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***Lyne SA, Yip K, Vasiliou VS, Katz DA, Richards P, Tieu J, Black RJ, Bridgewater S, Palmowski A, Beaton D, et al. Consensus of the definitions of the OMERACT glucocorticoid impact core domain set for people with rheumatic and musculoskeletal diseases. *Seminars in Arthritis and Rheumatism*. 2024; 64:152338.**

<https://doi.org/10.1016/j.semarthrit.2023.152338> [open access]

Abstract: Background: The Outcome Measures in Rheumatology (OMERACT) Glucocorticoid (GC) Impact Working Group has been working to develop a core domain set to measure the impact of GCs on patients living with rheumatic and musculoskeletal diseases. The mandatory domains previously identified for inclusion in all clinical trials measuring the GC effects include infection, bone fragility, mood disturbance, hypertension, diabetes, weight, fatigue, and mortality. Before progressing to instrument selection, the Working Group sought to establish precise definitions of all mandatory domains within the core domain set. Methods: OMERACT methodology was applied with the use of evidence and consensus-based decision making of all stakeholder groups (patient research partners, health care professionals, clinician researchers, industry members and methodologists) to develop detailed definitions for the broad domain, target domain and domain components, taking into consideration sources of variability that could affect measurement of the domain. The working group synthesized prior qualitative studies, quantitative work, and results from Delphi rounds, to develop a rich definition of 'what' is to be measured. Results: Between 2021 and 2023, the OMERACT Working Group on GC Impact conducted virtual meetings to establish domain definitions. First, we mapped each domain onto an OMERACT Core Area. All domains were

primarily represented within the Pathophysiological Manifestations Core Area, except from Fatigue which was primarily Life Impact and Weight which spanned both Core Areas. Sources of variability included cultural factors, age, gender, education level, socioeconomic status, personal experiences, emotional state, and language barriers. The domain definitions will form the foundation for instrument selection and the initial step of domain / concept match and content validity in the OMERACT pillar of 'truth' before moving on to feasibility and discrimination. Conclusion: The OMERACT GC Impact Working Group has developed and agreed upon detailed domain definitions for core domains. Future steps of the working group are to select instruments and develop the core outcome measurement set for clinical trials measuring the impact of GC on patients with rheumatic and musculoskeletal diseases.

Beckman S, Castaneda X, Rivas L, and Schenker MB. Stress, mental health, and coping among workers in the northern California cannabis industry: a qualitative descriptive analysis. *New Solutions*. 2024; 33(4):198-208.

<https://doi.org/10.1177/10482911231212936> [open access]

Abstract: California is home to a multibillion-dollar cannabis (marijuana) industry, but little is known about the occupational health and safety hazards faced by cannabis workers and even less of the stress, mental health, and coping mechanisms among these workers. Previous research has been based on long-term workers at legal businesses, but most California cannabis is produced and sold unlawfully. There are many seasonal workers whose experiences have not been studied. A qualitative study based on focus group discussions and key informant interviews was performed to understand cannabis workers' experiences, knowledge, and perceptions of occupational hazards. Participants reported sources of stress including production pressure and isolation, and mental health outcomes such as depression and mental fatigue. They described primarily maladaptive coping mechanisms. Unique characteristics of the cannabis industry, including criminalization and isolated, remote farms, make interventions challenging. However, policy approaches that involve community organizations could promote worker health

Buisseret F, Draye N, Di Santo C, Pacewicz J, Pannetier J, Dierick F, et al. Occupational risk factors for musculoskeletal disorders among workers in dairy diversification. *Healthcare*. 2024; 12(2):178.

<https://doi.org/10.3390/healthcare12020178>

Abstract: Background: In a changing European agricultural context, diversification of dairy farms is gaining attention. This study seeks to (1) assess musculoskeletal pain prevalence associated with tasks such as butter, yogurt, and cheese production; and (2) analyze associated risks. Methods: Observing 31, mostly female, workers, we utilized the ERGOROM questionnaire, a methodology adapted from the Institut National de Recherche et de Sécurité, and Key Indicator Method forms. Results: Findings revealed that tasks like load carrying (42% of workers), manual work (17%), and awkward postures (14%) resulted in musculoskeletal pain, predominantly in the lower back (65%), neck (39%), and dominant

upper limb areas (shoulder: 61%, elbow: 26%, and wrist: 65%). While psychosocial risks remained low, concerns arose from workload, hygiene standards, and resource unpredictability. Conclusions: As dairy farming evolves from artisanal to semi-industrial, our study emphasizes the importance of ergonomic adaptations to protect farmers' health and prevent musculoskeletal disorders during diversification.

Descatha A, Hamzaoui H, Takala J, and Oppliger A. A systematized overview of published reviews on biological hazards, occupational health, and safety. *Safety and Health at Work*. 2023; 14(4):347-357.

<https://doi.org/10.1016/j.shaw.2023.10.008> [open access]

Abstract: Introduction: The COVID-19 pandemic turned biological hazards in the working environment into a global concern. This systematized review of published reviews aimed to provide a comprehensive overview of the specific jobs and categories of workers exposed to biological hazards with the related prevention. Methods: We extracted reviews published in English and French in PubMed, Embase, and Web of Science. Two authors, working independently, subsequently screened the potentially relevant titles and abstracts recovered (step 1) and then examined relevant full texts (step 2). Disagreements were resolved by consensus. We built tables summarizing populations of exposed workers, types of hazards, types of outcomes (types of health issues, means of prevention), and routes of transmission. Results: Of 1426 studies initially identified, 79 studies by authors from every continent were selected, mostly published after 2010 (n = 63, 79.7%). About half of the reviews dealt with infectious hazards alone (n = 38, 48.1%). The industrial sectors identified involved healthcare alone (n = 16), laboratories (n = 10), agriculture (including the animal, vegetable, and grain sectors, n = 32), waste (n = 10), in addition of 11 studies without specific sectors. The results also highlighted a range of hazards (infectious and non-infectious agents, endotoxins, bioaerosols, organic dust, and emerging agents). Conclusion: This systematized overview allowed to list the populations of workers exposed to biological hazards and underlined how prevention measures in the healthcare and laboratory sectors were usually well defined and controlled, although this was not the case in the agriculture and waste sectors. Further studies are necessary to quantify these risks and implement prevention measures that can be applied in every country.

Fontana D, Ceron R, and d'Errico A. Occupational physical activity, all-cause mortality and incidence of cardiovascular diseases: results from three Italian cohorts. *International Archives of Occupational & Environmental Health*. 2024; 97(1):81-100.

<https://doi.org/10.1007/s00420-023-02028-w> [open access]

Abstract: Purpose: To examine the association of exposure to Occupational Physical Activity (OPA) with all-cause mortality and incidence of cardiovascular diseases (CVD). Methods: The study population was composed of three Italian cohorts: a national cohort of employees participating in the National Health Survey 2005, followed-up until 2014 (ILS 2005), and two urban cohorts of employees resident in Turin at 2001 and 2011 censuses (TLS 2001 and TLS

2011, respectively), both followed-up until 2018. Follow-up was conducted through individual record-linkage with death registries and hospital admissions archives. Exposure to OPA was assigned through an Italian job-exposure matrix (JEM). Relative Risks of both CVD incidence and overall mortality associated with OPA quartiles (IRR) were estimated using Poisson regression models adjusted for socio-demographics and health, and in the national cohort, also for leisure time physical activity, BMI, smoking, diabetes, and hypertension. Results: Compared to the lowest quartile, the highest OPA quartile was associated in both genders with significantly increased mortality in TLS 2001 (IRR = 1.11 among men, IRR = 1.20 among women) and in TLS 2011 (IRR = 1.27 among men and IRR = 1.73 among women), whereas in the ILS 2005 cohort no association was found. Among women, high OPA was also associated with CVD risk in TLS 2001 and 2011 (IRR = 1.39 and IRR = 1.16 for the highest quartile, respectively), while in the ILS cohort in both genders only the third quartile showed a significantly higher risk. Conclusion: Our results indicate that OPA does not have a beneficial effect on CVD and mortality, but rather suggest that it may produce deleterious health effects.

Hansson J, MacEachen E, Landstad BJ, Vinberg S, and Tjulin A. A comparative study of governmental financial support and resilience of self-employed people in Sweden and Canada during the COVID-19 pandemic. *International Journal of Circumpolar Health*. 2024; 83(1):2298015.

<https://doi.org/10.1080/22423982.2023.2298015> [open access]

Abstract: Globally, self-employed people were among the hardest hit by the repercussions of the COVID-19 pandemic and faced hardships such as financial decline, restrictions, and business closures. A plethora of financial support measures were rolled out worldwide to support them, but there is a lack of research looking at the effect of the policy measures on self-employed people. To understand how different governmental financial support measures enhanced the resilience of the self-employed and improved their ability to manage the pandemic, we conducted a mixed-method study using policy analysis and semi-structured interviews. The documents described policies addressing governmental financial support in Sweden and Canada during the pandemic, and the interviews were conducted with Swedish and Canadian self-employed people to explore how they experienced the support measures in relation to their resilience. The key results were that self-employed people in both countries who were unable to telework were less resilient during the pandemic due to financial problems, restrictions, and lockdowns. The interviews revealed that many self-employed people in hard-hit industries were dissatisfied with the support measures and found them to be unfairly distributed. In addition, the self-employed people experiencing difficulties running their businesses reported reduced well-being, negatively affecting their business survival

Kaur H, Wurzelbacher SJ, Bushnell PT, Bertke S, Meyers AR, Grosch JW, et al. Occupational injuries among construction workers by age and related economic loss: findings from Ohio workers' compensation, USA: 2007-2017. *Safety and Health at Work*. 2023; 14(4):406-414.

<https://doi.org/10.1016/j.shaw.2023.10.003> [open access]

Abstract: Background: This study examined age-group differences in the rate, severity, and cost of injuries among construction workers to support evidence-based worker safety and health interventions in the construction industry. Methods: Ohio workers' compensation claims for construction workers were used to estimate claim rates and costs by age group. We analyzed claims data auto-coded into five event/exposure categories: transportation incidents; slips, trips, and falls (STFs); exposure to harmful substances and environments; contact with objects and equipment (COB); overexertion and bodily reaction. American Community Survey data were used to determine the percentage of workers in each age group. Results: From 2007-2017, among 72,416 accepted injury claims for ~166,000 construction full-time equivalent (FTE) per year, nearly half were caused by COB, followed by STFs (20%) and overexertion (20%). Claim rates related to COB and exposure to harmful substances and environments were highest among those 18-24 years old, with claim rates of 313.5 and 25.9 per 10,000 FTE, respectively. STFs increased with age, with the highest claim rates for those 55-64 years old (94.2 claims per 10,000 FTE). Overexertion claim rates increased and then declined with age, with the highest claim rate for those 35-44 years old (87.3 per 10,000 FTE). While younger workers had higher injury rates, older workers had higher proportions of lost-time claims and higher costs per claim. The total cost per FTE was highest for those 45-54 years old (\$1,122 per FTE). Conclusion: The variation in rates of injury types by age suggests that age-specific prevention strategies may be useful.

Liu S, Bourgeois FT, Narang C, and Dunn AG. A comparison of machine learning methods to find clinical trials for inclusion in new systematic reviews from their PROSPERO registrations prior to searching and screening. *Research Synthesis Methods*. 2024; 15(1):73-85.

<https://doi.org/10.1002/jrsm.1672>

Abstract: Searching for trials is a key task in systematic reviews and a focus of automation. Previous approaches required knowing examples of relevant trials in advance, and most methods are focused on published trial articles. To complement existing tools, we compared methods for finding relevant trial registrations given a International Prospective Register of Systematic Reviews (PROSPERO) entry and where no relevant trials have been screened for inclusion in advance. We compared SciBERT-based (extension of Bidirectional Encoder Representations from Transformers) PICO extraction, MetaMap, and term-based representations using an imperfect dataset mined from 3632 PROSPERO entries connected to a subset of 65,662 trial registrations and 65,834 trial articles known to be included in systematic reviews. Performance was measured by the median rank and recall by rank of trials that were eventually included in the published systematic reviews. When ranking trial registrations relative to PROSPERO entries, 296 trial registrations needed to be screened to

identify half of the relevant trials, and the best performing approach used a basic term-based representation. When ranking trial articles relative to PROSPERO entries, 162 trial articles needed to be screened to identify half of the relevant trials, and the best-performing approach used a term-based representation. The results show that MetaMap and term-based representations outperformed approaches that included PICO extraction for this use case. The results suggest that when starting with a PROSPERO entry and where no trials have been screened for inclusion, automated methods can reduce workload, but additional processes are still needed to efficiently identify trial registrations or trial articles that meet the inclusion criteria of a systematic review

Marcelloni AM, Pignini D, Chiominto A, Gioffre A, and Paba E. Exposure to airborne mycotoxins: the riskiest working environments and tasks. *Annals of Work Exposures and Health*. 2024; 68(1):19-35.

<https://doi.org/10.1093/annweh/wxad070> [open access]

Abstract: OBJECTIVES: There is growing interest in the role of airborne mycotoxins in occupational environments, however, their impact on human health still remains poorly investigated. This review aims to provide a comprehensive analysis of the existing literature on the occurrence of inhalable mycotoxins in working environments to investigate which sectors and tasks are at greater risk of exposure. METHODS: We have performed a systematic search in the PubMed, Scopus and Web of Science databases from 2010 to date, without limitation of geographic location. RESULTS: Database searches yielded 350 articles. After the removal of duplicates and applying our inclusion and exclusion criteria, 31 papers remained. Results show that the most exposed workers are those engaged in activities related to animal care and management and, in particular, in feeding tasks, while harvester cleaning seems to be the activity with the highest levels of exposure in agriculture. In healthcare settings mycotoxin concentrations are low but HVAC systems can be a source of contamination and this reinforces the relevance of further studies in this sector. The most common scenario is the exposure to multiple mycotoxins with variable concentrations depending on the working environment, the products handled or the tasks performed by workers. Some authors emphasize the importance of multi-approach sampling and analysis protocols to achieve an accurate and more realistic risk characterization. CONCLUSIONS: Results brought forward by this review can be utilized by health and safety professionals to recognize activities in which workers may be potentially exposed to airborne mycotoxins and thus undertake suitable preventive and protective measures

Nguyen AT, Aris IM, Snyder BD, Harris MB, Kang JD, Murray M, et al. Musculoskeletal health: an ecological study assessing disease burden and research funding. *Lancet Regional Health. Americas*. 2024; 29:100661.

<https://doi.org/10.1016/j.lana.2023.100661> [open access]

Abstract: BACKGROUND: Exacerbated by an aging population, musculoskeletal diseases are a chronic and growing problem in the United States that impose significant health and

economic burdens. The objective of this study was to analyze the correlation between the burden of diseases and the federal funds assigned to health-related research through the National Institutes of Health (NIH). **METHODS:** An ecological study design was used to examine the relationship between NIH research funding and disease burden for 60 disease categories. We used the Global Burden of Disease (GBD) Study 2019 to measure disease burden and the NIH Research, Condition, and Disease Categories (RCDC) data to identify 60 disease categories aligned with available GBD data. NIH funding data was obtained from the RCDC system and the NIH Office of Budget. Using linear regression models, we observed that musculoskeletal diseases were among the most underfunded (i.e., negative residuals from the model) with respect to disease burden. **FINDINGS:** Musculoskeletal diseases were underfunded, with neck pain being the most underfunded at only 0.83% of expected funding. Low back pain, osteoarthritis, and rheumatoid arthritis were also underfunded at 13.88%, 35.08%, and 66.26%, respectively. Musculoskeletal diseases were the leading cause of years lived with disability and the third leading cause in terms of prevalence and disability-adjusted life years. Despite the increasing burden of these diseases, the allocation of NIH funding to the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) has remained low compared to other institutes. **INTERPRETATION:** Despite the increasing health burden and economic cost of \$980 billion annually, the allocation of NIH funding to the NIAMS has remained low compared to other institutes. These findings suggest that the NIH may need to reassess its allocation of research funding to align with the current health challenges of our country. Furthermore, these clinically relevant observations highlight the need to increase research funding for musculoskeletal diseases and improve their prevention, diagnosis, and treatment. **FUNDING:** No funding

Raittila S, Kouvonen A, Koskinen A, and Vaananen A. Occupational class differences in male suicide risk in Finland from 1970 to 2019. *European Journal of Public Health*. 2023; 33(6):1014-1019.

<https://doi.org/10.1093/eurpub/ckad176> [open access]

Abstract: Background: In the last few decades, suicide rates have decreased in most European countries. However, periodic changes in risk by occupational class have not been studied as much in detail. Methods: Representative cohorts of Finnish working-age men were followed for nine years on suicide mortality starting from five different census years (1970, 1980, 1990, 2000, 2010). Each cohort included between 300 970 and 332 318 men. Cox regression modelling was used to estimate hazard ratios by census year, occupational class and their interactions. Further models adjusted for age and its interactions with census year and occupational class. Results: The risk of male suicide has more than halved between 1991 and 2019. The relative hazard ratio of suicide in manual workers compared to managers and professionals was around 1.6 to 1.8 times higher. The period when the suicide risk started to decline differed by occupational class: a significant decrease compared to 1970s' levels was seen for managers and professionals already in the 1990s and for lower non-manual employees around 10 years later (in the 2000s). Manual workers only reached the 1970s

suicide risk of managers and professionals in the 2000s and 2010s. Conclusion: A delayed reduction of suicide rates among lower occupational classes suggests that the impact of social changes can occur at different speed in different population groups.

Schlunssen V and Jones RM. Gender aspects in occupational exposure and health studies. *Annals of Work Exposures and Health*. 2023; 67(9):1023-1026.

<https://doi.org/10.1093/annweh/wxad063>

Abstract: While sex is a biological attribute associated with physical and physiological features, gender refers to socially constructed roles, behaviors, expressions, and identities. On the biological side, males and females differ concerning hormonal and anatomical differences, and it is therefore plausible occupational exposure may act differently on males and females. In contrast, gender may influence the work organization, work environment conditions and exposures, and employment conditions, leading people of different genders to perform different jobs or job tasks, be exposed to different stressors, and work under different employment terms. Traditionally, occupational exposures have been assessed without considering how exposures may differ by sex or gender. Early research focused on occupations that primarily employed men. However, women have entered occupations historically dominated by men, leading to emerging exploration of gender differences in exposure. Some women-dominated occupations have become the focus of intensive research activity. In the *Annals*, the number of articles including sex and gender issues has increased dramatically over time, with only two published prior to 1980, and 70 in the 2010s, and with a special issue dedicated to Gender, Work, and Health in 2018 where the editors highlighted a need to improve assessment of gender and sex identities to allow for more nuanced knowledge to elucidate the role of work organization and contextual factors about gender, work exposures, and health. Females, on average, have different body dimensions than males, which affects how well workplaces and personal protective equipment (PPE) fit females, and there remains a need for further improvements to ensure that females are protected equally well. On the other hand, females tend to comply more frequently with PPE requirements than men highlighting the need for gender-specific initiatives in order to increase PPE performance and compliance. In conclusion, there is still work to do in order to fill in the existing knowledge gap with regard to sex, gender, and work, but there are promising initiatives and the field is progressing

Schuster RC, Wachter K, McRae K, McDaniel A, Davis OI, Nizigiyimana J, et al. "If you don't have the heart to help, you cannot do this job": the multidimensional wellbeing of community health workers serving refugees during the COVID-19 pandemic. *Qualitative Health Research*. 2024; 34(3):183-194.

<https://doi.org/10.1177/10497323231209836>

Abstract: Community health workers are members of two groups whose short- and long-term health has been uniquely shaped by the COVID-19 pandemic: health workers and the oft-marginalized populations that they serve. Yet, their wellbeing, particularly of those serving

resettled refugees, before and during the pandemic has been largely overlooked. Drawing from a holistic conceptualization of wellness, this study examined the effects of the COVID-19 pandemic on a group of cultural health navigators (CHNs), who serve resettled refugees. We conducted semi-structured individual interviews with CHNs at a southwestern U.S. hospital system between July and August 2020, a critical time in the pandemic. Our analysis produced four themes that encapsulate the effects of the pandemic on CHN wellbeing: (1) "You fear for your life": Chronic risk of COVID-19 exposure takes a toll on physical, emotional, and environmental wellbeing; (2) "It is stressful because it is completely new": Uncertainty diminishes occupational, financial, and emotional wellbeing; (3) "If you don't have the heart to help, you cannot do this job": CHNs remain committed while facing challenges to their occupational wellbeing on multiple fronts; and (4) "Now, you cannot release your stress": Loss of and shifts in outlets integral to social and spiritual wellbeing. The findings deepen empirical understanding of how the pandemic affected the holistic wellbeing of CHNs, as they continued to serve their communities in a time of crisis. We discuss the implications for addressing the multidimensionality of community health worker wellbeing in research, policy, and practice

de Sousa CC, Araujo TM, and Maturino MM. Occupational stressors and mental illness in healthcare work: an intersection between gender, race, and class. *American Journal of Industrial Medicine*. 2024; 67(2):143-153.

<https://doi.org/10.1002/ajim.23558>

Abstract: BACKGROUND: Previous studies have supported the relevance of using broad and complex approaches, including multiple explanatory categories, to analyze mental disorders in the working population. This study aimed to assess the direct and indirect effects of gender, race, social class, and occupational stressors on mental health. METHODS: A cross-sectional study used a random sample of 3343 health workers. The effort-reward imbalance (ERI) scale measured occupational stressors. The World Health Organization Self-Reporting Questionnaire (SRQ-20) evaluated common mental disorders (CMDs) as outcomes. The role of gender, race/color, and class determinants (level of schooling and income) in the relationship between occupational stressors and CMD was assessed. Structural equation modeling was used to determine associations and effects. RESULTS: Occupational stressors were directly associated with CMD and mediated the relationship between income and CMD. Gender was directly associated with occupational stressors, income, and domestic overload. Race was associated with education and with CMD through indirect paths mediated by class indicators. Class indicators contributed to increasing exposure to occupational stressors and the occurrence of CMD. CONCLUSION: The results highlight the relevance of gender, race/color, and class in understanding the unequal distribution of work stressors and mental illness in health workers

Wah W, Berecki-Gisolf J, and Walker-Bone K. Epidemiology of work-related fall injuries resulting in hospitalisation: individual and work risk factors and severity. *Occupational and Environmental Medicine*. 2024; [epub ahead of print].

<https://doi.org/10.1136/oemed-2023-109079>

Abstract: OBJECTIVES: Injuries at work are common and costly for individuals and employers. A common mechanism of workplace injury is through falls, but there have been few epidemiological studies of risk factors. This study aimed to identify patient, work and injury factors associated with injuries causing hospitalisation after falling at work in Victoria, Australia. METHODS: Data came from work-related hospitalised injury admissions, identified by International Classification of Diseases and Related Health Problems, Tenth Revision Australian Modification codes and compensation status, from Victorian Admitted Episodes Dataset between 1 July 2017 and 30 June 2022. Multivariate logistic regression analyses were conducted to identify factors associated with same-level falls and falls from height. RESULTS: This study included 42 176 work-related injury admissions: 8669 (20.6%) fall injuries and 33 507 (79.4%) other injuries. Rates of high falls were more common in males than females (0.44 (95% CI: 0.43, 0.46) vs 0.08 (0.08, 0.09) admissions per 1000 employed), while same-level falls were more common in females than males (0.21 (0.20, 0.22) vs 0.18 (0.17, 0.18)). Patients with same-level fall injuries, relative to all other work injuries, were more likely to be older women, and have at least one chronic condition; falls from height were associated with male sex and construction work and more likely to result in intracranial, internal organ injuries and fractures and longer hospital stay than non-fall injuries. CONCLUSION: Work-related falls were common and relatively severe. Same-level falls are relatively likely to occur in older women, the fastest-growing workplace demographic, and therefore the incidence is expected to increase. Comorbidities are an important fall risk factor. Employers could consider industry-relevant high and same-level fall prevention strategies for reducing the workplace injury burden

Williams M, Wang S, and Koumenta M. Ethnicity disparities in job control in the United Kingdom. *Industrial Relations Journal*. 2024; 55(1):33-53.

<https://doi.org/10.1111/irj.12414> [open access]

Abstract: Despite widely-reported ethnicity disparities in pay and occupational attainment, little is known about how different ethnic groups fare in job control—a crucial component of job quality with significant implications for well-being and health. Drawing on two large-scale representative datasets in the United Kingdom (1992–2022), we find that workers from all Black, Asian, and Minority Ethnic (BAME) groups conditionally report significantly lower job control than their White British counterparts, although heterogeneity exists depending on the BAME group in question. Ethnicity penalties are also most pronounced for foreign-born workers. Despite a slow trend towards convergence, ethnicity disparities have remained significant over the last three decades. We further show that disparities are largely unexplained by compositional factors such as pay and occupation, demonstrating ethnicity penalties in job control. By linking ethnicity to job control, this study contributes to the

growing research on BAME workers in the labour market, as well as the literatures on job quality and multisegmented labour markets.

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