tested the effects of a randomized controlled trial Total Worker Health intervention on workplace safety outcomes. The intervention targeted employee sleep at both the supervisor-level (e.g., sleep-specific support training) and employee-level (e.g., sleep tracking and individualized sleep feedback). The intervention components were developed using principles of the Total Worker Health approach and the theory of triadic influence for health behaviors. We hypothesized that employees in the treatment group would report greater safety compliance, safety participation, and safety motivation, and would be less likely to experience a work-related accident or injury following the intervention through improvements in sleep quantity and quality, as well as increased perceptions of supervisors' support for sleep. It was theorized that the indirect effects of the intervention on workplace safety outcomes via sleep mediators operated through a resource pathway, whereas the supervisor support for sleep mediator operated through an exchange pathway. Results broadly revealed that employees in the treatment group, compared to those in the control group, reported greater workplace safety behaviors and safety motivation, and reduced workplace accidents and injuries 9 months post-baseline, through lower dissatisfaction with sleep, reduced sleep-related impairments, and greater supervisor support for sleep 4 months post-baseline. Intervening on sleep and supervisor support for sleep in an integrated Total Worker Health framework can have a positive impact on workplace safety. (PsycInfo Database Record (c) 2023 APA, all rights reserved)

Chen JW, Lu L, and Cooper CL. Protecting well-being and performance after sickness presenteeism under demanding conditions: the dual effects of proactive personality and work reward as resources. *European Journal of Work and Organizational Psychology*. 2023; 32(5):702-719.

<https://doi.org/10.1080/1359432X.2023.2250083>

Gillet N, Fernet C, Blechman Y, and Morin AJS. On the combined role of work engagement and burnout among novice nurses: a longitudinal person-centered analysis. *Journal of Career Assessment*. 2023; 31(4):686-714.

<https://doi.org/10.1177/10690727221148720>

Haycock PC, Borges MC, Burrows K, Lemaitre RN, Harrison S, Burgess S, et al. Design and quality control of large-scale two-sample Mendelian randomization studies. *International Journal of Epidemiology*. 2023; 52(5):1498-1521.

<https://doi.org/10.1093/ije/dyad018> [open access]

Abstract: Background Mendelian randomization (MR) studies are susceptible to metadata errors (e.g. incorrect specification of the effect allele column) and other analytical issues that can introduce substantial bias into analyses. We developed a quality control (QC) pipeline for the Fatty Acids in Cancer Mendelian Randomization Collaboration (FAMRC) that can be used to identify and correct for such errors. **Methods** We collated summary association statistics from fatty acid and cancer genome-wide association studies (GWAS) and subjected the collated data to a comprehensive QC pipeline. We identified metadata errors through comparison of study-specific statistics to external reference data sets (the National Human Genome Research Institute-European Bioinformatics Institute GWAS catalogue and 1000 genome super populations) and other analytical issues through comparison of reported to expected genetic effect sizes. Comparisons were based on three sets of genetic variants: (i) GWAS hits for fatty acids, (ii) GWAS hits for cancer and (iii) a 1000 genomes reference set. **Results** We collated summary data from 6 fatty acid and 54 cancer GWAS. Metadata errors and analytical issues with the potential to introduce substantial bias were identified in seven studies (11.6%). After resolving metadata errors and analytical issues, we created a data set of 219 842 genetic associations with 90 cancer types, generated in analyses of 566 665 cancer cases and 1 622 374 controls. **Conclusions** In this large MR collaboration, 11.6% of included studies were affected by a substantial metadata error or analytical issue. By increasing the integrity of collated summary data prior to their analysis, our protocol can be used to increase the reliability of downstream MR analyses. Our pipeline is available to other researchers via the CheckSumStats package

Inversi C, Dundon T, and Buckley LA. Work in the gig-economy: the role of the state and non-state actors ceding and seizing regulatory space. *Work, Employment and Society*. 2023; 37(5):1279-1298.

<https://doi.org/10.1177/09500170221080387> [open access]

Abstract: Using the concept of regulatory space, this article asks how both the state and non-state actors influence employment regulations particular to the gig-economy. To address this question a mixed method approach is used, including interviews with strategically placed informants involved in policy formation at national and international levels, content analysis of legal cases, parliamentary inquiry transcripts and policy reports. The analysis contributes to an understanding of employment regulation by the state in two ways. First, it reports distinct 'levers', which lead to a particular state role of 'ceding and seizing' regulatory power. Second, it argues that these levers ultimately serve the accumulation interests of capital over the legitimacy of employment rights for labour. The findings have wider societal implications for issues of equity, justice and employment regulation applicable to the gig-economy.

Janssens KME, Joosen MCW, Henderson C, Bakker M, den Hollander W, van Weeghel J, et al. Effectiveness of a stigma awareness intervention on reemployment of people with mental health issues/mental illness: a cluster randomised controlled trial. *Journal of Occupational Rehabilitation*. 2023; [epub ahead of print].

<https://doi.org/10.1007/s10926-023-10129-z>

Abstract: Purpose: A barrier for reemployment of people with mental health issues/mental illness (MHI) is workplace stigma and discrimination. In this RCT the effectiveness of a stigma-awareness intervention addressing finding work, retaining work and decisional stress were evaluated. Methods: A cluster RCT was conducted in 8 Dutch municipal practices. Randomisation took place at practice level. Participants were unemployed people with MHI, receiving social benefits. The intervention consisted of a decision aid for workplace disclosure for participants and a 2 × 3 h stigma-awareness training for their employment specialists. Primary outcomes were measured at baseline, 3-, 6- and 12-months. Multilevel analyses, containing random intercepts of participants nested in organizations, were conducted to analyse the effects of the intervention. Results: Participants (N = 153) were randomized to an experimental (n = 76) or control group (n = 77). At six months, significantly more participants of the experimental group (51%) had found work compared to the control group (26%). At twelve months, significantly more participants of the experimental group (49%) had retained work compared to the control group (23%). Intention-to-treat analyses showed that randomization to the experimental group was associated with finding (OR(95%CI) = 7.78(1.33-45.53), p = 0.02) and retaining (OR(95%CI) = 12.15(2.81-52.63), p < 0.01) work more often at twelve months. Analyses showed that the experimental and control group did not differ in decisional stress. Conclusions: Our stigma awareness intervention was effective for finding and retaining work. As the percentage of people who found and retained work almost doubled, this suggests that on a societal level, a vast number of unemployed people could be reemployed with a relatively simple intervention. Trial registration: The study was retrospectively registered at the Dutch Trial Register (TRN: NL7798, date: 04-06-2019).

Nianogo RA, Benmarhnia T, and O'Neill S. A comparison of quasi-experimental methods with data before and after an intervention: an introduction for epidemiologists and a simulation study. *International Journal of Epidemiology*. 2023; 52(5):1522-1533.

<https://doi.org/10.1093/ije/dyad032>

Abstract: BACKGROUND: As the interest in and use of quasi-experimental methods to evaluate impacts of health policies have dramatically increased in the epidemiological literature, we set out this study to (i) systematically compare several quasi-experimental methods that use data before and after an intervention and contrast their performance within a simulation framework while providing a brief overview of the methods; and (ii) discuss challenges that could arise from using these methods as well as directions for future research in the context of epidemiological applications. METHODS: We considered single-group designs [pre-post and interrupted time series (ITS)] and multiple-group designs [controlled interrupted time series/difference-in-differences, synthetic control methods

(SCMs): traditional SCMs and generalized SCMs]. We assessed performance based on bias and root mean squared error. RESULTS: We identified settings in which each method failed to provide unbiased estimates. We found that, among the methods investigated, when data for multiple time points and for multiple control groups are available (multiple-group designs), data-adaptive methods such as the generalized SCM were generally less biased than other methods evaluated in our study. In addition, when all of the included units have been exposed to treatment (single-group designs) and data for a sufficiently long pre-intervention period are available, then the ITS performs very well, provided the underlying model is correctly specified. CONCLUSIONS: When using a quasi-experimental method using data before and after an intervention, epidemiologists should strive to use, whenever feasible, data-adaptive methods that nest alternative identifying assumptions including relaxing the parallel trend assumption (e.g. generalized SCMs)

Oakman J, Lambert KA, Weale VP, Stuckey R, and Graham M. The effect of preference and actual days spent working from home on stress and musculoskeletal pain in older workers. *International Archives of Occupational & Environmental Health*. 2023; 96(8):1113-1121.

<https://doi.org/10.1007/s00420-023-01992-7> [open access]

Abstract: Objectives: The rapid shift to working from home (WFH) due to the COVID-19 pandemic provided a unique opportunity to examine the relationship between preferred and actual days spent working from home on employees musculoskeletal pain (MSP) and stress in older workers. Methods: This study uses three waves of data from the Employees Working from Home (EWFH) study collected in May 2021 (n = 451), November 2021 (n = 358) and May 2022 (n = 320) during the COVID-19 pandemic. A generalised mixed-effect model was used to model the relationships between preference and actual days spent WFH, stress and MSP. Exploratory mediation analysis was conducted to further explore significant relationships between actual days WFH and outcomes. Results: WFH was associated with increasing stress levels in older participants, when the actual number of days WFH increased (B: 0.051, 95% CI: 0.008, 0.094) and when the number of days WFH exceeded their preferences (B: 0.218, 95% CI: 0.087, 0.349). Actual number of days spent WFH and stress in older employees was mediated through their sense of community (Indirect effect: 0.014, 95% CI: 0.003, 0.03; p = 0.006). The relationship between WFH and MSP was variable. For older employees, WFH more than their preferred number of days was associated with a higher likelihood of reporting MSP (OR: 4.070, 95% CI: 1.204, 13.757). Conclusions: Findings from this study support the need for flexible policies to support WFH which take into account employees preferences. For older workers, a sense of community was found to be important and proactive attempts to restore this will be important for maintain their health and supporting sustainable employment.

Parent-Lamarche A and Hallee Y. Exploring the effects of predominantly female jobs on demands and resources at work and consequently on health and performance in the Province of Québec, Canada. *International Archives of Occupational & Environmental Health*. 2023; 96(9):1267-1281.

<https://doi.org/10.1007/s00420-023-02005-3>

Abstract: PURPOSE: Predominantly female jobs are undervalued because the importance of the skills (e.g., empathy, meticulousness, patience) they require is underestimated. Based on a sample of 1831 workers, this cross-sectional study aimed to determine the effect of predominantly female jobs on demands and resources at work. It also aimed to evaluate if demands and resources at work played a mediating role in the relationship between female jobs and psychological well-being, psychological distress, insomnia, and intention to quit. METHODS: Mediation analysis to test indirect effects was conducted using MPlus software. RESULTS: Predominantly female jobs were directly associated with lower recognition and higher skill utilization and emotional demands. Also, predominantly female jobs were indirectly associated with health and performance via their effects on demands and resources at work. Therefore, these workers appear to face higher demands and lower resources, which in turn is harmful to them. CONCLUSION: Consequently, we might conclude that in addition to the pay inequity that is still present between men and women, those who hold predominantly female jobs (mostly women) are more vulnerable to health and performance problems because of the working conditions (demands and resources) of these jobs. At the societal level, increased knowledge of predominantly female jobs could also be achieved by, for example, popularizing the training and skills they require. Information campaigns (not just to attract people but also to eliminate misunderstanding of these jobs) could be initiated by unions, professional associations, schools, private companies, guidance or employment counselors, government, etc. At the organizational level, action could be taken in terms of human resource management practices, including job evaluation and remuneration

Pendergrast C, Boyle T, Crockett AJ, Eston R, and Johnston KN. Perceptions of lung function surveillance in urban firefighters. *Annals of Work Exposures and Health*. 2023; 67(8):926-937.

<https://doi.org/10.1093/annweh/wxad040> [open access]

Abstract: BACKGROUND AND OBJECTIVE: Workplace health and safety (WHS) is an important responsibility falling on both employers and employees and is most effective when the perspectives of all stakeholders are considered. This study aimed to explore the facilitators and barriers to a voluntary workplace lung function surveillance program from the perspective of urban firefighters and describe their perceptions of its value. METHODS: Using a qualitative, descriptive methodology, firefighters who had participated in a longitudinal lung function surveillance study were invited to participate in semi-structured interviews. Purposeful, maximum variation sampling was used to achieve diversity in those firefighters invited to participate. We used inductive content analysis to identify themes. RESULTS:

Interviews with 15 firefighters identified 3 main themes: (i) practical experience of surveillance (administration, communication, workplace culture change, convenience, acceptability, and appeal); (ii) value of surveillance (lung health efficacy and control, social support, workplace management support/motivations, contribution to global firefighter health); and (iii) contribution of surveillance to health (occupational risk, relevance in the context of total health, workability, and fitness and future value). **CONCLUSION:** Practical and psychosocial facilitators and barriers to providing lung function surveillance in the fire service were identified. In addition to the personal benefits of detecting adverse lung health and allowing for medical intervention, factors known to positively influence firefighter workplace wellbeing, such as providing peace of mind, feedback on good work practices, motivation to utilize control measures, management commitment to health, and providing data to assist with global knowledge were valued aspects of longitudinal lung function surveillance

Socias-Morales C, Konda S, Bell JL, Wurzelbacher SJ, Naber SJ, Scott Earnest G, et al. Construction industry workers' compensation injury claims due to slips, trips, and falls: Ohio, 2010-2017. Journal of Safety Research. 2023; 86:80-91.

<https://doi.org/10.1016/j.jsr.2023.06.010>

Abstract: Problem: Compared to other industries, construction workers have higher risks for serious fall injuries. This study describes the burden and circumstances surrounding injuries related to compensable slip, trip, and fall (STF) claims from private construction industries covered by the Ohio Bureau of Workers' Compensation. Methods: STF injury claims in the Ohio construction industry from 2010-2017 were manually reviewed. Claims were classified as: slips or trips without a fall (STWOF), falls on the same level (FSL), falls to a lower level (FLL), and other. Claim narratives were categorized by work-related risk and contributing factors. Demographic, employer, and injury characteristics were examined by fall type and claim type (medical-only (MO, 0-7 days away from work, DAFW) or lost-time (LT, ≥8 DAFW)). Claim rates per 10,000 estimated full-time equivalent employees (FTEs) were calculated. Results: 9,517 Ohio construction industry STF claims occurred during the 8-year period, with an average annual rate of 75 claims per 10,000 FTEs. The rate of STFs decreased by 37% from 2010 to 2017. About half of the claims were FLL (51%), 29% were FSL, 17% were STWOF, and 3% were "other." Nearly 40% of all STF claims were LT; mostly among males (96%). The top three contributing factors for STWOF and FSL were: slip/trip hazards, floor irregularities, and ice/snow; and ladders, vehicles, and stairs/steps for FLL. FLL injury rates per 10,000 FTE were highest in these industries: Foundation, Structure, and Building Exterior Contractors (52); Building Finishing Contractors (45); and Residential Building Construction (45). The highest rate of FLL LT claims occurred in the smallest firms, and the FLL rate decreased as construction firm size increased. Discussion and Practical Applications: STF rates declined over time, yet remain common, requiring prevention activities. Safety professionals should focus on contributing factors when developing prevention strategies, especially high-risk subsectors and small firms.

Weissman JS, Adler RR, Betancourt J, Tan-McGrory A, Lewis JA, DesRoches CM, et al. How hospitals are addressing the effects of racism: a mixed-methods study of hospital equity officers. Health Affairs. 2023; 42(10):1402-1410.

<https://doi.org/10.1377/hlthaff.2023.00474>

Abstract: Hospital equity officers have become critical leaders in the effort to address the determinants of health care disparities, including structural racism. In this mixed-methods study, we surveyed a national sample of equity officers and interviewed a subset of respondents to provide additional perspective. About one-half of survey respondents reported at least some obstacles to achieving their health equity objectives, including racist beliefs among people working in their hospitals and health care systems, policies that perpetuate racism, and a lack of staff diversity. To address these challenges, some hospitals are collecting information about instances of racism, reviewing clinical algorithms for evidence of bias, or forming community partnerships. However, in interviews, equity officers pointed out that racism is a public health issue that cannot be adequately addressed solely within the health care system. Given the relative newness of most hospital equity officer positions, our research may be viewed as an early glimpse into the challenges and opportunities of this evolving work

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