

ABOUT RESEARCH ALERT

Research Alert is a service provided to you by the Institute for Work & Health (IWH) to help you keep abreast of recent literature in the areas of occupational health and safety, epidemiology, public health and others within the IWH mandate. Please note that these articles have not been reviewed by Institute scientists to assess the quality of the studies. Research Alerts should not be considered an endorsement of the findings. Readers are cautioned not to act on the results of single studies, but rather to seek bodies of evidence. It should also be noted that the Institute for Work & Health cannot provide full-text of articles listed in Research Alerts to individuals outside of the organization, as this violates copyright legislation.

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

Abdalla A, Li X, Yang F, and Cao X. Mental health and well-being in international construction projects: systematic review of antecedents, constructs, and outcomes. *Journal of Construction Engineering and Management*. 2025; 151(10):04025153.

<https://doi.org/10.1061/JCEMD4.COENG-16391> [open access]

Abstract: The increasing complexity and stressful nature of international and multicultural construction projects have highlighted the urgent need to address the mental health and well-being (MHWB) of expatriates working in these challenging environments. Despite the growing awareness of these issues, existing research in this domain remains fragmented. This fragmentation limits the capacity to develop a comprehensive understanding of the mental health and well-being of expatriates, impeding progress in expatriate management practices and mental health interventions for this occupational group. This study adopts a systematic review methodology, analyzing 54 peer-reviewed journal articles from diverse disciplines to synthesize antecedents, MHWB constructs, and outcomes in the context of international construction projects. The study identified positive and negative MHWB constructs, outcomes, and five themes of antecedents: host country characteristics, personal factors, work-related factors, organizational factors, and social and interpersonal factors. Findings from this study could contribute to both mental health and expatriate research. Theoretically, this review introduces more clarity to MHWB research in the international and multicultural context by conceptualizing the link among antecedents, MHWB constructs, and their outcomes. The research also discusses practical implications and provides valuable references for researchers and practitioners in international construction projects

Berglund K, Bertilsson M, Hermansson U, Sager M, Wikstrom E, and Hensing G. Determinants of alcohol preventive actions by managers: a cross-sectional study among Swedish managers. *International Journal of Workplace Health Management*. 2025; 18(4):452-469.

<https://doi.org/10.1108/IJWHM-12-2024-0258> [open access]

Abstract: Purpose There are few studies on alcohol preventive actions by managers although they are responsible for the quality and efficiency of workplace activities, employee safety, and the work environment. Based on the Theory of Planned Behavior, the aim of the study was to explore the managerial factors (personal attitudes, prevailing norms, and knowledge and awareness of the issue) that are associated with an increased likelihood of engaging in alcohol prevention activities in the workplace. Design/methodology/approach Participants (N = 9,072) from a Swedish panel were invited to participate in a web survey in 2023 raising questions about personal attitudes, prevailing norms, and knowledge and awareness of the issue, in relation to alcohol preventive actions. Of these, 4,723 managers were selected for the analytical sample. Logistic regression was used to examine if personal attitudes, prevailing norms, and knowledge and awareness of the issue was associated with an increased likelihood of engaging in alcohol preventive actions (having arranged lectures about alcohol consumption, informed about the organization's alcohol policy, raising questions about alcohol in connection with staff parties or other social activities) controlling for background variables such as age, gender, education, and managerial position. Findings Gender, age, education, and managerial position had limited significance in explaining the use of alcohol preventive actions. The results indicated that knowledge and awareness of the issue such as managerial responsibility for alcohol prevention, experience with alcohol preventive training programs, and personal experience in supporting someone with alcohol-related problems in private life were the variables most strongly associated with managerial alcohol preventive actions. Attitudes and norms also contributed to some extent, but not as significantly as knowledge and awareness of the issue. Research limitations/implications This was a cross-sectional study. Practical implications The findings highlight the importance of a clear mandate to address these issues in the workplace and the need for training and knowledge in this area. Originality/value Few studies have investigated managerial alcohol preventive actions.

Blake H, Giannoulatou M, and Chaplin WJ. Employees' experiences of chronic pain in the workplace. *Occupational Medicine*. 2025; 75(5):250-255.

<https://doi.org/10.1093/occmed/kqaf052> [open access]

Abstract: BACKGROUND: Between one-third and one-half of the UK population is affected by chronic pain. Effectively supporting people with chronic pain at work requires an understanding of employees' experiences and expressed support needs. AIMS: To understand how chronic pain affects people in their place of work, their reported support needs with relation to self-managing their chronic pain at work, and views towards the support provided by their employers. METHODS: Qualitative study involving semi-structured interviews conducted with working-age adults who experience chronic pain and are employed in organizations in England. Data were analysed thematically and inductively. RESULTS: Thirteen employees were interviewed (12 female, 1 male; aged 19-58 years). Four themes and 12 sub-themes were identified: (i) flexibility (hybrid working, working hours, manager support), (ii) inadequate support services (underdeveloped policies, poorly trained staff, inaccessibility), (iii) working conditions (equipment and adjustments, nature of job, being overworked), and (iv) perception of pain (stigma and discrimination, awareness and knowledge, support networks).

CONCLUSIONS: This study provides insights into a range of factors that are described as helping or hindering the self-management of chronic pain at work. While support needs vary, inequities in workplace provisions and support are described. Occupational health and well-being services are described as not uniformly accessible, and workplace policies relating to chronic conditions or disability as vague. Line managers are described as playing a critical role in employee experiences, but are often perceived to lack the knowledge and training to address employees' support needs

Descloux G, Romanens M, Lamamra N, and Duc B. Different approaches and their consequences for addressing the occupational health and safety of young workers: a systematic narrative literature review. Work. 2025; 81(4):3105-3122.

<https://doi.org/10.1177/10519815251319240> [open access]

Abstract: Background The last twenty years, studies have examined 'young workers' occupational health and safety (OHS). Depending on the discipline, approach and methodology, they address youth OHS in different ways. This systematic narrative review aims to provide a deeper understanding of this research landscape. Objective The first objective is to provide a systematic review of the literature on OHS of 'young workers'. It consists of reviewing the literature by disciplines, approaches, methods, data and factors, and of focusing on studies that address the contextual and social aspects of OHS. The second objective is to consider the specific situation of apprentices. Methods Searches were conducted in five scientific databases, supplemented by three resource platforms. The criteria of literature selection were: OHS of 'young workers' aged from 15-24; explicit link between work and health; publication between 2005 and 2022 in Europe, North America and Australia. Studies have been categorised. Results 193 studies were included. The review shows the diversity of the population studied under the same heading and the predominance of medical studies, which favour epidemiological approaches and quantitative data. Other disciplines (e.g., psychology, educational sciences, social sciences), approaches (e.g., organisational, risk perception), data (e.g., interviews, observations) and methods (qualitative, mixed, longitudinal) are marginal. Individual and age-related factors are predominant. The impact of working conditions and social relations on OHS is rarely considered. Conclusion Research on OHS through organisational context and social relations, particularly employment status, should be encouraged. This provides a deeper understanding of the constraints faced by 'young workers', especially apprentices

Glavas A and Lysova EI. Meaningful work and corporate social responsibility: examining the interactions of a sense of calling with organizational- and job-level factors. Journal of Occupational and Organizational Psychology. 2025; 98(3):e70045.

<https://doi.org/10.1111/joop.70045> [open access]

Abstract: Drawing on a multilevel framework of factors fostering meaningful work and the extant Corporate Social Responsibility (CSR) literature, we examine the interactions of a sense of calling (an individual-level variable) with contextual factors at the organizational level (i.e. CSR) and job level (i.e. job autonomy and CSR embedded in work). In Study 1, we propose and test a multilevel model on 758 employees in 18 organizations, finding that a sense of calling, interacting with organizational CSR and job autonomy, is positively related to meaningful work. In Study 2, we conduct a scenario-based experiment with 261 participants, finding that the three-way interaction between a sense of calling, CSR at the organizational level and CSR in work is positively related to meaningful work. These results provide important theoretical and practical implications for further studying the

interactions of individual-, job- and organizational-level sources of meaningful work and, specifically, unpacking the role of CSR

Gomez EJ. Qualitative methods and the commercial determinants of health: insights from the social sciences. *Social Science & Medicine*. 2025; 380:118168.

<https://doi.org/10.1016/j.socscimed.2025.118168> [open access]

Abstract: While the commercial determinants of health (CDoH) is a growing field of study, insufficient attention has been paid to developing its qualitative methodological and theoretical contributions. CDoH researchers may benefit from considering the social science community's usage of qualitative methodological tools such as case studies for theory development, causal mechanisms and process-tracing for improved causal inference. While CDoH researchers have become interested in quantitative methods and establishing indicators and datasets for comparative statistical analysis, this article finds limitations with this approach and suggests that researchers focus first on establishing ample case study qualitative evidence with the eventual goal of devising theory-informed quantitative indicators and datasets. The timing is propitious for CDoH researchers and social scientists to work together to strengthen CDoH's methodological and theoretical contributions

Harman AW, Foley PG, and Ralph MI. Silica exposures and silicosis incidence in the Western Australia mining industry. *Occupational Medicine*. 2025; 75(5):227-234.

<https://doi.org/10.1093/occmed/kqaf006> [open access]

Abstract: Background: Silicosis has historically been an issue in the Western Australian mining industry. Aims: To determine the magnitude of exposures to atmospheric respirable crystalline silica (RCS) in mine workers recorded between 1986 and 2023 and if those exposures risk health effects. Methods: We used descriptive statistics to compare RCS exposures in mining job types. We identified high exposure occupations and modelled their resulting lung silica burden using known toxicokinetic parameters. These were compared with critical lung silica burdens for alveolar inflammation, soft macules, fibrosis and progressive massive fibrosis. We compared the miners' RCS exposures with historical silicosis cases in Western Australia's mine workers. Results: The geometric mean of more than 130 000 RCS results between 1986 and 2023 was 0.008 mg/m³. Exposures in exploration jobs were higher than in jobs on established mine operations (0.013 vs 0.007 mg/m³). Overall, exploration drilling assistant jobs and laboratory work were the two highest exposed cohorts, and modelling of steady state lung burden predicted 7.5 and 5.7 mg/lung, respectively, values an order of magnitude less than that associated with inflammation, and two orders of magnitude less than that associated with fibrosis. There have been 4 confirmed and 3 other possible cases of silicosis in more than 2 million person-years of mine work in WA since 1986. Conclusions: The low incidence of silicosis in the WA mining industry over the past 20 years is consistent with the estimated low silica lung burdens resulting from work-related exposures, which are significantly lower than the silica lung burdens typically associated with silicosis in the literature.

Kang J, Chang A, Wang X, Payne SC, Mehta RK, and Sasangohar F. Offshore worker compliance, perceived utility, effectiveness, and feasibility of daily fatigue assessments over four weeks in the Gulf of Mexico. *IIE Transactions on Occupational Ergonomics and Human Factors*. 2025; 13(3):165-176.

<https://doi.org/10.1080/24725838.2025.2466835>

Abstract: OCCUPATIONAL APPLICATIONS We conducted a study on offshore drillships in the Gulf of

Mexico that captured daily compliance rates with various fatigue assessments over four weeks—a Psychomotor Vigilance Task (PVT), actigraphy, physiological monitoring, and surveys. We obtained worker perceptions of these assessments' utility, effectiveness, and feasibility. Each fatigue assessment had a good overall compliance rate (>80%) over the four weeks but declined when the assessment was self-administered. Our interview findings revealed that actigraphy was the preferred means of monitoring their sleep to manage fatigue compared to physiological sensors. Workers also perceived PVT outcomes to be useful, but the duration (~10 min) was the biggest barrier to continued use. From these findings, we generated research-to-practice recommendations on effective and sustainable fatigue assessments in offshore shiftwork: (1) periodic use of actigraphy watches to monitor sleep time and efficiency and (2) implementation of a short 3- or 5-min PVT on an electronic device.

Lau K, Mkoma GF, Kreshpaj B, Kiss L, Zimmerman C, Norredam M, et al. All-cause and cause-specific mortality differences between migrant workers and local workers: a population-based cohort study in Denmark. *European Journal of Public Health*. 2025; 35(4):672-679.

<https://doi.org/10.1093/eurpub/ckaf058> [open access]

Abstract: Migrants are prone to poor working conditions in high-risk industries, yet little is known about their mortality risk compared to local-born workers. This study compares all-cause and cause-specific mortality between foreign-born and local-born workers, and identifies at-risk foreign-born workers. A nationwide register-based cohort study was performed using data on migrant workers obtaining residence permits in Denmark during 2015-22. Comparison group comprised Danish-born workers matched by age and sex. Survival analysis using extended Cox model was used to estimate all-cause and cause-specific mortality. Subgroup analysis was conducted by region of birth, economic sector, and occupation. Male migrant workers from Central Europe, Eastern Europe, and Central Asia had higher risk of all-cause mortality than Danish-born workers (HR = 1.30 [95% CI: 1.09-1.54]), attributed to accident deaths (HR = 1.64 [1.06-2.53]), whereas migrants from other regions had lower risk. Migrant workers from these regions were more likely to work in high-risk economic sectors and occupations, such as agriculture and construction. When stratified by economic sector and by occupation, among the elementary occupations, migrant workers from these regions still had a higher risk of all-cause mortality (HR = 1.70 [1.10-2.64]) and accident mortality (HR = 1.51 [1.22-1.85]) than Danish-born workers. Migrant workers from Central Europe, Eastern Europe, and Central Asia are more likely to die from accidents than Danish-born workers. This increased risk was partially explained by their higher representation in at-risk sectors and occupations. There is a need to better understand the structural determinants of health faced by these migrants, particularly in elementary occupations, to prevent avoidable deaths.

Lim GH, Tan ML, Hoe VCW, and Koh D. Generative AI in peer review process for occupational health. *Occupational Medicine*. 2025; 75(5):242-249.

<https://doi.org/10.1093/occmed/kqaf051> [open access]

Abstract: BACKGROUND: Generative Artificial Intelligence (AI) tools in academic writing can augment and speed up the proofing process by improving sections of the manuscript. This was the first known instance where the effectiveness and efficiency of Generative AI were quantified. AIMS: To determine the effectiveness and efficiency of these tools in providing feedback and recommendations to the first drafts of eight published occupational health papers. METHODS: To assess effectiveness, manuscripts

were reviewed by Microsoft Copilot, ChatGPT (GPT-3.5), Google Gemini 1.0 and five human reviewers in February 2024. Anonymized reviews were scored by two expert panel members using a self-developed structured scoring system. The quality of feedback was rated on its relevance, completeness, accuracy and ability to identify errors and provide constructive feedback. The quality of recommendations was rated on relevance, completeness and accuracy. Efficiency was assessed via the time taken to complete each review. The mean, standard deviation (SD) and level of significance of any differences among the parameters were obtained. RESULTS: Generative AI tools were significantly more effective (3.44, SD 0.77, $P < 0.001$) than human reviewers in providing feedback, while human reviewers performed significantly better (3.36, SD 0.71, $P < 0.01$) in providing recommendations. Generative AI tools were significantly more time-efficient and had the advantage of being always available. However, time/effort was required to verify the output for fictitious content. CONCLUSIONS: The utilization of Generative AI would improve the speed and accuracy of improving the manuscript prior to publication, leading to greater efficiencies in the dissemination of knowledge to the occupational health community

Neupane S, Prakash KC, Nosraty L, Kyronlahti S, Nygard CH, and Oakman J. Sickness absence trajectories and retirement pathways among industrial workers. *European Journal of Public Health*. 2025; 35(4):665-671.

<https://doi.org/10.1093/eurpub/ckaf104> [open access]

Abstract: We studied the trajectories of sickness absences among industrial workers over 6 years and examined whether the membership of trajectories was associated with subsequent retirement type for 11 years. We used data from one of the largest Finnish food industry companies that responded to a questionnaire survey in 2003. Sickness absence days per year from 2003 to 2008 were obtained from the company's registers and linked to the register of Finnish Centre for Pension data (statutory and non-statutory) until the end of 2019. We analysed data from 633 individuals who had information on sickness absence and the type of retirement. Latent class growth modelling was used to identify trajectories of sickness absence days per year, and Cox-regression models were used to examine the association of trajectories with retirement type. The models were adjusted for baseline sociodemographic, work-related physical, and psychosocial factors. We identified three distinct trajectories of sickness absence during the 6-year period. Most respondents (51.2%) had low-fluctuating, one-third (33.9%) had moderate-stable, and 14.9% had a high-stable sickness absence trajectory throughout. The high-stable trajectory was associated with a higher risk of non-statutory retirement (hazard ratio 2.67, 95% confidence interval 1.69-4.23) when adjusted for sociodemographic, perceived health, and work-related variables. We found significant heterogeneity in the number of sick absence days per year among the private sector employees over a period of 6 years. An increase in the risk of non-statutory retirement among those with high-stable sickness absences signifies the importance of early intervention to support individuals experiencing recurring sickness absence whilst employed

Rafalko N, Siegel S, Yerkes P, Eberth JM, Burstyn I, and Goldstein ND. Quantifying the primary care workforce in the U.S.: a validation study with and without an imperfectly measured referent standard. *Annals of Epidemiology*. 2025; 108:92-98.

<https://doi.org/10.1016/j.annepidem.2025.06.011> [open access]

Abstract: Purpose: To validate the National Provider Identifier (NPI), a commonly used data source in

health services research, for identifying primary care physicians, physician assistants (PAs), and nurse practitioners (NPs). Methods: Validation studies to calculate the sensitivity, specificity, and associated 95 % confidence intervals for physicians, PAs, and NPs. For physicians, Medicare claims data were used as an imperfectly measured referent standard. For PAs and NPs, we used a simulation-based method to estimate accuracy parameters that assumed the NPI and Medicare claims were equally misclassified. Results: Using the Medicare claims as the referent standard for physicians yielded a sensitivity and specificity of 0.95 (95 % CI: 0.88, 0.98) and 0.76 (95 % CI: 0.73, 0.79), respectively. Using the simulation-based method yielded a sensitivity and specificity of 0.57 (95 % CrI: 0.11, 0.97) and 0.56 (95 % CrI: 0.10, 0.96), respectively for PAs and 0.58 (95 % CrI: 0.13, 0.97) and 0.61 (95 % CrI: 0.14, 0.97), respectively for NPs. Conclusions: Our validation results varied by provider role. Accuracy was highest for physicians further highlighting the challenges in quantifying PAs and NPs based on their NPI alone. Failure to consider potential misclassification in the NPI may result in biased research findings.

Rijnhart JJM, Rabbers A, Rizzuto S, Howard AM, and Valente MJ. An umbrella review reveals that control variables are rarely considered as a source of heterogeneity in systematic reviews of observational studies. *Journal of Clinical Epidemiology*. 2025; 184:111826.

<https://doi.org/10.1016/j.jclinepi.2025.111826>

Abstract: OBJECTIVES: The effect estimates in systematic reviews of observational studies often exhibit high heterogeneity. A potentially important source of heterogeneity are differences in the control variables across observational studies. However, it remains unclear how often this source of heterogeneity is considered in practice. The objective of this umbrella review is to determine how often control for different sets of variables across primary studies was considered as a source of heterogeneity in published systematic reviews of observational epidemiologic studies. STUDY DESIGN AND SETTING: We systematically searched for systematic reviews of observational studies published in a quartile 1 Web of Science or Scopus-indexed epidemiology journal between January 1, 2023, and December 31, 2023. Eligibility screening, data extraction, and quality appraisal were performed by two independent reviewers. Data were summarized using descriptive statistics. RESULTS: Eligibility criteria were met by 297 systematic reviews, of which a random sample of 50 systematic reviews was included in this umbrella review. Differences in confounder sets were mentioned as a potential source of heterogeneity in 5/50 reviews (10.0%), differences in covariate sets in 4/50 reviews (8.0%), control for mediators in 0/50 reviews (0.0%), and control for colliders in 0/50 reviews (0.0%). CONCLUSION: While differences in control for confounders, mediators, and colliders may explain heterogeneity in systematic reviews of observational studies, these sources of heterogeneity are rarely considered in practice. To avoid invalid pooled effect estimates, it is important that future systematic reviews of observational studies assess these potential sources of heterogeneity

Stelson EA, Sorensen G, Berkman L, Ballou S, Hashimoto D, Kubzansky LD, et al. Physical health consequences of vicarious trauma: prospective relationship between hospital patient care worker vicarious trauma symptoms and gastrointestinal disorders. *Journal of Occupational & Environmental Medicine*. 2025; 67(8):654-665.

<https://doi.org/10.1097/JOM.0000000000003432> [open access]

Abstract: OBJECTIVE: Vicarious trauma (VT) is "secondhand" trauma healthcare workers experience when interacting with trauma survivors. The prospective relationship between workers' VT symptoms

and physical health has not been studied. **METHODS:** Survey data from 775 hospital workers were linked to health insurance expenditures to identify stress-related conditions known as disorders of gut-brain interaction (DGBIs) occurrence within 1-year follow-up. VT symptoms (modeled continuously and categorically) and conditional odds of developing DGBI were assessed with multilevel logistic regression. **RESULTS:** Conditional odds of DGBI increased 4% for every one-point increase in VT symptom score (95% confidence interval, 0.98 to 1.11; $P = 0.17$). Participants with high versus low VT symptoms had 3.40-times the conditional odds of DGBI (95% confidence interval, 1.44 to 8.06; $P = 0.01$). **CONCLUSION:** Workers with high versus low VT symptoms had significantly higher odds of developing DGBIs, indicating that VT may adversely impact workers' physical health

Stjernbrandt A, Liv P, Jackson JA, Pettersson H, Lewis C, Punnett L, et al. Occupational biomechanical risk factors for carpal tunnel syndrome surgery: a prospective cohort study on 203 866 Swedish male construction workers followed for 19 years. Occupational and Environmental Medicine. 2025; 82(6):263-269.

<https://doi.org/10.1136/oemed-2024-110008> [open access]

Abstract: **OBJECTIVES:** To prospectively determine the association between occupational biomechanical exposures and the incidence of surgically treated carpal tunnel syndrome (CTS) in Swedish male construction workers. **METHODS:** A cohort of 203 866 Swedish male construction workers who participated in a national occupational health surveillance programme between 1971 and 1993 were followed for CTS surgery between 2001 and 2019. Age, height, weight, smoking status and construction trade were obtained from programme records. CTS surgery cases were defined using the diagnostic code for CTS and surgical procedure code for peripheral median nerve decompression in the Swedish National Patient Register. Biomechanical exposure estimates were assigned by trade from a job-exposure matrix. The relative risk (RR) of CTS surgery for each biomechanical exposure was assessed with multivariable negative binomial regression modelling. **RESULTS:** The study included 3851 cases and the total incidence rate of CTS surgery was 137.6 cases per 100 000 person-years. Associations were found for upper extremity load (RR 2.6; 95% CI 2.2 to 3.0), repetitive wrist flexion and extension (RR 2.6; 95% CI 2.2 to 3.0), full wrist extension (RR 2.3; 95% CI 1.9 to 2.6), power grip (RR 2.5; 95% CI 2.2 to 2.9), pinch grip (RR 2.0; 95% CI 1.7 to 2.4), handheld tool use (RR 2.3; 95% CI 2.0 to 2.7) and hand-arm vibration exposure (RR 2.3; 95% CI 1.9 to 2.7). **CONCLUSIONS:** Occupational upper extremity load and postural exposures were associated with increased risk for surgical treatment for CTS in this large construction worker cohort. Preventive actions and consideration of occupation on assessment are warranted

Teras LR, Diver WR, Mitchell EL, Hodge JM, Turner MC, Deubler EL, et al. Occupation as a firefighter and cancer mortality in a population-based cohort in the United States. International Journal of Epidemiology. 2025; 54(4):dyaf104.

<https://doi.org/10.1093/ije/dyaf104>

Abstract: **Background:** A 2022 International Agency for Research on Cancer (IARC) Working Group concluded that occupational exposure as a firefighter causes mesothelioma and bladder cancer. Evidence for causality of other cancers was considered limited or inadequate, but methodologic limitations may have contributed to inconsistent or null findings from previous studies. The present analysis uses data from >470 000 men enrolled in a general population, prospective cohort to assess associations between occupation as a firefighter and cancer mortality. **Methods:** Multivariable hazard

ratios (HR) and 95% confidence intervals (CI) were used to compare survival time among firefighters (n = 3085) to other male participants in the American Cancer Society Cancer Prevention Study-II Cohort. Data were obtained from surveys taken by cancer-free individuals with 36 years of mortality follow-up (1982-2018). Occupations were categorized according to 1980 Census Bureau groups and cancer deaths according to the International Classification of Disease. Results: Occupation as a firefighter compared to career professional was associated with most cancers, but strongest for skin (HR = 1.72, 95% CI: 1.14-2.60) and kidney (HR = 1.39, 95% CI: 0.92-2.09) cancer mortality. Suggestive increases in prostate and colorectal cancer mortality were observed with more years as a firefighter. An association with lung cancer was only apparent after three decades of follow-up. Most associations attenuated with control for confounders and changes in referent group to include all nonfirefighter occupations, but associations with skin and kidney cancers persisted. Conclusions: These results support additional associations for occupation as a firefighter and cancer mortality beyond those reported in the most recent IARC evaluation.

Warhurst C, Knox A, and Wright S. Developing a standard measure of job quality. *Work, Employment and Society*. 2025; 39(4):927-948.

<https://doi.org/10.1177/09500170251325774> [open access]

Abstract: The UK government is concerned about job quality. However the lack of scientific consensus about measuring job quality hampers policy efforts to improve the quality of jobs. To address this problem, a standard measure was developed and adopted to report job quality by the UK's Office for National Statistics. This article outlines a replication study using a new dataset to assess the reliability and validity of this standard measure. The dataset comprises 75 empirical studies that examine job quality in the UK and elsewhere. Using this dataset, the standard measure is confirmed, encompassing six dimensions of job quality. Subsequently, this study establishes both the reproducibility of the measure and the replicability of the methods used to develop that measure. In doing so, the findings will facilitate improved research and policy development along with greater conceptual clarity regarding job quality, long called for by social scientists.

Missed an issue? Catch up on previous Research Alerts available on the IWH website
www.iwh.on.ca/journal-articles/research-alerts