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

***Christopher G, Biswas A, Lang JJ, and Prince SJ. Occupational and sex differences in active commuting among Canadian workers from 2006 to 2016. *Health Rep.* 2024; 35(9):3-15. <https://doi.org/10.25318/82-003-x202400900001-eng> [open access]**

Abstract: BACKGROUND: Active commuting (AC) to and from work is associated with numerous health benefits, through increased physical activity. This study examined whether occupation types and part-time work, by sex, were associated with AC in a population-based sample of Canadian workers. DATA AND METHODS: Cross-sectional public use microdata files from the 2006 (n=363,048), 2011 (n=370,672), and 2016 (n=362,310) Census of Population were examined. Multinomial logistic regression models were used to estimate the odds of cycling, walking, and using public transit, relative to using a private motorized vehicle, by occupation and sex. Time trends in mode share were also analyzed. RESULTS: In 2016, commuting by private motorized vehicle and cycling were more common among males, while public transit and walking were more common among females. Occupations in art, culture, recreation, and sport were associated with the greatest odds of cycling (odds ratio [OR]=3.02, 99% confidence interval [CI]: 2.65 to 3.39), while those in trades, transportation, natural resources, and manufacturing had the lowest odds of cycling (OR=0.47, 99% CI: 0.44 to 0.51) and walking (OR=0.36, 99% CI: 0.33 to 0.38). Since 2006, relative declines of 1% and 8% in the proportion of workers commuting by driving and walking, respectively, were observed (absolute change of -1% each). Relative increases of 14% and 12% were observed for cycling and public transit, respectively (absolute changes of less than 1% and 1.5%, respectively). INTERPRETATION: This study found that sex and occupation are important correlates of AC among Canadian workers. Further research aimed at understanding occupational barriers and facilitators may inform future AC interventions

***Samosh D, Lilius J, and Atwood K. ADHD and Career Success: Barriers, Facilitators, and Future Research Directions. *Neurodiversity and Work: Employment, Identity, and Support Networks for Neurominorities*. 2024; 257-281. Springer.**

***Woticky G, Jetha A, Tompa E, and Gignac MAM. Disclosure Decisions of Workers Living with a Chronic Health Condition Causing Disability at Work: Are Decisions to Disclose to Co-workers and Supervisors Different? *Journal of Occupational Rehabilitation*. 2024; [epub ahead of print]**

<https://doi.org/10.1007/s10926-024-10235-6> [open access]

Abstract: PURPOSE: Individuals living with chronic physical or mental health/cognitive conditions must make decisions that are sometimes difficult about whether to disclose health information at work. This research investigated workers' decisions to not to disclose any information at work, disclosure to a supervisor only, co-workers only, or to both a supervisor and co-workers. It also examined personal, health, and work factors associated with disclosure to different groups compared to not disclosing information. METHODS: Employed workers with a physical or mental health/cognitive condition were recruited for a cross-sectional survey from a national panel of Canadians. Respondents were asked about disclosure decisions, demographics, health, working experience, work context, and work perceptions. Multinomial logistic regressions examined predictors of disclosure. RESULTS: There were 882 respondents (57.9% women). Most had disclosed to both co-workers and supervisors (44.2%) with 23.6% disclosing to co-workers only and 7% to a supervisor only. Age, health variability, and number of accommodations used were significant predictors of disclosure for all groups. Job disruptions were associated with disclosure to supervisors only and pain and comfort sharing were associated with co-worker disclosure. CONCLUSION: The findings highlight that disclosure to co-workers is common despite being an overlooked group in workplace disclosure research. Although many similar factors predicted disclosure to different groups, further research on workplace environments and culture would be useful in efforts to enhance workplace support

Adams H, MacDonald JE, Castillo AN, Pavilanis A, Truchon M, Achille M, et al. Qualitative Examination of the Experience of Perceived Injustice Following Disabling Occupational Injury. *Journal of Occupational Rehabilitation*. 2024; 34(3):657-668.

<https://doi.org/10.1007/s10926-023-10154-y>

Abstract: PURPOSE: The primary objective of this study was to explore individuals' perspectives on the factors, situations or events that contributed to their perceptions of injustice following occupational injury. MATERIALS AND METHODS: The study sample consisted of 30 participants (18 women, 12 men) who had submitted a time-loss claim for a work-related musculoskeletal injury. Participants with elevated scores on a measure of perceived injustice were interviewed about the factors that contributed to their sense of injustice. A thematic analysis was conducted to identify the broad classes of situations or events that participants experienced as unjust in the weeks following occupational injury. RESULTS: Three dominant themes emerged from the interviews: (1) Invalidation, (2) Undeserved suffering and (3) Blame. Inductively derived subthemes reflected specific dimensions of post-injury experiences that contributed to participants' sense of injustice. CONCLUSIONS: Given that suffering and invalidating communication are potentially modifiable factors, there are grounds for optimism that intervention approaches can be developed to prevent or reduce perceptions of injustice in the aftermath of debilitating injury. The development of intervention approaches that are

effective in preventing or reducing perceptions of injustice holds promise of contributing to more positive recovery outcomes in individuals who have sustained debilitating work injuries

**Baek SU, Lee YM, Won JU, and Yoon JH. Precarious employment and the onset of depressive symptoms and problematic alcohol use in middle-aged or older workers: A Korean longitudinal study (2006-2022). *Social Science & Medicine*. 2024; 357(11):117170-
<https://doi.org/10.1016/j.socscimed.2024.117170>**

Abstract: Although precarious employment (PE) has emerged as a growing public health concern, research on older adults is scarce. This study explored the associations between PE and the onset of depressive symptoms and problematic alcohol use among middle-aged and older workers. A total of 2536 Korean waged workers aged ≥ 45 years contributed 8486 observations from 2006 to 2022. PE was defined as a multidimensional construct that includes employment insecurity, income inadequacy, and a lack of worker rights and protection. Depressive symptoms and problematic alcohol use were assessed using the Center for Epidemiological Studies Depression Scale and the CAGE questionnaire. Generalized estimating equations were employed to determine the association of PE with depressive symptoms and problematic alcohol use after the two-year follow-up. Risk ratios (RR) and 95% confidence intervals (CI) were estimated. Women, individuals with older age and low educational background, and blue-collar workers were more likely to belong to the high PE group. For individual indicators of PE, daily employment (RR: 1.26, 95% CI: 1.05-1.53), the lowest wage quartile (RR: 1.32, 95% CI: 1.01-1.72), and lack of trade union (RR: 1.55, 95% CI: 1.10-2.17) were positively associated with depressive symptom onset in the follow-up. Compared with the group with the lowest overall PE, the group with the highest PE exhibited increased risks of experiencing the onset of depressive symptoms (RR: 1.62, 95% CI: 1.27-2.08) and problematic alcohol use (RR: 2.45, 95% CI: 1.16-5.17) in the follow-up. This study suggests that PE is a major social determinant of older workers' mental health

**Coutu MF, Durand MJ, O'Hagan F, Gosselin P, Nastasia I, Berbiche D, et al. Workers' Worries, Pain, Psychosocial Factors, and Margin of Manoeuvre, in Relation to Outcomes in a Return-to-Work Program: An Exploratory Study. *Journal of Occupational Rehabilitation*. 2024; 34(3):568-581.
<https://doi.org/10.1007/s10926-023-10155-x>**

Abstract: PURPOSE: To explore the intensity and variation of workers' worries, pain, psychosocial factors, and margin of manoeuvre before and after a return-to-work program, and identified the psychosocial factors associated with non-return to work at the end of the rehabilitation program. METHODS: A pre-post study design was used. A convenience sample of 80 workers starting a return-to-work program and having a compensated musculoskeletal injury that caused an absence of more than three months from their regular work was recruited. Data were collected at baseline and at the end of the rehabilitation program on the nature of the worries and maintenance factors defined in Dugas' generalized anxiety and worry model, using validated questionnaires. The margin of manoeuvre was assessed by the treating occupational therapist. A series of descriptive analyses were performed, as well as Generalized Estimating Equations analyses. RESULTS: Workers' worries were work-related or disability-related 83% of the time at baseline. These worries were essentially based on the situation then occurring at work 90% of the time. For the Generalized Estimating Equations analyses on work status, the final model was significant, explaining 54% of the variance in non-return to work (Pseudo R^2) = 0.54; p = 0.0001). Workers were 8.52 times less likely to return to work when

the margin of manoeuvre was insufficient, and twice as likely not to return to work in the presence of intense worry. Worries were significantly associated with insufficient margin of manoeuvre.

CONCLUSION: A strong association between workers' lack of margin of manoeuvre at work and their worries about their return to work, and poor work outcomes, supports the importance of the worker-environment interaction in rehabilitation programs

Craven K, De Dios Perez B, Holmes J, Fisher R, and Radford KA. Factors influencing employers' support for employees with acquired brain injuries or mental illness to return to- and stay in work: A qualitative systematic review. Work. 2024; 79(1):93-121.

<https://doi.org/10.3233/WOR-230214> [open access]

Abstract: **BACKGROUND:** People with acquired brain injuries (ABIs) often experience residual limitations and co-morbid mental illnesses that restrict work participation. Employers are key in enabling successful return-to-work and job retention. **OBJECTIVE:** This review aimed to explore employers' perspectives of factors influencing their support for people with ABIs and/or mental illness to return to- and stay in work. Review questions focused on barriers and facilitators to their support, and contextual characteristics present at the time. **METHODS:** Five databases were searched from October 2010 until November 2023 for relevant qualitative studies published in English. Findings from included studies (N=25) were synthesised using thematic synthesis. **RESULTS:** Included studies focused on employees with ABI or mental illness, rather than dually diagnosed ABI and mental illness. Employers' support was influenced by their awareness/knowledge of- and attitudes towards the employee's condition/illness; their skills and experience in supportive strategies; factors related to provision of work accommodations; and stakeholder influence. Similarities and differences in influential factors were observed across the ABI and mental illness literature. Contextual characteristics related to organisational characteristics, cultural taboo, and involvement of certain stakeholders. **CONCLUSIONS:** ABI survivors (with and without co-morbid mental illness) and their employers may benefit from specialist support and resources to guide them through the return-to-work process. Further research is needed to investigate employers' knowledge of ABI and mental illness and supportive strategies. Exploration of the influence of other stakeholders, socio-demographic characteristics, and contextual factors on employers' return-to-work and retention support for ABI survivors with co-morbid mental illness is warranted

Gusenbauer M. Beyond Google Scholar, Scopus, and Web of Science: An evaluation of the backward and forward citation coverage of 59 databases' citation indices. Research Synthesis Methods. 2024; 15(5):802-817.

<https://doi.org/10.1002/jrsm.1729> [open access]

Abstract: Citation indices providing information on backward citation (BWC) and forward citation (FWC) links are essential for literature discovery, bibliographic analysis, and knowledge synthesis, especially when language barriers impede document identification. However, the suitability of citation indices varies. While some have been analyzed, the majority, whether new or established, lack comprehensive evaluation. Therefore, this study evaluates the citation coverage of the citation indices of 59 databases, encompassing the widely used Google Scholar, Scopus, and Web of Science alongside many others never previously analyzed, such as the emerging Lens, Scite, Dimensions, and OpenAlex or the subject-specific PubMed and JSTOR. Through a comprehensive analysis using 259 journal articles from across disciplines, this research aims to guide scholars in selecting indices with

broader document coverage and more accurate and comprehensive backward and forward citation links. Key findings highlight Google Scholar, ResearchGate, Semantic Scholar, and Lens as leading options for FWC searching, with Lens providing superior download capabilities. For BWC searching, the Web of Science Core Collection can be recommended over Scopus for accuracy. BWC information from publisher databases such as IEEE Xplore or ScienceDirect was generally found to be the most accurate, yet only available for a limited number of articles. The findings will help scholars conducting systematic reviews, meta-analyses, and bibliometric analyses to select the most suitable databases for citation searching

Haro-Ramos AY, Block R, Jr., and Sanchez G. The relationship between union membership and self-rated health among racially diverse U.S. healthcare workers: The role of control over work schedules and locations. *Social Science & Medicine*. 2024; 358(117254-<https://doi.org/10.1016/j.socscimed.2024.117254> [open access]

Abstract: BACKGROUND: Labor unions are associated with better wages, improved working conditions, and greater worker empowerment, which may result in better health. However, less is known about the relationship between unionization and health among U.S. healthcare workers, whether the relationship differs among racially diverse workers, and how much control over workplace schedules and location mediates the relationship. METHODS: We analyzed a cross-sectional survey of a nationally representative sample of 3000 U.S. healthcare workers collected from March 14 through April 5, 2023. Using ordinal logistic regression, we evaluated whether unionized healthcare workers had better self-rated health (SRH) than their nonunionized counterparts and examined potential differences between White and racially minoritized respondents. We quantified the mediation percentage explained by control over one's schedule and workplace location in the total and stratified samples using Karlson, Holm, and Breen decomposition analysis. RESULTS: Over a third (36.1%) of racially minoritized respondents were unionized, compared to 22.3% of White respondents. Among racially minoritized workers, a greater share of unionized workers reported excellent health (40.6% vs. 21.8%) than their nonunionized counterparts. In confounder-adjusted ordinal logistic regression analyses, labor union membership was associated with better SRH overall, with a stronger association for racially minoritized workers. Among White healthcare workers, control over workplace arrangements explained 68.1% of the union membership and SRH relationship. For racially minoritized workers, control over workplace arrangements partially mediated the relationship, explaining 17.4% of the variation, suggesting that labor unions may impact health through additional pathways for these workers. CONCLUSIONS: This study provides empirical evidence of the relationship between labor union membership and health among U.S. healthcare workers. We demonstrate that control over schedules and location is an important mechanism by which unionization may protect healthcare workers' health. Among racially diverse healthcare workers, labor unions may play an important role in health through various pathways beyond workplace control

Kurth L, Meyers AR, Wurzelbacher SJ, Naber SJ, and Cooper C. Respiratory-related workers' compensation claims from private employers - Ohio, 2001-2018. Journal of Safety Research. 2024; 90(128-136.

<https://doi.org/10.1016/j.jsr.2024.06.004>

Abstract: BACKGROUND: Diseases and conditions related to the respiratory system contribute to work-related morbidity, mortality, and disability. Details on the causes and nature of work-related respiratory disease and the specific industries in which they occur are limited. This study identifies respiratory-related claims in the Ohio Bureau of Workers' Compensation (OHBWC) system and describes claim and worker characteristics to inform public health surveillance. METHODS: We developed a list of respiratory-related International Classification of Diseases Clinical Modification (ICD-CM) diagnosis codes and searched over 2 million claims filed between 2001 and 2018 in the OHBWC system for at least one of these codes. The claim characteristics, rates of claims by employer industry classification, and causes of claims from narrative text were determined for these respiratory-related claims. RESULTS: Among the 23,015 respiratory-related claims (5.8 per 10,000 full-time equivalents [FTE]), 54.6% had at least one ICD-CM code for Allergic Reactions and 30.6% had at least one code for Toxic Effects of Substances Chiefly Non-medicinal as to Source. Claim causes from narrative text included Chemical Exposure (30.3%), Activity Suggesting Exposure (24.4%), and Vapors, Gases, Dusts, or Fumes (VGDF) Exposure (19.3%). The highest overall rates of respiratory-related claims among private employers were for the agriculture, forestry & fishing (11.4 per 10,000), public safety (ambulance services) (11.3), and manufacturing (10.7) industry sectors. CONCLUSIONS: Respiratory-related claims in the OHBWC system were often acute in nature and included allergic reactions. Narratives from these claims provide insight into the work-related exposures and events causing claims or the disease and symptom factors surrounding claims

Lee S, Lee J, Ji S, and Sargent M. Beyond boundaries: The mechanisms by which host organizations' safety climates impact on-site contractors' safety and retention. Journal of Safety Research. 2024; 90(9-18.

<https://doi.org/10.1016/j.jsr.2024.05.013>

Abstract: INTRODUCTION: Despite growing concerns over safety risks associated with on-site contractors in high-risk industries, little research has examined how host organizations affect their safety. Drawing from the open systems perspective, this study investigated the influence of host organizations' safety climates on on-site contractor employees' safety and job attitudes. METHOD: The study used multi-level structural equation modeling (MSEM) to test hypothesized relationships among variables with survey data collected from 1,720 employees of 68 on-site contractor organizations and 3,205 employees of six host organizations. RESULTS: At the organization-level, host organizations' safety climates were associated with their on-site contractor employees' safety behaviors, job attitudes, and injuries, and these effects were mediated by the safety climate of the on-site contractor organizations. CONCLUSIONS: This study demonstrates that the safety climates of host organizations can extend to their on-site contractor organizations. Therefore, fostering a positive safety climate not only benefits the host organizations themselves but also creates a crucial environmental cue that shapes the safety climate and outcomes of on-site contractors. PRACTICAL APPLICATIONS: Leading by example and fostering a positive safety climate within the organization are effective ways for a host organization to ensure the safety of its on-site contractors

Matta MG, Gupta S, Alfonso JM, Carrero MC, Agahari I, Sabouret P, et al. Prevalence and patterns of gender disparity in workplace violence among healthcare workers during the COVID-19 pandemic: a systematic review and meta-analysis. *Public Health*. 2024; 235(76-83).

<https://doi.org/10.1016/j.puhe.2024.06.037>

Abstract: OBJECTIVES: Despite the critical value of healthcare workers (HCWs) demonstrated during the COVID-19 pandemic, there remains a noted global surge in violence against this population. The present meta-analysis aimed to gather data on the prevalence of workplace violence (WPV) against HCWs and to determine if there is any difference based on gender. STUDY DESIGN: This was a systematic review and meta-analysis. METHODS: A thorough search of PubMed/MEDLINE, Lilacs, and Cochrane Collaboration databases was conducted from the start of the COVID-19 pandemic until March 8, 2023. Two authors independently carried out screening, data extraction, and quality assessment, followed by statistical analysis using random-effects meta-analysis and subgroup analysis to assess heterogeneity. RESULTS: We included 22 studies with 44,357 participants, of which 79.37% were women. The analysis revealed an overall prevalence of WPV similar in both women (51.86%, 95% confidence interval [CI]: 41.39-62.33) and men (51.45%, 95% CI: 40.95-61.95). There were considerable differences in gender-based WPV across geographic regions. Aggressions tend to be higher toward men in Asia (odds ratio [OR] 0.79, 95% CI 0.74-0.85, $P < 0.001$). Conversely, in Latin America, WPV prevalence was higher in women (OR 1.20, 95% CI 1.01-1.4, $P = 0.035$). HCWs from low-middle-income-level countries suffered a higher incidence of violence irrespective of gender compared with high- and upper-middle-income countries (72.36% vs 47.35%). CONCLUSIONS: Our data indicate that more than half of HCWs experienced WPV during the COVID-19 pandemic. In addition, women and HCWs in low-middle-income countries were notably vulnerable to WPV. A deeper understanding of the nuances behind violence against HCWs will help to facilitate tailored strategies for different demographical contexts. REGISTRATION: PROSPERO ID: CRD42023403970

Platts K, Scott E, Griffiths K, and Carter A. Attitudes to and perceptions of workplace health promotion amongst employees from ethnic minorities in the UK: A scoping review. *Work*. 2024; 79(1):289-305.

<https://doi.org/10.3233/WOR-230576> [open access]

Abstract: BACKGROUND: Ethnic minorities make up approximately 14% of the UK workforce. Despite the disproportionate burden of ill-health amongst ethnic minorities, and the increased interest in Diversity, Equity & Inclusion (DE&I) in the workplace, workplace health and wellbeing interventions are still most often designed for the ethnic majority. OBJECTIVE: The purpose of this scoping review was to explore the depth and breadth of evidence on the attitudes to and perceptions of health and wellbeing interventions in the workplace within ethnic minority groups in the UK, and to identify gaps in evidence that would provide direction for future research needs. METHODS: A scoping review with quality appraisal was undertaken, supplemented by a review of grey literature and a narrative review exploring related evidence from the knowledge bases related to community and cultural adaptation. RESULTS: Only three peer-reviewed studies met inclusion criteria, preventing broad conclusions. 14 papers from the community and cultural adaptation literature provided additional information about how health promotion may be approached effectively in the workplace, including the importance of culturally sensitive, people-centred design, and the use of established adaptation frameworks. CONCLUSION: The literature suggests a need for improvements in four key areas: (1) reporting of ethnic minorities in data relating to workplace health and wellbeing research, (2) more thorough

review of perceptions and attitudes of ethnic minority workers in the UK, (3) design of culturally appropriate interventions that are tested for impact, and (4) testing of the effectiveness of culturally adapted interventions

Rainbow JG, Chou K, Bethel C, Rothers J, Sans-Fuentes MA, and Dudding KM. More Than Just a Pain in the Back: Pain Among American Nurses and Its Relationship to Modifiable Work Factors and Work Performance. *Nursing Administration Quarterly*. 2024; 48(4):336-346.

<https://doi.org/10.1097/NAQ.0000000000000623>

Abstract: Nursing is a profession with high rates of workplace injuries, hazards, and turnover. Improving the health and safety of nurses at work is vital to retain and grow the workforce to meet future demands. The purpose of this study was to describe the breadth of pain among American nurses and explore the relationships between this pain and modifiable work factors and perceived work performance. We used a cross-sectional descriptive design of 2312 nurses from across the United States. Nurses completed a survey containing questions about demographics, the presence of pain in the past week, the number of pain sites, pain locations, severity, and the impact on work performance. The median number of pain locations reported was 2, back pain was the most reported pain site, and average pain severity ranged from 4 to 5. Significant modifiable work factors associated with pain were average patient load and shift length. Many participants indicated that their pain impacted work performance, while a smaller proportion acknowledged that their pain impacted patient care. Pain among nurses spans multiple locations, is moderately severe, and impacts work performance. Addressing related modifiable work factors may decrease pain and the impact on the health, safety, and work performance of the nursing workforce

Schinasi LH, Williams A, and Schnake-Mahl A. Mandated Rest Breaks and Occupational Injuries and Illnesses in Dallas County, Texas Construction Workers: A Quasi-Experimental, Comparative Interrupted Time Series Study. *Journal of Occupational & Environmental Medicine*. 2024; 66(9):731-736.

<https://doi.org/10.1097/JOM.0000000000003144>

Abstract: OBJECTIVE: We estimated associations of a rest break ordinance, implemented for construction workers in Dallas, Texas in 2016, with workplace injuries and illnesses. METHODS: We used workers' compensation claims data to compare changes in rates of injuries and illnesses among Dallas County, Texas construction (ie, "treated") workers with changes in untreated workers, before (2013-2015) and after (2016-2018) a rest break ordinance was implemented. RESULTS: Immediately after the ordinance was implemented, rates of injuries/illnesses among treated workers were modestly lower than in comparison workers (rate ratio comparing postmandate vs premandate rates, treated vs comparison workers: 0.89, 95% confidence interval: 0.72-1.11). Postordinance versus preordinance slope trends were similar in the treated versus the comparison group. CONCLUSIONS: Ten-minute rest breaks were associated with modestly lower rates of workplace injury/illnesses. More comprehensive standards may be needed for protection

Tarantino M and Reyes J. Experiences of Legally Blind Individuals at Different Stages of the Employment Cycle as These Relate to Section 503 of the Rehabilitation Act. *Journal of Disability Policy Studies*. 2023; 35(2):97-105.

<https://doi.org/10.1177/10442073231158767>

Wizner K, Journey WS, Jolivet D, and Ahle J. Mild traumatic brain injury caused by workplace violence in a US workers' compensation system. *Occupational & Environmental Medicine*. 2024; 81(8):395-399.

<https://doi.org/10.1136/oemed-2024-109437> [open access]

Abstract: OBJECTIVES: Approximately 81% of traumatic brain injury cases are considered to be mild (mTBI), but few studies have reviewed mTBI caused by workplace violence (WPV). This study aimed to (1) determine the incidence of mTBI secondary to WPV in a statewide workers' compensation system using International Classification of Disease codes and (2) analyse and compare factors associated with return-to-work outcomes between WPV mTBI cases versus other mechanisms. METHODS: Using a retrospective cohort of claims data from the California Workers' Compensation Information System during 2015-2019, cases with a return-to-work date were classified as WPV if the injury description contained keywords such as assault, gunpoint, harassed, intimidated, punch, threat, robbery, violent or verbal abuse. RESULTS: Of the 14 089 mTBI claims analysed in this study, 11.2% were caused by WPV. When comparing WPV to non-WPV claims, the variables with statistically significant ($p \leq 0.001$) differences were age, income, industry and job class. There were no significant differences between groups for leave duration. In a linear mixed model, the variable of interest (WPV) was not associated with recovery duration after adjusting for other factors. CONCLUSION: To our knowledge, this is the first study to examine WPV mTBI claims in the USA. The findings suggest that the public administration, education and healthcare and social services industries are at higher risk for WPV mTBI. WPV and job class were the only modifiable factors in the model and therefore should be the focus of additional research

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