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

**\*Gazel U, Barnes E, Jones B, Terrett A, Voshaar M, Hoogland W, March L, Beaton D, et al. Towards the development of a definition of independence for individuals diagnosed with rheumatoid arthritis in remission: an 'OMERACT remission in rheumatoid arthritis patient perspective' special interest group report. *Seminars in Arthritis and Rheumatism*. 2026; 77:152948.**

<https://doi.org/10.1016/j.semarthrit.2026.152948>

Abstract: AIMS: To discuss and refine the preliminary definition of "independence" from the patient's perspective in RA remission. METHODS: Data from a scoping review and international focus groups were presented at the OMERACT Remission in RA Patient Perspective Special Interest Group (SIG) meeting in February 2024. The SIG included 40 delegates from diverse geographic regions who discussed the findings and potential refinements of the preliminary definition of independence from the patient's perspective in the context of RA remission. RESULTS: Drawing together findings from the scoping review and focus groups, the following preliminary definition of "independence" was presented for discussion: "Being able to do what you want, when you want, in the way you want to do it." Delegates emphasized the importance of capturing all aspects of independence, adjustments to the proposed preliminary definition were suggested, and some delegates requested more specificity before taking the preliminary definition forward for use in the next research stage. Issues were raised on whether cultural variation on concepts of independence was adequately captured in the qualitative work so far. For example, some cultures may value receiving support from others as a reaffirmation of social belonging and interdependence, rather than a contradiction of independence. This will need addressing in our future work to ensure cross-cultural differences in definitions of independence are not missed. The majority of delegates voted in favour of continuing the work toward defining targeted sub-domains, which will allow the group to develop an instrument to assess independence in RA remission from the patient's

perspective. CONCLUSION: Consensus was reached in favour of continuing the work towards defining targeted sub-domains, which will allow the group to develop an instrument to assess independence in RA remission from the patient's perspective. However, suggestions were made to refine and improve the current definition. The next steps include refining the definition, followed by identifying and/or developing instruments to create an outcome measure for independence in RA remission

**\*Kucera A, Carnide N, Marquette A, and Hammond D. Self-reported cannabis use and intoxication at work: prevalence across industries and occupations and association with workplace injuries in the United States (US). American Journal of Industrial Medicine. 2026; [epub ahead of print].**

<https://doi.org/10.1002/ajim.70075>

Abstract: Objective: To examine the prevalence of workplace cannabis use across industry and occupation categories, and potential associations between workplace use, intoxication, and work-related injuries. Method: National survey data from Wave 7 (2024) of the International Cannabis Policy Study (ICPS) were used, including 30,123 workers aged 16-65 years from the United States. Separate logistic regression models examined past 30-day cannabis use at work across standard industry and occupation categories, and the association between past 30-day self-reported use, intoxication at work, and work-related injuries in the past 12 months. Results: Approximately 1 in 10 workers reported using cannabis at work/within 2 h before work, of whom 2 in 5 reported feeling high at work "often" or "every time." The prevalence of workplace consumption was greatest among those working in the "Agriculture, forestry, fishing and hunting" (24.9%), "Construction" (14.4%), and "Accommodation and food services" (12.6%) industries. Similar results were observed by occupation. The odds of experiencing a work-related injury in the past 12 months were greater among workplace cannabis consumers who reported feeling high "sometimes," "often," or "every time" versus those who reported no past-year cannabis use (29.6% vs. 11.2%, adjusted OR = 1.66,  $p < 0.001$ ). Conclusions: Workplace cannabis use is common in some occupations and industries, including those with substantial occupational risks. Self-reported cannabis intoxication at work was associated with increased odds of experiencing a work-related injury. Workplaces could consider developing policies that minimize cannabis intoxication at work, specifically, rather than all cannabis use.

**\*Nowrouzi-Kia B, Chattu VK, Sunil TS, Carnide N, Thomson H, Premji R, et al. Heat exposure and health outcomes in construction workers: a systematic review and meta-analysis. Environmental Health Insights. 2026; 20:11786302261426720.**

<https://doi.org/10.1177/11786302261426720> [open access]

Abstract: Climate change is becoming a recognized health concern in the scientific community, as heat exposure poses escalating health risks to outdoor occupational groups, particularly construction workers. Heat stress and climate change may lead to adverse physical health outcomes and reduced workability among construction workers. This systematic review and meta-analysis aimed to (1) examine the prevalence of physical health outcomes of construction workers in relation to heat exposure and (2) analyze the association between physical health outcomes of heat exposure and work performance by sex and age. Following the PRISMA guidelines and using a PICO framework, we conducted a comprehensive search across APA PsycINFO, MEDLINE, Embase, CINAHL, and Web of Science. Seventeen studies met our inclusion criteria. Outcomes were grouped into dehydration, heat-related illnesses (HRI), kidney function impairments, and heat-related deaths. Random-effects models were used for the meta-analysis, and subgroup analyses were performed using demographic variables. Pooled meta-

analysis and heterogeneity statistics are only provided for the HRI outcome, as all other outcomes are only represented by single eligible studies. Dehydration demonstrated the highest single-study prevalence (0.97, 95% CI: 0.88, 1.00), contrasting with HRI pooled prevalence (0.40, 95% CI: 0.24, 0.58) and kidney function impairment single-study prevalence (0.17, 95% CI: 0.05, 0.39), which showed much lower estimates. High heterogeneity was present in the HRI symptoms category ( $I^2 > 95\%$ ). Meta-regression revealed that males reported lower heat disorder prevalences in studies with both sexes ( $\beta = -2.09$ ,  $P = .049$ ). Heat exposure significantly impairs the physical health of construction workers, particularly through dehydration and heat-related illnesses. Sex-responsive, psychological, and intervention-based studies are essential for protecting this vulnerable occupational group from accelerating climate change.

**Adhikari B, Hong A, Johnson E, Fisher P, and Frank LD. Occupation type, home and work environments, and physical activity and sedentary behaviour. *Journal of Transport & Health*. 2026; 48:102269.**

<https://doi.org/10.1016/j.jth.2026.102269>

**Campoy-Vila M, Espelt A, Borao O, Artazcoz L, Feliu-Soler A, and Jubany J. Social and occupational aspects related to persistent low back pain in women geriatric nursing assistants. *International Journal of Occupational Safety & Ergonomics*. 2026; 32(1):179-187.**

<https://doi.org/10.1080/10803548.2025.2512658>

**Abstract:** OBJECTIVES: Geriatric nursing assistants often experience low back pain (LBP), which may become persistent and impair daily and occupational functioning. Social determinants of health play a key role in its development. This study aimed to estimate the prevalence of persistent LBP and its associated social and working conditions among women working as geriatric nursing assistants in Spain. METHODS: The cross-sectional study included women working as geriatric nursing assistants in Spain. A total of 480 participants were recruited through snowball sampling and completed self-reported questionnaires. The outcome variable was persistent LBP, and predictor variables included sociodemographic factors and work-related conditions. Prevalence of persistent LBP and Poisson regression models were calculated. RESULTS: The prevalence of persistent LBP was 44.2% (95% confidence interval [39.77, 48.65]), and was associated with older age, low monthly income, living in a region with a low Human Development Index, holding a permanent contract, limited work experience, absence of multiple jobs, high physical demands at work, time pressure and work-home conflict. CONCLUSION: Nearly half of the geriatric nursing assistants reported persistent LBP. The condition was linked to work conditions and socioeconomic factors, highlighting the need for interventions addressing both physical and psychosocial stressors

**Chaudhry ZS and Choudhury A. US occupational medicine clinicians' perceptions and practices with respect to artificial intelligence large language models: a mixed-methods investigation. *Journal of Occupational & Environmental Medicine*. 2026; 68(3):189-197.**

<https://doi.org/10.1097/JOM.0000000000003609>

**Abstract:** OBJECTIVE: The aim of the study was to explore US occupational and environmental medicine (OEM) clinicians' perceptions, knowledge, practices, and interest surrounding large language models (LLMs). METHODS: An online survey and semistructured interviews were conducted between April 2024 and July 2025 with a sample of US OEM clinicians. Quantitative and qualitative data analyses were performed. RESULTS: There were 60 survey respondents and 10 interviewees. Most respondents

reported that they do not currently use LLMs in their clinical practice (70.0%, n = 42). Composite trust scores significantly predicted intention to use LLMs (  $B = 0.57$ ,  $P = 0.019$ , 95% CI [0.10, 1.03]). The interview data converged with and complemented the survey findings. **CONCLUSIONS:** Although most OEM clinicians in this sample reported not using LLMs in clinical practice, the majority expressed an interest, with trust being a significant predictor of intention to use LLMs

**Gray WB and Mendeloff J. Do variations in state consultation programs affect construction fatality rates? *American Journal of Industrial Medicine*. 2026; 69(3):163-176.**

<https://doi.org/10.1002/ajim.70050> [open access]

**Abstract:** **BACKGROUND:** Along with its enforcement program, the Occupational Safety and Health Administration (OSHA) has a voluntary consultation program that responds to requests from firms to identify hazards at their workplaces. We studied the effects of this program on fatal work injuries in the construction industry. **METHODS:** We first examined differences across states in their consultation programs using data from 2016 through 2022, during which time 47,418 consultation visits were conducted in construction. These included differences in frequency of consultation visits at construction firms, the average number of hazards identified per visit, and the scope of those visits. We then used regression analysis to identify the connection between those characteristics and the state's construction fatality rate. We distinguished between the 21 State Plan states which ran their own OSHA enforcement programs and the 29 states where Federal OSHA did the enforcement. **RESULTS:** State Plan states generally had higher rates of consultation visits that covered more of the worksite and identified higher rates of serious hazards per 1000 workers than Federal states. In regression analyses, State Plan consultation rates were negatively and significantly related to their construction fatality rates. Interactions of consultation rates and average visit hazards or visit scope showed a significant negative relationship with construction fatality rates. The relationship for Federal states was similar though not always significant. **CONCLUSIONS:** More frequent consultation visits to a state's construction firms and more hazards identified or greater visit scope were associated with lower construction fatality rates

**Haas EJ, Robinson T, Attwood WR, Ringer SJ, and Austin ET. Considering human factors during firefighter fatality investigations: insights from public feedback. *Journal of Safety Research*. 2026; 96:88-98.**

<https://doi.org/10.1016/j.jsr.2025.12.002>

**Abstract:** **INTRODUCTION:** The National Institute for Occupational Safety and Health (NIOSH) Fire Fighter Fatality Investigation and Prevention Program investigates firefighter line-of-duty-deaths (LODD) and serious injuries to help prevent incidents. In addition to physical hazards, human factors like situational awareness, mental workload, fatigue, culture, and decision making can be considered to identify and mitigate risks. **METHOD:** NIOSH sought public input on assessing human factors during investigations through a Federal Register Notice. Posted in May 2024, 33 responses were received from fire departments, academic institutions, and association representatives across 18 U.S. states and several Canadian provinces. Three researchers and two firefighters examined the comments using thematic qualitative analysis methods to identify human factors considerations during investigations. **RESULTS:** Comments indicated general support for systematically assessing human factors elements and provided insight into what some of those elements may be. Five overarching themes emerged across the comments: Department Culture, Total Worker Health®, Operational Risk Management & Decision Making, Team Dynamics, and Training and Education. Within these themes, commenters highlighted the

importance of considering individual human factors elements such as fatigue, situational awareness, and mental health as well as organizational human factors elements such as leadership commitment and communication, operational risk assessment, and training needs. **CONCLUSIONS AND PRACTICAL APPLICATIONS:** Future research may consider ways to empirically and routinely assess human factors during incident investigations and possible tools, frameworks, and training that may be necessary to support these efforts in the field

**Kotynkova Krotka V and Porkertova H. Disability, productivism and temporalities of labour: rethinking work through crip time . Scandinavian Journal of Disability Research. 2026; 28(1):87-100.**

<https://doi.org/10.16993/sjdr.1317> [open access]

Abstract: Situated in a post-socialist context shaped by neoliberal restructuring and intensified temporal discipline, this article examines how crip time (Kafer 2013) challenges dominant temporal norms. These norms—conceptualised as chrononormativity (Freeman 2010)—underpin productivism that reduces people to resources for output (Mladenov 2017). Drawing on semi-structured interviews with disabled people in Czechia, the article argues that temporality can be reimagined in more relational, embodied and care-oriented ways (cf. Kafer 2013; Sharma 2014), enabling more inclusive and sustainable forms of work and life for diverse body-minds (Price 2011; 2021). The analysis develops this argument in three steps: it examines situations where the system temporarily accommodates individual needs without resulting in structural change, explores the emancipatory potential of crip time to reimagine futurity, and shows how the collective nature of crip time can challenge dominant ideals of productivism and labour.

**Lai Y, Chen S, Li G, Wang Z, and Wang B. Double-edged effects of work task stress on safety performance: a cognitive appraisal perspective. Safety Science. 2026; 197:107120.**

<https://doi.org/10.1016/j.ssci.2026.107120>

**Maurya T, Kalita JD, and Kar S. Assessing safety scores of multimodal activities to integrate safety into construction planning . Journal of Construction Engineering and Management. 2026; 152(5):04026039.**

<https://doi.org/10.1061/JCEMD4.COENG-17004>

**Nassar C, Boulanger M, Baldi I, Tual S, Bara S, Lebailly P, et al. Kidney cancer and occupational agricultural exposures in the AGRiculture and CANcer cohort. International Journal of Epidemiology. 2026; 55(1):dyag001.**

<https://doi.org/10.1093/ije/dyag001>

Abstract: Introduction: The relationship between kidney cancer and occupational exposures, especially agricultural, has been understudied. This study aimed to assess the risk of kidney cancer with a wide range of agricultural activities and tasks. Methods: Participants from the French AGRiculture and CANcer cohort (~180 000) were included. Incident kidney cancers (n = 654) were identified through cancer registries from 2005-2007 until 31 December 2017. Occupational exposures and potential confounders were identified by using enrollment questionnaires covering 5 livestock types, 13 crops, and related tasks. Cox models with age as the timescale were applied separately for men and women, using non-exposed farmers as the reference to account for genetic and agricultural exposure differences, along with exposure-response and sensitivity analyses. Results: In men, positive associations were found between kidney cancer risk and working with rapeseed [hazard ratio (HR) = 1.26 (0.95-1.68)] and sunflowers [HR = 1.23 (0.89-1.68)], and tasks related to other crops such as corn, wheat/barley, beet,

and tobacco. In women, an increased risk was noted for winegrowers [HR = 1.56 (1.12-2.18)]. Pesticide use (on fields and/or seeds) was associated, for both sexes, with these crops, showing exposure-response relationships with crop area and work duration. Conversely, some inverse associations were observed for livestock breeding, notably cattle in men and poultry in women. Conclusion: We reported positive associations between kidney cancer risk and specific field crops, tobacco, and vineyards, with gender differences in pesticide-related tasks. Further studies are needed to understand these differences and identify substances linked to kidney cancer.

**Norgaard B, Lie KE, and Lund H. Predictors of citation rates and the problem of citation bias: a scoping review. *Journal of Clinical Epidemiology*. 2026; 190:112057.**

<https://doi.org/10.1016/j.jclinepi.2025.112057>

Abstract: OBJECTIVES: To systematically map the factors associated with citation rates, to categorize the types of studies evaluating these factors, and to obtain an overall status of citation bias in scientific health literature. STUDY DESIGN AND SETTING: A scoping review was reported following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses scoping review extension checklist. Four electronic databases were searched, and the reference-lists of all included articles were screened. Empirical meta-research studies reporting any source of predictors of citation rates and/or citation bias within health care were included. Data are presented by descriptive statistics such as frequencies, portions, and percentages. RESULTS: A total of 165 studies were included. Fifty-four distinct factors of citation rates were evaluated in 786 quantitative analyses. Regardless of using the same basic methodological approach to calculate citation rate, 78 studies (48%) aimed to examine citation bias, whereas 79 studies (48%) aimed to optimize article characteristics to enhance authors' own citation rates. The remaining seven studies (4%) analyzed infrastructural characteristics at publication level to make all studies more accessible. CONCLUSION: Seventy-nine of the 165 included studies (48%) explicitly recommended modifying paper characteristics—such as title length or author count—to boost citations rather than prioritizing scientific contribution. Such recommendations may conflict with principles of scientific integrity, which emphasize relevance and methodological rigor over strategic citation practices. Given the high proportion of analyses identifying a significant increase in citation rates, publication bias cannot be ruled out. PLAIN LANGUAGE SUMMARY: Why was the study done? Within scientific research, it is important to cite previous research. This is done for specific reasons, including crediting earlier authors and providing a credible and trustworthy background for conducting the study. However, findings suggest that citations are not always chosen for their intended purpose. This is known as citation bias. What did the researchers do? The researchers searched for all existing studies evaluating predictors of citation rate, ie, how often is a specific study referred to by other researchers. They systematically mapped these studies to find out both the level of citation bias and the types of citation bias present in scientific health literature. To find these studies, the researchers searched four electronic databases and screened the reference lists of all included studies to be sure to include as many studies as possible. What did the researchers find? The researchers found a total of 165 studies that evaluated predictors of citation rate in no less than 786 analyses. However, the researchers found that the studies differed in the way they evaluated predictors of citation rate, as 78 studies (48%) evaluated citation bias, meaning if researchers referred to earlier studies in a nonscientific way, whereas 79 studies (48%) evaluated predictors of citation rate to identify ways to increase authors' own citation rates. The remaining seven studies (4%) wanted to find characteristics that could make the studies more accessible. What do the findings mean? The study identified a very large number of predictors of

citation rate being evaluated and even indicating risk of citation bias. Furthermore, the study found that 48% of the papers recommended changing things like title length or number of authors to get more citations, instead of focusing on the actual scientific contribution. These recommendations might, however, be in conflict with scientific principles and honesty

**Persson ML, Willert MV, Kyndi M, and Dalgaard VL. Work participation and disability pension after work-related PTSD: trajectories and impact of occupation. Occupational and Environmental Medicine. 2026; 82(12):589-596.**

<https://doi.org/10.1136/oemed-2025-110412>

**Abstract:** Objectives: This study examines work participation (WP) and disability pension (DP) among patients diagnosed with post-traumatic stress disorder (PTSD) at Danish Departments of Occupational Medicine. The aim was to identify WP trajectories and determine whether occupation is associated with poor labour market attachment. Methods: A nationwide longitudinal study was conducted on register data from patients diagnosed with PTSD at Departments of Occupational Medicine in Denmark from 2000 to 2015. WP was operationalised as a score (WPS, Work Participation Score) derived from the proportion of weeks in employment relative to the possible number of work weeks per year. WPS is dichotomised as low (=75%) or high (>75%). Group-based trajectory models were used to identify patterns of WP. Logistic regression was used to investigate the effect of occupation on WPS and DP. Results: Among 1187 patients, 58% had low WPS and 43% entered DP after 3 years. Three trajectories were identified from prediagnosis to postdiagnosis: sustained low WPS (12.5%), shift from high to low WPS (50.7%) and near-full recovery (36.8%). Patients in the occupations 'plant and machine operator and assemblers' (OR=3.25; 95% CI: 1.28 to 8.23) and 'prison guards' (OR=2.50; 95% CI: 1.23 to 5.08) had higher odds of low WPS, but only 'prison guards' (OR=1.84; 95% CI: 0.97 to 3.49) had potentially higher odds of receiving DP after 3 years. Conclusions: Work-related PTSD is associated with a high risk of low WPS after 3 years. Specific occupations are associated with poorer labour market attachment, underscoring the need for prevention and recovery interventions. Trial registration number: NCT04459793.

**Sartore A, Stoppa G, Minelli G, Fazzo L, Manno V, Mensi C, et al. Spatio-temporal trends in pleural mesothelioma mortality in Italy: a 40-year analysis by calendar period and birth cohort. International Journal of Epidemiology. 2026; 55(1):dyaf227.**

<https://doi.org/10.1093/ije/dyaf227> [open access]

**Abstract:** BACKGROUND: Italy, among the leading asbestos producers and users until the national ban in 1992, continues to register a high burden of asbestos-related diseases, mainly due to their long latency and delays in remediation. This study investigates the spatio-temporal evolution of pleural mesothelioma (PM) mortality over the past 40 years. MATERIALS AND METHODS: Malignant pleural tumours and PM deaths (1980-2020) were extracted from the national death registry, adjusted for misclassification of pleural tumours, and analysed by region and birth cohort (1905-1984). The analyses by calendar period and cohort, stratified by sex assigned at birth, were followed by a space-cohort Bayesian Hierarchical Model with structured random effects for time (cohorts up to 1960-1969) and space (administrative regions). RESULTS: In Italy, from 1980 to 2020, 35 134 people died from PM (24 380 males and 10 754 females). A mortality decrease was observed in males after 2010-14 and in females after 2000-4. Mortality steadily declined in both males and females across cohorts after 1935-44. The space-time analysis enabled the clear identification of the Italian regions most affected by PM.

**CONCLUSION:** Italy's trend mirrors those of other Western countries that have banned asbestos, with the highest risks for birth cohorts in working age before the ban. The results reveal distinct spatio-temporal patterns, with the northern regions exhibiting the highest rates. The Italian experience with asbestos-related diseases detection could help other countries to assess the impact of asbestos, raise awareness, and promote a global ban on asbestos

**da Silva JMN, Lisboa AHS, de Sa Teixeira R, de Araujo Vieira EM, dos Santos Leite WK, Bispo LGM, et al. Sustainable work environments and gendered perceptions of risk factors, musculoskeletal discomfort, and quality of work life: a pilot validation of a theoretical model. *International Journal of Industrial Ergonomics*. 2026; 112:103897.**

<https://doi.org/10.1016/j.ergon.2026.103897> [open access]

**Abstract:** Recent studies have proposed theoretical models integrating biomechanical, psychosocial, and organizational risk factors with Work-Related Musculoskeletal Disorders (WMSDs) outcomes and their impacts on Quality of Work Life (QWL), but without stratification by worker sex. This pilot study aimed to validate a theoretical model through a sex-stratified analysis in a specific regional context. It involved evaluating 116 men and 304 women across various economic sectors. Variables were analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM). All hypotheses that were statistically significant for males were also significant for females; however, the converse is not valid. This asymmetry may partly reflect the greater statistical power from the larger female subsample, but also suggests that women are exposed to a broader spectrum of ergonomic and psychosocial risk factors. Female workers experienced all risk factors affecting males, plus additional sex-specific factors, notably the impact of physical work demands on perceived stress and musculoskeletal discomfort on quality of life. These findings point to a disproportionate burden borne by female workers and underscore the need for targeted interventions to advance workplace health equity. The model also revealed that contextual risk factors for musculoskeletal discomfort occur more frequently among females, negatively impacting their QWL—an effect not observed in males. Findings should be interpreted with the sample's gender imbalance in mind, which may affect statistical power, particularly for male-specific estimates. The model highlights the unequal ergonomic burden across sexes and reveals how sustainable workplace policies must incorporate gender equity to promote occupational well-being and prevent chronic conditions.

**Tulloch JSP, Whiting M, Jackson R, and Schofield I. Hidden harm: quantifying occupational injury under-reporting in veterinary workplaces through modified capture-recapture analysis. *The Veterinary Journal*. 2026; 317:106637.**

<https://doi.org/10.1016/j.tvjl.2026.106637> [open access]

**Abstract:** **INTRODUCTION:** Occupational injuries are prevalent within the veterinary sector, though their true extent is unknown as evidence indicates widespread under-reporting of injuries. This study aimed to: assess injury under-reporting across roles in a group of UK veterinary practices; and audit the type, frequency, and outcomes of workplace injuries within a large veterinary organisation. **METHODS:** A retrospective audit was conducted on a large veterinary organisation's accident reporting system in 2022. Under-reporting was estimated using a modified capture-recapture method, comparing audit records with self-reported injury data from a cross-sectional staff survey stratified by role and employment figures. Audit data were descriptively analysed and compared with survey data. **RESULTS:** The overall injury under-reporting rate was 68.9%; for every 100 workplaces injuries, 69 went un-

reported. Levels of under-reporting were higher in companion animal practices (70.0%) than large animal practices (56.4%). Common causes of injury of companion animal staff included; clinical examination (28.2%); falls, slips and trips (11.2%); drug administration (10.4%), and needlesticks and surgical sharps injuries (6.1%). LIMITATIONS: Survey responses could not be directly linked to audit records due to anonymity, and survey-based prevalence estimates assumed only one injury per person per year, likely underestimating true injury rates. CONCLUSIONS: Occupational injury under-reporting is likely widespread in UK veterinary practices, particularly companion animal practices. Without improving reporting, it will be challenging to establish the true incidence and context of occupational injuries in the veterinary workforce. Strengthening reporting, training, leadership engagement, and visible responses to incidents are key to strengthening safety culture and injury reporting

**Wu C, Gray A, Paleo J, Dziuk M, Ruiz-Sandoval J, and Pavitt L. Promoting employment participation for people with mental health challenges: photovoice and advocacy. OTJR. 2026; 46(2):292-301.**

<https://doi.org/10.1177/15394492251388031> [open access]

Abstract: People with mental health issues are three times more likely to be unemployed. The purpose of this community-engaged research project was to address an issue brought up by our community partner that people with mental health challenges were restricted from participating in employment. A photovoice study was conducted to answer the research question: what facilitating factors and hindering factors of employment were encountered by people with mental health challenges? Seven participants recruited by our community partner completed three rounds of photo assignments and group meetings. Study findings revealed that mental health conditions presented challenges in finding, acquiring, and retaining employment, and that self-management strategies and a safe work environment were critical to facilitate employment participation. A community advisory group was informed about the study findings. We then hosted photovoice exhibit events to increase awareness about the employment issue for community people. Recommendations for conducting community-engaged research are discussed

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