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

***Griffiths D, Di Donato M, Lane TJ, Gray S, Iles R, Smith PM, et al. Transition between social protection systems for workers with long term health problems: a controlled retrospective cohort study. *SSM - Population Health*. 2023; 23:101491.**

<https://doi.org/10.1016/j.ssmph.2023.101491> [open access]

Abstract: Many nations have established workers' compensation systems as a feature of their social protection system. These systems typically provide time-limited entitlements such as wage replacement benefits and funding for medical treatment. Entitlements may end for workers with long-term health conditions before they have returned to employment. We sought to determine the prevalence of transitions to alternative forms of social protection, specifically social security benefits, among injured workers with long-term disability, when workers' compensation benefits end. We linked Australian workers' compensation and social security data to examine receipt of social security payments one year before and after workers' compensation benefit cessation. Study groups included (1) injured workers whose workers' compensation benefits ceased due to reaching a 260-week limit introduced by legislative reform (N = 2761), (2) a control group of injured workers with at least 104 weeks workers compensation income support (N = 3890), and (3) a matched community control group (N = 10,114). Adjusted binary logistic regression examined the odds of transitions to social security in the injured worker groups relative to the community control group. Within 12 months of workers' compensation benefit cessation, 60% (N = 1669) of the exposed group received social security payments, of which 41% (N = 1120) received the unemployment allowance and 19% (N = 516) the disability pension. Among the work injured control group,

42% (N = 1676) received social security payments after workers compensation benefits ceased. Transitions to social security payments were significantly more common than community levels for both exposed (OR 25.0, 95%CI = 20.7, 30.1) and work injured control groups (OR 4.7, 95%CI = 4.2, 5.3). Many injured workers with long-term health problems transition to social security when their workers' compensation benefits cease. Transitions were more common among workers whose claims ended due to legislative reform which time-limited benefits. Design and implementation of system level policy reform should consider the social and economic impacts of transitions between separate social protection systems.

***Jetha A and Shahidi FV. Racism: a neglected piece of the work disability management puzzle. *Journal of Occupational Rehabilitation*. 2023; [epub head of print].**

<https://doi.org/10.1007/s10926-023-10133-3> [open access]

Akbarzadeh Khorshidi H, Aickelin U, and de Silva A. Evaluation of the early intervention physiotherapist framework for injured workers in Victoria, Australia: data analysis follow-up. *Healthcare (Basel)*. 2023; 11(15):2205.

<https://doi.org/10.3390/healthcare11152205> [open access]

Abstract: PURPOSE: This study evaluates the performance of the Early Intervention Physiotherapist Framework (EIPF) for injured workers. This study provides a proper follow-up period (3 years) to examine the impacts of the EIPF program on injury outcomes such as return to work (RTW) and time to RTW. This study also identifies the factors influencing the outcomes. METHODS: The study was conducted on data collected from compensation claims of people who were injured at work in Victoria, Australia. Injured workers who commenced their compensation claims after the first of January 2010 and had their initial physiotherapy consultation after the first of August 2014 are included. To conduct the comparison, we divided the injured workers into two groups: physiotherapy services provided by EIPF-trained physiotherapists (EP) and regular physiotherapists (RP) over the three-year intervention period. We used three different statistical analysis methods to evaluate the performance of the EIPF program. We used descriptive statistics to compare two groups based on physiotherapy services and injury outcomes. We also completed survival analysis using Kaplan-Meier curves in terms of time to RTW. We developed univariate and multivariate regression models to investigate whether the difference in outcomes was achieved after adjusting for significantly associated variables. RESULTS: The results showed that physiotherapists in the EP group, on average, dealt with more claims (over twice as many) than those in the RP group. Time to RTW for the injured workers treated by the EP group was significantly lower than for those who were treated by the RP group, indicated by descriptive, survival, and regression analyses. Earlier intervention by physiotherapists led to earlier RTW. CONCLUSION: This evaluation showed that the EIPF program achieved successful injury outcomes three years after implementation. Motivating physiotherapists to intervene earlier

in the recovery process of injured workers through initial consultation helps to improve injury outcomes

Barnay T and Defebvre E. Work strains and disabilities in French workers: a career-long retrospective study. *Labour*. 2023; 37(3):385-408.

<https://doi.org/10.1111/labr.12252>

Dong S, Eto O, Liu L, and Villaquiran A. Examining psychosocial factors associated with receiving workplace accommodations among people with disabilities. *Work*. 2023; 75(3):799-811.

<https://doi.org/10.3233/WOR-220230> [open access]

Abstract: BACKGROUND: People with disabilities experience challenges in obtaining workplace support including job accommodations. OBJECTIVE: This study examined the impacts of psychosocial factors affecting the likelihood of an employee with disability receiving an accommodation and subsequent effects on job satisfaction and job performance. METHODS: This study recruited 596 participants from multiple national and state agencies serving persons with disabilities in U.S. A mediation model was conducted to examine the impacts of psychosocial factors (i.e., self-efficacy, positive affect, negative affect, workplace support, Americans with Disabilities Act (ADA) knowledge, accommodation knowledge, and work goal) on receiving accommodation, and the impacts of receiving accommodations on job satisfaction and job performance. The indirect effects of the psychosocial factors on job satisfaction and job performance via receiving accommodations were examined using the Delta method. RESULTS: Among all the examined direct effects, only the effect from workplace support to receiving accommodations and the effect from receiving accommodations to job satisfaction were significant. Nevertheless, indirect effects were non-significant, indicating that all the psychosocial factors had no indirect effect (via receiving accommodation) on job satisfaction and job performance. CONCLUSION: The findings reveal the significance of workplace support on employees' likelihood of receiving accommodations, and subsequent association between accommodation receipt and job satisfaction. Rehabilitation professionals need to provide adequate training to employers to facilitate inclusive and supportive workplace environments

Fukai K, Furuya Y, Nakazawa S, Kojimahara N, Hoshi K, Toyota A, et al. Length of employment in workplaces handling hazardous chemicals and risk of cancer among Japanese men. *Occupational and Environmental Medicine*. 2023; 80(8):431-438.

<https://doi.org/10.1136/oemed-2022-108775> [open access]

Abstract: Objectives: In Japan, the risk of developing cancer among workers employed in workplaces where chemical substances are handled is unclear. This study aimed to assess the association between cancer risk and employment in workplaces handling hazardous chemicals. Methods: The Inpatient Clinico-Occupational Survey of the Rosai Hospital Group data of 120 278 male patients with incident cancer and 217 605 hospital controls matched for

5-year age group, hospital (34 hospitals) and year of admission (2005-2019) were analysed. Cancer risk in relation to lifetime employment in workplaces using regulated chemicals was assessed while controlling for age, region and year of diagnosis, smoking, alcohol consumption and occupation. Further analysis stratified by smoking history was performed to examine interaction effects. Results: In the longest group of employment in tertiles, ORs were increased for all cancers (OR=1.13; 95% CI: 1.07 to 1.19) and lung (OR=1.82; 95% CI: 1.56 to 2.13), oesophageal (OR=1.73; 95% CI: 1.18 to 2.55), pancreatic (OR=2.03; 95% CI: 1.40 to 2.94) and bladder (OR=1.40; 95% CI: 1.12 to 1.74) cancers. Employment of 1+ years was associated with risk for lung cancer; 11+ years for pancreatic and bladder cancers; and 21+ years for all cancers and oesophageal cancer. These positive relationships were particularly obvious among patients with a history of smoking; however, no significant interaction between smoking and length of employment was observed. Conclusions: There is a high risk of cancer among workers, especially smokers, employed in workplaces handling regulated chemicals in Japan. Thus, future measures for chemical management in workplaces are needed to prevent avoidable cancers.

Gleeson J, Rickinson M, Walsh L, Cutler B, Salisbury M, Hall G, et al. Quality use of research evidence: practitioner perspectives. Evidence & Policy. 2023; 19(3):423-443.

<https://doi.org/10.1332/174426421X16778434724277> [open access]

Abstract: Background: This article comes in response to two gaps within the research use literature: a lack of work on quality of use as distinct from quality of evidence, and a lack of research use models based on practitioner, as opposed to researcher, perspectives. Aims and objectives: The study probes into the views of education practitioners about 'using research well', and explores: (1) the extent to which those views align with or differ from a conceptual framework of quality research use; and (2) whether and how practitioner views can provide deeper insights into quality use of research in practice. Methods: The article draws on open-text survey (n=492) and interview (n=27) responses from Australian teachers and school leaders, which were analysed in relation to components of the Quality Use of Research Evidence (QURE) Framework. Findings: There was considerable alignment between the practitioners' views and the QURE Framework, but greater recognition for certain enablers such as 'skillsets' and 'leadership', as compared with others, such as 'relationships' and 'infrastructure'. The practitioners' accounts provided nuanced descriptions and elaborations of different aspects of using research well. Discussion and conclusions: The findings suggest that: the QURE Framework has empirical validity as a way of conceptualising quality research use; practitioners' views on using research well can inform future capacity building efforts; and research use as a field needs far more work that is focused on the quality of use and the perspectives of users.

Gyllensten K, Holm A, and Sanden H. Workplace factors that promote and hinder work ability and return to work among individuals with long-term effects of COVID-19: a qualitative study. *Work*. 2023; 75(4):1101-1112.

<https://doi.org/10.3233/WOR-220541>

Abstract: BACKGROUND: Long COVID is defined by the persistence of physical and/or psychological and cognitive symptoms debuting after SARS-CoV-2 infection. Individuals affected describe impairing and debilitating symptoms sometimes making it difficult to take part in work and social life. Long COVID is likely to have an impact on the work force. OBJECTIVE: The aim of the study was to explore workplace factors that promote and hinder work ability and return to work among individuals with long-term effects of COVID-19. METHODS: A qualitative design was used. Data were collected by semi-structured focus group interviews and analysed using inductive thematic analysis. To increase trustworthiness, several researchers were involved in the data collection and analysis. Five focus group interviews were conducted with individuals suffering from long-term effects from COVID-19 affecting their work ability. In total, 19 individuals participated in the study, and all were working at least 50 per cent at the time of recruitment. RESULTS: Five main themes emerged from the analysis: Communication and support, Possibilities to adjust work, Acceptance of new limitations, Increased need for recovery from work and Lack of knowledge and understanding of the effects of Covid. CONCLUSION: The results suggested that it is useful to facilitate communication, support and work adjustments for individuals suffering from Long COVID. It is also important to accept limitations and fluctuations in work ability and encourage recovery during and after work

Ladha KS, Wijesundera DN, Wunsch H, Clarke H, Diep C, Jivraj NK, et al. The association between opioid prescribing and opioid-related mortality within neighborhoods in Ontario, Canada: a case-control study. *Journal of Studies on Alcohol and Drugs*. 2023; 84(3):389-397.

<https://doi.org/10.15288/jsad.22-00170>

Abstract: OBJECTIVE: Recent Canadian data show that the prescribing of opioids has declined while the number of opioid deaths continues to rise. This study aimed to assess the relationship between neighborhood-level opioid prescription rates and opioid-related mortality among individuals without an opioid prescription. METHOD: This was a nested case-control study using data in Ontario from 2013 to 2019. Neighborhood-level data were analyzed by using dissemination areas that consist of 400-700 people. Cases were defined as individuals who had an opioid-related death without an opioid prescription filled in the year prior. Cases and controls were matched using a disease risk score. After matching, there were 2,401 cases and 8,813 controls. The primary exposure was the total volume of opioids dispensed within the individual's dissemination area in the 90 days before the index date. Conditional logistic regression was used to examine the association between opioid prescriptions and the risk of overdose. RESULTS: There was no significant association between the total volume of opioid prescriptions dispensed in a dissemination area and opioid-related mortality. In subgroup analyses stratifying the cohort into prescription and

nonprescription opioid-related mortality, the number of prescriptions dispensed was positively associated with prescription opioid-related mortality. There was also a significant inverse association between the increased total volume of opioids dispensed and nonprescription opioid mortality. CONCLUSIONS: Our results suggest that prescription opioids dispensed within a neighborhood can have both potential benefits and harms. The opioid epidemic requires a nuanced approach that ensures appropriate pain care for patients while also creating a safer environment for opioid use through harm-reduction strategies

Lou J, Borjigin S, Tang C, Saadat Y, Hu M, and Niemeier DA. Facility design and worker justice: COVID-19 transmission in meatpacking plants. *American Journal of Industrial Medicine*. 2023; 66(9):713-727.

<https://doi.org/10.1002/ajim.23510>

Abstract: BACKGROUND: Meatpacking plants were major sources of COVID-19 outbreaks, posing unprecedented risks to employees, family members, and local communities. The effect on food availability during outbreaks was immediate and staggering: within 2 months, the price of beef increased by almost 7% with documented evidence of significant meat shortages. Meatpacking plant designs, in general, optimize on production; this design approach constrains the ability to enhance worker respiratory protection without reducing output. METHODS: Using agent-based modeling, we simulate the spread of COVID-19 within a typical meatpacking plant design under varying levels of mitigation measures, including combinations of social distancing and masking interventions. RESULTS: Simulations show an average infection rate of close to 99% with no mitigation, 99% with the policies that US companies ultimately adopted, 81% infected with the combination of surgical masks and distancing policies, and 71% infected with N95 masks and distancing. Estimated infection rates were high, reflecting the duration and exertion of the processing activities and lack of fresh airflow in an enclosed space. CONCLUSION: Our results are consistent with anecdotal findings in a recent congressional report, and are much higher than US industry has reported. Our results suggest current processing plant designs made rapid transmission of the virus during the pandemic's early days almost inevitable, and implemented worker protections during COVID-19 did not significantly affect the spread of the virus. We argue current federal policies and regulations are insufficient to ensure the health and safety of workers, creating a justice issue, and jeopardizing food availability in a future pandemic

Medici G, Grote G, Igic I, and Hirschi A. Technological self-efficacy and occupational mobility intentions in the face of technological advancement: a moderated mediation model. *European Journal of Work and Organizational Psychology*. 2023; 32(4):538-548.

<https://doi.org/10.1080/1359432X.2023.2197215> [open access]

Abstract: While research on the effects of technological advancement on job design has gained traction, we know little about how personal and contextual factors relate to work attitudes and mobility intentions in relation to technology-induced change in different occupational domains. Based on social cognitive career theory, we investigated the influence

of technological self-efficacy beliefs (TSE) on occupational commitment and occupational mobility intentions and included automation potential and developmental support as contextual moderators. Based on a survey study with 512 employees and two data points, we found that TSE was negatively related to occupational mobility intentions, both directly and through the mediating role of occupational commitment. The relation between occupational commitment and mobility intention was stronger for individuals receiving more developmental support. Contrary to our hypotheses, the relation between TSE and mobility intention was stronger in occupations with low and medium automation potential. Our findings provide first evidence for the relevance of TSE for occupational mobility intentions and the impact of automation potential and perceived developmental support on this relationship. We discuss the relevance of our findings for better understanding potential effects of technological advancement on occupational mobility and provide practical implications for enabling employees to deal with changing work environments.

Menger-Ogle LM, Baker D, Guerin RJ, and Cunningham TR. A staffing perspective on barriers to and facilitators of temporary worker safety and health. *American Journal of Industrial Medicine*. 2023; 66(9):736-749.

<https://doi.org/10.1002/ajim.23509>

Abstract: BACKGROUND: Research has documented occupational health disparities, including higher rates of work-related injuries, among temporary workers compared with workers in standard employment arrangements. According to guidance from the Occupational Safety and Health Administration (OSHA) and the National Institute for Occupational Safety and Health (NIOSH), both staffing companies and host employers are responsible for protecting the occupational safety and health (OSH) of temporary workers. To date, there has been little qualitative research on temporary worker OSH in the United States and a lack of evidence-based OSH programs designed to meet the needs of temporary workers. The aim of this study was to better understand the barriers to and facilitators of temporary worker OSH from the perspective of US staffing companies. METHODS: In-depth interviews were conducted with a convenience sample of representatives from 15 US staffing companies. Interviews were audio recorded, transcribed verbatim, and analyzed through a three-step process. RESULTS: Commonly mentioned barriers to temporary worker OSH include differential treatment of temporary workers by host employers; lack of understanding among host employers and staffing companies of joint OSH responsibilities; and workers' fear of job loss or other negative repercussions if they report an injury or illness or voice OSH concerns. Commonly mentioned facilitators of temporary worker OSH include conducting client assessments and site visits and fostering strong communication and relationships with both host employers and temporary workers. CONCLUSIONS: These findings can help inform the tailoring of OSH programs to promote health equity in temporary workers

Nobili M, Gonnella MT, Mazza B, Lombardi M, and Setola R. Review of measures to prevent and manage aggression against transport workers. Safety Science. 2023; 166:106202.

<https://doi.org/10.1016/j.ssci.2023.106202> [open access]

Abstract: In recent years, the issue of aggression towards workers has become increasingly relevant, particularly in the transport sector. This is because transit operators often interact with users who may exhibit unpredictable and potentially dangerous behavior. As a result, there is a widespread need to define effective strategies to prevent and manage such phenomena. However, there is no consensus on the most effective or "best" practices, and a multi-approach strategy is generally recommended. The right combination of initiatives largely depends on the environmental context, the company's culture, and the need to consider the legal framework. This paper compares the most commonly adopted initiatives in terms of "Employability", "Affordability", "Lack of Side Effects", "Maturity Level" and "Efficacy", based on information obtained from the literature. The only exception is "Efficacy", which was evaluated with the support of a group of experts. The article formulates a ranking of the different measures and highlights the elements that should not be neglected in a comprehensive mitigation strategy. Specifically, it is evident that any successful strategy should include a combination of personal training, specific procedures for managing aggressions, and appropriate technological devices.

Porru F, Schuring M, Hoogendijk WJG, Burdorf A, and Robroek SJW. Impact of mental disorders during education on work participation: a register-based longitudinal study on young adults with 10 years follow-up. Journal of Epidemiology and Community Health. 2023; 77(9):549-557.

<https://doi.org/10.1136/jech-2022-219487> [open access]

Abstract: Background: Mental disorders are a leading cause of disability and a major threat to work participation in young adults. This register-based longitudinal study aims to investigate the influence of mental disorders on entering and exiting paid employment among young graduates and to explore differences across socioeconomic groups. Methods: Register information on sociodemographics (age, sex, migration background) and employment status of 2 346 393 young adults who graduated from secondary vocational (n=1 004 395) and higher vocational education or university (n=1 341 998) in the period 2010-2019 was provided by Statistics Netherlands. This information was enriched with register information on the prescription of nervous system medication for mental disorders in the year before graduation as a proxy for having a mental disorder. Cox proportional hazards regression models were used to estimate the influence of mental disorders on (A) entering paid employment among all graduates and (B) exiting from paid employment among graduates who had entered paid employment. Results: Individuals with mental disorders were less likely to enter (HR 0.69-0.70) and more likely to exit paid employment (HR 1.41-1.42). Individuals using antipsychotics were the least likely to enter (HR 0.44) and the most likely to exit paid employment (HR 1.82-1.91), followed by those using hypnotics and sedatives. The association between mental disorders and work participation was found across socioeconomic

subgroups (ie, educational level, sex and migration background). Discussion: Young adults with mental disorders are less likely to enter and maintain paid employment. These results ask for prevention of mental disorders and for a more inclusive labour market.

Rivera-Cuadrado W. Healthcare practitioners' construction of occupational risk during the COVID-19 pandemic. *Social Science & Medicine*. 2023; 331:116096.

<https://doi.org/10.1016/j.socscimed.2023.116096>

Abstract: RATIONALE AND OBJECTIVE: In the pandemic's first year, frontline healthcare practitioners (HCPs) experienced a disproportionate burden of COVID-19's negative effects, including infection, death, trauma and burnout. Qualitative research is needed to understand practitioners' experiences to address the unique challenges they face. To this end, this article investigates occupational factors identified by practitioners as relevant to their risk perceptions. By positioning HCPs as a distinctive risk group in the hierarchical space of risk group prioritization, this analysis extends thinking about such classifications within medicine. METHODS: Remote interviews were conducted between 2020 and 2022 with 45 U.S. practitioners, including physicians, nurse practitioners, physician associates, registered nurses and technicians. Interviews were audio recorded, transcribed, and coded using NVivo to analyze how practitioners understood their occupational risk. RESULTS: Participants' risk perceptions focused on three concerns. First, working within spatial concentrations of COVID-19 required adapting procedures and reimagining their bodies as potentially hazardous. Second, the limitations of protective measures elevated concerns about healthcare work, and were perceived as pitting practitioners' health against patient care and administrative needs. Third, managing the many uncertainties about COVID-19 meant HCPs risked both its known and unknown effects. CONCLUSION: This study examines frontline practitioners' perceptions of occupational risk during the pandemic. It argues two tensions underlie practitioners' risk perceptions. First, like other essential workers, HCPs constituted a unique risk group that distinguished them from other vulnerable populations - due to risks arising from occupational rather than biomedical factors. Second, unlike other essential workers, practitioners were directly exposed to infectious patients that posed risks to their health. These elements each highlight a perceived gap between practitioners' and administrators' risk perceptions that facilitated HCP cynicism about guidelines. Future research may fruitfully investigate if these themes persist outside the U.S. and across healthcare systems

Salmon PM, Bhawana KC, Irwin BG, Brennan CJ, and Read GJM. What influences gig economy delivery rider behaviour and safety? A systems analysis. *Safety Science*. 2023; 166:106263.

<https://doi.org/10.1016/j.ssci.2023.106263>

Senthanar S, Dali N, and Khan TH. A scoping review of refugees' employment integration experience and outcomes in Canada. *Work*. 2023; 75(4):1165-1178.

<https://doi.org/10.3233/WOR-220221>

Abstract: BACKGROUND: Refugees involuntarily arrive to Canada to escape unfavourable conditions in their home country. Employment is an important marker of integration and a foundational determinant of health yet; little is known about the employment integration experiences of refugees as a distinct group of workers in Canada. OBJECTIVE: This scoping review was completed to explore the employment experience and outcomes of refugees in Canada and to identify gaps in the literature. METHODS: Three databases were searched for peer-reviewed articles published in English over a 25-year period, 1993 to 2018, for research on refugees and employment in the Canadian context. The research team reviewed all articles, including abstract screening, full text review and data extraction; consensus on inclusion was reached for all articles. Relevant articles were synthesized for overarching themes. RESULTS: The search strategy identified 2,723 unique articles of which 16 were included in the final sample. There was a mix of quantitative, qualitative and mixed-methods studies which reported on employment rates of refugees, the quality of jobs secured, gendered differences in employment experience and differential impacts of under/unemployment on health and well-being. CONCLUSION: The findings suggest that refugees in Canada do not secure jobs that are in line with their previous skills and experience leading to downward occupational mobility and poorer health with refugee women experiencing these outcomes more acutely. Research in this area with long-term outcomes and contextualized experiences is needed, as well as studies that include equity considerations such as racialization and gender

Taylor JP, Inge KJ, and Malouf E. Facilitating self-employment as a competitive integrated employment outcome: results of a focus group study with vocational rehabilitation professionals. *Journal of Vocational Rehabilitation*. 2023; 59(1):55-67.

<https://doi.org/10.3233/JVR-230027>

Walker SA and Kuchinka DGJ. Authentic leadership & safety climate: leading teams to a safer workplace. *Professional Safety*. 2023; 68(8):16-21.

[doi unavailable as of August 25, 2023]

Willeke K, Janson P, Zink K, Tischer C, Heuschmann PU, Zapf A, et al. Comparing the occurrence of chronic physical disorders in self-employed individuals with that of employees: a systematic review. *Work*. 2023; 75(4):1179-1198.

<https://doi.org/10.3233/WOR-220145>

Abstract: BACKGROUND: A stringent systematic review of population-based observational studies focusing on the physical health of self-employed individuals as a basis for the development of targeted prevention strategies is lacking. OBJECTIVE: We aimed to systematically evaluate all the studies of good quality that compared the occurrence of

chronic physical disorders in self-employed individuals with that of employees. **METHODS:** We searched three major medical databases (MEDLINE, Web of Science, Embase) following the Cochrane guidelines. The quality of the studies was rated based on the slightly modified validated assessment tool that was developed by Hoy et al. **RESULTS:** We included 16 population-based studies of good quality, with data from 15,369,964 participants in total. The two longitudinal evaluations of Swedish national registers with the longest follow-up periods showed increased cardiovascular mortality and incidence estimates of cardiovascular disease in self-employed individuals compared with those of white-collar (i.e., nonmanual) employees but decreased risk estimates compared with those of blue-collar (i.e., manual) workers. The results of the shorter cohort studies were heterogeneous. In cross-sectional studies, prevalence estimates for musculoskeletal, respiratory and malignant diseases were higher among self-employed individuals than among employees. **CONCLUSION:** The long-term cardiovascular disease risk and mortality of self-employed individuals seemed to be higher than those of white-collar employees but lower than those of blue-collar employees. As a basis for targeted prevention strategies, further longitudinal studies in different settings are required to better understand the development of physical health disorders for specific self-employment categories such as sole proprietors, small entrepreneurs, family businesses and others

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