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

***Keshavarz E, Hansen N, Buckland J, and Engel L. Feeling excluded in financial environments: challenges and strategies to promote financial inclusion for adults with post-stroke communication disabilities. *Journal of Communication Disorders*. 2026; 119:106595.**

<https://doi.org/10.1016/j.jcomdis.2025.106595> [open access]

Abstract: INTRODUCTION: Participating in financial environments may be challenging for people with stroke due to the communication disabilities they may experience. Understanding the experiences of adults with stroke-related communication disabilities in financial environments could help to identify strategies to improve their participation and performance. This study aimed to explore the experiences and potential challenges of people with post-stroke communication disabilities in financial environments, and introduce strategies for improving financial participation. METHOD: Four adults, three being women, from Manitoba with stroke-related speech and language disabilities participated in individual interviews for this qualitative descriptive research study. The data were analyzed using thematic analysis. RESULTS: Four themes and three subthemes were developed, highlighting that post-stroke communication disabilities often lead to financial exclusion due to external factors like institutional structures and social environments. Ableism, reflected in others' attitudes or behaviors, may have also impacted financial inclusion and participation. However, participants suggested strategies to improve financial participation and inclusion of people with stroke-related communication disabilities. CONCLUSION: This study adds to the growing area of speech-language pathology practice and research related to critical disability theory. Clinicians need to be aware that environments, including financial environments, have a key influence on the participation of people with post-stroke communication disabilities. Future studies should examine

policies and practices in financial environments for people with stroke-related communication disabilities to improve their social inclusion

***Pienkowski M, Dollard M, and Smith P. The combined effect of psychosocial safety climate and OHS vulnerabilities on workplace injury risks. American Journal of Industrial Medicine. 2026; [epub ahead of print].**

<https://doi.org/10.1002/ajim.70049>

Abstract: Objective: Physical and psychological workplace injuries present serious risks to employee well-being, productivity, and public health. More fully understanding the combined role of the psychosocial and physical work environments in increasing the risk of work injuries is an important public health concern. We explored the relationship between psychosocial safety climate (PSC) and occupational health and safety vulnerability (OHS-V) and their combined impact on work-related physical and psychological injuries. Methods: Workers in British Columbia completed a cross-sectional online survey, measuring injuries, demographic, and job-related covariates. The PSC-12 scale assessed management priorities, consultation, and communication, while the OHS-V index evaluated hazards and protections. Adjusted regression models estimated the risk ratios associated with OHS-V and PSC on injury, and additive effects between PSC/OHS exposures and injury were explored. Results: High-risk PSC and OHS-V environments were independently associated with increased risk of both psychological (RR = 3.09, 95% CI = 2.60-3.66 and RR = 4.78, 95% CI = 3.82-5.97, respectively) and physical injury (RR = 2.13, 95% CI = 1.88-2.41 and RR = 3.32, 95% CI = 2.89-3.82, respectively). The combined effect of high-risk PSC and OHS-V showed additive impacts, with the combination of high-risk PSC and OHS-V environments associated with an RR of 10.08 (95% CI = 4.48-22.70) for psychological injuries and an RR of 4.77 (95% CI = 2.61-8.71) for physical injuries. Conclusion: This study underscores the importance of addressing both psychosocial and physical safety factors to prevent physical and psychological injury. Targeting both psychosocial and physical hazards in combination can reduce the incidence of both types of injuries, promoting a healthier, more productive workforce.

Bianchi R, De Beer LT, Engelbrecht GJ, van der Vaart L, and Schonfeld IS. The occupational anxiety inventory: a new measure of job-related distress. International Journal of Stress Management. 2025; 32(4):470-485.

<https://doi.org/10.1037/str0000371>

Che Mat N, Idris MA, and Dormann C. Exploring time lags between job stressors and burnout in cross-lagged panel and diary studies: a systematic literature review. International Journal of Stress Management. 2025; 32(4):325-342.

<https://doi.org/10.1037/str0000369> [open access]

Abstract: Despite extensive research into the causal relationship between job stressors and burnout, the role of time in the progression of burnout symptoms remains unclear. This article examines the time lags used in cross-lagged panel and diary studies to identify patterns in the relationship between job stressors and burnout symptoms over both long and short periods. We systematically reviewed articles from three major databases, ultimately including 71 studies in our final analysis. In total, we identified 65 distinct types of job stressors, primarily stemming from job characteristics and individual factors. The mixed findings on the effects of job stressors and burnout symptoms highlight the need for researchers to carefully consider optimal time lags and statistical analysis to better capture the

dynamic nature of the stressor-burnout relationship, ultimately leading to more effective interventions for managing workplace stress and preventing burnout. (PsycInfo Database Record (c) 2025 APA, all rights reserved)

Cole K, Carey RN, and Driscoll T. The future burden of silicosis and lung cancer among tunnel construction workers in Queensland. *Annals of Work Exposures and Health.* 2025; 69(9):917-926.
<https://doi.org/10.1093/annweh/wxaf013> [open access]

Abstract: Exposure to respirable crystalline silica (RCS) is known to increase the risk of the development of silicosis, in addition to lung cancer and other diseases. While much evidence of the link between underground tunnel construction and the resultant development of silicosis exists, limited information is available on the levels of occupational exposure to RCS or the prevalence of RCS-related disease in tunnelling in Australia. Publicly available RCS exposure data were sourced from the construction of 3 major Queensland tunnelling projects between 2007 and 2013. Statistical evaluation was performed to estimate RCS exposure, and together with estimates of workforce size and risk estimates, the future excess number of silicosis and lung cancer in that tunnelling workforce were estimated. In a cohort of around 2,000 workers who serviced the Queensland tunnel projects, it was estimated that between 20 and 30 cases of lung cancer and between 200 and 300 cases of silicosis would develop over their lifetime as a result of exposure to RCS. This paper highlights the likely future burden of disease, the need for case-finding and better control measures to reduce RCS exposure in this high-risk cohort

Erby WJ and Blustein DL. Racism at work and racial identity of Black graduates of elite universities: a psychology of working perspective. *Journal of Career Assessment.* 2025; 34(1):185-201.
<https://doi.org/10.1177/10690727251325861>

Giezek M, Szpakow A, Mintus B, and Karakiewicz B. Risk factors for harmful alcohol consumption among employees and intervention strategies used in the workplace: current state of knowledge based on a literature review. *Frontiers in Public Health.* 2025; 13:1685325.
<https://doi.org/10.3389/fpubh.2025.1685325> [open access]

Abstract: INTRODUCTION: Harmful alcohol consumption among employees is a significant public health problem, leading to adverse health and social outcomes, as well as impaired occupational functioning. Identifying risk factors and effective prevention strategies is crucial to address this issue in the workplace. The aim of this study was to analyze the main determinants of harmful alcohol use among employees and to assess the effectiveness of interventions in occupational settings.
METHODS: A literature review was conducted on studies published between 2020 and 2024. The PubMed, Scopus, and Web of Science databases were searched for international studies on workplace alcohol consumption and intervention strategies. Key risk factors, workplace interventions, and their effectiveness were analyzed. Inclusion criteria included peer-reviewed articles published in English, a focus on employees or the occupational context, and a clear analysis of risk factors or interventions addressing harmful alcohol consumption. Titles and abstracts were independently reviewed by two researchers, and any discrepancies were resolved by a third. Data on risk factors, types of interventions, target populations, and outcome measures were extracted and summarized in tables.
RESULTS: Key risk factors identified comprise high job strain, workplace-related stress, low social support, job insecurity, unfavorable organizational culture, and shift work. Harmful alcohol use was associated with increased risk of workplace accidents, absenteeism, and diminished productivity.

Effective preventive approaches included the implementation of digital interventions (e.g., mobile health applications, online brief interventions), involvement of management in educational campaigns, organizational policy changes, and multi-level, sustained action plans. Interventions targeting both individual and organizational levels demonstrated the greatest potential for sustainable impact. CONCLUSION: Reducing harmful alcohol use in the workplace requires a comprehensive, multi-level approach tailored to organizational context and providing long-term employee support. Continued evaluation and adaptation of intervention strategies to specific workplace environments are recommended

Hu Z, Li S, He C, Shen Y, Zhong H, and Li S. Literature review on construction safety resilience: a bibliometric analysis to map the state of the art. Safety and Health at Work. 2025; 16(3):259-267.

<https://doi.org/10.1016/j.shaw.2025.05.004> [open access]

Abstract: BACKGROUND: This study provides a comprehensive overview of the research progress on construction safety resilience and sets up a three-subdimension concept framework (structural resilience, psychological resilience, and managerial resilience) with the theory of engineering resilience. METHODS: With a three-step review method based on document metrics analysis and scientific measurements, this study screened 1,018 related articles published on the Web of Science, and 168 articles were finally selected as research samples. The VOSviewer software was used to analyze the number of publications, the journals, and the keyword co-occurrence. The software-generated visual graphics and tables were described and summarized. RESULTS: The results show that the existing research on construction safety resilience mainly focuses on three streams: structural resilience, psychological resilience, and managerial resilience. Previous studies on structural resilience mostly focus on the physical aspect of a construction project, while the research on psychological and managerial resilience mainly relates with the personal and managerial aspects of a construction project, respectively. The differences, influencing factors, and measuring methods for these three research streams on construction safety resilience were also explored. Future studies could distinguish them more clearly with their definitions, measurements, and relationships. CONCLUSION: This study helps to clarify the framework of construction safety resilience and provides a theoretical basis for the evaluation and development of resilient construction safety management, which may be beneficial for future studies on construction safety resilience

Kabic T, Simundic MM, Weerasekara I, Bala MM, Zajac J, Briel M, et al. Reporting guidelines can be used to foster reporting of evidence-based research principles: a cross-sectional study. Journal of Clinical Epidemiology. 2026; 189:112008.

<https://doi.org/10.1016/j.jclinepi.2025.112008>

Abstract: OBJECTIVES: The purpose of our study was to examine the presence and the extent of items related to an evidence-based research (EBR) approach in reporting guidelines, as well as their features and how these items were implemented. We evaluated whether protocol and complete report guidelines make sufficient/any recommendations to foster EBR. STUDY DESIGN AND SETTING: This cross-sectional study included the most recent version of any reporting guideline that included a checklist published on the Enhancing the QUALity and Transparency Of health Research (EQUATOR) Network website. Only guidelines that were applicable to the whole report were included. Two authors independently screened the guidelines and extracted data on whether the checklist and its accompanying article(s) incorporated EBR principles, including justification for a new study, optimal

design of a relevant and necessary new study, contextualization of new results in relation to earlier studies, and whether they defined prior evidence. **RESULTS:** Of 635 checklists published on the EQUATOR website as of August 1, 2024, we analyzed 219 pertaining to the whole report. Among these, nine (4.1%) checklists included items addressing EBR for justifying a new study, seven (3.2%) for optimally designing a relevant and necessary new study, and three (1.4%) for placing new results in the context of earlier research. The corresponding figures in accompanying articles were 5 (2.3%), 2 (0.9%), and 2 (0.9%), respectively. **CONCLUSION:** Currently, the majority of reporting guidelines do not explicitly incorporate EBR principles. Core EBR principles are applied primarily at the design phase of the research, where protocol guidance plays a critical upstream role. The reporting guidelines can complement this by requesting transparent reporting, particularly contextualization of results. To better support EBR and reduce research waste, it is essential to strengthen protocol guidance, align standards across protocols and final reports, and improve the uptake and implementation of these guidelines during the planning stages of research

Kirchner S, Gemes K, Josefsson P, Niederkrotenthaler T, Melchior M, Haro JM, et al. Sickness absence with common mental disorders and antidepressant prescriptions across different employment branches during as compared to before the Covid-19 pandemic: an observational study covering the Swedish population aged 18-65 years. European Journal of Public Health. 2025; 35(6):1137-1142.

<https://doi.org/10.1093/eurpub/ckaf145> [open access]

Abstract: Few studies have examined the implications of the Covid-19 pandemic on mental health across different employment branches. This study investigated the impact of the pandemic on long-term sickness absence (SA) with common mental disorders (CMDs) and antidepressant prescriptions in different employment branches and age groups in Sweden. Using national registers, we observed the Swedish population (18-65 years) with gainful employment quarterly from 2018 to 2021. An interrupted time-series design was employed to examine changes in trends of incidence rates (IRs) for (i) long-term (>90 days) SA with CMDs and for (ii) antidepressant prescriptions across eight employment branches during versus pre-pandemic. Analyses were stratified by age group. There was no evidence of outcome changes in the entire working age population. However, compared to pre-pandemic levels, the IRs of long-term SA with CMD increased by 5.9% per quarter for those working in the cultural sector [95% confidence interval (CI): 2.2%-9.8%], 3.4% in trade and transportation (95% CI: 0.4%-6.4%), and 5.5% in manufacturing and services (95% CI: 1.5%-9.7%) as well as among individuals aged 56-64. Incident antidepressant prescription rates were marginally higher for workers in construction (1.1% annual increase; 95% CI: 0.1%-2.1%), culture (1.4%; 0.7%-2.0%), and trade and transportation (0.9%; 0.1%-1.7%). While the risk of CMD-related long-term SA or incident antidepressant prescription in Swedish workers did not appear to be impacted by the pandemic, certain employment branches and older individuals were negatively affected in terms of both outcomes. Targeted countermeasures and initiatives to improve well-being are necessary for vulnerable groups.

Maharjan P, Griffiths D, Di Donato M, Sheehan LR, Mazza D, and Collie A. General practitioner service use before and after long-term workplace injury: a retrospective cohort study. *Journal of Occupational Rehabilitation*. 2026; [epub ahead of print].

<https://doi.org/10.1007/s10926-025-10356-6>

Abstract: Purpose: In Australia, general practitioner (GP) consultations for work-related injuries are funded by workers' compensation and GP care for non-work-related conditions is funded by public health insurance (Medicare Benefits Schedule, MBS). This study aimed to measure changes in the proportion and frequency of GP consultations after a long-term work injury, including both Medicare and workers' compensation funded care, and to assess the proportion of GP services funded by each scheme. Method: This retrospective cohort study linked administrative GP records from MBS and workers' compensation systems in New South Wales, Australia. The study included injured workers with long-duration (2 + years) compensation claims and community comparators. Primary outcome measures included the proportion and frequency of GP services, measured in the year pre-injury, and each of the first two years post-injury. Mixed-effects negative binomial regression was used to compare outcomes between groups during all three study periods. Results: The cohort included 3170 injured workers and 7636 community controls. The annual median GP services increased from 5 (Interquartile range 2-10) pre-injury to 19 (IQR 12-27) in the first-year post-injury and decreased to 16 (IQR 10-23) in the second year. Compared to the community control cohort, injured workers used 3.6 (95% CI 3.33, 3.81) and 2.7 (95% CI 2.54, 2.91) times more GP services in the first- and second-year post-injury, respectively. This increase in annual median service use was observed among those funded by workers' compensation, while services subsidised by Medicare remained similar across all three study periods. Conclusion: GP service use by injured workers with long-compensation claims increased substantially post-injury and remained high for two years. Workers also continued receiving Medicare-subsidised services at a similar level to pre-injury, presumably for managing non-work-related conditions. An integrated care model may provide holistic support to injured workers needing care for both workplace-injury-related and other conditions.

Rodgers YVM, Schur L, Hammond FM, Edwards R, Cohen J, and Kruse D. Work from home and job satisfaction: differences by disability status among healthcare workers. *Disability and Health Journal*. 2026; 19(1):101931.

<https://doi.org/10.1016/j.dhjo.2025.101931> [open access]

Abstract: BACKGROUND: Many workers with disabilities face negative stereotypical attitudes, pay gaps, and a lack of respect in the workplace, contributing to substantially lower job satisfaction compared to people without disabilities. Work from home may help to increase job satisfaction for people with disabilities. OBJECTIVE: This study analyzes how different measures of job satisfaction vary between people with and without disabilities, and the extent to which working from home moderates the relationship between disability and job satisfaction. METHODS: We use multivariable regression analysis to examine if the ability to work from home moderates the relationship between disability and indicators related to job satisfaction. The dataset draws on a novel survey of healthcare professionals. RESULTS: Results show that people with disabilities have relatively greater turnover intentions, lower sense of organizational commitment and support, weaker perceptions of openness and inclusion in the workplace, and worse relations with management and coworkers. Regressions indicate that working from home helps to improve most perceptions of work experiences but does so more for people without disabilities than for people with disabilities. CONCLUSIONS: The findings

suggest that (a) some accommodations typically viewed as exceptions to meet the needs of people with disabilities have even greater benefits for the workforce at large and (b) because workers without disabilities also benefit from remote work, we cannot expect this accommodation to close job satisfaction gaps caused by inequities

Nakase-Richardson R, Haun J, Sevigny M, Martin A, Hanks R, Hammond F, et al. TBI disability, health beliefs, and workforce capacity are top barriers to chronic pain guideline-based nonpharmacologic interventions. Archives of Physical Medicine & Rehabilitation. 2026; 107(1):32-41.

<https://doi.org/10.1016/j.apmr.2025.06.002>

Abstract: OBJECTIVE: To examine determinants of evidence-based, nonpharmacologic treatments for chronic pain among patients with traumatic brain injury (TBI) using an access to care lens. DESIGN: Convenience sample of respondents to an online survey directed to rehabilitation professionals. SETTING: Civilian and VA-based centers with TBI providers. PARTICIPANTS: US based providers (N=145) (63% civilian; 34% VA, 3% DOD). INTERVENTION: Not applicable. MAIN OUTCOME MEASURES: A 10-item survey examining barriers to nonpharmacologic evidence-based therapies, informed by the robust Levesque Access to Care framework, which includes supply and demand characteristics. Six of the items described patient and community abilities to access care and 4 focused on health care system or infrastructure critical in access. On the basis of their professional experience, participants were asked to separately rate the frequency of the 10 barriers for each of the 3 specific guideline-endorsed interventions for chronic pain: behavioral health therapies, comprehensive chronic pain programs, and substance use disorder treatment. RESULTS: Across all 3 interventions, morbidity associated with TBI (ie, cognitive, physical disabilities), patient lack of understanding, trust, or beliefs about efficacy of intervention, and lack of qualified providers who can deliver the intervention were the most frequently endorsed barriers to delivering NP-EBTs for chronic pain. Subgroup analyses found higher frequency of barriers in civilian versus VA settings particularly related to patient ability to afford (58%-70% difference) and insurance coverage (54%-61%) of interventions. CONCLUSIONS: Findings have implication for policy and practice to address health care inequities that persons with TBI-related disability experience in accessing high-quality, evidence-based treatments

Park JS, Park EK, Kim HK, and Choi GS. Trends in occupational skin disease among Korean workers (2006-2017): insights into declining prevalence and demographic shifts. Safety and Health at Work. 2025; 16(4):454-461.

<https://doi.org/10.1016/j.shaw.2025.08.005> [open access]

Abstract: Background: Occupational skin diseases (OSDs) are among the most common work-related illnesses and impose a significant socioeconomic burden. While improvements in workplace environments have been noted in the Republic of Korea over the past two decades, research investigating long-term trends in OSD prevalence remains limited. Methods: This study analyzed the 2006-2017 Republic of Korea Working Conditions Survey (KWCS) data to examine temporal trends in self-reported 1-year prevalence of OSDs among Korean workers. OSD was identified based on self-reported skin symptoms and perceived work-relatedness. Sociodemographic, occupational characteristics, and hazardous factor exposure were assessed using descriptive statistics, Chi-square tests, and Pearson's correlation. Results: The self-reported 1-year prevalence of OSD significantly declined from 5.03% in 2006 to 0.67% in 2017 ($p < 0.001$). Demographically, the proportion of older

workers (>=60 years) among OSD cases increased. OSD remained concentrated in small-scale workplaces and personal protective equipment (PPE)-required occupations. Notably, 1-year OSD prevalence declined among those using PPE and workers informed on occupational safety and health. Industrial shifts were observed, with a growing proportion of cases in primary sectors such as agriculture and forestry, while prevalence declined in manufacturing and construction. Despite these trends, the proportion of OSD cases exposed to high and low temperatures and chemical skin contact increased over time. Conclusion: Despite self-reported OSD's overall decline in the Republic of Korea, emerging challenges like increased exposure in vulnerable groups and shifts to higher-risk industries persist. Our findings underscore the need for targeted prevention, continuous monitoring, and robust research to address evolving occupational skin health.

Rajappan D, Sivasubramanian Thangathurai Pandian A, Vijayakumar Santhi I, and Neelakanda Pillai Varadha Lekshmi RK. Occupational stress: analyzing the factors affecting the well-being and mindfulness of information technology employees at the workplace. Work. 2025; 82(4):1131-1142.

<https://doi.org/10.1177/10519815251353461>

Abstract: Background Stress at the workplace has a detrimental effect on the job performances of both the employees and the employers. This study discusses occupational stress of employees in Information Technology (IT) organizations and analyzes the factors which tend to affect the well-being and mindfulness of employees at the workplace. Objective This research with a focus on multiple stress factors including individual factors, organization factors, and environment factors has undergone an empirical investigation to examine which of the factors cause stress to employees in their workplace. Methods A structured questionnaire has been developed with 30 questions and the data have been collected from 260 employees of IT organizations. The collected data have been analyzed using ANOVA and SEM. From the analysis results of ANOVA, we conclude that individual factors, environment factors, and organization factors can highly impact the mindfulness and well-being of employees in an organization. Results This study shows that there are several consequences to applying mindfulness for managing stress in an organization. Conclusions We conclude that these consequences can influence businesses, activists, and scholars. This study reveals that organization factors, individual factors, and environment factors cause occupational stress and impact the well-being and mindfulness of workers

Shin S. Effect of initiation and cessation of night shift work on health: a retrospective longitudinal study. Archives of Environmental & Occupational Health. 2025; 80(10):275-281.

<https://doi.org/10.1080/19338244.2025.2585263>

Abstract: This study aimed to evaluate the changes of health outcomes in individuals who started and those who ceased working the night shift. Linear mixed models were used to determine whether the initiation and cessation groups differed from the control group in terms of annual changes in health outcomes. When comparing the control and initiation groups, The Center of Epidemiological Studies Depression Scale showed significant increase compared to the control group, while the metabolic equivalent task scores showed significant decrease compared to the control group. The body mass index (BMI), total cholesterol, low-density lipoprotein cholesterol, and triglyceride levels showed significant increase compared to the control group, while the high-density lipoprotein cholesterol level showed significant decrease compared to the control group. This study identified depressive mood changes and decreased physical activity as the first manifestations of night shift work. An

increase in BMI and worsening of lipid profiles were observed in the cessation group, relative to the control group

Yang Y, Herdt ML, Hosler AS, Desrosiers TA, and Howley MM. Association between maternal occupation as a cleaner/maid/janitor during early pregnancy and selected birth defects in the National Birth Defects Prevention Study. Occupational and Environmental Medicine. 2025; 82(10):504-511.

<https://doi.org/10.1136/oemed-2025-110511>

Abstract: Objectives: Cleaning work involves potential exposures to physical, chemical, biological and psychosocial hazards, which might increase the risk of birth defects. Yet, there is limited research focused on maternal occupation in cleaning jobs and the risk of birth defects. We investigated the association between maternal occupation in cleaning-related jobs during early pregnancy and selected birth defects in the National Birth Defects Prevention Study, a case-control study from 1997 to 2011. Methods: Mothers self-reported job details, which were classified by occupational epidemiologists into cleaner or non-cleaner occupations. Cases were live births or stillbirths with at least one of 19 eligible birth defects ascertained from state surveillance systems, while controls were randomly selected live births without structural defects. We estimated adjusted ORs with 95% CIs from multivariable logistic regression for associations between maternal cleaning occupations and birth defects, controlling for eight covariates identified a priori. Results: Of the 28 936 mothers, 1109 (868 cases/241 controls) were assigned a primary occupational code as a cleaner during early pregnancy. In total, 9 of the 19 included birth defects had elevated ORs (>1.5), ranging from 1.58 for anophthalmia/microphthalmia to 2.65 for oesophageal atresia/stenosis; six had CIs that excluded the null (anencephaly, glaucoma, anotia/microtia, cleft lip and palate, oesophageal atresia/stenosis, small intestinal atresia/stenosis). Conclusions: We observed that maternal occupation in cleaning-related jobs was associated with several specific birth defects in various body systems. Future studies should explore specific chemical and physical exposures under these cleaning occupations and the association with birth defects.

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