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***Prince SA, Biswas A, Betancourt MT, Toigo S, Roberts KC, Colley RC, et al. Telework and 24-h movement behaviours among adults living in Canada during the Covid-19 pandemic. Preventative Medicine. 2024; 108053.**

<https://doi.org/10.1016/j.ypmed.2024.108053>

Abstract: Objective: To assess the association between work location and movement behaviours (physical activity [PA], screen time, sleep) and adherence to the Canadian 24-Hour Movement Guidelines (24-H Guidelines) among Canadian workers during the Covid-19 pandemic. Methods: Using cross-sectional data from the 2021 Canadian Community Health Survey (n = 10,913 working adults 18-75 years), primary work location was categorized as: worked outside the home at a fixed location (fixed workplace), worked at home (telework), and worked outside the home at no fixed location (non-fixed workplace). Recreational, transportation and occupational/household PA, as well as leisure screen time and sleep duration were self-reported. Logistic regression assessed associations between work location and adherence to movement behaviour recommendations, adjusting for covariates. Results: Compared to a fixed workplace, those teleworking reported more recreational PA (21.1 vs 17.0 min/day, $p < 0.0001$) and sleep (7.2 vs 7.1 h/night, $p = 0.026$) and were more likely to meet sleep duration recommendations (adjusted odds ratio [aOR] = 1.28, 95%CI: 1.08-1.51) and the 24-H Guidelines (aOR = 1.25, 95%CI: 1.04-1.51). Compared to fixed workplaces, those at non-fixed workplaces reported more occupational PA (62.7 vs 32.8 min/day, $p < 0.0001$) and less leisure screen time (2.5 vs 2.7 h/day, $p = 0.021$), and were more likely to meet the PA recommendation (aOR = 1.46, 95%CI: 1.15-1.85) and the 24-H Guidelines (aOR = 1.38, 95%CI: 1.09-1.75). Conclusions: Results suggest that adherence to the 24-H Guidelines varies by work location, and work location should be considered when developing strategies to promote healthy movement behaviours. Future studies could explore hybrid work arrangements, and longitudinal study designs.

Agboola F and Wright AC. A framework for evaluating the diversity of clinical trials. *Journal of Clinical Epidemiology*. 2024; 169:111299.

<https://doi.org/10.1016/j.jclinepi.2024.111299>

Abstract: OBJECTIVES: The topic of diversity in clinical trials is rising to the forefront of many conversations in evidence-based medicine, and efforts are being made to improve the diversity of clinical trials. However, there is little uniformity in the methods used to evaluate these efforts. In this article, we describe our Clinical trial Diversity Rating (CDR) framework and the development process, including the broader considerations for evaluating the demographic diversity of clinical trials and their implications, and demonstrate its use through an illustrative example. STUDY DESIGN AND SETTING: The development of the framework was a four-step process, including a scoping review, a cross-sectional study, creation of the tool, and integration of feedback from an advisory group. RESULTS: Our scoping review identified 110 publications that examined clinical trial diversity. Race/ethnicity, sex, and age were the most common characteristics evaluated. About 85% clearly defined the benchmark used for evaluation, but less than half (48%) used disease prevalence as the benchmark. Only 64% of studies defined what would be considered adequate representation. The cross-sectional study, which applied some of the approaches identified in the literature, helped to identify the complexities of evaluating multinational trials and certain demographic characteristics. Key decisions for the CDR framework, such as the demographic characteristics to be evaluated, the benchmark and thresholds for evaluation, and how these factors contribute to the overall rating of clinical trial diversity, were informed by the two earlier phases and feedback from an advisory group. CONCLUSION: The CDR framework provides an objective and transparent approach to evaluating clinical trial diversity. Groups such as Health Technology Assessment bodies, clinical trial regulators, policymakers, journal editors, and individual researchers can use this tool to examine, monitor, and improve diversity in clinical trials

Baek SU, Won JU, Lee YM, and Yoon JH. Association between long working hours and metabolic dysfunction-associated steatotic liver disease: a nationwide population-based study in Korea. *Public Health*. 2024; 232:188-194.

<https://doi.org/10.1016/j.puhe.2024.04.034>

Abstract: Objectives: Long working hour is a known risk factor for metabolic diseases. We explored the association between working hours and metabolic dysfunction-associated steatotic liver disease (MASLD). Study design: Data on working hours among 22,818 workers (11,999 females) from the Korea National Health and Nutrition Examination Survey (2013-2021) were used for this study. Methods: MASLD was defined as a combination of hepatic steatosis combined with one or more of cardiometabolic risk factors (overweight/obesity, prediabetes/diabetes, raised blood pressure, hypertriglyceridemia, low high-density lipoprotein cholesterol). Hepatic steatosis was assessed using the hepatic steatosis index. Logistic regression was used to estimate the odds ratios (ORs) and 95% confidence intervals (CIs). Results: The overall prevalence of MASLD was 30.4% in men and 18.1% in women. Among male workers, 20.2% worked =55 h/week, whereas among female workers, 10.1% worked =55 h/week. Compared with working 35-40 h/week, working =55 h/week was positively associated with overweight/obesity (OR: 1.21; 95% CI: 1.05-1.40), pre-diabetes mellitus (pre-DM)/DM (OR: 1.20; 95% CI: 1.04-1.38), raised blood pressure (OR: 1.17; 95% CI: 1.02-1.35), and presence of any cardiometabolic risk factors (OR: 1.56; 95% CI: 1.21-2.02). The adjusted OR (95% CI) of the association between working hours and MASLD was 1.27 (1.09-1.47) for =55 h/week compared with working 35-

40 h/week in male workers. In female workers, long working hours were not clearly associated with cardiometabolic risk factors and MASLD. Conclusion: Long working hours are positively associated with MASLD among Korean male workers. Policy interventions are needed to mitigate the adverse metabolic effects of prolonged working hours.

Berecki-Gisolf J, Wah W, and Walker-Bone K. Occupational injuries caused by fire and smoke in Victoria, Australia, 2003-2021: a descriptive study. Occupational and Environmental Medicine. 2024; 81(5):232-237.

<https://doi.org/10.1136/oemed-2024-109428>

Abstract: Objectives: Hospital attendance related to fire, flame or smoke exposure is commonly associated with work. The aim of this study was to examine time trends and risk factors for work-related fire/flame/smoke injuries in Victoria, Australia. Methods: This study was based on emergency department (ED) presentation records from the Victorian Emergency Minimum Dataset, 2003-2021. Cases were people aged 15-74 years with injury-related ED presentations, if cause of injury was recorded as fire/flame/smoke, based on coded data and/or narratives. Work-related rates were calculated per employed persons; non-work rates were calculated per population. Work-related and non-work-related cases were compared using logistic regression modelling. Results: There were 11 838 ED presentations related to fire/flame/smoke: 1864 (15.7%) were work-related. Non-work-related rates were 12.3 ED presentations per 100 000 population, and work-related rates were 3.43 per 100 000 employed persons annually. Over the study period, work-related rates decreased annually by 2.0% ($p < 0.0001$), while non-work rates increased by 1.1% ($p < 0.0001$). Work-related cases (vs non-work) were associated with summer (vs winter), but the association with extreme bushfire periods (Victorian 'Black Saturday' and 'Black Summer') was not statistically significant. Work-related cases were less severe than non-work-related cases, evidenced by triage status and subsequent admission. Conclusions: Rates of occupational fire/flame/smoke-related injury presentations decreased over the past two decades in Victoria, while non-work-related rates increased. This could reflect improved safety in the workplace. Hospital data, however, cannot be used to distinguish occupation or industry therefore, employment data linkage studies are recommended to further inform workplace preventive measures.

Das K, Kumari S, Rizvi MR, Sharma A, Sami W, and Al-Kuwari NFA. Unknotting tech neck by breaking the cycle of pain and disability: comparing the impact of instrument assisted soft tissue mobilization on specific muscles and superficial back arm line. Journal of Bodywork and Movement Therapies. 2024; 39:97-108.

<https://doi.org/10.1016/j.jbmt.2024.02.041>

Abstract: BACKGROUND: Computer professionals often develop a forward head posture due to prolonged hours of computer use, leading to neck pain. Instrument-assisted soft tissue mobilization (IASTM), an advanced technique for treating myofascial trigger points, has become increasingly popular for addressing these musculoskeletal issues. OBJECTIVES: The study aimed to compare the effectiveness of IASTM mobilization on SBAL (superficial back arm line) and SM (specific muscles-upper trapezius, levator scapulae, and sternocleidomastoid) in managing chronic neck pain among computer professionals. PARTICIPANTS & METHODS: The study involved 62 computer professionals, randomly divided into two groups. Group A received IASTM on SBAL and group B received IASTM on SM for neck pain each receiving three sessions weekly for four weeks. Outcome variables like Neck Disability

Index (NDI), NPRS(Neck Pain Rating Scale), Craniovertebral angle (CVA), and range of motion (ROM) for flexion, and side flexion (right & left side) were evaluated at baseline, 2 weeks and 4 weeks. RESULTS: Significant improvement in NPRS were observed in both the SBAL and SM groups after 2 weeks of IASTM, with the SBAL group demonstrating greater improvement. At 4 weeks, IASTM on SBAL showed significantly higher improvements in NPRS, CVA, NDI, and flexion compared to the SM group. The repeated measures ANOVA indicated a significant main effect of both time and group, along with a significant interaction between time and group for all outcome variables, except for CVA. CONCLUSION: The study indicates that IASTM on SBAL may offer a more effective treatment for chronic neck pain in computer professionals compared to targeting specific muscles

Goede H, Ge C, and Fransman W. Meta-analysis of the quantitative effectiveness of risk management measures (RMM) in the workplace. *Annals of Work Exposures and Health*. 2024; 68(5):495-509.

<https://doi.org/10.1093/annweh/wxae021>

Abstract: BACKGROUND AND OBJECTIVES: This paper describes an evaluation and analysis of an updated version of ECEL v3.0-an integrated risk management measure (RMM) library developed as part of a CEFIC LRI initiative. The occupational module contains extensive data on the quantitative effectiveness of RMMs to control inhalation and dermal exposure in the workplace. The objective was to investigate the effectiveness and variability in effectiveness of RMM and to explore the difference between optimal and non-optimal RMM applications in the workplace. METHODS: A new database structure and interface were developed and the content of the database was updated with a systematic literature review and integration with other databases (totalling 3373 records from 548 studies). To analyse the data, Bayesian linear mixed models were constructed with the study as a random effect and various study characteristics and RMM categories as fixed effects individually in separate models. A multivariate mixed model was used on a stratified dataset to test (amongst others) the conditions of RMM use. RESULTS: Analyses of the data indicated effectiveness values for each RMM category (for example ~87% for technical emission controls compared with ~60% for technical dispersion controls). Substantial variability in effectiveness was observed within and between different types of RMM. Seven study characteristics (covariables) were included in the analyses, which indicated a pronounced difference in as-built (optimal/experimental) and as-used (workplace) conditions of RMM use (93.3% and 74.6%, respectively). CONCLUSIONS: This library provides a reliable evidence base to derive base estimates of RMM effectiveness-beneficial for both registrant and downstream users. It stresses the importance of optimal use of RMMs in the workplace (technical design/functioning, use, and maintenance). Various challenges are foreseen to further update ECEL to improve guidance, for deriving improved estimates and ensure user-friendliness of the library

Goodman N, Wise FA, Hyseni F, Gilbert L, and Blanck P. Disability inclusion in corporate supplier diversity initiatives. *Journal of Occupational Rehabilitation*. 2024; 34(2):373-386.

<https://doi.org/10.1007/s10926-024-10190-2> [open access]

Abstract: PURPOSE: Since the 1960s, federal and state governments and private-sector companies have used supplier diversity initiatives to ensure their supply chains include businesses owned by traditionally economically disadvantaged or underrepresented groups. Originally concentrated on racial and ethnic minority groups, programs have expanded to include businesses owned by women,

veterans, LGBTQ+ individuals, and, in some cases, people with disabilities. This study investigates the extent to which disability is included in supplier diversity initiatives of Fortune 500 companies.

METHODS: This paper uses a novel data set created by the authors with information on supplier diversity initiatives and Disability, Equity, and Inclusion (DEI) statements in Fortune 500 companies extracted from public sources. This information is combined with data from Compustat, a corporate financial database published by Standard and Poor's and additional variables from other sources.

RESULTS: 75% of the Fortune 500 companies have supplier diversity programs that express a commitment to diversity yet only 49% of those with such programs include disability-owned businesses (38% of all Fortune 500 companies). Among the largest 100 companies, 89% had supplier diversity programs that included disability, almost 6 times the rate Ball et al. reported in 2005. This study finds disability inclusion varies significantly by company size, industry, and whether the company is a government contractor. **CONCLUSION:** Despite the growth in disability inclusion, the absence of disability as a diversity category in regulations mandating supplier diversity initiatives for government contractors impacts disability inclusion. If we want to align our supplier diversity programs with the Americans with Disabilities Act, the first step is to address the issue in the Small Business Administration and federal contracting requirements

Hyseni F, Goodman N, and Blanck P. Who requests and receives workplace accommodations? An intersectional analysis. *Journal of Occupational Rehabilitation*. 2024; 34(2):283-298.

<https://doi.org/10.1007/s10926-024-10172-4> [open access]

Abstract: **PURPOSE:** This study investigates who requests workplace accommodations and who is more likely to have requests granted. We investigate the role of demographic characteristics and their intersection, including disability, gender, race/ethnicity, and age. We also consider the role of other personal and job-related factors. **METHODS:** We use the data from the Current Population Survey (CPS) 2021 Disability Supplement to estimate the odds ratio of having requested workplace accommodations and having such request granted during the COVID-19 pandemic when the survey was conducted. In supplementary analyses, we explore the relationship between remote work and flexible scheduling and workplace accommodations, as well as possible trends using CPS 2019 Disability Supplement. **RESULTS:** Our results indicate that Hispanics with disabilities are more likely than others to request workplace accommodations, but they are substantially less likely to be granted accommodations. Consistent with other studies, our paper also finds that people with disabilities, women, and older people are more likely to request accommodations than their respective counterparts. Other personal and job-related factors such as higher education, parenthood, being single, being a citizen, and working in management-related occupations are associated with higher likelihood of requesting workplace accommodations compared to their counterparts, while receiving accommodations is largely explained by occupational differences. **CONCLUSION:** Our findings show that there are still disparities in the rates of workplace accommodation requests and provision for multiply marginalized groups, and as such, taking into account intersectional differences in addition and in relation to disability is important

Karhu M, Hakkila J, Kalving M, Makiranta M, and Colley A. Renegotiating work-home boundaries: reconciliations of remote work and school during COVID-19. *Nordic Journal of Working Life Studies*. 2024; 14(2):47-69.

<https://doi.org/10.18291/njwls.143181> [open access]

Abstract: This article contributes to understanding the radical transformation of everyday lives when parents' remote work and children's remote school were reconciled in homes during the early moments of the COVID-19 pandemic in 2020. The dataset comprises an online survey (n = 92) plus interviews, online diaries, and sampled experiences from 16 Finnish remotely working parents. Identified challenges to the parents' remote work included interruptions and fragmentation of work tasks, non-optimal work ergonomics, and rescheduling of work times. We present the strategies parents used to create new rhythms and routines, a shared space under the same roof, peace, and privacy for daily work and school, as well as managing multiple simultaneous social roles. Parents' rich experiences provide insights into the early steps of COVID-19-catalyzed remote work. Thus, the paper offers a reference point for exploring potential development trajectories in the increasingly common hybrid work setting.

Leung R, Cook MM, Capra MF, and Johnstone KR. Do non-healthcare workers report physical, physiological, psychological or communication impacts associated with wearing hearing and respiratory protection? *International Journal of Industrial Ergonomics*. 2024; 101:103595.

<https://doi.org/10.1016/j.ergon.2024.103595> [open access]

Abstract: Personal protective equipment (PPE) is used by workers in a wide range of industries to minimise the risk of exposure to occupational hazards. While various effects associated with their use have been investigated, there is a lack of insight on how PPE can act as a stressor, especially for non-healthcare workers. This study aimed to explore the perceptions of non-healthcare workers on the various impacts caused by common PPE types (i.e., hearing and respiratory protective devices) that may affect an individual's well-being. The study employed a cross-sectional research method via online survey, which was distributed globally targeting workers in PPE-dependent industries (with the exception of health care), and designed to explore workers' PPE usage patterns, their perceptions of how PPE impacted them, and to report any specific symptoms they experienced associated with the usage of PPE (n = 234). Communication impairments were identified as the main issue reported for both types of PPE. Frequent users of respirators perceived the use of these forms of PPE to not be helpful or effective in protecting them at work. Infrequent users of hearing protection were found to be significantly impacted by a reduction in their ability to communicate, form social and working relationships, and felt their awareness levels in the workplace were affected. Discomfort and headaches were frequently reported symptoms associated with both types of PPE, with breathing difficulties being another commonly reported symptom for those who use respirators.

Mathieson S, Collie A, Maher CG, Abdel Shaheed C, Xia T, Gilbert S, et al. Secular trends in gabapentinoid dispensing by compensated workers with low back pain: a retrospective cohort study. *Occupational and Environmental Medicine*. 2024; 81(5):245-251.

<https://doi.org/10.1136/oemed-2023-109369> [open access]

Abstract: Objectives: The increase in gabapentinoid prescribing is paralleling the increase in serious harms. To describe the low back pain workers compensation population whose management included a gabapentinoid between 2010 and 2017, and determine secular trends in, and factors associated with gabapentinoid use. Methods: We analysed claim-level and service-level data from the Victorian workers' compensation programme between 1 January 2010 and 31 December 2017 for workers with an accepted claim for a low back pain injury and who had programme-funded gabapentinoid dispensing. Secular trends were calculated as a proportion of gabapentinoid dispensings per year.

Poisson, negative binomial and Cox hazards models were used to examine changes over time in incidence and time to first dispensing. Results: Of the 17 689 low back pain claimants, one in seven (14.7%) were dispensed at least one gabapentinoid during the first 2 years (n=2608). The proportion of workers who were dispensed a gabapentinoid significantly increased over time (7.9% in 2010 to 18.7% in 2017), despite a reduction in the number of claimants dispensed pain-related medicines. Gabapentinoid dispensing was significantly associated with an opioid analgesic or anti-depressant dispensing claim, but not claimant-level characteristics. The time to first gabapentinoid dispensing significantly decreased over time from 311.9 days (SD 200.7) in 2010 to 148.2 days (SD 183.1) in 2017. Conclusions: The proportion of claimants dispensed a gabapentinoid more than doubled in the period 2010-2017; and the time to first dispensing halved during this period.

Oliveira AJ, Pancoti BM, Oliveira BRR, de Figueiredo JA, and Paravidino V. Associations of occupational physical activity and active transport with depressive symptoms in a middle-income country. *Public Health*. 2024; 232:195-200.

<https://doi.org/10.1016/j.puhe.2024.04.033>

Abstract: OBJECTIVE: This study investigated the associations of occupational physical activity and active transport with depressive symptoms, stratified by income range, among Brazilian working adults. STUDY DESIGN: This cross-sectional study drew on data from the 2019 Brazilian National Health Survey. METHODS: We used the Patient Health Questionnaire (PHQ-9) to assess depressive symptoms in working adults aged 18-65 years, with physical activities (occupational physical activity and active transport) self-reported through a specially developed questionnaire. Crude and adjusted logistic regression models were fitted. RESULTS: Individuals at the highest level of occupational physical activity (odds ratio [OR] 1.35; 95% confidence interval [95% CI] 1.19-1.53) and at the moderate level of active transport to work (OR 1.66; 95% CI 1.24-2.22) returned increased odds of depressive symptoms as compared with those who were inactive in these domains. Stratified by income group, light active transport to work (OR 0.57; 95% CI 0.34-0.95) in the lower income group (Range 1) was associated with lower odds of depressive symptoms. On the other hand, individuals at the highest level of active transport to work returned higher odds of depressive symptoms in the low- and intermediate-income groups, Ranges 3 and 4 (OR 1.92; 95% CI 1.22-3.00 and OR 2.91; 95% CI 1.71-4.95, respectively). CONCLUSION: Our results suggest that occupational physical activity and active transport may be a risk factor for depressive symptoms. They also point to differences in this relationship by income range. Further studies are needed to pursue the analysis of how specific domains of physical activity contribute to depressive symptoms

Palermo G, D'Angelo S, Ntani G, Bevilacqua G, and Walker-Bone K. Work and retirement among women: the health and employment after fifty study. *Occupational Medicine*. 2024; 74(4):313-322.

<https://doi.org/10.1093/occmed/kqae035> [open access]

Abstract: BACKGROUND: Women increasingly work beyond age 50+ but their occupational health is under-researched. AIMS: To investigate what jobs older contemporary women do, when they exit their jobs and what factors predict job exit. METHODS: Data came from the Health and Employment After Fifty cohort, which recruited women aged 50-64 at baseline in 2013-14 and has followed them up annually collecting: demographic, lifestyle and work information. Exits from employment were mapped longitudinally over five follow-ups. Time-to-first event Cox regression analyses were used to identify risk factors for job exit. RESULTS: At baseline, 4436 women participated, 64% of whom were

working. The proportions of women working at 50-54, 55-60 and over 60 years were 86%, 79% and 38%, respectively. Amongst all women, after adjustment for age, managing comfortably financially and not coping with the mental demands of the job were associated with exit. Risk factors for job exit differed in the age bands: 50-54; 55-59 and >60 years, reflecting socio-economic status, markers of health (musculoskeletal pain and poor self-rated health) and work factors (under-appreciation, job dissatisfaction, temporary/permanent contracts, coping with work's physical demands).

CONCLUSIONS: Factors contributing to exit from work among older women differ by age group, after controlling for perceived financial position, age and mental demands of the job. A number of work characteristics predict job exit and suggest that employers can play an important role in supporting women to continue working until older ages. Identification and treatment of musculoskeletal pain could also enable work amongst older women

Park H, Sim J, Oh J, Lee J, Lee C, Kim Y, et al. Comparison of the association between presenteeism and absenteeism among replacement workers and paid workers: cross-sectional studies and machine learning techniques. *Safety and Health at Work*. 2024; 15(2):151-157.

<https://doi.org/10.1016/j.shaw.2024.03.001> [open access]

Abstract: Background Replacement drivers represent a significant portion of platform labor in the Republic of Korea, often facing night shifts and the demands of emotional labor. Research on replacement drivers is limited due to their widespread nature. This study examined the levels of presenteeism and absenteeism among replacement drivers in comparison to those of paid male workers in the Republic of Korea. Methods This study collected data for replacement drivers and used data from the 6th Korean Working Conditions Survey for paid male workers over the age of 20 years. Propensity score matching was performed to balance the differences between paid workers and replacement drivers. Multivariable logistic regression was used to estimate the adjusted odds ratio (OR) and 95% confidence intervals for presenteeism and absenteeism by replacement drivers. Stratified analysis was conducted for age groups, educational levels, income levels, and working hours. The analysis was adjusted for variables including age, education, income, working hours, working days per week, and working duration. Results Among the 1,417 participants, the prevalence of presenteeism and absenteeism among replacement drivers was 53.6% (n = 210) and 51.3% (n = 201), respectively. The association of presenteeism and absenteeism (adjusted OR [95% CI] = 8.42 [6.36-11.16] and 20.80 [95% CI = 14.60-29.62], respectively) with replacement drivers being significant, with a prominent association among the young age group, high educational, and medium income levels. Conclusion The results demonstrated that replacement drivers were more significantly associated with presenteeism and absenteeism than paid workers. Further studies are necessary to establish a strategy to decrease the risk factors among replacement drivers.

Rezai M, Nayebzadeh A, Catli S, and McBride D. Occupational exposures and sarcoidosis: a rapid review of the evidence. *Occupational Medicine*. 2024; 74(4):266-273.

<https://doi.org/10.1093/occmed/kqae016> [open access]

Abstract: BACKGROUND: Sarcoidosis is a rare, multisystem, inflammatory condition associated with the formation of granulomas. Diagnosis can be challenging because of non-specific symptoms complicating epidemiological investigations of its aetiology. Despite research efforts, a review of the current state of the evidence is needed. AIMS: To assess the evidence for an association between occupational exposures and the development of sarcoidosis. To determine if workers in any

occupation are at a greater risk of developing sarcoidosis. **METHODS:** This rapid review follows the methodology suggested by the World Health Organization. Two electronic databases were systematically searched until April 2022. The methodological quality of the studies was critically appraised, and a best-evidence approach was used to synthesize the results. **RESULTS:** Titles and abstracts of 2916 articles were screened, with 67 full-text articles reviewed for eligibility. Among the 13 studies eligible for this review, none were of high quality (i.e. low risk of bias). Six studies exploring the association between sarcoidosis and a range of occupations and exposures, and one previous systematic review were of low quality reporting inconsistent findings. Six studies examined the risk of sarcoidosis associated with occupational silica exposure, two of which were of acceptable quality. Overall, the study methodologies and results were inadequate to support causal relationships. **CONCLUSIONS:** There is limited evidence of acceptable methodological quality to assess the risk of sarcoidosis associated with occupational exposures. There is a growing body of research examining occupational exposure to silica and sarcoidosis. Additional high-quality confirmatory research is needed

Schaefer C and Ahonen E. Creating shared perspectives for worker well-being: a community health-focused certificate in total worker health. *Journal of Occupational & Environmental Medicine*. 2024; 66(6):445-449.

<https://doi.org/10.1097/JOM.0000000000003064>

Abstract: **OBJECTIVES:** This study aimed to highlight the utility of a new certificate program in Total Worker Health [®] (TWH) designed for health professionals in other community health settings (OCHS). **METHODS:** Stakeholder needs assessment, priority setting, and comparison with existing core competencies in TWH approaches were performed to identify learning objectives and curricular threads in alignment with adult learning principles. Faculty-student pairings were conducted for content and assessment development. **RESULTS:** A free six-module training course that prepares OCHS professionals to collaborate with occupational safety and health (OSH) professionals. **CONCLUSIONS:** TWH can be advanced through collaboration between OSH and OCHS professionals. In service of shared ground, OCHS professionals should articulate the influence of work on health, TWH principles, and OSH vocabulary and concepts. Such training is a necessary step toward facilitating groups for the benefit of all work and workers

Stagg AL, Madan I, Fear N, Stevens MJ, Wainwright E, Hoving JL, et al. Do current methods of measuring the impact of chronic pain on work reflect the experience of working-age adults? An integrated mixed-methods systematic narrative review. *Pain*. 2024; 165(7):1472-1481.

<https://doi.org/10.1097/j.pain.0000000000003169> [open access]

Abstract: Chronic pain affects individuals' work participation. The impact of chronic pain on work has historically been measured through sickness absence, though it is now appreciated that the impacts on work are far wider. This mixed-methods review aimed to identify the full range of impacts of pain on work in addition to impacts that are currently measured quantitatively to inform the development of a new questionnaire assessing the wider impacts of chronic pain on work. MEDLINE, Embase, PsychINFO, and CINAHL were searched for studies that included quantitative measures of the impact of chronic pain on work and for qualitative studies where individuals described impacts of their chronic pain on work. Quantitative measures, and text from qualitative studies, were analysed thematically. A thematic framework was developed for establishing the types of impacts measured or

described in the literature. Forty-four quantitative and 16 qualitative papers were identified. The literature described impacts within 5 areas: changes at work and to working status; aspects of the workplace and work relationships; pain and related symptoms at work; psychological factors; and factors and impacts outside the work environment related to work. Quantitative measures mainly assessed impacts related to the quantity and quality of work (29 of 42 measures). Seventeen aspects were only discussed within the qualitative literature. This study identifies a discrepancy between the impacts that have been the focus of quantitative measures and the range that individuals working with chronic pain experience and highlights the need for a new measure assessing a wider range of issues

Vitrano G, Urso D, Micheli GJL, Guglielmi A, De Merich D, and Pellicci M. Enabling effective implementation of occupational safety and health interventions. *Safety and Health at Work*. 2024; 15(2):213-219.

<https://doi.org/10.1016/j.shaw.2024.04.003> [open access]

Abstract: Background The design, implementation, and evaluation are three important stages of occupational safety and health (OSH) interventions. Historically, there has been a tendency to prioritize implementation, often neglecting detailed design and rigorous outcome evaluation. Currently, much has changed, and contemporary approaches recognize the interdependence of these stages, considering them integral to the success of any intervention. This work presents a comprehensive procedure for implementing interventions, not only to ensure short-term effectiveness but also their long-term sustainability through continuous monitoring. The focus is on a national OSH project introducing a near-miss management system (NMS) in Italy. Methods Initial meetings were convened among project partners, complemented by interviews with diverse stakeholders, to plan implementation steps and test the NMS. Tailored questionnaires were designed for diverse stakeholder groups - initial promoters, company managers and employers, and employees - facilitating targeted implementation, and three case studies were started in Italian regions to assess the structured implementation, involving intervention promoters and collaborating companies. Results The primary outcome is the development of practical tools, specifically three questionnaires, which are considered valuable for establishing an effective human-centered implementation strategy, meticulously designed to facilitate ongoing monitoring of processes and continual enhancement of instruments intended for NMS integration within companies. Conclusions This work lays the foundation for successful NMS implementation in Italy and, although the outlined procedure had specific objectives, it also provides valuable insights applicable in enhancing the effectiveness and sustainability of interventions across diverse contexts. It underscores the importance of comprehensive planning, stakeholder engagement, and continuous evaluation in achieving lasting OSH interventions

Zhang B, Yin X, Li J, and Tong R. Incorporating ergonomic and psychosocial stressors: a comprehensive model for assessing miners' work-related musculoskeletal disorders. *Safety Science*. 2024; 176:106564.

<https://doi.org/10.1016/j.ssci.2024.106564>

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