research alert

July 17, 2026

ABOUT RESEARCH ALERT

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

Boirot A and Lotto M. Alcohol in the workplace: an ethnographic study of professional bartender culture and risk management. Social Science & Medicine. 2026; 403:119445.
https://doi.org/10.1016/j.socscimed.2026.119445 [open access]

Abstract: BACKGROUND: Alcohol consumption among bartenders is higher than in most other professions. However, the cultural and occupational meanings of drinking in this setting are underexplored. METHODS: Drawing on symbolic interactionism, this ethnographic study explores how bartenders interpret and regulate their alcohol use in their professional environment. Fieldwork was conducted in Marseille, France, in 2023 and included 22 in-depth semi-structured interviews and 320 h of participant observation with 38 bartenders working in 33 independent bars. Data were analysed inductively. RESULTS: Findings reveal a "professional culture of drinking" where alcohol serves multiple functions: commercial, relational, ritual, and self-regulatory. Bartender drinking was tolerated by all concerned parties (managers, clients, etc.) and was often considered part of their identity, provided that service quality remained unaffected. Consumption frequently occurred in a "grey zone" where personal and professional boundaries were blurred. While most bartenders interviewed recognized the associated risks, they mainly emphasized mental not physical harms. They feared dependence but rarely sought formal healthcare services; instead, informal peer-based regulation and support predominated, together with self-regulation strategies like limiting hours of drinking and using non-alcoholic shots. CONCLUSIONS: Alcohol use among bartenders cannot be understood solely as a health-risk behaviour; it must be situated within professional norms and social logics. Public health interventions should move beyond prescriptive regulation to co-constructed approaches to prevention that respect occupational culture, valorise existing peer-based moderation practices, and strengthen dialogue between health professionals, employers, and workers

Christianson-Barker J, Chowdhury S, and Hole R. From jobs to careers: a scoping review of supported advancement for autistic individuals and people with an intellectual disability. Journal of Vocational Rehabilitation. 2026; 65(1):83-95.
https://doi.org/10.1177/10522263261449119 **[open access]**
Abstract: Background Supported employment programs have enhanced job placement and retention for autistic individuals and people with an intellectual disability; however, there is limited understanding of the supports that facilitate long-term career advancement, and the experiences associated with it. Methods A scoping review was undertaken, involving systematic searches across six databases: Scopus, PsycINFO, Embase, MEDLINE, CINAHL, and Business Source Ultimate, guided by a structured search strategy. Eligible articles were subsequently coded and analysed to identify overarching themes and key points. Objective To answer the research question: "What does the literature say about the use of career planning practices to facilitate career advancement for autistic individuals and people with an intellectual disability?" Results Fifteen relevant studies revealed six key points: 1) autistic individuals and workers with an intellectual disability consistently desire career progression; 2) persistent barriers impede advancement; 3) progression is possible despite these barriers; 4) effective job coaching supports advancement; 5) positive workplace relationships and inclusive cultures improve outcomes; and 6) advancement requires individualized planning beyond traditional pathways. Conclusions Career progression for autistic individuals and people with an intellectual disability is achievable; however, supported employment practices must evolve to better facilitate long-term career goals and advancement, promoting meaningful workplace inclusion.

Descatha A, Hawkins D, Sembajwe G, Aloui S, Fadel E, Gagliardi D, et al. Artificial intelligence and occupational health: global umbrella review of applications and limitations. Safety and Health at Work. 2026; 17(2):155-171.
https://doi.org/10.1016/j.shaw.2026.02.004 **[open access]**
Abstract: BACKGROUND: Artificial Intelligence (AI) and information processing are technologies that will likely be the transformational for Occupational Health and Safety (OHS). We aim to provide a global umbrella review of the application of AI in occupational health, highlighting its strengths, limitations, and perspectives regarding its application. METHODS: In PubMed, Web of Science, and Scopus, we identified reviews published in peer-reviewed journals, as well as reports in the gray literature, dealing with the application of AI in OHS. Data extraction from these publications focused on applications of the technologies, strengths, and limitations of their utilization. RESULTS: From 1,884 initial hits, 33 reviews were included in this review, with only 4 systematic and 12 other systematized reviews. Many diverse AI applications in occupational health were found. Studies were identified from all continents and were mostly published in the last 15 years. The findings suggested that AI might have positive applications (risk prevention and monitoring, diagnosis, health, and well-being, training and skills development, automation and robotics, sector-specific applications, and organizational efficiency). Data and security, reliability, and limitations of AI systems, impacts on workers, governance and ethics, and scientific and methodological limitations were noted. However, the level of evidence is low and further specific studies will be needed, especially worker-centered studies with a health equity perspective. CONCLUSION: The application of AI to OHS requires proactive policy, worker participation, and evidence-informed risk management, with rigorous impact assessments and ongoing research

Fujii K, Harada K, Morikawa M, Nishijima C, Kakita D, Okuya T, et al. Health effects of employment initiation and retirement in later life among Japanese older adults: a longitudinal study. Public Health. 2026; 256:106276.
https://doi.org/10.1016/j.puhe.2026.106276
Abstract: Objectives: To examine the effects of employment initiation and retirement on physical and mental health among older adults in Japan, using three waves of cohort data and inverse probability of treatment weighting (IPTW). Study design: Longitudinal study. Methods: This study included 1477 community-dwelling older Japanese adults. Working status was assessed at baseline (T0) and at the first follow-up (T1; 30 months) and categorised into four groups: (1) Never (not working at T0 and T1), (2) Initiation (not working at T0, working at T1), (3) Retirement (working at T0, not working at T1), and (4) Continuation (working at both T0 and T1). Outcomes were assessed at the second follow-up (T2; 80 months): incident frailty and incident depressive symptoms. Binary regression models weighted by IPTW were used to estimate the effects of employment transitions on health outcomes. Results: Compared with participants who never worked, those who initiated employment had a significantly lower risk of frailty onset (OR = 0.90, 95% CI = 0.82-0.99) and depressive symptom onset (OR = 0.85, 95% CI = 0.75-0.96). In contrast, retirement, compared with continued employment, was not significantly associated with either outcome. Conclusions: Employment initiation was associated with a lower risk of developing both frailty and depressive symptoms. In contrast, retirement was not significantly associated with health outcomes. These findings suggest that initiating employment in later life may be associated with better health status and that retirement may not inherently lead to adverse health outcomes.

Hu H, Hatsusaka N, Little MP, Kurihara O, Kim E, Sasaki H, et al. Low-dose radiation exposure and risk of self-reported cataract in Fukushima nuclear emergency workers. International Journal of Epidemiology. 2026; 55(3):dyag063.
https://doi.org/10.1093/ije/dyag063 **[open access]**
Abstract: Background: Cataract is a well-established radiogenic condition and recent evidence suggests an increased risk even at radiation doses of <100 mGy. Following the 2011 Fukushima Daiichi Nuclear Power Plant accident, ~20 000 workers participated in emergency operations. This study aimed to investigate the association between cumulative low-dose occupational radiation exposure and the risk of cataract among workers enrolled in the Epidemiological Study of Health Effects in Fukushima Nuclear Emergency Workers. Methods: Data from 5773 nuclear emergency workers participating in the cohort were analysed. The cumulative lifetime occupational radiation dose was estimated by combining pre-2011 individual dose records from a nationwide nuclear radiation worker dose registry with radiation doses received during the 2011 emergency-work period. Self-reported, physician-diagnosed cataract was identified through baseline and first follow-up questionnaires. A Cox proportional hazards model was applied to estimate hazard ratios (HRs) with 95% confidence intervals (CIs) for incident cataract, with adjustments for major covariates. Results: More than 90% of the participants had cumulative occupational radiation exposure of <100 mSv, including doses received both prior to the accident and during the emergency period (March-November 2011). During 52 921 person-years of follow-up from 2012 to 2024 (mean, 9.2 years), 310 participants reported new-onset cataract. The risk of cataract increased with lifetime occupational exposure up to November 2011, with an HR of 1.03 per 10-mSv increase (95% CI, 1.02, 1.05). This association persisted after excluding participants with doses of =100 mSv. For exposure during the emergency period (March-November

2011), the HR was 1.06 per 10-mSv increase (95% CI, 1.03, 1.09). When the cumulative lifetime occupational radiation dose was recalculated by using 2-year and 5-year lag periods before diagnosis or censoring, the HRs per 10-mSv increase were 1.03 (95% CI, 1.01, 1.04) and 1.01 (95% CI, 0.99, 1.04), respectively. Conclusion: This study suggests an excess risk of cataract at doses of <100 mSv and adds to the evidence base suggesting an association between low-dose occupational radiation exposure and cataract risk.

Janssen-Masmeier TI, Vogel O, Otto AK, Klotzbier T, Korbus H, Gruhn LA, et al. Occupational and personal factors contributing to participation in occupational health promotion programs for employees in nursing home facilities: a secondary analysis of the PROCARE study. BMC Nursing. 2026; 25(1):610.
https://doi.org/10.1186/s12912-026-04973-6 [open access]
Abstract: Background: Nursing staff are exposed to demanding occupational conditions, including physical load, physiological stress and negative institutional factors that are associated with job turnover and unhealthy behavior, health complaints (such as back pain), and other issues. Occupational health promotion programs, such as ergonomics and exercise, are offered to counteract these unfavorable trends, but participation is often low. However, knowledge about factors favoring or reducing the participation of nursing staff in occupational health promotion programs in nursing home settings remains incomplete. Given this limited and inconclusive evidence, this study followed an exploratory approach for the participation analysis. Methods: This cross-sectional secondary analysis explored potential predictors that may be associated with participation in tailored occupational health promotion programs in nursing home facilities. We analyzed multicenter data of nurses (n = 310) from 47 nursing homes invited to participate in tailored occupational health promotion programs (PROCARE study). We focused on reasons for (non-)participation, including occupational and individual factors and conducted a logistic regression analysis to examine the potential predictors associated with nurses' participation in occupational health promotion programs. Results: The findings suggested that a better relationship with colleagues (workplace environment) (OR = 0.569; CI [0.360 0.899]) and a higher physical activity level (individual health behavior) (OR = 0.525; CI [0.328 0.842]) were associated with a higher likelihood of participation in occupational health promotion programs. Conclusions: We identified possible predictors associated with participation, such as the work environment and the individual health behavior, that could be considered during the planning and implementation of occupational health promotion programs. Future programs might consider a linkage to individuals' health behavior change strategies and address the relationship to colleagues. This tailoring could be particularly relevant to support employees' participation in occupational health promotion programs in the implementation phase. Trial registration: The PROCARE study was registered with the German Register of Clinical Trials (DRKS.de; DRKS00015241).

Kapanadze MK, Codern-Bove N, Cegarra Duenas B, and Sauri Ruiz J. Overcoming barriers through an intersectional lens: return-to-work and work participation of people with spinal cord injury in Spain. Disability and Rehabilitation. 2026; 48(10):3033-3048.
https://doi.org/10.1080/09638288.2025.2568569 [open access]
Abstract: PURPOSE: People with spinal cord injuries (SCI) face reduced access to work opportunities compared to individuals without disabilities. This study explored how people with SCI experience

barriers and facilitators to work participation during return-to-work (RTW) and their quality of work participation in Spain's post-COVID-19 context. METHODS: A qualitative phenomenological design was used. Eight women and nine men participated in three focus groups between February and June 2023. Data was video and audio recorded and analysed using a six-step Interpretative Phenomenological Analysis approach. RESULTS: Three main themes emerged: (1) intersectional factors contributing to unemployment and poverty risks, (2) lack of post-rehabilitation services and RTW planning, and (3) the need for policy reforms. Findings highlighted inequities such as inadequate job search support, inaccessible work environments, and insufficient subsidies for technical aids, adaptations, and teleworking. The post-COVID-19 context legitimised teleworking, which was previously unfeasible. Intersectional analysis revealed heightened unemployment and work precarity among young adults, women, and migrants. CONCLUSIONS: Personalised RTW programs are essential for people with SCI, addressing systemic barriers and incorporating an intersectional approach to transform policies and improve employment outcomes

Kumarasamy C, Betts K, Norman R, Bennett K, Franklin P, Tammemagi M, et al. Lung cancer risk prediction models and asbestos exposure: a validation study on the Western Australia Asbestos Review Program. Occupational and Environmental Medicine. 2026; 83(3):154-161.
https://doi.org/10.1136/oemed-2025-110249 **[open access]**
Abstract: Objectives: Asbestos exposure raises the lung cancer risk and has supra-additive synergy alongside tobacco exposure. Lung cancer screening (LCS) is effective when high-risk populations are targeted. This study examined the utility of various LCS eligibility and risk prediction models in an asbestos-exposed population. Methods: The Western Australia Asbestos Review Program (ARP) consists of individuals with known exposure to asbestos. All participants underwent annual review with low-dose CT screening. The performance of the Prostate, Lung, Colorectal and Ovarian (PLCO)m2012, PLCOm2014 and PLCOocc models, Liverpool Lung Project V.2 (LLPv2) and Bach models, together with the United States Preventive Services Task Force (USPSTF)2021 and Australian LCS eligibility criteria were validated on the ARP. Results: The cohort consisted of 2126 participants of which 85.4% were male with a median (IQR) age of 70 (63-75) years old. Former smokers comprised 55.1% (n=1172) and never smokers 36.2% (n=769) of the cohort. Median smoking and cessation duration were 24 years (IQR: 13-72) and 32 years (IQR: 22-41), respectively. Lung cancer was diagnosed in 51 (2.4%) participants. When applying the risk models to the ARP cohort, the area under the curve for all models was modest, ranging from 0.602 to 0.675. All models underestimated risk in this cohort during calibration assessment, with the exception of the LLP V.2, which overestimated risk. Conclusions: In an asbestos exposed population, current LCS eligibility criteria and risk models mostly underestimate the risk of lung cancer, reflecting the need for improved risk prediction models that adequately account for asbestos exposure.

Liu S, Ji S, and Yang D. Study on influencing factors of safety initiative behavior of project construction workers from the perspective of multiple exchanges. Safety Science. 2026; 202:107285.
https://doi.org/10.1016/j.ssci.2026.107285

Man SS, Fang Y, Chen Y, Liu L, and Shou Chan AH. Do females and males experience occupational stress differently? Insights from a meta-analysis. Safety and Health at Work. 2026; 17(2):179-190.
https://doi.org/10.1016/j.shaw.2026.03.003 [open access]
Abstract: Occupational stress has been extensively studied due to its key role in shaping the well-being, safety, and productivity of workers. However, existing studies offer conflicting evidence regarding the association between gender and occupational stress. This research systematically reviewed 18 studies with 20 records from the past decade on gender differences in occupational stress, utilizing meta-analysis techniques. Based on the literature review, occupational stress was categorized into physical, psychological, safety, and work stress. Moderators affecting the relationship between gender and occupational stress were analyzed. The findings suggested that female workers exhibited greater work stress (Cohen's d = -0.119, $p < 0.001$) and less safety stress (Cohen's d = 0.106, $p = 0.010$) than males. Region was a key moderator significantly affecting the relationship between gender and occupational stress ($p < 0.05$). These findings emphasize the distinct stress challenges faced by female and male workers, highlighting the need for tailored support to decrease occupational stress for workers of both genders, thus enhancing workers' performance, safety, and well-being

Miller J, Whitehurst L, Watkins E, Weatherbie J, Lanham SN, Thruston JL, et al. Effect of shift schedules on firefighter sleep outcomes. Journal of Occupational & Environmental Medicine. 2026; 68(7):561-568.
https://doi.org/10.1097/JOM.0000000000003668
Abstract: OBJECTIVE: To descriptively compare sleep outcomes between fire agencies utilizing different shift configurations. METHODS: Firefighters employed by three departments utilizing a 24/48, 48/96, four-Platoon system (4P) and a control group of day-shift first responders completed the Emergency Service Sleep Diary and Pittsburgh Sleep Quality Index (PSQI) to compare sleep quantity and quality outcomes. RESULTS: After controlling for differences in nighttime emergency call volume, the 24/48 resulted in less on-duty sleep time than the 48/96, whereas the 4P was similar to 24/48. The 24/48 displayed greater total PSQI scores than all other shift configurations. CONCLUSIONS: Sleep quantity and quality were worse among firefighters working a 24/48 shift compared to some shifts. Many firefighters across shifts did not obtain the recommended amount of sleep on- and off-duty

Nakamura S, Matsumoto N, Takao S, and Yorifuji T. The relationship between psychological distress, precarious employment, and unpaid work hours in Japanese adults: generalized linear mixed model using longitudinal survey of adults in the 21st century. American Journal of Industrial Medicine. 2026; 69(8):631-644.
https://doi.org/10.1002/ajim.70096 [open access]
Abstract: Background: Previous studies indicate that precarious employment harms mental health, but the association when combined with unpaid work remains unexplored. This study examined the relationships between psychological distress, employment status, and unpaid work in Japan, where women often engage in precarious work and bear the majority of unpaid work. Methods: We analyzed data from the Longitudinal Survey of Adults in the 21st Century. Poisson regression analysis with robust standard errors was conducted using a mixed-effects model stratified by gender to calculate adjusted risk ratios (aRR). Additionally, sensitivity analyses were performed by altering the

outcome's cutoff point. Results: The risk of psychological distress decreased with regular permanent employment for women (aRR = 0.90, 95% CI = [0.85, 0.96]), while no significant association was observed for men (aRR = 0.93, 95% CI = [0.86, 1.01]). Unpaid work hours showed no main effects. For women, an additive negative interaction was observed between employment status and unpaid work hours (relative excess risk due to interaction [RERI] = -0.12, 95% CI: [-0.22, -0.02] for precarious work × 3rd quartile of unpaid work hours; RERI = -0.15, 95% CI: [-0.28, -0.02] for precarious work × 4th quartile unpaid work). Conclusions: The findings suggest that the mental health benefits of regular employment for women are attenuated by longer unpaid work hours, highlighting the "dual burden" of paid work and disproportionate domestic responsibilities. Consequently, policies aimed solely at increasing job security are insufficient. To improve public mental health, interventions must simultaneously address the gender disparity in unpaid work by promoting work-life balance and redistributing domestic loads.

Ray TK, Pana-Cryan R, and Bhattacharya A. Changes in work arrangements, psychosocial working conditions, and worker well-being between 2018 and 2022: evidence from the general social survey. American Journal of Industrial Medicine. 2026; 69(7):560-574.
https://doi.org/10.1002/ajim.70088

Abstract: Background: We used national-level data to compare worker demographic and socioeconomic characteristics, work arrangements, psychosocial working conditions, safety and health, job security, wages and benefits, and worker health and well-being before the COVID-19 pandemic, in 2018, and in the late stage of the pandemic, in 2022. Understanding these changes helps inform some of the potential ways these factors may shape the future of work. Methods: We analyzed self-reported and publicly available data from the 2018 and 2022 waves of the General Social Survey (GSS)-Quality of Worklife (QWL) module, focusing on adults working part-time or full-time. We describe differences in the broad categories of interest mentioned above, as well as subcategories within each. For example, we assessed changes in psychosocial working conditions by focusing on subcategories that included job demands, job control, role conflict, resource adequacy, job support, work flexibility, and work and family interface, that is, the boundaries between work and family life. We used Mann-Whitney tests to assess statistically significant changes, using weighted, nationally representative worker samples (N = 1473 in 2018; N = 2112 in 2022). Results: Between 2018 and 2022, we observed two changes in work arrangements; the share of independent contractors increased (from 12.4% to 14.4%) while the share of those working full-time decreased (from 81.3% to 78.5%). Psychosocial conditions exhibited mixed trends; job demands and control showed marginal improvement, while role conflict, resource adequacy, and job support worsened. The share of workers who mainly worked at home increased (6.6%-17.2%), alongside those experiencing family-work conflict (from 26% to 32%). Health and well-being also worsened, with more workers reporting lower job satisfaction and very often feeling used up (from 13.1% to 16.0%). In addition, workers reported more days in poor mental health (from 3.6 to 4.4 days) and days with activity limitations (from 1.6 to 2.2) in the past 30 days. Conclusions: The quality of worklife in 2022 differed meaningfully from 2018, though not uniformly for better or worse. For example, increases in working at home and the share of independent contractor arrangements suggest different potential long-term consequences for worker well-being. Continued monitoring and more nuanced analyses are essential to understanding the evolving future of work.

de Smalen AW, Maarleveld JM, Burchell G, Huysmans MA, Juurlink TT, Beekman ATF, et al. Effectiveness of the participatory approach on return-to-work of sick-listed workers: a systematic review and meta-analysis. Journal of Occupational Rehabilitation. 2026; [epub ahead of print].
https://doi.org/10.1007/s10926-026-10410-x
Abstract: Purpose: To synthesize the evidence regarding the effectiveness of the participatory approach (PA) on return to work (RTW) of sick-listed workers compared to usual care and other interventions. Methods: A systematic review and meta-analysis were conducted according to the PRISMA guidelines, searching five databases for evidence from their inception until February 2025. Studies were eligible for inclusion if they included sick-listed workers, conducted a PA intervention at the workplace focused on RTW, and included a comparison group. Data on RTW, health, and economic outcomes were extracted, and the quality of the studies was appraised. Data on time until full and lasting RTW were pooled, and a meta-analysis was conducted, followed by an assessment of the certainty of the evidence. Results: Eight randomized controlled trials reported across 14 papers were included. Half of the studies had a good quality score, whereas the remaining studies were considered of poor (n = 3) or fair (n = 1) quality. While no significant overall effect of the PA on time until full and lasting RTW was found, a statistically significant effect in favor of the PA was observed among sick-listed workers with low back pain (LBP) compared to control conditions. Conclusion: The evidence provides moderate certainty that the PA is effective in reducing time to full and lasting RTW for sick-listed workers with LBP compared to usual care. However, for workers sick-listed due to mental health conditions or mixed health complaints, the evidence does not support its effectiveness, and the certainty of this evidence is very low. More high-quality research and realist evaluations across different settings and populations are needed to strengthen the evidence on the PA as an RTW intervention and to explain its underlying working mechanisms.

Turk E, Deerwater L, Mattson L, Hagopian A, and Gilbert S. Voices of Hanford workers exposed to chemical vapors: interactions with workplace, safety, health care and compensation systems. New Solutions. 2026; 36(2):182-199.
https://doi.org/10.1177/10482911261454466
Abstract: In this qualitative study, we sought to understand the experiences of Hanford nuclear workers who navigated health care and compensation systems after exposure to chemical vapors. In 2016, we conducted semi-structured interviews with six workers who had experienced chemical vapor exposure. Our grounded theory inductive analysis produced five themes. In light of Washington State's 2018 Hanford Presumption Law, we added a longitudinal component to our investigation. In 2021, we reconnected with original participants to assess whether their experiences navigating systems had changed. Our analysis produced four themes

Williams L. Moral injury, PTSD and narrative identity among Danish military veterans. Social Science & Medicine. 2026; 403:119404.
https://doi.org/10.1016/j.socscimed.2026.119404 **[open access]**
Abstract: In recent years, the concept of moral injury has been embraced in debates on military trauma and commonly refers to the psychological impact of having one's moral expectations and beliefs violated. While many studies on moral injury point to the damage to personal identity as central to morally injurious experiences, a more fully developed concept of identity and specification of how precisely morally injurious experiences can damage individual identity is left under-examined.

Drawing on 35 qualitative interviews with Danish military veterans between 2023 and 24, this article addresses the particular ways that morally injurious experiences are damaging to identity. By examining the veterans' experiences from the Balkans and Afghanistan and by way of narrative theories of identity, the article shows two different processes of identity transformation related to morally injurious experiences: first, how morally injurious events in military conflicts may damage a sense of identity, and secondly how new identities may become reshaped through engagement in new kinds of social practice engendering new narrative identities. This argument contributes to debates on moral injury in the context of military trauma, and specifically to inquiries into identity transformations in relation to morally injurious/traumatic experiences

Zhang Y, Yue H, and Xia X. Impact of punishment on safety behavior and the implications for construction safety: a neuroscientific perspective. Journal of Construction Engineering and Management. 2026; 152(8):04026112.
https://doi.org/10.1061/JCEMD4.COENG-16876

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