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December 8, 2017

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***Scott KA, Fisher GG, Baron AE, Tompa E, Stallones L, and DiGuseppi C. Same-level fall injuries in US workplaces by age group, gender, and industry. *American Journal of Industrial Medicine*. 2017; [Epub ahead of print].**

<http://dx.doi.org/10.1002/ajim.22796>

Abstract: BACKGROUND: As the workforce ages, occupational injuries from falls on the same level will increase. Some industries may be more affected than others. METHODS: We conducted a cross-sectional study using data from the Bureau of Labor Statistics to estimate same-level fall injury incidence rates by age group, gender, and industry for four sectors: 1) healthcare and social assistance; 2) manufacturing; 3) retail; and 4) transportation and warehousing. We calculated rate ratios and rate differences by age group and gender. RESULTS: Same-level fall injury incidence rates increase with age in all four sectors. However, patterns of rate ratios and rate differences vary by age group, gender, and industry. Younger workers, men, and manufacturing workers generally have lower rates. CONCLUSIONS: Variation in incidence rates suggests there are unrealized opportunities to prevent same-level fall injuries. Interventions should be evaluated for their effectiveness at reducing injuries, avoiding gender- or age-discrimination and improving work ability

Andersen LL, Geisle N, and Knudsen B. Can beliefs about musculoskeletal pain and work be changed at the national level? Prospective evaluation of the Danish national Job & Body campaign. *Scandinavian Journal of Work, Environment & Health*. 2017; [Epub ahead of print].

<http://dx.doi.org/10.5271/sjweh.3692> [open access]

Abstract: Objectives This study evaluates the Danish national Job & Body

campaign on beliefs about musculoskeletal pain and work. Methods Initiated in 2011, a national campaign in Denmark targeted public sector employees with a mixture of networking activities, workplace visits, and a mass media outreach with topics related to job and body (eg, musculoskeletal pain, movement and work) and creating balance between demands at work and physical capacity. At baseline (2011) and at four time points until the end of 2014, random cross-sectional samples of $n \geq 1000$ representative public sector employees (total $N=5012$) replied to eight questions concerning beliefs about musculoskeletal pain and work. Changes over time were modelled using general linear models (averaged for all questions, 0-100 points, where 0 is completely negative and 100 completely positive) and logistic regression analyses (for the single questions) controlling for age, gender and a number of work-related factors. Results At the last follow-up in 2014, 17.3% of public sector employees were familiar with the campaign. Beliefs about musculoskeletal pain and work were 3.4 points (95% CI 2.4-4.3) higher than at baseline. For the single questions, 4 out of 8 showed improved odds for more positive beliefs [odds ratios (OR) of 1.28-1.89]. Conclusion During follow-up of the national campaign, beliefs about musculoskeletal pain and work were more positive among public sector employees in Denmark. Due to the time-wise mixture of several campaign activities, the isolated effect of each component could not be disentangled. Whether changes in health occurred remain unknown

Bergeron K, Abdi S, Decorby K, Mensah G, Rempel B, and Manson H. Theories, models and frameworks used in capacity building interventions relevant to public health: a systematic review. BMC Public Health. 2017; 17(1):914.

<http://dx.doi.org/10.1186/s12889-017-4919-y> [open access]

Abstract: BACKGROUND: There is limited research on capacity building interventions that include theoretical foundations. The purpose of this systematic review is to identify underlying theories, models and frameworks used to support capacity building interventions relevant to public health practice. The aim is to inform and improve capacity building practices and services offered by public health organizations. METHODS: Four search strategies were used: 1) electronic database searching; 2) reference lists of included papers; 3) key informant consultation; and 4) grey literature searching. Inclusion and exclusion criteria are outlined with included papers focusing on capacity building, learning plans, professional development plans in combination with tools, resources, processes, procedures, steps, model, framework, guideline, described in a public health or healthcare setting, or non-government, government, or community organizations as they relate to healthcare, and explicitly or implicitly mention a theory, model and/or framework that grounds the type of capacity building approach developed. Quality assessment were performed on all included articles. Data analysis included a process for synthesizing, analyzing and presenting descriptive summaries, categorizing theoretical foundations according to which theory, model and/or framework was used and whether or not the theory, model or

framework was implied or explicitly identified. RESULTS: Nineteen articles were included in this review. A total of 28 theories, models and frameworks were identified. Of this number, two theories (Diffusion of Innovations and Transformational Learning), two models (Ecological and Interactive Systems Framework for Dissemination and Implementation) and one framework (Bloom's Taxonomy of Learning) were identified as the most frequently cited.

CONCLUSIONS: This review identifies specific theories, models and frameworks to support capacity building interventions relevant to public health organizations. It provides public health practitioners with a menu of potentially usable theories, models and frameworks to support capacity building efforts. The findings also support the need for the use of theories, models or frameworks to be intentional, explicitly identified, referenced and for it to be clearly outlined how they were applied to the capacity building intervention

Cregan C, Kulik CT, and Bainbridge HTJ. Differences in well-being among people with disabilities in paid employment: level of restriction, gender and labour market context. Social Policy & Administration. 2017; 51(7):1210-1230.

<http://dx.doi.org/10.1111/spol.12263>

Darnell D, Dorsey CN, Melvin A, Chi J, Lyon AR, and Lewis CC. A content analysis of dissemination and implementation science resource initiatives: what types of resources do they offer to advance the field? Implementation Science. 2017; 12(1):137.

<http://dx.doi.org/10.1186/s13012-017-0673-x> [open access]

Abstract: BACKGROUND: The recent growth in organized efforts to advance dissemination and implementation (D & I) science suggests a rapidly expanding community focused on the adoption and sustainment of evidence-based practices (EBPs). Although promising for the D & I of EBPs, the proliferation of initiatives is difficult for any one individual to navigate and summarize. Such proliferation may also result in redundant efforts or missed opportunities for participation and advancement. A review of existing D & I science resource initiatives and their unique merits would be a significant step for the field. The present study aimed to describe the global landscape of these organized efforts to advance D & I science. METHODS: We conducted a content analysis between October 2015 and March 2016 to examine resources and characteristics of D & I science resource initiatives using public, web-based information. Included resource initiatives must have engaged in multiple efforts to advance D & I science beyond conferences, offered D & I science resources, and provided content in English. The sampling method included an Internet search using D & I terms and inquiry among internationally representative D & I science experts. Using a coding scheme based on a priori and grounded approaches, two authors consensus coded website information including interactive and non-interactive resources and information regarding accessibility (membership, cost, competitive application, and location). RESULTS: The vast majority (83%) of resource

initiatives offered at least one of seven interactive resources (consultation/technical assistance, mentorship, workshops, workgroups, networking, conferences, and social media) and one of six non-interactive resources (resource library, news and updates from the field, archived talks or slides, links pages, grant writing resources, and funding opportunities). Non-interactive resources were most common, with some appearing frequently across resource initiatives (e.g., news and updates from the field). **CONCLUSION:** Findings generated by this study offer insight into what types of D & I science resources exist and what new resources may have the greatest potential to make a unique and needed contribution to the field. Additional interactive resources may benefit the field, particularly mentorship opportunities and resources that can be accessed virtually. Moving forward, it may be useful to consider strategic attention to the core tenets of D & I science put forth by Glasgow and colleagues to most efficiently and effectively advance the field

Derrett S, Harcombe H, Wyeth E, Davie G, Samaranayaka A, Hansen P, Hall G, Cameron ID, Gabbe B, Powell D, Sullivan T, Wilson S, and Barson D. Subsequent Injury Study (SInS): improving outcomes for injured New Zealanders. Injury Prevention. 2017; 23(6):429-434.

<http://dx.doi.org/10.1136/injuryprev-2016-042193>

Abstract: **BACKGROUND:** Subsequent injury (SI) is a major contributor to disability and costs for individuals and society. **AIM:** To identify modifiable risk factors predictive of SI and SI health and disability outcomes and costs. **OBJECTIVES:** To (1) describe the nature of SIs reported to New Zealand's no-fault injury insurer (the Accident Compensation Corporation (ACC)); (2) identify characteristics of people underaccessing ACC for SI; (3) determine factors predicting or protecting against SI; and (4) investigate outcomes for individuals, and costs to society, in relation to SI. **DESIGN:** Prospective cohort study. **METHODS:** Previously collected data will be linked including data from interviews undertaken as part of the earlier Prospective Outcomes of Injury Study (POIS), ACC electronic data and national hospitalisation data about SI. POIS participants (N=2856, including 566 Maori) were recruited via ACC's injury register following an injury serious enough to warrant compensation entitlements. We will examine SI over the following 24 months for these participants using descriptive and inferential statistics including multivariable generalised linear models and Cox's proportional hazards regression. **DISCUSSION:** Subsequent Injury Study (SInS) will deliver information about the risks, protective factors and outcomes related to SI for New Zealanders. As a result of sourcing injury data from New Zealand's 'all injury' insurer ACC, SInS includes people who have been hospitalised and not hospitalised for injury. Consequently, SInS will provide insights that are novel internationally as other studies are usually confined to examining trauma registries, specific injuries or injured workers who are covered by a workplace insurer rather than a 'real-world' injury population

Geiger BB, van der Wel KA, and Toge AG. Success and failure in narrowing the disability employment gap: comparing levels and trends across Europe 2002-2014. BMC Public Health. 2017; 17(1):928.

<http://dx.doi.org/10.1186/s12889-017-4938-8> [open access]

Abstract: BACKGROUND: International comparisons of the disability employment gap are an important driver of policy change. However, previous comparisons have used the European Union Statistics on Income and Living Conditions (EU-SILC), despite known comparability issues. We present new results from the higher-quality European Social Survey (ESS), compare these to EU-SILC and the EU Labour Force Survey (EU-LFS), and also examine trends in the disability employment gap in Europe over the financial crisis for the first time. METHODS: For cross-sectional comparisons of 25 countries, we use micro-data for ESS and EU-SILC for 2012 and compare these to published EU-LFS 2011 estimates. For trend analyses, we use seven biannual waves of ESS (2002-2014) with a total sample size of 182,195, and annual waves of EU-SILC (2004-2014) with a total sample size of 2,412,791. RESULTS: (i) Cross-sectional: countries that have smaller disability employment gaps in one survey tend to have smaller gaps in the other surveys. Nevertheless, there are some countries that perform badly on the lower-quality surveys but better in the higher-quality ESS. (ii) Trends: the disability employment gap appears to have declined in ESS by 4.9%, while no trend is observed in EU-S

Harpur P, Connolly U, and Blanck P. Socially constructed hierarchies of impairments: the case of Australian and Irish workers' access to compensation for injuries. Journal of Occupational Rehabilitation. 2017; 27(4):507-519.

<http://dx.doi.org/10.1007/s10926-017-9745-7>

Abstract: OBJECTIVES: Socially constructed hierarchies of impairment complicate the general disadvantage experienced by workers with disabilities. Workers with a range of abilities categorized as a "disability" are likely to experience less favourable treatment at work and have their rights to work discounted by laws and institutions, as compared to workers without disabilities. Value judgments in workplace culture and local law mean that the extent of disadvantage experienced by workers with disabilities additionally will depend upon the type of impairment they have. Rather than focusing upon the extent and severity of the impairment and how society turns an impairment into a recognized disability, this article aims to critically analyse the social hierarchy of physical versus mental impairment. METHODS: Using legal doctrinal research methods, this paper analysis how Australian and Irish workers' compensation and negligence laws regard workers with mental injuries and impairments as less deserving of compensation and protection than like workers who have physical and sensory injuries or impairments. RESULTS: This research finds that workers who acquire and manifest mental injuries and impairments at work are less able to obtain compensation and protection than workers who have developed physical and sensory injuries of equal or lesser severity. Organizational cultures

and governmental laws and policies that treat workers less favourably because they have mental injuries and impairments perpetuates unfair and artificial hierarchies of disability attributes. CONCLUSIONS: We conclude that these "sanist" attitudes undermine equal access to compensation for workplace injury as prohibited by the United Nations Convention on the Rights of Persons with Disabilities

Hemphill E and Kulik CT. The tyranny of fit: yet another barrier to mainstream employment for disabled people in sheltered employment. Social Policy & Administration. 2017; 51(7):1119-1134.
<http://dx.doi.org/10.1111/spol.12220>

Luhnen M, Prediger B, Neugebauer EAM, and Mathes T. Systematic reviews of health economic evaluations: a protocol for a systematic review of characteristics and methods applied. Systematic Reviews. 2017; 6(1):238.
<http://dx.doi.org/10.1186/s13643-017-0639-8> [open access]

Abstract: BACKGROUND: The number of systematic reviews of economic evaluations is steadily increasing. This is probably related to the continuing pressure on health budgets worldwide which makes an efficient resource allocation increasingly crucial. In particular in recent years, the introduction of several high-cost interventions presents enormous challenges regarding universal accessibility and sustainability of health care systems. An increasing number of health authorities, inter alia, feel the need for analyzing economic evidence. Economic evidence might effectively be generated by means of systematic reviews. Nevertheless, no standard methods seem to exist for their preparation so far. The objective of this study was to analyze the methods applied for systematic reviews of health economic evaluations (SR-HE) with a focus on the identification of common challenges. METHODS/DESIGN: The planned study is a systematic review of the characteristics and methods actually applied in SR-HE. We will combine validated search filters developed for the retrieval of economic evaluations and systematic reviews to identify relevant studies in MEDLINE (via Ovid, 2015-present). To be eligible for inclusion, studies have to conduct a systematic review of full economic evaluations. Articles focusing exclusively on methodological aspects and secondary publications of health technology assessment (HTA) reports will be excluded. Two reviewers will independently assess titles and abstracts and then full-texts of studies for eligibility. Methodological features will be extracted in a standardized, beforehand piloted data extraction form. Data will be summarized with descriptive statistical measures and systematically analyzed focusing on differences/similarities and methodological weaknesses. DISCUSSION: The systematic review will provide a detailed overview of characteristics of SR-HE and the applied methods. Differences and methodological shortcomings will be detected and their implications will be discussed. The findings of our study can improve the recommendations on the preparation of SR-HE. This can increase the acceptance and usefulness of systematic reviews in health economics for

researchers and medical decision makers. **SYSTEMATIC REVIEW REGISTRATION:** The review will not be registered with PROSPERO as it does not meet the eligibility criterion of dealing with clinical outcomes

Lunny C, Brennan SE, McDonald S, and McKenzie JE. Toward a comprehensive evidence map of overview of systematic review methods: paper 1: purpose, eligibility, search and data extraction. *Systematic Reviews*. 2017; 6(1):231.

<http://dx.doi.org/10.1186/s13643-017-0617-1> [open access]

Abstract: **BACKGROUND:** Overviews of systematic reviews attempt to systematically retrieve and summarise the results of multiple systematic reviews. Methods for conducting, interpreting and reporting overviews are in their infancy. To date, there has been no evidence map of the methods used in overviews, thus making it difficult to determine the gaps and priorities for methods research. Our objectives were to develop and populate a comprehensive framework of methods for conducting, interpreting and reporting overviews (stage I) and to create an evidence map by mapping studies that have evaluated overview methods to the framework (stage II). **METHODS:** We searched methods collections (e.g. Cochrane Methodology Register, Meth4ReSyn library, AHRQ Effective Health Care Program) to identify eligible studies for both stages of this research. In stage I, cross-sectional studies, guidance documents and commentaries that described methods proposed for, or used in, overviews were used to develop and populate the framework of methods. Drafts and multiple iterations of the framework were discussed and refined by all authors. In stage II, we identified and described studies evaluating overview methods and mapped these evaluations to the framework. **RESULTS:** In this paper, we present results for the four initial steps of conducting an overview: (a) specification of the purpose, objectives and scope, (b) specification of the eligibility criteria, (c) search methods and (d) data extraction. Twenty-nine studies mentioned or described methods relevant to one or more of these steps. In the developed framework, identified methods and approaches were grouped according to the steps an overview author would need to undertake. Fifteen studies evaluated identified methods, all of which mapped to the search methods step. These studies either reported the development and evaluation of a new search filter to retrieve systematic reviews or compared the performance of multiple filters. **CONCLUSION:** Gaps in the evaluation of methods were found for the majority of steps in the framework. More empirical studies are needed to evaluate the methods outlined and provide a comprehensive evidence map. The framework is useful for planning these evaluations and for planning methods required to deal with challenges that arise when conducting an overview

Schur L, Han K, Kim A, Ameri M, Blanck P, and Kruse D. Disability at work: a look back and forward. *Journal of Occupational Rehabilitation*. 2017; 27(4):482-497.

<http://dx.doi.org/10.1007/s10926-017-9739-5>

Abstract: Purpose This article presents new evidence on employment barriers and workplace disparities facing employees with disabilities, linking the disparities to employee attitudes. Methods Analyses use the 2006 General Social Survey to connect disability to workplace disparities and attitudes in a structural equation model. Results Compared to employees without disabilities, those with disabilities report: lower pay levels, job security, and flexibility; more negative treatment by management; and, lower job satisfaction but similar organizational commitment and turnover intention. The lower satisfaction is mediated by lower job security, less job flexibility, and more negative views of management and co-worker relations. Conclusion Prior research and the present findings show that people with disabilities experience employment disparities that limit their income, security, and overall quality of work life. Technology plays an increasingly important role in decreasing employment disparities. However, there also should be increased targeted efforts by government, employers, insurers, occupational rehabilitation providers, and disability groups to address workplace barriers faced by employees with disabilities, and by those with disabilities seeking to return to work

Stock SR, Nicolakakis N, Vezina N, Vezina M, Gilbert L, Turcot A, Sultan-Taieb H, Sinden K, Denis MA, Delga C, and Beaucage C. Are work organization interventions effective in preventing or reducing work-related musculoskeletal disorders? A systematic review of the literature. Scandinavian Journal of Work, Environment & Health. 2017; [Epub ahead of print].

<http://dx.doi.org/10.5271/sjweh.3696> [open access]

Abstract: Objectives We sought to determine whether interventions that target work organization or the psychosocial work environment are effective in preventing or reducing work-related musculoskeletal disorders (WMSD) compared to usual work. Methods We systematically reviewed the 2000-2015 English and French language scientific literature, including studies evaluating the effectiveness of an organizational or psychosocial work intervention on incidence, prevalence or intensity of work-related musculoskeletal pain or disorders in the neck, shoulders, upper limbs and/or back or of work absence due to such problems, among non-sick-listed workers. We excluded rehabilitation and individual-level behavioral interventions and studies with >50% attrition. We analyzed medium- and high-quality studies and synthesized the evidence using the Grading of Recommendations Assessment, Development & Evaluation (GRADE) approach. An analysis of key workplace intervention elements supplemented interpretation of results. Results We identified 884 articles; 28 met selection criteria, yielding 2 high-quality, 10 medium-quality and 16 low-quality studies. There was moderate evidence that supplementary breaks, compared to conventional break schedules, are effective in reducing symptom intensity in various body regions. Evidence was low- to very low-quality for other interventions, primarily due to risk of bias related to study design, high attrition rates, co-interventions, and insensitive indicators. Most interventions lacked key

intervention elements, such as work activity analysis and ergonomist guidance during implementation, but the relation of these elements to intervention effectiveness or ineffectiveness remains to be demonstrated. Conclusions Targeting work-rest cycles may reduce WMSD. Better quality studies are needed to allow definitive conclusions to be drawn on the effectiveness of other work organizational or psychosocial interventions to prevent or reduce WMSD

Tiberg I, Hansson K, Holmberg R, and Hallstrom I. An ethnographic observation study of the facilitator role in an implementation process. BMC Research Notes. 2017; 10(1):630.

<http://dx.doi.org/10.1186/s13104-017-2962-5> [open access]

Abstract: BACKGROUND: Even though the importance of a facilitator during an implementation process is well described, the facilitator's role is rarely problematized in relation to the organizational context in terms of power and legitimacy; themes which have recently been brought to the fore when studying change in health care organizations. Therefore, in this article, we present a qualitative study with the aim of identifying key aspects of the experience of being in a facilitator role. The data collection involved ethnographic fieldwork encompassing observations and field notes, as well as two qualitative interviews with the facilitator. The data were analysed using a phenomenological hermeneutical method in order to formulate thematic aspects of the implementation process. The study was conducted in southern Sweden between January 2013 and August 2014. RESULTS: One main theme, "walking a tightrope", and four sub-themes, all of which involved balancing acts of different levels and different ways, were identified. These included: being in control, but needing to adjust; pushing for change, but forced to stand back; being accepted, but dependent; and being reasonable, but culturally sensitive. CONCLUSION: Instead of listing the desirable qualities and conditions of a facilitator, this study shows that being a facilitator can be described more completely by applying the concept of role, thus allowing a more holistic process of reflection and analysis. This in turn makes it possible to move from the reactive stance of balancing to a more proactive stance of negotiating

Tsujimoto H, Tsujimoto Y, and Kataoka Y. Unpublished systematic reviews and financial support: a meta-epidemiological study. BMC Research Notes. 2017; 10(1):703.

<http://dx.doi.org/10.1186/s13104-017-3043-5> [open access]

Abstract: OBJECTIVE: PROSPERO, an international prospective register of systematic reviews, was launched in February 2011 to reduce publication bias of systematic reviews (SRs). A questionnaire survey of SR researchers conducted in 2005 indicated the existence of unpublished SRs and the potential influence of lack of funding as a reason for non-publication. Here, we investigated the publication status of registered SRs in the 1st year that PROSPERO launched and assessed the association between publication and the existence of funding or conflicts of interest (COIs). RESULTS: We identified 326 SRs registered in

PROSPERO from February 2011 through February 2012. Among them, 85 SRs (26%) remained unpublished at least 65 months after registration. We found 241 published reports, including four conference abstracts and one poster presentation. Median time to publication from protocol registration was 16.3 months. Funding for SRs was associated with publication [odds ratio (OR) = 2.10; 95% confidence interval (CI) = 1.26 to 3.50]. We found no significant association of author-reported COIs with publication (OR = 2.35; 95% CI = 0.67 to 8.20). Twenty SRs were not published despite the authors reporting completion of the reviews in PROSPERO

Uyanik H, Shogren KA, and Blanck P. Supported decision-making: implications from positive psychology for assessment and intervention in rehabilitation and employment. Journal of Occupational Rehabilitation. 2017; 27(4):498-506.

<http://dx.doi.org/10.1007/s10926-017-9740-z>

Abstract: Purpose This article reviews existing literature on positive psychology, supported decision-making (SDM), employment, and disability. It examines interventions and assessments that have been empirically evaluated for the enhancement of decision-making and overall well-being of people with disabilities. Additionally, conceptual themes present in the literature were explored. Methods A systematic review was conducted across two databases (ERIC and PsychINFO) using various combination of keywords of 'disabilit*', work rehabilitation and employment terms, positive psychology terms, and SDM components. Seven database searches were conducted with diverse combinations of keywords, which identified 1425 results in total to be screened for relevance using their titles and abstracts. Database search was supplemented with hand searches of oft-cited journals, ancestral search, and supplemental search from grey literature. Results Only four studies were identified in the literature targeting SDM and positive psychology related constructs in the employment and job development context. Results across the studies indicated small to moderate impacts of the assessment and interventions on decision-making and engagement outcomes. Conceptually there are thematic areas of potential overlap, although they are limited in the explicit integration of theory in supported decision-making, positive psychology, disability, and employment. Conclusion Results suggest a need for additional scholarship in this area that focuses on theory development and integration as well as empirical work. Such work should examine the potential utility of considering positive psychological interventions when planning for SDM in the context of career development activities to enhance positive outcomes related to decision-making, self-determination, and other positive psychological constructs

Wib T. Paths towards family-friendly working time arrangements: comparing workplaces in different countries and industries. Social Policy & Administration. 2017; 51(7):1406-1430.

<http://dx.doi.org/10.1111/spol.12270> [open access]

***IWH authored publication.**