Emerging Evidence Alert
April 2019

This Emerging Evidence Alert supports Comcare’s strategic focus of working with employees and employers to minimise the impact of harm in the workplace, improve recovery at and return to work, and promote the health benefits of work through good work design. It also provides the latest research evidence to support Comcare’s Strategic Research and Innovation group’s five areas of importance to Comcare’s strategic direction.

- Enabling healthy and safe workplaces
- Enhancing employer capability
- Guiding and supporting mental health
- Fostering work participation
- Adapting to the future of work

The following topics support these areas of strategic importance.

Where possible, links to the full text of the articles have been included. The Digital Object Identifier (DOI) has also been included where possible, to enable direct links to the article and journal. Check with your library to see if you have access or may ask for an interlibrary loan.

Emerging Evidence Topics
Fostering Work Participation

- Absenteeism and presenteeism
- Ageing workforce
- Asbestos and mesothelioma
- Chronic health issues
- Ergonomic issues
- Health and wellbeing
- Management and leadership
- Musculoskeletal issues
- Occupational issues
- Psychosocial issues
- Public health
- Return to work
- Shift work
- Vocational rehabilitation
- Work ability
- Work disability
- Work health and safety
- Work stress
- Workers’ compensation
- Workplace bullying
ENGAGING GENERAL PRACTITIONERS FOR WORKPLACE HEALTH AND WELLBEING

Comcare has a focus on supporting and influencing health practitioner behaviour and certification processes to create practice change that supports returning employees to good work. It is now well accepted that good work is good for mental and physical health and wellbeing and can help in recovery from injury or illness.

General practitioners (GPs) and other treating health practitioners (THPs) play a vital role in supporting employees to recover at and return to work (RTW). This includes appropriate certification and the delivery of treatment and information to workers. This type of work often forms a small part (6-7%) of their everyday practice which can result in practitioners having a lesser knowledge of their role in the RTW process, how compensation schemes operate or how best to certify fitness for work.

Comcare was a partner in the development of the recently released Clinical Guideline for the diagnosis and management of work related mental health conditions in General Practice. These guidelines aim to foster a nationally consistent approach to supporting better health and work outcomes for Australians with work-related mental health conditions. This is an opportunity to reduce clinical uncertainties and increase the evidence-based support for GPs to assist recovery.

Comcare is also supporting the implementation of these guidelines and anticipates that the guidelines will progress the quality of the conversations between GPs and their patients for work-related mental health conditions and injuries resulting in improvements in recovery at and return to work.

A range of medical practitioner resources are available on the Comcare website.

Research by Monash University has found that high caseload GPs in Victoria treated more men in blue collar occupations and issued significantly more ‘alternate duties’ certificates. Conversely, low caseload GPs treated significantly more women in white collar occupations, predominantly for mental health injuries, and issued significantly more ‘unfit-for-work’ certificates. Therefore, a GPs level of experience with workers compensation claims can impact their certification practices.

ABSENTEEISM AND PRESENTEEISM

Title  Adverse outcomes of sick leave due to mental disorders: A prospective study of discordant twin pairs
Author/s  Mather, L et al
Source  Scandinavian journal of public health 2019 47 2  127-136
https://doi.org/10.1177/1403494817735755
Abstract  Aims: The aim of this study was to investigate whether sick leave due to different mental disorders increased the risk of reoccurring sick-leave, disability pension and unemployment, taking genetics and shared environment into account.  
Methods: This register-based cohort study contains 2202 discordant twin pairs 18–64 years old, where one twin had sick leave due to a mental disorder 2005–2006. The end of the sick-leave spell was the start of follow-up for both twins. The twins were followed up for reoccurring sick-leave, disability pension and unemployment (> 180 days in a year), until December 2012. Analyses were censored for disability pension, death, emigration and old-age pension. Cox proportional hazards models with time-varying covariates were used to calculate hazard ratios with 95% confidence intervals (CI).  
Results: Those with sick leave due to mental disorders had a 3.64 (CI: 3.24–4.08) times higher risk of reoccurring sick-leave within the first two years; after that, hazard ratios were attenuated and explained by genetic factors. The first year, they had 12.24 (CI: 8.11–18.46) times the risk of disability pension. The risk was attenuated but remained at 2.75 (CI: 2.07–3.65) after one year. The risk of unemployment was 1.99 (CI: 1.72–2.31) during the whole follow-up period. The risk of unemployment and disability pension was lower for those with...
stress-related than other mental disorders, this was less clear for recurrent reoccurring sick-leave. Conclusions: Sick leave due to mental disorders increased the risk of reoccurring sick-leave within two years, disability pension and unemployment, independent of genetics and shared environment.

**Title**

Changes in common mental disorders and diagnosis-specific sickness absence: a register-linkage follow-up study among Finnish municipal employees

**Author/s**

Mauramo, E et al

**Source**

*Occupation & environmental medicine* 2019 76 4 230-235

http://dx.doi.org/10.1136/oemed-2018-105423

**Abstract**

Objective: This study examined the associations between changes in common mental disorders (CMD) and subsequent diagnosis-specific sickness absence (SA) among midlife and ageing municipal employees.

Methods: Data from the Helsinki Health Study phase I (2000–2002) and phase II (2007) surveys among employees of the City of Helsinki, Finland, were linked with prospective register data from the Social Insurance Institution of Finland on diagnosis-specific (mental, musculoskeletal, other causes) SA (n=3890). Associations between change in CMD (General Health Questionnaire 12) from phase I to phase II and the first SA event in 2007–2014 were analysed using Cox regression modelling. Sociodemographic, work and health-related covariates from phase I, and SA from the year preceding phase I were controlled for.

Results: Having CMD at one or two time points, that is, favourable and unfavourable change in CMD and repeated CMD, were all associated with a higher risk of SA due to mental, musculoskeletal and other diagnoses compared with women and men with no CMD. Favourable change in CMD reduced the risk of SA when compared with repeated CMD. The strongest associations were observed for repeated CMD (HR range: 1.44 to 5.05), and for SA due to mental diagnoses (HR range: 1.15 to 5.05). The associations remained after adjusting for the covariates.

Conclusions: Changing and repeated CMD increased the risk of SA due to mental, musculoskeletal and other diagnoses. CMD should be tackled to prevent SA and promote work-ability among ageing employees.

**Title**

Determinants of sickness absence rate among Finnish municipal employees

**Author/s**

Vuorio, Tiina; Suominen, Sakari; Kautiainen, Hannu; Korhonen, Päivi.

**Source**


**Abstract**

Objective: In addition to acute health problems, various aspects of health behavior, work-related and sociodemographic factors have been shown to influence the rate of sickness absence. The aim of this study was to concomitantly examine factors known to have an association with absenteeism. We hypothesized the prevalence of chronic diseases being the most important factor associated with sickness absence.

Design: A cross-sectional study. Setting: Occupational health care in the region of Pori, Finland. Subjects: 671 municipal employees (89% females) with a mean age of 49 (SD 10) years. Information about the study subjects was gathered from medical records, by physical examination and questionnaires containing information about physical and mental health, health behavior, work-related and sociodemographic factors. The number of sickness absence days was obtained from the records of the city of Pori.

Main outcome measures: The relationship of absenteeism rate with sociodemographic, health- and work-related risk factors. Results: In the multivariate analysis, the mean number of chronic diseases (IRR 1.24, 95% CI 1.13 to 1.36), work ability (IRR 0.83, 95% CI 0.76 to 0.91), and length of years in education (IRR 0.90, 95% CI 0.85 to 0.95) remained as
independent factors associated with absenteeism. Conclusion: According to our results, chronic diseases, self-perceived work ability and length of years in education are the most important determinants of the rate of sickness absence. This implies that among working-aged people the treatment of chronic medical conditions is also worth prioritizing, not only to prevent complications, but also to avoid sickness absences. KEY POINTS: Various sociodemographic, health- and work- related risk factors have been shown to influence sickness absence. The study aimed to find the most important determinants of absenteeism among several known risk factors in Finnish municipal employees. Chronic diseases, self-perceived work ability and education years remained as the most important determinants of sickness absence rates. Treatment of chronic medical conditions should be prioritized in order to reduce sickness absence rate.

Title Early part-time sick leave results in considerable savings in social security costs at national level: an analysis based on a quasi-experiment in Finland

Author/s Viikari-Juntura, E et al


Abstract Objectives We analyzed social security costs based on an earlier quasi-experiment that compared work participation between partial sickness beneficiaries and a matched group of full sickness beneficiaries. Methods Utilizing a population-based 70% representative sample, 1878 persons with part-time sick leave (intervention group) due to musculoskeletal diseases or mental disorders at an early stage of work disability and their propensity-score-matched controls with full-time sick leave were followed for two years. The outcome was the difference (absolute and relative) in social security costs between the intervention and control groups during follow-up. Costs of sickness absence, vocational rehabilitation, unemployment, and retirement days were calculated from national administrative registers. Results A cost reduction of €2395 per person per year [95% confidence interval (CI) -2890-- -1899) was observed in the intervention compared with the control group. The cost ratio was 0.512 (95% CI 0.511–0.513). The largest savings were attributable to differences in the costs of retirement and vocational rehabilitation. The savings were higher for the second compared with the first follow-up year. Costs were saved across both genders and diagnostic groups, however, savings for women with musculoskeletal diseases were lowest. Conclusions Part-time instead of full-time sick leave, at the early stage of work disability due to musculoskeletal diseases or mental disorders, leads to considerable social security cost savings during two years, in correspondence with increased work participation and in addition to earlier reported health benefits. Part-time sick leave can be recommended from an economic perspective; however more consideration should be given to women with musculoskeletal diseases.

Weblink

Title Job strain and long-term sickness absence from work: a ten-year prospective study in German working population

Author/s Mutambudzi, M et al


Abstract Objective: The aim of this study was to examine the prospective associations between baseline job strain and 10-year cumulative incidence of long-term sickness absence (LTSA) in the German workforce.
Methods: This study used longitudinal data from the 2001 to 2011 waves of The German Socio-Economic Panel (SOEP) \((n = 9794)\). Kaplan–Meier survival curves and Cox proportional hazard regression models were used to examine the prospective association between job strain and incidence of LTSA.

Results: High strain [hazard ratio (HR) = 1.28, 95% confidence interval (95% CI) = 1.12 to 1.46] and passive jobs (HR = 1.14, 95% CI = 1.01 to 1.30) were significantly associated with LTSA after full adjustment for covariates, with greater risk in the older participants (>45) in passive (HR = 1.33, 95% CI = 1.08 to 1.63) and high strain (HR = 1.56, 95% CI = 1.27 to 1.92) jobs.

Conclusion: Jobs with low control over work were associated with LTSA in German workers. More studies using longitudinal employment data, and more detailed job strain measures are warranted.
Title: Working conditions and absence from work during pregnancy in a cohort of healthcare workers

Author/s: Villar R, Serra L, Serra C, et al

Source: Occupational & environmental medicine 2019 76 236-242
http://dx.doi.org/10.1136/oemed-2018-105369

Abstract: Objectives To assess the relationship between exposure to occupational risk factors during pregnancy and absence from work using two different social benefits. Method Three working pregnancy trajectories (WPT) were identified in a cohort of 428 pregnant workers from a healthcare institution (period 2010–2014), based on absence days and using cluster analysis. WPT1 included absences mainly covered by sickness absence benefit (32.0% of women), WPT2 included absences covered by pregnancy occupational risk (POR) benefit (28.3%) and WPT3 were pregnant workers with few absences (39.9%). Exposure to occupational risk factors was assessed by experts and association with trajectories was analysed using logistic regression. Relative risks (RR) and their 95% CIs were adjusted for age, type of contract and shift work. Results WPT2 was associated with exposure to physical (RR=1.86, 95%CI 1.17 to 2.97), safety (RR=2.10, 95%CI 1.61 to 2.73), ergonomic (RR=2.52, 95%CI 1.89 to 3.36) and psychosocial (RR=1.79, 95%CI 1.31 to 2.46) factors, and with exposure level. For physicians, WPT1 was associated with safety risks (RR=3.13, 95%CI 1.22 to 7.99), WPT2 with chemical and ergonomic for administrative/technical support (RR=12.20, 95%CI 1.69 to 88.09; RR=14.09, 95%CI 1.34 to 148.61, respectively), with safety and ergonomic risks for nursing aides (RR=1.84, 95%CI 1.12 to 3.02; RR=3.94, 95% CI 2.38 to 6.53, respectively), and with physical (RR=1.72, 95%CI 1.04 to 2.86), safety (RR=2.21, 95%CI 1.62 to 3.03), ergonomic (RR=2.02, 95%CI 1.44 to 2.86) and psychosocial factors (RR=1.96, 95%CI 1.32 to 2.90) for nurses. Conclusions Absences from work covered by POR benefit show a consistent relationship with exposure to occupational risks. Sickness absence is the most frequent benefit used by pregnant workers. Current social benefits are apparently used adequately for protecting women from occupational exposures. Future studies are needed to clarify this further.

Title: Associations between age discrimination and health and wellbeing: cross-sectional and prospective analysis of the English Longitudinal Study of Ageing

Author/s: Jackson, SE et al

Source: The Lancet : public health April 2019 4 4 PE200-E208

Abstract: Background Age discrimination (or ageism) is pervasive in society. Other forms of discrimination (such as racism) have been linked with adverse health outcomes, but age discrimination has not been well studied in public health. We aimed to examine associations between perceived age discrimination and health and wellbeing in England. Methods We did a longitudinal observational population study with data from the English Longitudinal Study of Ageing, a nationally representative sample of older men and women. Participants were aged 50 years or older and reported experiences of age discrimination via a face-to-face computer-assisted personal interview and a self-completed questionnaire between July, 2010, and June, 2011. Self-rated health, chronic health conditions, and depressive symptoms were assessed between July, 2010, and June, 2011, and between May, 2016, and June, 2017. We used logistic regression to test cross-sectional associations between perceived age discrimination and baseline health status and prospective associations between perceived age discrimination and incident ill health over 6 years. Analyses were adjusted for age, sex, and wealth. Findings Our sample for cross-sectional analyses of 2010–11 data comprised 7731 people

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who took part in the face-to-face interview, returned the self-completion questionnaire, and had available data for age discrimination. Perceived age discrimination was reported by 1943 (25.1%) participants. Patients who perceived age discrimination were more likely to self-report fair or poor health (odds ratio [OR] 1·32 [95% CI 1·17–1·48]) and to have coronary heart disease (1·33 [1·14–1·54]), chronic lung disease (1·37 [1·11–1·69]), arthritis (1·27 [1·14–1·41]), limiting long-standing illness (1·35 [1·21–1·51]), and depressive symptoms (1·81 [1·57–2·08]) than those who did not perceive age discrimination. Follow-up data collected 6 years after the baseline assessment were available for 5595 participants. Longitudinally, perceived age discrimination was associated with the deterioration of self-rated health (OR 1·32 [95% CI 1·10–1·58]) and incident coronary heart disease (1·66 [1·18–2·35]), stroke (1·48 [1·08–2·10]), diabetes (1·33 [1·01–1·75]), chronic lung disease (1·50 [1·10–2·04]), limiting long-standing illness (1·32 [1·10–1·57]), and depressive symptoms (1·47 [1·16–1·86]) over 6 years.

Interpretation Among older adults living in England, perceived age discrimination was associated with increased odds of poor self-rated health and risk of incident serious health problems over a 6-year period. These findings underscore the need for effective interventions at the population level to combat age stigma and discrimination.
vulnerability integration model, and the selection, optimization, and compensation – emotion regulation model) predict that aging is accompanied by increased emotion regulation capacity, with implications for well-being at work. Research has linked aging with increased levels of deep acting. Therefore, we hypothesized that the perceived work ability of older workers would benefit more from deep acting than younger workers. Eighty-seven employees who regularly interacted with customers and experienced chronic pain completed surveys twice daily (mid-day and end-of-day) over 1 continuous workweek (5 consecutive work days, Monday through Friday). We examined within-day changes in perceived work ability across the 5 days of the study. We modeled time-lagged end-of-day levels of perceived work ability predicted by mid-day levels of perceived work ability, person-level covariates, momentary mood and pain fluctuations, and the interactions of chronological age and mid-day levels of deep and surface acting. Supporting our hypothesis, we found that among relatively older individuals, greater use of deep acting was associated with more positive changes in perceived work ability. This was not the case for relatively younger workers, and was not found for surface acting.

Title Getting the hours you want in the preretirement years: work hour preferences and mismatch among older Canadian workers
Author/s Pannor Silver, M Settels, J Schafer, MH Schieman, S
Source Work, aging and retirement April 2019 5 2 175–188, https://doi.org/10.1093/workar/way015
Abstract Expectations regarding the work hours of older workers have changed over time. This article examines Canadian workers in their pre-retirement years to identify patterns in work hour preferences by gender—and whether work hour mismatch predicts late-stage workforce transitions. Findings from a national sample of Canadian workers show that slightly over half of all respondents were content with the number of hours they worked, but that 36% of the sample expressed a preference to work fewer hours and more than 8% expressed a preference to work more hours. Among men and women there were remarkable similarities in the factors that predicted a mismatch between respondents’ preferred and actual hours worked. While highlighting heterogeneity in the work hour preferences of Canadian workers in the years leading up to traditional retirement age, findings illustrate how mismatches between workers’ preferred and actual work hours predict later career workforce transitions. Findings also emphasize the importance of good relations with coworkers and supervisor support as factors that can enhance preferences to continue working at later career stages. Our findings also support claims that employers ought to be encouraged to focus on later career transitions and to find opportunities to enhance the fit between the number of hours required to meet work demands with individuals’ capabilities and interests.

Title Preretirement work motivation and subsequent retirement adjustment: a self-determination theory perspective,
Author/s Henning, G Stenling, A Tafvelin, S Hansson, I Kivi, M Johansson, B Lindwall, M
Source Work, aging and retirement April 2019 5 2 189–203, https://doi.org/10.1093/workar/way017
Abstract Research grounded in self-determination theory confirms the importance of different types of work motivation for well-being and job performance. Less is known about the role of work motivation at the end of one’s working life and its association with adjustment to retirement. We investigated the association between preretirement work motivation and retirement adjustment in a subsample of the Health, Aging and Retirement Transitions in Sweden (HEARTS) study. We included participants (n = 572) who retired between two annual waves in this longitudinal study. Retirement adjustment was operationalized as change between waves in satisfaction of the three basic psychological needs (autonomy, competence, and relatedness). The association between preretirement work motivation and retirement adjustment varied depending on the subdimension of motivation (intrinsic, identified, introjected, external, or amotivation), type of transition (full vs. partial), and the particular need
(autonomy, competence, and relatedness). In line with our expectations, low intrinsic work motivation was associated with gains in autonomy satisfaction for full-time retirees, which may be interpreted as a relief from dissatisfying jobs. Among those who continued to work, high intrinsic motivation was related to increases in relatedness satisfaction, that is, retirees who were intrinsically motivated for their work seem to benefit from continuing to work in retirement. In contrast to our expectations, amotivation before retirement was associated with gains in relatedness satisfaction for those continuing to work. Our results highlight the complexity of retirement and the need to study postretirement adjustment as a multifaceted and multidirectional process.

**Title**: Work-related stress in the banking sector: a study on an Italian aged population of over 2,000 workers.

**Author/s**: Giorgi, G., Ariza Montes, A., Rapisarda, V., Campagna, M., Garzaro, G., Arcangeli, G., & Mucci, N.

**Source**: La Medicina Del Lavoro 2019 110 1 11-21. https://doi.org/10.23749/mdl.v110i1.7125

**Abstract**: Introduction: In the European Union, the employment rate for the population in the age group 55-64 years has greatly increased in the last two decades. Companies, especially in sectors such as banking, are looking for new strategies to improve the productivity of workers in this age group. Objectives: This study was conceived with the purpose of exploring the associations between job characteristics that could influence stress and certain organizational aspects in a large population of banking workers. Methods: More than 2,000 workers over 50 years of age of an Italian banking group participated in the study. Work-related stress was measured with the Stress Questionnaire (SQ). Organizational aspects of work were measured with a dedicated scale included in the SQ. Demographic aspects were detected by specific questions. Structural equation modelling was used and correlation coefficients were calculated. Results: The results from the structural equation modeling supported the theoretical model. Organizational policies are associated with both stress correlated factors (β=0.468) and perceptions of supervisor support and social support (β=0.710). The perception of both parameters is associated with stress outcomes (β=0.365). The proposed model offered better results than a competitive model, on which a total mediation was tested, rather than a partial one (p<0.001). Conclusions: The results highlight the importance of an integrated assessment of the effects of organizational aspects of work and stress factors to implement the protection of physical and mental health. Further research will help to understand more thoroughly if the issues emerged are effectively related to age. This can be assessed through a case-control study that also includes younger workers.

**Title**: Identification of workers with past asbestos exposure in Tuscany eligible to health surveillance programme.

**Author/s**: Chellini, E., Lippi, G., Festa, G., Fani, S., Capacci, F., Martini, A., & Battisti, F.

**Source**: La Medicina Del Lavoro 2019 110 1 46-55. https://doi.org/10.23749/mdl.v110i1.7739

**Abstract**: Background: In 2016 the Administration of the Tuscany Region, Italy, established a health surveillance programme for workers with past asbestos exposure. The programme includes two levels of activities, a local basic health evaluation, and a centralized in-depth evaluation of specific cases. Objectives: To estimate the number and identify the workers with past exposure to asbestos in Tuscan industrial settings entitled to participate in the health surveillance programme. Methods: The number of formerly-exposed workers was estimated from the records of the working population of 15,441 workers of thirteen Tuscan asbestos industrial plants and from the existing data bases of the Local Health Administrations (USLs) and the Institute for Study, Prevention and Cancer Network (ISPRO), and from national data
bases such as Social Security Administration (INPS) and National Institute for Insurance against Accidents at Work (INAIL). The expected number of medical examinations per year was estimated from the adhesion rates seen in previous comparable programmes. Results: The estimated number of workers with past asbestos exposure eligible to the programme was 5,446. The estimated number of health examinations in the first and second phases of the surveillance programme during 2016-24 was 7,275 and 7,155, respectively, follow-up examinations included. The number of workers identified from local data bases was 4,713: They had been operating in 129 plants that had been using asbestos in the past. Further 1,395 workers were identified from previous health surveillance activities. Conclusions: The use of several sources of information and the cooperation between occupational health services made it possible to identify a high proportion of former asbestos workers and plants., It is, nevertheless, still necessary to complete the list of eligible workers, and to facilitate their participation by making the programme more widely known.

Title   North-south gradient of mesothelioma and asbestos consumption-production in the United States-Progresses since the 1st asbestos partial ban in 1973

Author/s  Sun, Honbing

Source  American journal of industrial medicine April 2019 62 4 337-346
https://doi.org/10.1002/ajim.22955

Abstract  Background Temporal trends and broad geographical distributions of asbestos use and the incidence of malignant mesothelioma (MM) in the US still need to be studied. Methods Data on asbestos consumption and production between 1900 and 2015 and MM mortality and incidence rates between 1975 and 2015 in the US were examined. Spatial distributions of MM mortality and incidence rates and their association with climate zone were analyzed. Results Decline of MM incidence and mortality rates in the US occurred about 20 years after the peak of asbestos consumption-production in 1973. There are apparent north-south (N-S) gradients in MM mortality and incidence rates in the US. Conclusion Recent decline of MM incidence and mortality rates in the US may be associated with reduced US asbestos consumption. N-S MM gradients between 1999 and 2015 were likely related to larger asbestos requirements in building materials in the northern states.

CHRONIC HEALTH ISSUES

Title   Optimizing resilience in orofacial pain: a randomized controlled pilot study on hope

Author/s  Bartley, EJ et al

Source  PAIN reports March/April 2019 4  2  e726 doi: 10.1097/PR9.0000000000000726

Abstract  Introduction: Over recent years, there has been growing interest in the role of positive, psychological resources that promote resilience and optimal functioning in chronic pain. Although multiple factors comprise resilience, hope is a strength-based motivational state known to contribute to positive psychosocial adjustment and adaptive pain coping. Emerging evidence supports the viability of therapeutic approaches that foster resilience; however, interventions designed to target hope in the context of pain have been remarkably understudied. Objectives: The objectives of this pilot study were to test the feasibility and preliminary efficacy of a resilience-oriented hope intervention for clinical pain, as well as psychosocial outcomes and experimental pain sensitivity in individuals with orofacial pain.
Methods: Twenty-nine participants with temporomandibular disorder were randomized to a 3-session intervention intended to increase hope or a control intervention (EDU) involving education about pain and stress. Before and after the intervention, participants attended 2 laboratory sessions whereby they completed psychosocial questionnaires and sensitivity to heat, cold, and pressure pain was assessed. Hope was measured using the Adult State Hope Scale.

Results: Compared with EDU, the Hope group exhibited an increase in state hope, lower heat pain sensitivity, higher pressure pain thresholds at the temporomandibular joint, and reductions in pain catastrophizing.

Conclusion: Although preliminary, results suggest that a resilience-based hope intervention may be beneficial in reducing pain sensitivity and catastrophizing and could serve as a target for pain management.

Title: Interventions to support behavioral self-management of chronic diseases
Author/s: Allegrante, JP Wells, MT Peterson, JC
Source: Annual review of public health 2019 40 127-146  https://doi.org/10.1146/annurev-publhealth-040218-044008

Abstract: A majority of the US adult population has one or more chronic conditions that require medical intervention and long-term self-management. Such conditions are among the 10 leading causes of mortality; an estimated 86% of the nation's $2.7 trillion in annual health care expenditures goes toward their treatment and management. Patient self-management of chronic diseases is increasingly essential to improve health behaviors, health outcomes, and quality of life and, in some cases, has demonstrated effectiveness for reducing health care utilization and the societal cost burden of chronic conditions. This review synthesizes the current state of the science of chronic disease self-management interventions and the evidence for their effectiveness, especially when applied with a systematic application of theories or models that account for a wide range of influences on behavior. Our analysis of selected outcomes from randomized controlled trials of chronic disease self-management interventions contained in 10 Cochrane systematic reviews provides additional evidence to demonstrate that self-management can improve quality of life and reduce utilization across several conditions.

ERGONOMIC ISSUES

Title: Active sitting with backrest support: Is it feasible?
Author/s: Kuster, RP Bauer, CM Gossweiler, L Baumgartner, D
Source: Ergonomics 2018 61 12 1685-1695, DOI: 10.1080/00140139.2018.1517899

Abstract: Ergonomics science recommends office chairs that promote active sitting to reduce sitting related complaints. Since current office chairs do not fulfill this recommendation, a new chair was developed by inverting an existing dynamic chair principle. This study compares active sitting on the inverted chair during a simulated computer-based office task to two existing dynamic office chairs (n = 8). Upper body stability was analysed using Friedman ANOVA (p = .01). In addition, participants completed a questionnaire to rate their comfort and activity after half a working day.

The inverted chair allowed the participants to perform a substantial range of lateral spine flexion (11.5°) with the most stable upper body posture (≤11 mm, ≤2°, p ≤ .01). The results of this study suggest that the inverted chair supports active sitting with backrest support during computer-based office work. However, according to comfort and activity ratings, results
should be verified in a future field study with 24 participants.
Practitioner Summary: This experimental laboratory study analyses the feasibility of active sitting with a backrest support during common office work on a new type of dynamic office chair. The results demonstrate that active sitting with a backrest support is feasible on the new but limited on existing chairs.

**Title**
Assessing the ergonomic exposure for construction workers during construction of residential buildings

**Author/s**
Genin, P et al

**Source**
Work 2019 62 3 411-419, 2019 DOI: 10.3233/WOR-192873

**Abstract**
Background: Construction workers are at greater risk of musculoskeletal disorders due to their exposure to physical ergonomic risk factors.
Objectives: The purpose of this study is to quantify the ergonomic hazards for workers in the construction of residential buildings.
Methods: In this cross-sectional study, PATH method, a work-sampling observation method, was applied to study the working postures, handled loads, and manual material handling activities in construction workers. A total of 5832 observations were made on 10 workers involved in tasks of three jobs including reinforcing bar, formwork, and pouring concrete. The ergonomic exposure was characterized in terms of percentage of observations made for each task.
Results: Non-neutral trunk postures, especially mild and severe flexions, were frequently observed in all job tasks. High-strain leg postures of squatting, kneeling, and leg(s) bent were mostly observed in floor formwork (39%), concrete finishing (5%), and floor rebar construction (52.3%), respectively. The highest proportion of work time with one (5.8%) and two hands (9%) at/above shoulder was observed in column rebar construction. In concrete pouring and rebar cutting, workers were observed in 39.45% and 23.1% of work time doing carry and push/pull activities, respectively. Heavy loads (>15 kg) were mostly observed in concrete pouring and floor formwork tasks.
Conclusion: In the construction of residential buildings with the concrete structure, workers perform their task with non-neutral postures of trunk and leg and handling heavy loads. The recommended controls could reduce the musculoskeletal stress in rebar tying, concrete pouring, and concrete finishing tasks

**Title**
Does ergonomics training have an effect on body posture during computer usage?

**Author/s**
Yasin, E et al

**Source**
Journal of back and musculoskeletal rehabilitation 2019 32 2 191-195 DOI: 10.3233/BMR-181196
Abstract

Background: Computer users are at risk in terms of musculoskeletal disorders. It is known that ergonomics training prevents short-term injuries to the musculoskeletal system, but its long-term effect is unknown.

Objective: The aim of our study was to investigate the effect of receiving ergonomics training in undergraduate instruction on posture during computer usage.

Methods: The present study included 27 individuals who had received training previously and 58 individuals who had not received any training. Their posture was evaluated with Rapid Upper Limb Assessment (RULA) and Musculoskeletal Diseases in Computer Users Frequency and Risk Factors Screening Form (MCFRF).

Results: The percentage of pain experienced at least once in four weeks was much higher in the untrained than the trained group. The RULA scores were 3.7 ± 2.1 and 3.3 ± 0.8 points for the lower body and upper extremity for the trained group, and 4.2 ± 2.2 and 3.9 ± 0.9 points for the lower body and upper extremity, respectively, for the untrained group. The MCFRF scores were 1.9 ± 1.0 and 1.7 ± 1.0 points for the lower body and upper extremity, respectively, for the trained group, and 1.6 ± 1.3 and 1.6 ± 0.8 points for the lower body and upper extremity for the untrained group.

Conclusions: According to RULA scores, training on ergonomics was effective in reducing the risk level of musculoskeletal disorders. MCFRF scores showed that ergonomics training had no effect on posture during computer usage. Nevertheless, MCFRF evaluates only posture and does not calculate approximate forces that body parts were exposed to. Thus, these areas of MCFRF required improvement. Our study emphasized the importance of the long-term effects of ergonomics training for preventive purposes before musculoskeletal problems manifest.

Title

Feasibility and impact of sit-stand workstations with and without exercise in office workers at risk of low back pain: A pilot comparative effectiveness trial

Author/s Johnston, V et al

Source Applied ergonomics April 2019 76 82-89


Abstract The aim of this study was to compare the feasibility and impact of sit-stand workstations plus advice, with or without exercise, on back pain and sitting time in office workers at risk of low back pain (LBP). Eligible participants (n = 29/169; 17% overall) were randomized to receive a sit-stand workstation and advice with (n = 16) or without (n = 13) progressive resistance exercise training for 4-weeks. Feasibility (recruitment, acceptability, adherence) and impact (LBP severity during a standardized standing task, workplace-sitting time) were assessed. Intervention acceptability (87.5% very satisfied) was good and adherence (60% completed all 12 exercise sessions) was satisfactory. Maximum LBP severity (mean difference of −1.3 (−2.0, −0.6) and workplace sitting time (82.7–99.3 min/8-hr workday reduction) were similarly reduced in both groups. The introduction of a sit-stand workstation with advice was feasible and achieved similar outcomes for LBP and workplace sitting time when administered with or without exercise.

Title Influences of continuous sitting and psychosocial stress on low back kinematics, kinetics, discomfort, and localized muscle fatigue during unsupported sitting activities

Author/s Bochen, Jia Nussbaum, Maury A.

Source Ergonomics 61:12, 1671-1684, DOI: 10.1080/00140139.2018.1497815

Abstract Continuous seated postures may increase the risk of adverse health outcomes such as low-back pain, and this risk may be influenced by several modifying factors. In the present study, we aimed to quantify the effects of continuous sitting and psychosocial stress under an unsupported sitting condition. Fourteen participants completed continuous, 40 min. periods of
computer-based tasks, involving both low and higher levels of psychosocial stress, while using a laptop computer without a desk. Continuous sitting significantly increased perceived discomfort (particularly in the upper and lower back), trunk flexion and metrics of localized muscle fatigue. A higher level of psychosocial stress increased estimated lumbosacral compression forces (by ~12%). Only weak correlations were found between subjective and objective measures, while various fatigue metrics showed a good level of correspondence with each other. These results could support the future evaluation or design of diverse seated work configurations.

Practitioner Summary: Continuous, 40 min. periods of unsupported sitting had broad impacts on subjective and objective outcomes, including discomfort, postures, spine loads and localized muscle fatigue, while psychosocial stress only had a substantial influence on lumbosacral compression. These results extend our understanding of sitting behaviors and provide information for designing future sitting environments.

HEALTH AND WELLBEING

**Title** Daily strengths use and employee well-being: The moderating role of personality

**Author/s** Bakker, AB et al

**Source** Journal of occupational & organizational psychology March 2019 92 1

**Abstract**

This study combines strengths use and personality theories to develop a multilevel model of employee well-being. We hypothesized that individuals would experience higher well-being on the days they use their strengths. In addition, we predicted that Neuroticism, Extraversion, and their blend would bolster this main effect. A total of 87 Norwegian naval cadets filled out a general survey and then completed a diary questionnaire for 30 consecutive days (total N = 2610). Results of multilevel modelling showed that daily strengths use was positively related to daily positive affect and work engagement, after controlling for previous levels of the dependent variables. In addition, we found evidence for the predicted three-way interaction effects. These findings contribute to character strengths and personality theories by showing how blends of personality traits modify the effects of daily strengths use behaviours.

Practitioner points:

- Employees who use their strengths at work build their own positive affect and work engagement.
- Personality influences how successful employees are in using strengths; strengths use works best for those high in Extraversion and low in Neuroticism.

**Weblink**

Organizations and managers should facilitate employee strengths use, because when employees use their strong points, they are more dedicated and energized during work.

**Title** Evaluating costs and health consequences of sick leave strategies against pandemic and seasonal influenza in Norway using a dynamic model

**Author/s** Edwards CH, Tomba GS, Sonbo Kristiansen I, et al

**Source** BMJ open 2019 9 e027832. doi: 10.1136/bmjopen-2018-027832

**Abstract**

Objectives To quantify population-level health and economic consequences of sick leave among workers with influenza symptoms. Interventions Compared with current sick leave practice (baseline), we evaluated the health and cost consequences of: (1) increasing the proportion of workers on sick leave from 65% (baseline) to 80% or 90%; (2) shortening the maximum duration from symptom onset to sick
Methods
A dynamic compartmental influenza model was developed using Norwegian population data and survey data on employee sick leave practices. The sick leave interventions were simulated under 12 different seasonal epidemic and 36 different pandemic influenza scenarios. These scenarios varied in terms of transmissibility, the proportion of symptomatic cases and illness severity (risk of primary care consultations, hospitalisations and deaths). Using probabilistic sensitivity analyses, a net health benefit approach was adopted to assess the cost-effectiveness of the interventions from a societal perspective.

Results
Compared with current sick leave practice, sick leave interventions were cost-effective for 31 (65%) of the pandemic scenarios, and 11 (92%) of the seasonal scenarios. Economic benefits from sick leave interventions were greatest for scenarios with low transmissibility, high symptomatic proportions and high illness severity. Overall, the health and economic benefits were greatest for the intervention involving 90% of sick workers taking sick leave within one-half day of symptoms. Depending on the influenza scenario, this intervention resulted in a 44.4%–99.7% reduction in the attack rate. Interventions involving sick leave onset beginning 2 days or later, after the onset of symptoms, resulted in economic losses.

Conclusions
Prompt sick leave onset and a high proportion of sick leave among workers with influenza symptoms may be cost-effective, particularly during influenza epidemics and pandemics with low transmissibility or high morbidity.

Title
The prevalence and health impacts of frequent work discrimination and harassment among women firefighters in the US Fire Service.

Author/s
Jahnke, Sara A.; Haddock, Christopher K.; Jitnarin, Nattinee; Kaipust, Christopher M.; Hollerbach, Brittany S.; Poston, Walker S. C.

Source

Abstract
Both discrimination and harassment directly impact mental and physical health. Further, workplace discrimination degrades workplace culture and negatively impacts health behaviors, job-related outcomes, and family dynamics. Women represent a small proportion of the fire service and are often the targets of discrimination/harassment, yet little research documents the impact of such experiences. The purpose of this study was to evaluate the relationship between chronic work discrimination and/or harassment and women firefighters’ (FFs) physical and mental health, substance abuse, and job efficacy, stress, and satisfaction.

Methods
Snowball sampling was used to solicit participation from women career FFs. Participants completed an online survey regarding physical and mental health, job behavior, job efficacy/stress/satisfaction, and family well-being. Logistic regression examined the impact of work discrimination-harassment severity on dichotomous variables. Results. 1,773 had complete data on their experiences with work-related discrimination and harassment. Women reported experiencing verbal (37.5%) and written (12.9%) harassment, hazing (16.9%), sexual advances (37.4%), and assaults (5.1%) in the fire service. FFs in the highest tertile of work discrimination-harassment severity reported over 40% more poor health days in the last 30 days (OR=1.42; 95% CI=1.33–1.51; p<0.001). Women who experienced moderate and severe discrimination/harassment had negative mental health outcomes including higher prevalence of depressive symptoms, anxiety, and PTSD symptoms. Those who experienced high rates of discrimination and/or harassment also were more likely to report issues with alcohol consumption. Conclusion. The impact of discrimination and harassment, related negative physical and mental outcomes, low levels of job satisfaction, and negative impact of these experiences on family/home stress likely take a significant toll on women in the fire service. Findings confirm and extend previous work suggesting there is a need to improve the mental and physical health of women FFs. Future work should examine the prospective relationship between discrimination/harassment and poor health outcomes and potential policies/practices to reduce these negative behaviors.
The differential impact of interactions outside the organization on employee well-being

Bhave, DP et al

Journal of occupational & organizational psychology March 2019 92 1
https://doi.org/10.1111/joop.12232

We examine two different perspectives of interactions outside the organization: the relational work design perspective and the emotional labour perspective. The relational work design perspective suggests that interactions outside the organization have favourable outcomes for employees, whereas the emotional labour perspective suggests that such interactions have adverse outcomes for employees. Our goal is to reconcile findings from these two research streams. In Study 1, using data from employees working in diverse occupations, we find that interactions outside the organization have a positive indirect effect on employee well-being via task significance, and a negative indirect effect on employee well-being via surface acting. In Study 2, using data collected across two time points, we replicate these findings. In Study 3, we further extend these results and illustrate that interactional autonomy and interactional complexity are influential moderators that shape the strength of the mediated relationships. Our results aid in reconciling and extending findings from two different research streams, and enhance our understanding of the role of interactions outside the organization.

Practitioner points:
Managers should consider that employees’ interactions outside the organization have the potential to improve their well-being.
Organizations could redesign jobs to enable employees in customer-facing roles to have greater discretion in how they interact with their customers and also increase the variety of these interactions.

Dimensions of personal meaning from engagement in occupations: A metasynthesis

Roberts, AEK Banningan, K

Canadian journal of occupational therapy 2019 85 5 386-396
https://doi.org/10.1177/0008417418820358

Background: Occupational scientists have offered various theoretical propositions regarding the dimensions of meaning derived from engagement in occupations, and empirical studies have explored the personal meaning of engaging in a wide range of occupations.

Purpose: The study aimed to distil the dimensions of personal meaning from existing research, with a view to informing theory in this area.

Method: A qualitative metasynthesis of research studies was conducted, focusing on research reporting individuals’ accounts of the personal meaning of an occupation to them. Twenty papers met the search criteria and were reviewed, rated for quality, analyzed, and synthesized following a process of meta-aggregation.

Findings: There were four common dimensions of personal meaning: a sense of fulfilment; a sense of restoration; social, cultural, and intergenerational connection; and identity shaping.

Implications:
This review provides occupational therapists with sound evidence of the link between engagement in a meaningful occupation and a sense of personal and social well-being.
Implicit core self-evaluations and work outcomes: Validating an indirect measure

Dietl, E Meurs, JA

Journal of occupational & organizational psychology March 2019 92 1 169-190
https://doi.org/10.1111/joop.12244

Core self-evaluations (CSE) represent the fundamental appraisals individuals make about their self-worth and capabilities. Although scholars characterize CSE as evaluations that are both conscious and subconscious, the implicit aspect of CSE has not yet been examined. Drawing on models of dual information processing, we develop and validate an indirect measure (Implicit Association Test) assessing implicit CSE. Therefore, we investigate how explicit, implicit, and acquaintance-rated CSE relate to task performance, organizational citizenship behaviours (OCB), and income. We argue that implicit CSE accounts for incremental variance in these three outcomes beyond explicit and acquaintance-rated CSE. We found that implicit CSE accounted for incremental variance in OCB and income above and beyond explicit CSE. Our effects for implicit CSE held even when controlling for acquaintance ratings of CSE. Also, acquaintance ratings accounted for incremental variance in income and OCB beyond explicit CSE. We discuss implications for CSE measurement and research, and the practical implications of our findings.

Practitioner points:
In evaluative situations, such as personnel selection, self-reported core self-evaluations (CSE) are susceptible to impression management and social desirability. We developed an indirect measure (i.e., an Implicit Association Test) to assess implicit CSE and demonstrated that it accounts for incremental variance in job performance and income beyond self-reported and other-rated CSE.

Organizations and practitioners should measure self-rated, implicit, and other-rated CSE to predict job performance and income more accurately.

Proactive personality and proactive behaviour: Perspectives on person–situation interactions

McCormick, BW et al

Journal of occupational & organizational psychology March 2019 92 1 30-51
https://doi.org/10.1111/joop.12234

We conducted a field survey of leaders and their followers to examine factors that moderate the relationship between employee proactive personality and proactive behaviour. As hypothesized, random coefficient modelling analysis showed that two situational factors – transformational leadership and a climate of innovation and flexibility – moderated the relationship between employee proactive personality and proactive behaviour. Conceptually, we draw from situational strength theory to predict the pattern of these interactions. Our findings indicated that organizations desiring proactive employee behaviour would be well advised to take one of three courses of action: select employees with proactive personality who will generally behave proactively regardless of the situation; develop transformational leaders who will motivate, inspire, and support proactive employee behaviour; or cultivate a climate of innovation and flexibility which will create a strong situation that fosters proactivity regardless of employee individual differences.

Practitioner points: The modern workplace often demands that employees behave proactively, and our research shows that there are multiple strategies organizations can implement to facilitate employee proactive behaviour. In particular, our study reveals three ways for organizations to facilitate proactive employee behaviour: (1) recruit and select employees who are high in proactive personality, who will be more apt to naturally engage in proactive behaviour; (2) hire or train leaders to be transformational since transformational leaders will bring about proactive employee
behaviour; or (3) create a climate that rewards innovation and flexibility as such a climate will encourage proactive employee behaviour.

Title The role of group-level perceived organizational support and collective affective commitment in the relationship between leaders’ directive and supportive behaviors and group-level helping behaviors

Author/s Tremblay, M Gaudet, M-C Vandenberghe, C


Abstract Purpose: The purpose of this paper is to examine a model linking directive and supportive leadership to group-level helping behaviors via group-level perceived organizational support (GPOS) and collective affective commitment (CAC). Design/methodology/approach: Using data from 115 business units of an international retailer, the authors tested and compared the theoretical model against more parsimonious solutions using $\chi^2$ difference tests. The hypotheses were examined within a structural model. Findings: The results show that GPOS acts as a mediator in the relationship between leadership behaviors and CAC and between directive leadership and group-level helping behaviors. Supportive leadership is directly related to CAC and group-level helping behaviors. Research limitations/implications: Implications of these findings for research on supportive and directive leadership are discussed. Originality/value: This paper proposed a model that examined intermediate linkages between directive and supportive leadership and group-level helping behaviors. In doing so, the authors provide a preliminary response to recent calls for examination of mediators of task-oriented and relations-oriented leadership effects (Judge et al., 2004).

Title Strengthening personal growth: The effects of a strengths intervention on personal growth initiative

Author/s van Woekom, M Meyers, M C

Source Journal of occupational & organizational psychology March 2019 92 1 98-121 https://doi.org/10.1111/joop.12240

Abstract Personal growth is not only a central individual need but also a key requirement for organizational success. Nevertheless, workplace interventions aimed at stimulating the personal growth of employees are still scarce. In this study, we investigated the effectiveness of an intervention that aimed at the identification, development, and use of employee strengths in stimulating personal growth initiative. We conducted a field experiment with a sample of 84 educational professionals who were either assigned to a strengths intervention or a wait-list control group. In a 1-month follow-up study, we found that the intervention had a direct effect on general self-efficacy (GSE) and an indirect effect on personal growth initiative. Moreover, in line with plasticity theory we found that the intervention was especially effective for participants with low to medium initial levels of GSE. We conclude that a strengths intervention may provide a brief and effective tool for organizations that aim for self-directed learning among their staff, in particular when offered to employees who lack confidence in their own abilities.

Practitioner points:
In a 1 month follow-up study, we found that a strengths intervention had a positive direct effect on general self-efficacy and an indirect effect on personal growth initiative. In line with plasticity theory, we found that the strengths intervention was especially effective for participants with low to medium initial levels of general self-efficacy.
Turning attention to clinician engagement in Victoria

Author/s: Jorm, Christine Hudson, Robyn Wallace, Euan

Source: Australian health review 43 2 123-125 https://doi.org/10.1071/AH17100

Abstract: The engagement of clinicians with employing organisations and with the broader health system results in better safer care for patients. Concerns about the adequacy of clinician engagement in the state of Victoria led the Victorian Department of Health and Human Services to commission a scoping study. During this investigation more than 100 clinicians were spoken with and 1800 responded to surveys. The result was creation of a clear picture of what engagement and disengagement looked like at all levels – from the clinical microsystem to state health policy making. Multiple interventions are possible to enhance clinician engagement and thus the care of future patients. A framework was developed to guide future Victorian work with four elements: setting the agenda, informing, involving and empowering clinicians. Concepts of work or employee engagement that are used in other industries don’t directly translate to healthcare and thus the definition of engagement chosen for use centred on involvement. This was designed to encourage system managers to ensure clinicians are full participants in design, planning and evaluation and in all decisions that affect them and their patients.

What type of worker are you? Work-related Inventory (WI-10): A comprehensive instrument for the measurement of workaholism

Author/s: Loscalzo, Yura, Giannini, Marco


Abstract: Background: In literature, there are many instruments for evaluating workaholism; however, they do not have convergent validity, because of the lack of a shared definition of workaholism.

Objective: We propose a new instrument for evaluating workaholism and work engagement, namely the Work-related Inventory (WI-10), which is based on Loscalzo and Giannini’s (2017) comprehensive definition of workaholism.

Methods: We developed a pool of 36 items, covering: 1) addiction symptoms; 2) obsessive-compulsive symptoms, and 3) work engagement. Then, we conducted Exploratory and Confirmatory Factor analyses on a sample of 503 Italian workers (165 males, 337 females, one missing; Mean age=38.26±10.84) aiming to reduce the number of items.

Results: The results showed a 10-items (2 filler) and 2-factor solution: 1) Workaholism and 2) Work Engagement; moreover, the WI-10 has good internal reliability, convergent and divergent validity.

Conclusions: We found good psychometric properties for the WI-10. We also proposed the cut-off scores for the screening of the four kinds of workers proposed by Loscalzo and Giannini (2017): disengaged workaholics, engaged workaholics, engaged workers, and detached workers. The WI-10 will be useful for both research and preventive and clinical purposes.

Work addiction as a behavioural addiction: Towards a valid identification of problematic behaviour

Author/s: Atroszko, PA

Source: Australian and New Zealand journal of psychiatry 53 4 284-285 https://doi.org/10.1177/0004867419828496

Abstract: Work addiction has fairly well-established clinical relevance and has been recognized as a disorder by many clinicians and researchers outside the circle of supporters of the components model. Furthermore, discounting the problematic behaviour’s potential for harm when other co-occurring or underlying disorders are present may have severe negative
consequences for the prognosis concerning that individual. Finally, regarding work addiction, Starcevic et al. (2018) point out that it is not recognized as a disorder by the official diagnostic and classification systems. It will never be recognized, despite enormous suffering and costs it may bring, without wider recognition from the professionals in psychiatry and clinical psychology, concerning the advancements in its conceptualization and research.

Title: Work addiction is associated with increased stress and reduced quality of life: Validation of the Bergen Work Addiction Scale in Danish

Author/s: Lichtenstein, M Beck et al

Source: Scandinavian journal of psychology April 2019 60 2 145-151

https://doi.org/10.1111/sjop.12506

Abstract: Addiction to work is defined as a compulsion or an uncontrollable need to work incessantly. Only few measures exist to identify work addiction and the health consequences are sparsely explored. The Bergen Workaholic Scale (BWAS) measures seven core elements of work addiction and has been used in Norway, Hungary, Brazil, Italy, USA and Poland. The aim of this study was to validate the BWAS in a Danish sample and to investigate if high risk of work addiction was associated with stress and reduced quality of life. We conducted an online screening survey with 671 participants aged 16–68 years with the Danish translation of the BWAS. We added the perceived stress scale (PSS) and the quality of life scale EQ-5D-5L. Those with high risk of work addiction reported significantly higher mean PSS scores (20.0 points) compared to those with low risk of addiction (12.5 points) and poorer quality of life (61.9) compared to the low risk group (81.3). Furthermore, work addiction was associated with more weekly working hours (44.0 vs. 35.6 hours/week) and having more leadership responsibility. A preliminary estimate of work addiction prevalence was 6.6%. The BWAS demonstrated good reliability (α = 0.83), and factor analyses pointed at a single factor structure. Work addiction seems to be associated with health problems in terms of stress and poorer quality of life. The BWAS is recommended as a reliable and valid tool to identify work addiction in Danish.

MUSCULOSKELETAL ISSUES

Title: Long-term exposure to heavy physical work, disability pension due to musculoskeletal disorders and all-cause mortality: 20-year follow-up—introducing Helsinki Health Study job exposure matrix

Author/s: Ervasti, J et al

Source: International archives of occupational and environmental health April 2019 92 3 337-345
Abstract

Purpose: We developed a job exposure matrix (JEM) to study the association between long-term exposure to heavy physical effort or heavy lifting and carrying at work with disability pension due to musculoskeletal disorders and premature all-cause mortality. Methods: Exposure to heavy physical effort at work during 1996–2005 was estimated with JEM developed for this study population, where the exposure was based on occupational titles of the participants. We included all employees of the City of Helsinki, Finland, who had annual data of exposure for 8–10 years (1996–2005, n = 18387). The outcome variables were register-based, and the follow-up was from 2006 until 2015. The risk estimates were evaluated using competing risk survival analysis.

Results: There were 530 (3%) disability pension events due to musculoskeletal disorders during the 10-year follow-up. After adjustment for sex, age, education and chronic diseases, employees in the second (SHR = 1.46, 95% CI 1.05–2.05), third (SHR = 2.73, 95% CI 2.00–2.29), and the highest exposure quartile (SHR = 2.56, 95% CI 1.88–3.50) had a higher risk of musculoskeletal disability pension than employees in the lowest quartile. A total of 110 (4%) men and 266 (2%) women died during the follow-up. Men in the third quartile (SHR = 2.29, 95% CI 1.23–4.24), and women in the highest exposure quartile (SHR = 1.54, 95% CI 0.99–2.41) had a higher risk of premature mortality than those in the lowest quartile.

Conclusions: Eight to ten years of exposure to heavy physical effort at work is strongly associated with disability pension due to musculoskeletal disorders. This exposure also increases the risk of premature mortality, particularly among men.

Title

Management of acute musculoskeletal pain (excluding low back pain): protocol for a systematic review and network meta-analysis of randomised trials

Author/s

Busse JW, Craigie S, Sadeghirad B, et al

Source

BMJ Open 2019 9 e024441. doi: 10.1136/bmjopen-2018-024441

Abstract

Introduction Acute, non-low back-related musculoskeletal pain is common and associated with significant socioeconomic costs. No review has evaluated all interventional studies for acute musculoskeletal pain, which limits attempts to make inferences regarding the relative effectiveness of treatments.

Methods and analysis We will conduct a systematic review of all randomised controlled trials evaluating therapies for acute musculoskeletal pain (excluding low back pain). We will identify eligible, English-language, trials by a systematic search of the Cumulative Index to Nursing and Allied Health Literature (CINAHL), Embase, Medline, Physiotherapy Evidence Database (PEDro) and the Cochrane Central Register of Controlled Trials (CENTRAL) from inception to February 2018. Eligible trials will: (1) enrol patients presenting with acute, non-low back-related musculoskeletal pain (duration of pain ≤4 weeks), and (2) randomise patients to alternative interventions or an intervention and a placebo/sham arm. Fractures will be considered ineligible, unless they are non-surgical and therapy is directed at pain relief. Pairs of reviewers will, independently and in duplicate, screen titles and abstracts of identified citations, review the full texts of potentially eligible trials and extract information from eligible trials. We will use a modified Cochrane instrument to evaluate risk of bias. Disagreements will be resolved through discussion to achieve consensus. We will use the Grading of Recommendations Assessment, Development and Evaluation approach to evaluate the quality of evidence supporting treatment effects. When possible, we will conduct: (1) in direct comparisons, a random-effect meta-analysis to establish the effectiveness of therapeutic interventions on patient-important outcomes; and (2) multiple treatment comparison meta-analysis to assess the relative effects of treatments. We will use a priori hypotheses to explain heterogeneity between studies. We will use STATA V.14.2 for all analyses.

Weblink

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**Prevalence of musculoskeletal disorders in patients with diabetes mellitus: A systematic review and meta-analysis**

**Author/s** Bashir, K et al

**Source** Journal of back and musculoskeletal rehabilitation 2019 32 2223-235 DOI: 10.3233/BMR-171086

**Abstract**
Background: Diabetes mellitus (DM) is associated with musculoskeletal disorders (MSDs) and is often not clinically diagnosed and managed. There are also no systematic reviews of literature relating to the prevalence of MSDs among people with diabetes.

Objective: To determine the prevalence and areas of the body affected by MSDs in diabetic patients.

Methods: A literature search of the electronic databases of CINAH, PubMed, Web of Science and Google Scholar using the keywords of “MSDs and DM” as the search term was conducted. Pooled estimates were calculated using a meta-analysis of proportion.

Results: Five thousand and eighty-eight studies were identified from the databases; 21 studies fulfilled the inclusion criteria and were included in the review. Five studies were of high quality, 13 were of moderate quality and three were of low quality. The prevalence of all types of MSDs among patients with diabetes was 58.15% (95% CI 41.4%–73.9%). The hand was the most common area of the body affected being 33.05% (95% CI 21.1–46.13) followed by the shoulder.

Conclusions: A high prevalence of MSDs was found among diabetic patients with the hand and shoulder being the most frequently reported areas affected. However, future studies with a larger sample and the relevant type of diabetes are required.

**The Quick Exposure Check (QEC) — Inter-rater reliability in total score and individual items**

**Author/s** Oliv, S et al

**Source** Applied ergonomics April 2019 76 32-37 https://doi.org/10.1016/j.apergo.2018.11.005

**Abstract**
Highlights:
The inter-rater reliability of the QEC items ranged from substantial to perfect.
The inter-rater reliability of the QEC scores ranged from substantial to almost perfect.
There was a systematic disagreement on the shoulder/arm and wrist/hand items.
The agreement for the individual items were highest for back and lowest for wrist/hand.

The development of musculoskeletal disorders has been linked to various risk factors in the work environment including lifting heavy loads, machine and materials handling, work postures, repetitive work, work with handheld vibrating tools, and work stress. The Quick Exposure Check (QEC) was designed to assess exposure to work-related musculoskeletal risk factors affecting the back, shoulder/arm, wrist/hand, and neck. We investigated the inter-rater reliability of the summary scores and individual items of the QEC by comparing two simultaneous assessments of 51 work tasks, performed by 14 different workers. The work tasks were mainly “light” to “moderately heavy”. For total scores, the level of disagreement for shoulder/arm had a Relative Position of 0.13 (95% CI: 0.02; 0.23) and no statistically significant random disagreement. Percentage agreement was 63–100% for individual items and 71–88% for total score. Weighted Kappa of agreement for the individual items rated by the assessors were −0.94–0.77; highest for back motion, and lowest for wrist/hand position.
The Swedish translation of the Quick Exposure Check has moderate to very good inter-rater reliability with fair to slight levels of systematic disagreement. There was no statistically significant random disagreement.
Title: Work-related neck and upper limb disorders – quantitative exposure–response relationships adjusted for personal characteristics and psychosocial conditions

Author/s: Balogh, I et al


Abstract: Background We have previously reported quantitative exposure–response relationships between physical exposures recorded by technical methods, and complaints and diagnoses in the neck/shoulders, and the elbows/hands, based on group data. In the present study the number of workers was doubled, and information on individual factors, and psychosocial working conditions was used. Relationships between various kinds of exposure and response have been analysed in this larger and more detailed sample.

Methods: The prevalence of complaints (Nordic Questionnaire) and diagnoses (clinical examination) were recorded in a number of occupational groups within which the participants had similar work tasks, 34 groups of female employees (N= 4733 women) and 17 groups of male employees (N= 1107 men). Age and other individual characteristics were recorded, as well as psychosocial work environment factors (job-content questionnaire) for most participants. Postures and velocities (inclinometry) of the head (N= 505) and right upper arm (N= 510), right wrist postures and velocities (electrogoniometry; N= 685), and muscular activity (electromyography; EMG) in the right trapezius muscle (N= 647) and forearm extensors (N= 396) were recorded in representative sub-groups. Exposure-response relationships between physical exposure and musculoskeletal disorders, adjusted for individual factors with Poisson regression were then calculated. The effect of introducing psychosocial conditions into the models was also assessed.

Results: Associations were found between head velocity, trapezius activity, upper arm velocity, forearm extensor activity and wrist posture and velocity, and most neck/shoulder and elbow/hand complaints and diagnoses. Adjustment for age, other individual characteristics and psychosocial work conditions had only a limited effect on these associations. For example, the attributable fraction for tension neck syndrome among female workers with the highest quintile of trapezius activity was 58%, for carpal tunnel syndrome versus wrist velocity it was 92% in men in the highest exposure quintile.

Conclusions: Based on the findings, we propose threshold limit values for upper arm and wrist velocity.

OCCUPATIONAL ISSUES

Title: Associations between age discrimination and health and wellbeing: cross-sectional and prospective analysis of the English Longitudinal Study of Ageing

Author/s: Jackson, SE Hackett, RA Steptoe, A

Source: The Lancet 2019 4 200-08 DOI :https://doi.org/10.1016/S2468-2667(19)30035-0

Abstract: Background Age discrimination (or ageism) is pervasive in society. Other forms of discrimination (such as racism) have been linked with adverse health outcomes, but age discrimination has not been well studied in public health. We aimed to examine associations between perceived age discrimination and health and wellbeing in England.

Methods We did a longitudinal observational population study with data from the English Longitudinal Study of Ageing, a nationally representative sample of older men and women. Participants were aged 50 years or older and reported experiences of age discrimination via a face-to-face computer-assisted personal interview and a self-completed questionnaire.
between July, 2010, and June, 2011. Self-rated health, chronic health conditions, and depressive symptoms were assessed between July, 2010, and June, 2011, and between May, 2016, and June, 2017. We used logistic regression to test cross-sectional associations between perceived age discrimination and baseline health status and prospective associations between perceived age discrimination and incident ill health over 6 years. Analyses were adjusted for age, sex, and wealth.

Findings Our sample for cross-sectional analyses of 2010–11 data comprised 7731 people who took part in the face-to-face interview, returned the self-completion questionnaire, and had available data for age discrimination. Perceived age discrimination was reported by 1943 (25·1%) participants. Patients who perceived age discrimination were more likely to self-report fair or poor health (odds ratio [OR] 1·32 [95% CI 1·17–1·48]) and to have coronary heart disease (1·33 [1·14–1·54]), chronic lung disease (1·37 [1·11–1·69]), arthritis (1·27 [1·14–1·41]), limiting long-standing illness (1·35 [1·21–1·51]), and depressive symptoms (1·81 [1·57–2·08]) than those who did not perceive age discrimination. Follow-up data collected 6 years after the baseline assessment were available for 5595 participants. Longitudinally, perceived age discrimination was associated with the deterioration of self-rated health (OR 1·32 [95% CI 1·10–1·58]) and incident coronary heart disease (1·66 [1·18–2·35]), stroke (1·48 [1·08–2·10]), diabetes (1·33 [1·01–1·75]), chronic lung disease (1·50 [1·10–2·04]), limiting long-standing illness (1·32 [1·10–1·57]), and depressive symptoms (1·47 [1·16–1·86]) over 6 years.

Interpretation: Among older adults living in England, perceived age discrimination was associated with increased odds of poor self-rated health and risk of incident serious health problems over a 6-year period. These findings underscore the need for effective interventions at the population level to combat age stigma and discrimination.

Title
Caring for workers’ health: do German employers follow a comprehensive approach similar to the total worker health concept? results of a survey in an economically powerful region in Germany

Author/s
Hoge, A et al

Source
International journal of environmental research in public health March 2019 16 5 726
doi: 10.3390/ijerph16050726

Abstract
Similar to ‘Total Worker Health’ in the United States (USA), ‘Workplace Health Management’ in Germany is a holistic strategy to protect, promote, and manage employees’ health at the workplace. It consists of four subcategories. While the subcategories ‘occupational health and safety’ and ‘reintegration management’ contain measures prescribed by law, ‘workplace health promotion’ and ‘personnel development’ can be designed more individually by the companies. The present study focused on the current implementation of voluntary and legally required measures of the four subcategories, as well as companies’ satisfaction with the implementation. A total of $N = 222/906$ companies (small, medium, and big enterprises of one German county) answered a standardized questionnaire addressing the implementation of health-related measures, satisfaction with the implementation, and several company characteristics. In the subcategory ‘occupational health and safety’, 23.9% of the companies fulfilled all of the legally required measures, whereas in the category ‘reintegration management’, that rate amounted to 50.9%. There was a positive correlation between company size and the implementation grade, and as well between company size and the fulfilling of measures required by law. Companies tended to be more satisfied with higher implementation grades. Nevertheless, a surprisingly high proportion of the companies with poor implementation indicated satisfaction with the measures’ implementation.

Title
The challenge of recruiting underrepresented groups – exploring organizational recruitment practices in Sweden.

Author/s
Osman, A., & Thunborg, C.
The aim of this article is to explore organisational recruitment practices from human resources (HR) experts’ narratives and discuss the challenges of recruiting underrepresented groups in relation to these practices. From the HR experts’ narratives, we identify four organisational recruitment practices: the informal, the pragmatic, the standardised and the strategic. These practices consist of, for example, ‘subjective’ judgements versus ‘objective’ criteria and are construed in relation to different rationalities, which also give rise to various dilemmas in relation to underrepresented groups. From our analysis, there seems to be a paradox between enhancing diversity and counteracting discrimination. Organisational recruitment practices that are counteracting discrimination do not necessarily enhance diversity and recruitment practices that radically work with enhancing diversity can be seen as discriminatory. We thereby draw the conclusion that there is no effective practice for the recruitment of underrepresented groups in the labour market. This is a dilemma for HR experts and a challenge for the Swedish labour market in general.

The contribution of work and lifestyle factors to socioeconomic inequalities in self-rated health – a systematic review

Objective

This study aimed to systematically review the literature on the contribution of work and lifestyle factors to socioeconomic inequalities in self-rated health among workers.

Methods

A search for cross-sectional and longitudinal studies assessing the contribution of work and/or lifestyle factors to socioeconomic inequalities in self-rated health among workers was performed in PubMed, PsycINFO and Web of Science in March 2017. Two independent reviewers performed eligibility and risk of bias assessment. The median change in odds ratio between models without and with adjustment for work or lifestyle factors across studies was calculated to quantify the contribution of work and lifestyle factors to health inequalities. A best-evidence synthesis was performed.

Results

Of those reviewed, 3 high-quality longitudinal and 17 cross-sectional studies consistently reported work factors to explain part (about one-third) of the socioeconomic health inequalities among workers (grade: strong evidence). Most studies separately investigated physical and psychosocial work factors. In contrast with the 12 cross-sectional studies, 2 longitudinal studies reported no separate contribution of physical workload and physical work environment to health inequalities. Regarding psychosocial work factors, lack of job resources (e.g., less autonomy) seemed to contribute to health inequalities, whereas job demands (e.g., job overload) might not. Furthermore, 2 longitudinal and 4 cross-sectional studies showed that lifestyle factors explain part (about one-fifth) of the health inequalities (grade: strong evidence).

Conclusions

The large contribution of work factors to socioeconomic health inequalities emphasizes the need for future longitudinal studies to assess which specific work factors contribute to health inequalities.

Hot desking affects wellbeing for eight in 10 office workers

The prospect of not knowing where to sit every day was identified as the biggest stressor when it came to hot desking, a survey of 1,001 office workers found.
Title: The impact of within and between role experiences on role balance outcomes for working Sandwich Generation Women,

Author/s: Evans, KL; Millsteed, J; Richmond, JE; Falkmer, M; Falkmer, T; Girdler, SJ


Abstract: Women combining paid employment with dual caring responsibilities for children and aging parents, otherwise known as the sandwich generation, experience both benefits and costs related to role participation and quality of life. However, previous literature is inconclusive regarding the impact of this role combination on role balance. In the context of these mixed findings on role balance for working sandwich generation women, this study aimed to explore how within role characteristics and between role interactions are related to role balance for these women. This aim was achieved through the use of a questionnaire administered to 18 Australian working sandwich generation women. Data were analyzed using descriptive statistics and correlation coefficients, with findings suggesting the women studied tended to experience neither role balance or role imbalance. Within-role characteristics, particularly within the mother and family member roles, were related to role balance. In addition, between-role conflict and role interactions involving either the home maintainer or family member roles had the greatest impact on role balance.

Title: Learning on the job, the use of selection, optimization, and compensation strategies, and their association with telomere length as an indicator of biological aging

Author/s: Weber, J et al


Abstract: Purpose: Due to the increased need for retention of older workforce caused by demographic changes in industrialized countries, support of healthy aging in occupational settings is of increasing relevance. This study examines the relationship between leucocyte telomere length (LTL), a potential biomarker for biological aging, and selection, optimization, and compensation (SOC) and learning opportunities as strategies involving efficient management and gain of resources at work.

Methods: Within a cross-sectional study, blood samples were drawn from 141 geriatric care professionals to measure LTL by quantitative real-time polymerase-chain reaction. Furthermore, all participants were asked with standardized questionnaires to rate their learning opportunities at work and use of SOC strategies. Analyses were performed by multiple linear regressions.

Results: SOC use, especially compensation, tended to be negatively, and learning opportunities tended to be positively associated with LTL. Furthermore, a significant interaction was found between optimization and learning opportunities, such that LTL and learning opportunities were only positively associated when optimization was high.

Conclusions: Resources at work were weakly associated with telomere length, which is not unexpected in view of the multiplicity of factors affecting LTL. The results further suggest that a mismatch between SOC and learning opportunities may negatively affect successful aging. They also suggest that more detailed research on biological aging and its relation to resources at work is needed.
**Title**

Occupational health research round: up April 2019

**Author/s**

Silcox, Sarah

**Source**

Occupational health & wellbeing April 2019

**Abstract**

This research round up for April 2019 covers poor sleep and job stressors anxiety, depression, productivity and workstations, chronic bronchitis, social support in rehabilitation, smoking, pesticides and suicide and chronic headaches.

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**Title**

Pathways from flexible work arrangements to financial performance

**Author/s**

Kotey, BA Sharma, B

**Source**


**Abstract**

Purpose

The purpose of this paper is to investigate the direct and indirect effects of flexible working arrangements (FWAs) on return on labour (ROL).

Design/methodology/approach

Data from 4,204 employees and their employers were used to construct regression models to assess separately, the direct relationships between the FWAs and ROL and also the indirect relationships, with job satisfaction and staff turnover as mediating variables, applying Baron and Kenny’s (1986) mediation rules.

Findings

Flexible work hours significantly and directly increased ROL and indirectly through reduction in staff turnover, while the negative direct effect of job sharing on ROL was indirectly reduced by its positive effect on job satisfaction. Time in lieu of overtime (TOIL) and working from home reduced ROL with the direct negative effects of TOIL on ROL worsened by a reduction in job satisfaction.

Practical implications

The results suggest that not all FWAs increase ROL and that the direct effects of FWAs on ROL emanate from the efficacy with which work is reallocated in FWA negotiations. The indirect effects derive from employees’ reciprocation of FWAs through improved job satisfaction and turnover. The onus is therefore, on employers to maximise returns from FWAs through efficient work reallocation during negotiations.

Originality/value

The study makes a contribution by examining the direction of effects of FWAs on ROL and the pathways (direct and indirect) by which the effects occur. Research in this area has hitherto considered subjective and qualitative performance measures. FWAs, such as job sharing and TOIL, which are rarely considered in the literature, are covered in the study.

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**Title**

Standards for the diagnosis and management of complex regional pain syndrome: Results of a European Pain Federation task force

**Author/s**

Goebel, A Moseley, GL et al

**Source**

European journal of pain April 2019 23 4 https://doi.org/10.1002/ejp.1362

**Abstract**

Background

Complex regional pain syndrome is a painful and disabling post-traumatic primary pain disorder. Acute and chronic complex regional pain syndrome (CRPS) are major clinical challenges. In Europe, progress is hampered by significant heterogeneity in clinical practice. We sought to establish standards for the diagnosis and management of CRPS.

Methods

The European Pain Federation established a pan-European task force of experts in CRPS who followed a four-stage consensus challenge process to produce mandatory quality standards worded as grammatically imperative (must-do) statements.

Results

We developed 17 standards in 8 areas of care. There are 2 standards in diagnosis, 1 in multidisciplinary care, 1 in assessment, 3 for care pathways, 1 in information and education, 4 in pain management, 3 in physical rehabilitation and 2 on distress management. The standards are presented and summarized, and their generation and consequences were discussed. Also presented are domains of practice for which no agreement on a standard
could be reached. Areas of research needed to improve the validity and uptake of these standards are discussed.

Conclusion The European Pain Federation task force present 17 standards of the diagnosis and management of CRPS for use in Europe. These are considered achievable for most countries and aspirational for a minority of countries depending on their healthcare resource and structures.

Significance This position statement summarizes expert opinion on acceptable standards for CRPS care in Europe.

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**Title**
Growing need for non-paid eldercare continues to largely disrupt the work of women: IWH study  
**Source**
IWH Canada 2019  
**Abstract**
Despite their growing numbers in the workforce, women continue to bear the greatest responsibility when it comes to the impact of eldercare on work. Women are much more likely than men to stop working, to work part-time or to take time off work during the week in order to care for an older relative.

**Title**
Male/female differences in the impact of caring for elderly relatives on labor market attachment and hours of work: 1997–2015  
**Author/s**
Smith, P M et al  
**Source**
The journals of gerontology: series B, gbz026, https://doi.org/10.1093/geronb/gbz026  
**Abstract**
Objectives Using representative samples of the Canadian labor market (N = 5,871,850), this study examined male/female differences in the impact of informal care on labor market attachment, and the extent to which differences in labor market participation and employment relationships explained these differences over a 19-year period.
Methods We examined four outcomes related to labor market impacts associated with caring for elderly relatives: leaving the labor market, working part-time, taking time off work in the previous week, and the amount of time taken off from work. Regression models examined differences between men and women, and the extent to which gendered labor market roles accounted for these differences.
Results We observed an increase in all labor market outcomes over the study period. Women were more likely than men to experience each outcome. Adjusting for labor market role variables did not change these estimates appreciably. After adjustment for differences in labor market roles women were 73% more likely to leave the labor market, more than 5 times more likely to work part-time, and twice as likely to take time off in the last week due to informal care. Further, for temporary absences to provide care, women took an average of 160 min more per week than men.
Discussion Taken together, these results suggest an increasing impact of informal care on labor market participation in Canada between 1997 and 2005, and it remains gendered.

**Title**
A temporary liminal space counteracting the permanent ‘in between’ in working life.  
**Author/s**
Vesala, H., & Tuomivaara, S  
**Source**
Nordic journal of working life studies, 2019 91 https://doi.org/10.18291/njwls.v9i1.113084  
**Abstract**
Ambiguous liminality used to exist 'in between', in a transition to a new social-structural order, but recently, it has gained a more permanent and normalized presence in working life, where existing boundaries are becoming blurred. However, liminality as a continuous state can be individually demanding. This paper elaborates upon a theoretical understanding of permanent liminality as an aspect of working life.
and temporary liminality in working life and examines possible measures to tame excessive liminality. To illustrate the theoretical development, forms of permanent and temporary liminality in the lives of three professionals are analyzed. We found that dealing with multiple and complex work roles independently could be conducive to fracturing work routines, which we identify as habitualized, permanent liminality. Withdrawal to an alternative work environment – a rural Finnish archipelago – formed a liminal space in its original sense, a creative and reflective phase that illuminated work-related challenges. It is suggested that such spaces are designed to achieve simplicity.

PSYCHOSOCIAL ISSUES

**Title**
Are perceived barriers to accessing mental healthcare associated with socioeconomic position among individuals with symptoms of depression? Questionnaire-results from the Lolland-Falster Health Study, a rural Danish population study

**Author/s**
Packness, A., Halling, A., Simonsen, E., Waldorff, F. B., & Hastrup, L. H.

**Source**
*BMJ open*, 9(3), e023844. doi:10.1136/bmjopen-2018-023844

**Abstract**
Objective: To evaluate if perceived barriers to accessing mental healthcare (MHC) among individuals with symptoms of depression are associated with their socio-economic position (SEP).

Design: Cross-sectional questionnaire-based population survey from the Lolland-Falster Health Study (LOFUS) 2016–17 of 5076 participants.

Participants: The study included 372 individuals, with positive scores for depression according to the Major Depression Inventory (MDI), participating in LOFUS.

Interventions: A set of five questions on perceived barriers to accessing professional care for mental health problem was posed to individuals with symptoms of depression (MDI score >20).

Outcomes: The association between SEP (as measured by educational attainment, employment status and financial strain) and five different types of barriers to accessing MHC were analysed in separate multivariable logistic regression models adjusted for gender and age.

Results: A total of 314 out of 372 (84%) completed the survey questions and reported experiencing barriers to MHC access. Worry about expenses related to seeking or continuing MHC was a considerable barrier for 30% of the individuals responding and, as such, the greatest problem among the five types of barriers. 22% perceived *Stigma* as a barrier to accessing MHC, but there was no association between perceived *Stigma* and SEP. Transportation was not only the barrier of least concern for individuals in general but also the issue with the greatest and most consistent socio-economic disparity (OR 2.99, 95% CI 1.19 to 7.52) for the lowest vs highest educational groups and, likewise, concerning *Expenses* (OR 2.77, 95% CI 1.34 to 5.76) for the same groups.

Conclusion: Issues associated with *Expenses* and *Transport* were more frequently perceived as barriers to accessing MHC for people in low SEP compared with people in high SEP. *Stigma* showed no association with SEP.
Introduction

Health, well-being and health service needs of asylum seekers have emerged as urgent topics following the arrival of 2.5 million asylum seekers to the European Union (EU) between 2015 and 2016. However, representative information on the health, well-being and service needs of asylum seekers is scarce. The Asylum Seekers Health and Wellbeing (TERTTU) Survey aims to: (1) gather population-based representative information; (2) identify key indicators for systematic monitoring; (3) produce the evidence base for development of systematic screening of asylum seekers’ health, well-being and health service needs.

Methods and analysis

TERTTU Survey is a population-based prospective study with a total population sample of newly arrived asylum seekers to Finland, including adults and children. Baseline data collection is carried out in reception centres in 2018 and consists of a face-to-face interview, self-administered questionnaire and a health examination following a standardised protocol. Altogether 1000 asylum seekers will be included into the study. Baseline data will be followed up with national electronic health record data encompassing the entire asylum process and later with national register data among persons who receive residency permits.

Objectives

Bi-directional associations between perceived effort–reward imbalance (ERI) at work and neck-shoulder pain have been reported. There is also evidence of associations between ERI and depressive symptoms, and between depressive symptoms and pain while the links between ERI, depressive symptoms and pain have not been tested. We aimed to assess whether depressive symptoms mediate the association between ERI and neck-shoulder pain, as well as the association between neck-shoulder pain and ERI.

Methods

We used prospective data from three consecutive surveys of the Swedish Longitudinal Occupational Survey of Health (SLOSH) study. ERI was assessed with a short version of the ERI questionnaire, and pain was defined as having had neck-shoulder pain that affected daily life during the past three months. Depressive symptoms were assessed with a continuous scale based on six-items of the (Hopkins) Symptom Checklist. Counterfactual mediation analyses were applied using exposure measures from 2010/2012 (T1), depressive symptoms from 2012/2014 (T2), and outcomes from 2014/2016 (T3), and including only those free of outcome at T1 and T2 (N=2876–3239).

Results

ERI was associated with a higher risk of neck-shoulder pain [risk ratio (RR) for total effect 1.22, 95% confidence interval (CI) 1.00–1.48] and 41% of this total effect was mediated through depressive symptoms. Corresponding RR for association between neck-shoulder pain and ERI was 1.34 (95% CI 1.09–1.64), but the mediating role of depressive symptoms was less consistent. Conclusions Depressive symptoms appear to be an intermediate factor in the relationship between ERI and neck-shoulder pain.
**Title**

Can resilience be measured and used to predict mental health symptomology among first responders exposed to repeated trauma?

**Author/s**

Joyce, Sadhbh et al

**Source**


**Abstract**

Objectives: To examine whether baseline measures of resilience among active first responders predicts future mental health symptomology following trauma exposure.

Methods: Multivariate linear regression examined the associations between baseline resilience and future mental health symptomatology following repeated trauma exposure. Symptomatology at 6-month follow-up was the dependent variable.

Results: The associations between baseline resilience and future posttraumatic stress disorder (PTSD) ($P = 0.02$) and depression ($P = 0.03$) symptoms were statistically significant. Those reporting higher resilience levels had lower symptomology at 6-month follow-up. Eighty percent of first-responders who screened positive for low resilience went on to develop more PTSD symptoms.

Conclusions: Examining resilience may serve as a more effective means of screening, given resilience is a malleable construct which can be enhanced via targeted interventions. Higher levels of resilience may protect the long-term mental health of first-responders, particularly in regard to future PTSD.

**Title**

Consideration of psychosocial factors in workplace risk assessments: findings from a company survey in Germany

**Author/s**

Beck, D Lenhardt, U

**Source**


**Abstract**

Purpose Work-related psychosocial risks are an increasingly important issue in occupational safety and health (OSH) policy. In Germany, as in many other European countries, employers are legally required to carry out workplace risk assessments (WRAs) and to account for psychosocial factors when doing this. The aim of this study was to expand the still scarce and sketchy empirical evidence on the extent to which employers comply with these obligations, as well as on possible determinants of compliance behaviour.

Methods Survey data from 6500 German companies were used to calculate the prevalence of workplace risk assessments that include psychosocial factors. Furthermore, multinomial logistic regressions were performed to explore which company characteristics influence the chance of psychosocial risk assessment occurrence.

Results The prevalence of psychosocial risk assessments was 21%. Next to company size (OR = 5.7, 95% CI 3.0–11.0), availability of safety specialist assistance (OR = 3.5, 95% CI 2.6–4.6), availability of occupational health specialist assistance (OR = 3.4; 95% CI 2.6–4.4) and inspection by OSH authority (OR = 3.4, 95% CI 2.4–4.7) were the strongest predictors of psychosocial risk assessment occurrence. Smaller (but still significant) effect sizes were found for the level of knowledge about legal OSH requirements, training of managers in OSH, economic situation of the company, presence of a works council, positive view on the benefit of OSH, affiliation with the production sector and magnitude of psychosocial risks within the company.

Conclusions The study results indicate large deficiencies in the implementation of psychosocial risk assessments, especially for small companies. Findings suggest that enhancing companies’ utilisation of professional OSH experts and strengthening the advisory and control capacities of the OSH inspection authorities in the area of psychosocial risks would be beneficial for improving the current situation.
The economic case for the prevention of mental illness

Author/s: McDaid, D Park, A-La Wahlbeck, K


Abstract: Poor mental health has profound economic consequences. Given the burden of poor mental health, the economic case for preventing mental illness and promoting better mental health may be very strong, but too often prevention attracts little attention and few resources. This article describes the potential role that can be played by economic evidence alongside experimental trials and observational studies, or through modeling, to substantiate the need for increased investment in prevention. It illustrates areas of action across the life course where there is already a good economic case. It also suggests some further areas of substantive public health concern, with promising effectiveness evidence, that may benefit from economic analysis. Financial and economic barriers to implementation are then presented, and strategies to address the barriers and increase investment in the prevention of mental illness are suggested.

Employer strategies for preventing mental health related work disability: a scoping review.


Source: Nordic journal of working life studies, 2019 9 1 https://doi.org/10.18291/njwls.v9i1.113082

Abstract: This study examined Nordic research on psychosocial work environment and disability management, specifically employer strategies for preventing work disability in common mental disorders (CMDs). A scoping review was performed to identify strategies across several research databases, alongside contact with content experts, hand-searching of non-indexed journals, and internet searches. Identification and selection of relevant studies, charting of data, and collating and summarizing of results was done using a six-step framework for conducting scoping reviews. Several key elements and knowledge gaps were identified in current prevention approaches and workplace initiatives across the included studies. We propose a program theory for workplace prevention of CMD-related work disability. The program theory may help specify employer strategies, and bridge activities with stakeholders outside the workplace.

How can we decrease burnout and safety workaround behaviors in health care organizations? The role of psychosocial safety climate

Author/s: Mansour, S Tremblay, D-G


Abstract: Purpose: Conducted with a staff of 562 persons working in the health sector in Quebec, mainly nurses, the purpose of this paper is to test the indirect effects of psychosocial safety climate (PSC) on workarounds through physical fatigue, cognitive weariness and emotional exhaustion as mediators. Design/methodology/approach: The structural equation method, namely CFA, was used to test the structure of constructs, the reliability and validity of the measurement scales as well as model fit. To test the mediation effects, Hayes’s PROCESS (2013) macro and 95 percent confidence intervals were used and 5,000 bootstrapping re-samples were run. The statistical treatments were carried out with the AMOS software V.24 and SPSS v.22.
Findings The results based on bootstrap analysis and Sobel's test demonstrate that physical fatigue, cognitive weariness and emotional exhaustion mediate the relationship between PSC and safety workarounds.

Practical implications The study has important practical implications in detecting blocks and obstacles in the work processes and decreasing the use of workaround behaviors, or in converting their negative consequences into positive contributions.

Originality/value To the authors' knowledge, this is the first study to examine the relationship between PSC, burnout and workaround behaviors. These results could contribute to a better understanding of this construct of workarounds and how to deal with it. Moreover, the test of the concepts of PSC in this study provides support for the theory of “conservation of resources” by proposing an extension of this theory.

Title Icelandic inclusion, German hesitation and American fear: A cross-cultural comparison of mental-health stigma and the media

Author/s Manago, B Pescosolido, BA Olafsdottir, S


Abstract Quantitative survey research findings reveal that Western countries have lower rates of public stigma surrounding mental illness than other nations. However, qualitative media research across selected Western countries reports differences in stigmatising messages. Here, we take an in-depth look at country-level data exploring both similarities and differences in this stigma across three countries.

Title The impact of post-traumatic stress disorder symptomatology on quality of life: The sentinel experience of anger, hypervigilance and restricted affect

Author/s Forbes, D et al

Source Australian and New Zealand journal of psychiatry 2019 53 4 336-349 https://doi.org/10.1177/0004867418772917

Abstract Background: It is unclear which specific symptoms of post-traumatic stress disorder are related to poor perceived quality of life.

Objective: To investigate the influence of post-traumatic stress disorder symptomatology on quality of life in traumatic injury survivors.

Method: Traumatic injury survivors completed questionnaires on post-traumatic stress disorder symptomatology and quality of life at 3 months (n = 987), 12 months (n = 862), 24 months (n = 830) and 6 years (n = 613) post trauma.

Results: Low quality of life was reported by 14.5% of injury survivors at 3 months and 8% at 6 years post event. The post-traumatic stress disorder symptom clusters that contributed most to poor perceived quality of life were numbing and arousal, the individual symptoms that contributed most were anger, hypervigilance and restricted affect.

Conclusions: There was variability in the quality of life of traumatic injury survivors in the 6 years following trauma and a consistent proportion reported low quality of life. Early intervention to reduce anger, hypervigilance and restricted affect symptoms may provide a means to improving the quality of life of traumatic injury survivors.
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<th>Title</th>
<th>Long-term occupational trajectories and suicide: a 22-year follow-up of the GAZEL cohort study</th>
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<td>Author/s</td>
<td>DaSilva, A et al</td>
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<tr>
<td>Abstract</td>
<td>Objective Most suicides occur among individuals of working age. Risk is elevated in some occupational groups, however relations between long-term occupational trajectories and suicide are not well known. We describe career-long occupational trajectories and examine their influence on suicide. Methods Data come from GAZEL, a French cohort study set among employees of a large national utilities company. Occupational grade was obtained from company records from the time of hiring (1953–1988). Group-based trajectory models were used to define occupational trajectories over a mean time period of 25.0 (standard deviation 6.5) years. Causes of mortality, coded using the International Classification of Diseases, were recorded from 1993–2014 and studied using Cox regression models. Results Of the 20,452 participants included in the study, 73 died by suicide between 1993–2014. Results suggested an increased risk of suicide [hazard ratio (HR) 2.57, 95% confidence interval (CI) 1.08–6.15] among participants with persistently low occupational grade compared to those with higher occupational grade and career development. After adjustment for all covariates, especially psychological factors, this association was reduced and no longer statistically significant (HR 2.02, 95% CI 0.82–4.95). Conclusions Persistently low occupational grade could be related to an elevated risk of suicide. This association partly reflects psychological and health characteristics, which can influence occupational trajectories and be reinforced by unfavorable work conditions.</td>
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<th>Title</th>
<th>Mental health: Current trends and challenges in the Nordic countries and beyond: Editorial</th>
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<tr>
<td>Author/s</td>
<td>Olafsdottir, Sigrum</td>
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<tr>
<td>Abstract</td>
<td>It is well known that the diseases that affect us have changed drastically over the past 100 years, as multiple societies have moved from a disease profile wherein a significant proportion of the population is killed by infectious diseases to an increased burden of chronic and mental health problems. What is striking, and of course most relevant for this issue, is this increased burden of mental health problems, especially in rich democracies. A recent policy report on the global burden of disease places depression at number three when evaluating the global burden of disability, measured by years lived with any short- or long-term disability</td>
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<th>Title</th>
<th>Mental health promotion competencies in the health sector in Finland: a qualitative study of the views of professionals</th>
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<tr>
<td>Author/s</td>
<td>Tamminen, N et al</td>
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Abstract

Aims: In this study, we aimed to investigate what competencies are needed for mental health promotion in health sector practice in Finland.

Methods: A qualitative study was carried out to seek the views of mental health professionals regarding mental health promotion-related competencies. The data were collected via two focus groups and a questionnaire survey of professionals working in the health sector in Finland. The focus groups consisted of a total of 13 professionals. Further, 20 questionnaires were received from the questionnaire survey. The data were analysed using the qualitative data analysis software ATLAS.ti Scientific Software Development GmbH, Berlin. A content analysis was carried out.

Results: In total, 23 competencies were identified and clustered under the categories of theoretical knowledge, practical skills, and personal attitudes and values. In order to promote mental health, it is necessary to have a knowledge of the principles and concepts of mental health promotion, including methods and tools for effective practices. Furthermore, a variety of skills-based competencies such as communication and collaboration skills were described. Personal attitudes and values included a holistic approach and respect for human rights, among others.

Conclusions: The study provides new information on what competencies are needed to plan, implement and evaluate mental health promotion in health sector practice, with the aim of contributing to a more effective workforce. The competencies provide aid in planning training programmes and qualifications, as well as job descriptions and roles in health sector workplaces related to mental health promotion.
Persistent depression: should such a DSM-5 diagnostic category persist? perspective

Parker, G., & Malhi, G. S.

Abstract
DSM-5 has introduced yet another type of depressive diagnosis – persistent depressive disorder (dysthymia)(PDD) – which it describes as “as a consolidation of DSM-IV-defined chronic major depressive disorder and dysthymic disorder”. This condition and its definition have attracted little consideration and thus encouraged this critique. In light of its problematic status (as we review), we will argue for its potential inclusion, albeit modified as a duration specifier for major depression.

Psychological climate predicting job insecurity through occupational self-efficacy

Tomas, J Seršić, DM De Witte, H

Abstract
Purpose The purpose of this paper is to test the hypothesized mediation model that specifies psychological climate dimensions as antecedents of job insecurity, while accounting for occupational self-efficacy. Stemming from the conservation of resources theory, the authors hypothesize that job challenge, role harmony, leader support and co-worker cooperation negatively relate to job insecurity due to its positive correlation with occupational self-efficacy.

Design/methodology/approach Data were collected with a sample of 329 white-collar employees from the ICT sector who were employed full-time and for a period of at least six months in their current organization. All hypotheses were tested via structural equation modeling using the bootstrap method to test the significance of indirect effects.

Findings Among the four work environment domains, only job challenge had a significant contribution in explaining job insecurity variance. This relationship was fully mediated by occupational self-efficacy.

Research limitations/implications The cross-sectional research design limits the ability to make causality inferences, while the convenience sampling method limits the generalizability of findings.

Practical implications The study results indicate that well-designed (i.e. challenging, autonomous and important) job tasks may be advantageous in organizational interventions aimed at reducing job insecurity due to their potential to strengthen employees' efficacy beliefs.

Originality/value The study results contribute to current knowledge regarding the relative importance of work environment antecedents of job insecurity, as well as the prominent role played by occupational self-efficacy in explaining some of these relationships.

Psychological treatments for return to work in individuals on sickness absence due to common mental disorders or musculoskeletal disorders: a systematic review and meta-analysis of randomized-controlled trials

Finnes, A., Enebrink, P., Ghaderi, A. et al.
**Title**

*Traumatic stress within disaster-exposed occupations: overview of the literature and suggestions for the management of traumatic stress in the workplace*

**Author/s**

Brooks, SK et al

**Source**

*British medical bulletin* March 2019 129 1 25–34, [https://doi.org/10.1093/bmb/ldy040](https://doi.org/10.1093/bmb/ldy040)

**Abstract**

Background: Many people who experience a disaster will do so as part of an occupational group, either by chance or due to the nature of their role. Sources of data: This review is based on literature published in scientific journals. Areas of agreement: There are many social and occupational factors, which affect post-disaster mental health. In particular, effective social support—both during and post-disaster—appears to enhance psychological resilience. Areas of controversy: There is conflicting evidence regarding the best way to support trauma-exposed employees. Many organisations carry out post-incident debriefing despite evidence that this is unhelpful. Growing points: Employees who are well supported tend to have better psychological outcomes and as a result may be more likely to perform well at work. Areas timely for developing research: The development and evaluation of workplace interventions designed to help managers facilitate psychological resilience in their workforce is a priority. Successful interventions could substantially increase resilience and reduce the risk of long-term mental health problems in trauma-exposed employees.

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**Title**

*Workplace mental health: Current practice and support needs of Ontario occupational therapists*

**Author/s**

Moll, SE et al

**Source**

*Canadian journal of occupational therapy* 2019 85 5 408-417 [https://doi.org/10.1177/0008417418822491](https://doi.org/10.1177/0008417418822491)
Abstract
Workplace mental health (WMH) is an important and expanding practice area for occupational therapists.

Purpose. This cross-sectional study explores the current practices and support needs of Ontario-based occupational therapists in WMH.

Method. Registrants from the provincial association who provide mental health and/or work-related services were invited to participate. Ninety-three therapists completed an online survey; 10 participated in follow-up focus groups. Analysis involved descriptive statistics of the survey data and content analysis of the focus group data.

Findings. Return to work, reactivation, and functional cognitive assessment were the most commonly reported services. Key challenges were limited funding and training and lack of awareness of the occupational therapy role. Therapists emphasized the importance of raising the competence, credibility, and profile of occupational therapy in WMH.

Implications. Defining the role of occupational therapy, developing training and resources, and advocacy are needed to advance occupational therapy practice within this rapidly changing field.

PUBLIC HEALTH

Title
Fit-for-purpose?’ – challenges and opportunities for applications of blockchain technology in the future of healthcare

Author/s
Mackey, TK et al

Source

Abstract
Blockchain is a shared distributed digital ledger technology that can better facilitate data management, provenance and security, and has the potential to transform healthcare. Importantly, blockchain represents a data architecture, whose application goes far beyond Bitcoin – the cryptocurrency that relies on blockchain and has popularized the technology. In the health sector, blockchain is being aggressively explored by various stakeholders to optimize business processes, lower costs, improve patient outcomes, enhance compliance, and enable better use of healthcare-related data. However, critical in assessing whether blockchain can fulfill the hype of a technology characterized as ‘revolutionary’ and ‘disruptive’, is the need to ensure that blockchain design elements consider actual healthcare needs from the diverse perspectives of consumers, patients, providers, and regulators. In addition, answering the real needs of healthcare stakeholders, blockchain approaches must also be responsive to the unique challenges faced in healthcare compared to other sectors of the economy. In this sense, ensuring that a health blockchain is ‘fit-for-purpose’ is pivotal. This concept forms the basis for this article, where we share views from a multidisciplinary group of practitioners at the forefront of blockchain conceptualization, development, and deployment.

Title
The health burden of preventable disease in Australia: a systematic review

Author/s
Crosland, P et al

Source
Australian and New Zealand journal of public health April 2019 43 2 163-170 https://doi.org/10.1111/1753-6405.12882

Abstract
Objective: A systematic review was conducted to determine the health burden of preventable disease in Australia.

Methods: The PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) statement guidelines were followed to identify, screen and describe the protocols used in the systematic review.

Results: Eleven studies were included in the review. Data on the health burden associated
with lifestyle-related risk factors were extracted by disease with outcomes reported in attributable number and proportion of deaths, years of life lost, years lived with disability and disability-adjusted life years (DALYs). Around one-third of DALYs was attributed to all modifiable risk factors. The range of estimates of DALYs attributable to each prioritised risk factor was: combined dietary risk factors, 7.2% to 9.7%; tobacco, 7.9% to 9.0%; alcohol, 5.1% to 12.2%; high body mass, 5.5% to 8.3%; and physical inactivity, 1.2% to 5.5%.

Conclusions: Although the methods used to estimate preventable health burden varied greatly between studies, all found that a substantial amount of death and disability was attributable to lifestyle-related risk factors.

Implications for public health: There is a large health burden in Australia caused by modifiable risk factors and further action is warranted to address this burden.

Title Interdisciplinary working in public health research: a proposed good practice checklist
Author/s Gavens, L Holmes, J Bühringer, G McLeod, J Neumann, M Lingford-Hughes, A Hock, ES Meier, PS
Source Journal of public health 40 1 175–182, https://doi.org/10.1093/pubmed/fdx027
Abstract Background Guidance on how different disciplines from the natural, behavioural and social sciences can collaborate to resolve complex public health problems is lacking. This article presents a checklist to support researchers and principle investigators to develop and implement interdisciplinary collaborations.
Methods Fourteen individuals, representing 10 disciplines, participated in in-depth interviews to explore the strengths and challenges of working together on an interdisciplinary project to identify the determinants of substance use and gambling disorders, and to make recommendations for future interdisciplinary teams. Data were analysed thematically and a checklist was derived from insights offered by participants during interview and discussion among the authors on the implications of findings.
Results Participants identified 18 scientific, interactional and structural strengths and challenges of interdisciplinary research. These findings were used to develop an 18-item BASICS checklist to support future interdisciplinary collaborations. The five domains of the checklist are: (i) Blueprint, (ii) Attitudes, (iii) Staffing, (iv) Interactions and (v) Core Science.
Conclusion Interdisciplinary work has the potential to advance public health science but the numerous challenges should not be underestimated. Use of a checklist, such as BASICS, when planning and managing projects may help future collaborations to avoid some of the common pitfalls of interdisciplinary research.

RETURN TO WORK

Title Enabling the return-to-work process among people with affective disorders: A multiple-case study
Author/s Johanson, S Markström, U Bejerholm, U
Abstract Background: The Individual Enabling and Support (IES) model is an adapted, supported employment program developed to meet motivational, cognitive and time-use needs of people with affective disorders. Vocational programs for this target group have been developed but more knowledge is needed about the important characteristics and perceived usefulness of the programs. The aim of this study was to illustrate the IES model and process from multiple perspectives.
Methods: Five participants were included in this multiple-case study. The material comprised interviews with participants, intervention documents, memos and interviews with employment specialists. Within and cross-case analyzes and an analytical generalization were performed. Results: The cases illustrated different IES processes, and the theme; Enabling engagement in return to work (RTW) was formulated. Continuous support from the employment specialist and a focus on personal resources and motivation were essential to overcome low self-confidence regarding RTW. Motivational, cognitive and time-use strategies gave an opportunity to learn new behavior and coping strategies for job seeking, getting employed and working.

Conclusion: Providing a combination of these strategies integrated with supported employment could promote self-efficacy and engagement in the RTW process among people on sick leave due to an affective disorder.

Title How do line managers experience and handle the return to work of employees on sick leave due to work-related stress? A one-year follow-up study

Author/s Ladegaard, Yun; Skakon, Janne; Elrond, Andreas Friis; Netterstrøm, Bo.

Source Disability & rehabilitation. January 2019 41 1 44-52. 9p DOI: 10.1080/09638288.2017.1370733

Abstract Purpose: To examine how line managers experience and manage the return to work process of employees on sick leave due to work-related stress and to identify supportive and inhibiting factors. Materials and methods: Semi-structured interviews with 15 line managers who have had employees on sick leave due to work-related stress. The grounded theory approach was employed.

Results: Even though managers may accept the overall concept of work-related stress, they focus on personality and individual circumstances when an employee is sick-listed due to work-related stress. The lack of a common understanding of stress creates room for this focus. Line managers experience cross-pressure, discrepancies between strategic and human-relationship perspectives and a lack of organizational support in the return to work process.

Conclusion: Organizations should aim to provide support for line managers. Research-based knowledge and guidelines on work-related stress and return to work process are essential. As is the involvement of coworkers. A commonly accepted definition of stress and a systematic risk assessment is also important. Cross-pressure on line managers should be minimized and room for adequate preventive actions should be provided as such an approach could support both the return to work process and the implementation of important interventions in the work environment. Implication for rehabilitation: Organizations should aim to provide support for line managers handling the return to work process. Cross-pressure on line managers should be minimized and adequate preventive actions should be provided in relation to the return to work process. Research-based knowledge and guidelines on work-related stress and return to work are essential. A common and formal definition of stress should be emphasized in the workplace.

SHIFT WORK

Title Impact of shift duration on alertness among air-medical emergency care clinician shift workers

Author/s Patterson, PD et al

Abstract  Background Greater than half of Emergency Medical Services (EMS) shift workers report fatigue at work and most work long duration shifts. We sought to compare the alertness level of EMS shift workers by shift duration.
Methods We used a multi-site, 14-day prospective observational cohort study design of EMS clinician shift workers at four air-medical EMS organizations. The primary outcome was behavioral alertness as measured by psychomotor vigilance tests (PVT) at the start and end of shifts. We stratified shifts by duration (< 24 h and 24 h), night versus day, and examined the impact of intra-shift napping on PVT performance.
Results One hundred and twelve individuals participated. The distribution of shifts <24 h and 24 h with complete data were 54% and 46%, respectively. We detected no differences in PVT performance measures stratified by shift duration (P > 0.05). Performance for selected PVT measures (lapses and false starts) was worse on night shifts compared to day shifts (P < 0.05). Performance also worsened with decreasing time between waking from a nap and the end of shift PVT assessment.
Conclusions Deficits in performance in the air-medical setting may be greatest during night shifts and proximal to waking from an intra-shift nap. Future research should examine alertness and performance throughout air-medical shifts, as well as investigate the timing and duration of intra-shift naps on outcomes.

Title  Short time between shifts and risk of injury among Danish hospital workers: a register-based cohort study
Author/s  Nielsen, HB et al
Source  Scandinavian, journal of work, environment & health 2019 45 2 166-173
doi:10.5271/sjweh.3770
Abstract  Objectives Short time between consecutive work shifts (quick returns, ie, ≤11 hours between shifts) is associated with sleepiness and fatigue, both of which have been linked to risk of injury. This paper aims to study quick returns between work shifts and risk of injury among Danish hospital workers. Method The study population included 69 200 employees, primarily working at hospitals, corresponding to 167 726 person years at risk between 2008–2015. Information on working hours was obtained from payroll data in the Danish Working Hour Database and linked, at an individual level, with data on 11 834 injury records identified in the National Patient Register and the Danish Register of Causes of Death. Multivariate Poisson regression models were used to calculate incidence rate ratios (IRR) with 95% confidence intervals (CI).
Results Results showed the shorter the time between shifts, the higher the risk of injury. Thus, an elevated risk of injury was observed after quick returns compared with the standard 15–17 hours between shifts (IRR 1.39, 95% CI 1.23–1.58). Furthermore, when assessing the number of days since a quick return, the risk of injury was especially high within the first two days (day 1: IRR 1.39, 95% CI 1.23–1.58; day 2: IRR 1.39, 95% CI 1.21–1.58) following a quick return.
Conclusions Our results suggest that quick returns increased the risk of injury, in particular within the first two days following a quick return. These findings point towards avoiding or reducing the number of quick returns in order to lower employees’ risk of injury.

Title  Sleep and alertness in shift work disorder: findings of a field study.
Author/s  Vanttola, P et al
Source  International archives of occupational and environmental health May 2019 92 4 523-533
Abstract

Purpose: Although shift work disorder (SWD) affects a major part of the shift working population, little is known about its manifestation in real life. This observational field study aimed to provide a detailed picture of sleep and alertness among shift workers with a questionnaire-based SWD, by comparing them to shift workers without SWD during work shifts and free time.

Methods: SWD was determined by a questionnaire. Questionnaires and 3-week field monitoring, including sleep diaries, actigraphy, the Karolinska Sleepiness Scale (KSS), EEG-based sleep recordings, and Psychomotor Vigilance Tasks (PVT), were used to study 22 SWD cases and 9 non-SWD workers.

Results: The SWD group had a shorter subjective total sleep time and greater sleep debt before morning shifts than the non-SWD group. Unlike the non-SWD group, the SWD group showed little compensatory sleep on days off. The SWD group had lower objective sleep efficiency and longer sleep latency on most days, and reported poorer relaxation at bedtime and sleep quality across all days than the non-SWD group. The SWD group's average KSS-sleepiness was higher than the non-SWD group's sleepiness at the beginning and end of morning shifts and at the end of night shifts. The SWD group also had more lapses in PVT at the beginning of night shifts than the non-SWD group.

Conclusions: The results indicate that SWD is related to disturbed sleep and alertness in association with both morning and night shifts, and to less compensatory sleep on days off. SWD seems to particularly associate with the quality of sleep.

VOCATIONAL REHABILITATION

Title Mental health literacy among vocational rehabilitation professionals and their perception of employers in the return-to-work process

Author/s Porter, S Lexen, A Bejerholm

Source Journal of vocational rehabilitation 2019 50 2 157-169, 2019

Abstract Background: Individuals with mental health problems often need support from vocational rehabilitation professionals in their return-to-work (RTW) process. Research has shown that this support can be deficient, with vocational rehabilitation professionals lacking relevant knowledge and an underlying belief in the individual’s ability to resume a working life. More understanding is therefore needed of professionals’ mental health literacy and their perception of and influence on employer roles in the RTW process.

objective: To explore the mental health literacy of Swedish vocational rehabilitation professionals and their perception of employers in the RTW process.

Method: Qualitative grounded theory study which included 22 interviews of vocational rehabilitation professionals working with individuals with mental health problems in their RTW process.

Results: Three categories emerged: holding a position of power in the RTW process, viewing and believing in individuals’ work ability plays a central role, and recognizing the employer’s role as a key factor for realizing employment.

Conclusion: Increasing the mental health literacy of vocational rehabilitation professionals is crucial since they have a decisive role with both clients and employers in the RTW process.

Title Practice motivated research: Application of an evidence-informed prognostic model in vocational rehabilitation to increase the chance of employment at closure

Author/s Nnaoke, U et al

Source Journal of vocational rehabilitation 2019 50 2 219-242
Abstract
Background: We argue that relevant research must focus on a problem of practice. We demonstrate this approach by developing a new product for practice to help counselors make informed vocational rehabilitation decisions. With only 18.7% of persons with disabilities employed in 2017, an accurate and simple prognostic tool could improve the effectiveness of the Individualized Plan for Employment and thus assist persons with disabilities to live independent lives. OBJECTIVE: To demonstrate the validity and practical relevance of a counseling decision support tool that accurately predicts clients’ employment outcomes based on demographic characteristics and vocational rehabilitation factors.
Methods: Using a historical sample of 53,629 persons with disabilities who completed vocational rehabilitation in a state agency, we derived our prediction model using logistic regression with 90-day employment as the outcome.
Results: The final prognostic model was derived from 12 client demographics and 20 vocational rehabilitation factors. The model correctly classified the outcome for 72% of the clients and demonstrated strong calibration and discrimination. The resulting app is available here: www.ablescore.com.
Conclusions: AbleScore accurately classifies client probability of employment at closure. The app therefore has immediate application in providing evidence-informed rehabilitation counseling to people with disabilities to improve the odds of employment at closure.

WORK ABILITY

Title
Lifestyle and work ability in a general working population in Norway: a cross-sectional study

Author/s
Oellingrath IM, De Bortoli MM, Svendsen MV et al

Source
BMJ open 2019 9 e026215. doi: 10.1136/bmjopen-2018-026215

Abstract
Objectives The aim of this study was to investigate the association between multiple lifestyle-related risk factors (unhealthy diet, low leisure-time physical activity, overweight/obesity and smoking) and self-rated work ability in a general working population.
Participants A random sample of 50 000 subjects was invited to answer a self-administered questionnaire and 16 099 responded. Complete data on lifestyle and work ability were obtained for 10 355 participants aged 18–50 years all engaged in paid work during the preceding 12 months.
Outcome measure Work ability was assessed using the Work Ability Score (WAS)—the first question in the Work Ability Index. To study the association between multiple lifestyle risk factors and work ability, a lifestyle risk index was constructed and relationships examined using multiple logistic regression analysis.
Results Low work ability was more likely among subjects with an unhealthy diet (ORadj 1.3, 95% CI 1.02 to 1.5), inactive persons (ORadj 1.4, 95% CI 1.2 to 1.6), obese respondents (ORadj 1.5, 95% CI 1.3 to 1.7) and former and current smokers (ORadj 1.2, 95% CI 1.1 to 1.4 and 1.3, 95% CI 1.2 to 1.5, respectively). An additive relationship was observed between the lifestyle risk index and the likelihood of decreased work ability (moderate-risk score: ORadj 1.3; 95% CI 1.1 to 1.6; high-risk score: ORadj 1.9; 95% CI 1.6 to 2.2; very high risk score: ORadj 2.4; 95% CI 1.9 to 3.0). The overall population attributable fraction (PAF) of low work ability based on the overall risk index was 38%, while the PAFs of physical activity, smoking, body mass index and diet were 16%, 11%, 11% and 6%, respectively.
Conclusions Lifestyle risk factors were associated with low work ability. An additive relationship was observed. The findings are considered relevant to occupational intervention programmes aimed at prevention and improvement of decreased work ability.
Personal meaning of work and perceived work ability among middle-aged workers with physically strenuous work: a Northern Finland Birth Cohort 1966 Study

Purpose
To investigate the association between personal meaning of work and perceived work ability among middle-aged workers with physically strenuous or light work. We evaluated the course of perceived work ability from 31 to 46 years and examined the possible differences in the association between personal meaning of work and perceived work ability at the age of 46 depending on physical workload.

Methods
The study population consisted of participants of the Northern Finland Birth Cohort 1966 (n = 4420). Data were collected through questionnaires at 31 and 46 years. The main outcome was perceived work ability (0–7 = poor, 8–10 = good) and the main explanatory measures were physically strenuous work and personal meaning of work. Multivariate logistic regression analyses were adjusted for unhealthy habits, number of diseases, job strain, social support at work, employment history and gender. They were also stratified for the strenuousness of work.

Results
Perceived work ability decreased during the 15-year follow-up in both the strenuous and light work groups, and was lowest among workers with strenuous work. Perceived work ability remained poor or decreased in 22% of men and 21% of women in the strenuous work group vs. 14% and 13% in the light work group, respectively. After adjusting for confounders, the participants in both groups who reported low personal meaning of work were at approximately a twofold risk of having poor perceived work ability at 46 years compared to the participants who reported high personal meaning of work.

Conclusions
Perceived work ability was significantly lower and deteriorated more during the follow-up among participants with strenuous work. High personal meaning of work was important for good work ability, irrespective of the strenuousness of work.

Work ability and work functioning: measuring change in individuals recently returned to work

Purpose
To assess: (1) whether work ability and work-functioning instruments can detect relevant changes in their respective parameters following a return to work (RTW) and (2) what proportion of those returning to work show changes in their work ability and work functioning.

Methods
A total of 1073 workers who returned to work after at least 2 weeks of sick leave were invited to fill out three questionnaires in the first 8 weeks after RTW. These consisted of an appraisal of general, physical, and mental/emotional work ability (scores 0–10) and a work-functioning questionnaire (scores 0–100). Minimal Important Change (MIC) was defined to determine the proportion of people, whose scores had changed at weeks 5 and 8 following RTW. The Smallest Detectable Change (SDC) was determined to put the MIC in perspective of measurement error.

Results
Of all participants, 235 were eligible for the analysis. All MIC values were below the SDC and thus not suitable for use. The SDC for work ability was 2.2 and 19.9 for work functioning. In the first 5 weeks after RTW, 10–15% showed a relevant, measurable improvement in work ability, and work functioning based on the SDC margins.

Conclusions
Both instruments were unable to identify change after RTW adequately. We can conclude that 10–15% of individuals showed improvement in work ability and work functioning in the first 5 weeks after RTW when SDC is used.
WORK DISABILITY

**Title**  
Assessment of prognosis by physicians involved in work disability evaluation: A qualitative study

**Author/s**  
Kox, René J.; Hoving, Jan L.; Verbeek, Jos H.; Schouten, Maria J. E.; Hulshof, Carel T. J.; Wind, Haije; Frings-Dresen, Monique H. W.

**Source**  

**Abstract**  
Background: Assessment of prognosis of work functioning is a challenging aspect of work disability evaluations. To gain insight into this process, we conducted a qualitative study to determine the aspects considered and the difficulties, needs and potential solutions affecting the prognosis assessment by physicians performing disability evaluations.

Methods: In-depth, semi-structured individual interviews were conducted with 20 physicians performing disability evaluations for the Dutch social security institute: the national institute for employee benefit schemes. Verbatim transcripts were independently analyzed by two researchers using MAXQDA software until significant themes emerged and data saturation was achieved.

Results: The responses that emerged from the interviews were clustered in three primary themes. The first theme was “Aspects considered by physicians in assessing prognosis.” When making a prognosis, physicians considered the following medical issues: nature and severity of disease, the role of treatment, course of the disease, external information, and medical evidence. Patient-related issues and physician-related aspects were also distinguished. Patient-related aspects concerned the patients’ work perspectives and coping or recovery behavior. Physician-related aspects concerned awareness of the physician’s own role and reflection on aspects such as empathy for clients and ethical considerations. The second theme was “Difficulties physicians face in assessing prognosis,” which included challenges during the assessment of diseases of a complex or less concrete nature, applying prognostic evidence to the individual, and lack of time when seeking prognostic evidence. The third theme concerned “Needs and solutions” formulated by physicians that facilitated the prognostic assessment. It consisted of continuous education, better collaboration with medical specialists and/or labor experts, and the use of prognostic tools such as checklists, apps or internet applications incorporating evidence on prognosis.

Conclusions: Physicians identified several medical and patient-related aspects that elucidated the prognosis assessment. Given the variety of challenges and the need for further support found in the current study, future research should focus on the development and evaluation of training, tools, and guidelines to improve prognosis assessment by physicians.

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**Title**  
Employers' perspectives of including young people with disabilities in the workforce, disability disclosure and providing accommodations

**Author/s**  
Lindsay, S et al

**Source**  
*Journal of vocational rehabilitation* 2019 50 2 141-156, 2019 DOI:10.3233/JVR-180996

**Abstract**  
Background: Enhancing the employment of people with disabilities can help support healthy and productive work.

Objective: Our objective was to understand employer accommodation practices with youth with disabilities (i.e., as they currently exist and what employers need help with) and how they create an inclusive environment.

Methods: A descriptive qualitative study was conducted involving in-depth interviews with a purposive sample of 18 employers who hire young people with disabilities. Thematic analysis explored issues related to disclosure, accommodations, and inclusion. RESULTS: Most employers encouraged youth with disabilities to disclose their condition and emphasized the importance of building trust and rapport. Employers described how and when to provide
accommodations, types of accommodations (i.e., formal, informal, physical, and social), and how they addressed unmet needs. Employers’ strategies for creating an inclusive workplace culture included: diversity training, addressing stigma and discrimination, open communication, mentoring and advocacy. Conclusions: Our findings highlight that most employers hiring youth with disabilities have strategies for encouraging them to disclose their condition and request accommodations, which can help to inform employers who do not hire people with disabilities or have effective strategies in place to support them.

Title From welfare to work and from work to welfare: a comparison of people with and without disabilities

Author/s Yosef, L et al

Source Journal of disability policy studies 2019 29 4 226-234

Abstract In this study, we explore the behavioral factors that play a role in the decision—among people with and without disabilities—to move from welfare to work and from work to welfare. A survey of people with and without disabilities in Israel was conducted; a nonprobability quota sample of 193 individuals was drawn (95 people with disabilities and 98 nondisabled people). The data were collected by means of a closed-ended questionnaire. The results show that people with disabilities tended more than nondisabled persons to favor decisions that maintain their current employment status quo bias). Furthermore, compared with nondisabled individuals, people with disabilities demanded more wages or benefits while changing status in the labor market. The more years of education people with disabilities have, the less incentive is needed to resume or begin working. In addition, the noneconomic value of work is higher among more-educated people compared with less-educated people with disabilities. The results emphasize the need to design various policies to lower the status quo bias effect, especially, among people with disabilities. Maintaining employment status among this population, and promoting their education level, should be central rehabilitation priorities.

Title General issues around the implementation and performance of the NDIS: progress report 2019

Author/s Joint Standing Committee on the National Disability Insurance Scheme

Abstract The Parliamentary Joint Standing Committee on the National Disability Insurance Scheme was established on 1 September 2016 following the passing of a resolution in the Senate and the House of Representatives. The committee is comprised of five members and five senators and is tasked with reviewing:

(a) the implementation, performance and governance of the National Disability Insurance Scheme (NDIS or the Scheme);
(b) the administration and expenditure of the NDIS; and
(c) such other matters in relation to the NDIS as may be referred to it by either House of the Parliament.

This is the second progress report of the committee in the 45th Parliament. The report covers events from 1 July 2017 to 31 December 2018. Chapter 1 provides an overview of the committee’s activities during the period and the activities of NDIA, the DRC, the Quality and Safeguards Commission, bodies whose responsibilities relate to the implementation, performance and governance of the NDIS. Chapter 2 explores issues raised in evidence. Chapter 3 considers potential future areas of inquiry.
WORK HEALTH AND SAFETY

**Title**  
Are recommended heat stroke treatments adequate for Australian workers? - commentary

**Author/s**  
Brearley, MT

**Source**  
Annals of work exposures and health April 2019 63 3 263 –266  
https://doi.org/10.1093/annweh/wxz001

**Abstract**  
Workers that combine physical exertion with exposure to hot conditions are susceptible to heat-related illnesses, including heat stroke. Despite recognition of cold water immersion as the heat stroke treatment of choice in the peer-reviewed literature, it was not included within recommended treatments of leading Australian healthcare training organizations and was omitted from Safe Work Australia’s recently updated ‘Managing the risks of working in heat’ guidance material. On this basis, the guidance material appears an opportunity lost to assist Australian industry transition their heat stroke management to reflect the evidence. It is recommended that Australian providers of healthcare training, and those reliant on such information, review the efficacy of their heat stroke treatments.

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**Title**  
Cognitive failures in response to emotional contagion: Their effects on workplace accidents

**Author/s**  
Petitta, L et al

**Source**  
Accident analysis & prevention April 2019 125 165-173  
https://doi.org/10.1016/j.aap.2019.01.018

**Abstract**  
Highlights: The interplay between contagion of emotions and cognitive failures is key to prevent workplace accidents. Lapses in cognitive functioning may be prevented by positive emotions that employees absorb during social interactions at work. Contagion of anger among employees enhances their cognitive failures and subsequent accidents.

The purpose of this study was to examine contagion of positive and negative emotions among employees as an antecedent of cognitive failures and subsequent workplace accidents. Using emotional contagion theory and the neural model of emotion and cognition, we tested the proposition that higher contagion of anger (i.e., a negative emotion accompanied by dysfunctional cognition) would be associated with greater cognitive failures, whereas higher contagion of joy (i.e., a positive emotion accompanied by pleasant information processing, attention and positive cognition) would be associated with fewer cognitive failures. In turn, cognitive failures were predicted to be related to higher rates of subsequent workplace accidents. Using a two-wave lagged design, anonymous survey data collected from N = 390 working adults in the U.S. supported the hypothesized mediation model. Specifically, emotional contagion of anger positively predicted cognitive failures, whereas emotional contagion of joy negatively predicted cognitive failures. Furthermore, cognitive failures positively predicted experienced accidents and fully mediated the relationship between contagion of joy/anger and experienced accidents. These findings suggest that lapses in cognitive functioning may be prevented by positive emotions (and enhanced by negative emotions) that employees absorb during social interactions at work and represent a more proximal source of accidents in comparison to emotions. Theoretical and practical implications of these results are discussed in light of the globally rising rates of workplace accidents and related costs for safety.

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**Title**  
Creating psychologically safe team
Creating a psychologically safe team isn’t an easy feat, but the benefits are exponentially worth it. Amy Edmondson, a professor from Harvard Business School, defines a psychologically safe team as “A shared belief that the team is safe for interpersonal risk taking”. As she mentions in her 2015 Tedx Talk, “nobody wakes up in the morning wanting to go to work to feel ignorant, incompetent, intrusive or negative”. In Edmondson’s research she has found that the top teams who make the fewest errors were not in fact the most productive teams, as it turns out better performing teams are the ones making more errors than worse performing ones. The reason behind this finding is that teams making the most errors but they feel able to admit mistakes and discuss them, learn more and enter into more of a growth mindset.

Customs officers in relation to viral infections, tuberculosis, psittacosis and environmental health risk.

Customs Service is a financial authority responsible for controlling the flow of importation and exportation goods in each country and for collecting the relevant taxes. Customs officers are considered as 'high-demand' and 'high-responsibility' governmental officials, which constitute members of multidisciplinary teams at the local, as well as international level and collaborate with different authorities, including medical officers. Despite limited data in the medical literature, customs officers are considered as a 'high-risk' occupational group for infections and environmental health risk. During the severe acute respiratory syndrome (SARS) and influenza A/H1N1 pandemic outbreaks in 2003 and 2009, respectively, customs officers had a fundamental front-line input in the establishment of the recommended at that time border measures. In Belgium in 1994, a psittacosis outbreak occurred in customs officers following their exposure to illegally imported parakeets. During the recent increased immigration proceedings, customs officers have been involved in detaining unauthorized populations for various infectious diseases, such as tuberculosis, varicella and measles. Occupational risk for customs officers also includes noise-induced hearing loss, exposure to diesel engine emission and stored tobacco and occupational stress due to their increased time-schedule and decision-making duties. In this review, we discuss customs officers' occupational risk towards environmental and infectious factors, including viral infections, tuberculosis and psittacosis.

Fatigue and measurement of fatigue: a scoping review protocol

Review question/objective: The objectives of this review are to identify and present definitions of fatigue and theoretical, conceptual and mechanistic models of fatigue, and to identify the commonly used instruments that measure fatigue in humans and the settings in which they are used. Specifically, the review questions are:

1. How is fatigue defined?
2. What theories, conceptual and mechanistic models of fatigue that underpin the understanding of fatigue have been posited?
3. What are the most commonly used instruments that measure human fatigue and in which settings are they used?

**Title**
The impact of within-day work breaks on daily recovery processes: An event-based pre-/post-experience sampling study

**Author/s**
Zhu, Z Kuykendall, L Zhang, X

**Source**
Journal of occupational & organizational psychology March 2019 92 1 191-211
https://doi.org/10.1111/joop.12246

**Abstract**
Research on recovery from work stress has emphasized the importance of within-day work breaks. However, prior research has not been designed and analysed in a way that fully aligns with the processes described by the underlying theoretical framework (i.e., the effort-recovery model). The current paper examines the effects of within-day work breaks on recovery using an event-based pre-/post (EBPP)-design, in a way that more fully captures the recovery process as described by the effort-recovery model. We also included designs used in previous studies (i.e., an interval-based design and an event-based design without pre-break strain measures) to demonstrate the differences between the EBPP design and previous designs. The results of the EBPP model using a sample of Chinese white-collar employees showed that within-day work breaks are significantly associated with reduced fatigue and negative affect and increased positive affect, supporting the predicted recovery effects of within-day work breaks. However, mixed results were found in the interval-based design, and non-significant results were found in the event-based design without pre-break measurements. We discuss methodological implications and explain how the EBPP design could be applied to study other episodic phenomena.

Practitioner points
An event-based pre-/post-design (EBPP) can be used to study recovery and other momentary, episodic events at work. Within-day work breaks can help employees reduce fatigue and negative affect and increase positive affect.

**Weblink**
Relaxation break activities, nutrition-intake activities, social activities, and cognitive activities help recovery.

**Title**
Is there an association between working conditions and health? An analysis of the Sixth European Working Conditions Survey data

**Author/s**
Nappo, Nunzia.

**Source**
PLoS ONE. February 2019 14 2 1-15. 15p. DOI: 10.1371/journal.pone.0211294

**Abstract**
This paper analyses the association between working conditions and physical health using data from the Sixth European Working Conditions Survey (EWCS6) released in 2017. The econometric analysis uses two indicators to describe health status: self-assessed health (SAH), which is a subjective indicator of health; and an objective indicator of health (SICK), which is based on the occurrence of any illness or health problem that has lasted or is expected to last for more than 6 months. The theoretical hypotheses concerning the association between working conditions and SAH and the association between working conditions and SICK are tested using a standard ordered probit model and a standard probit model, respectively. The results show that encouraging working conditions, work environment, and job support are associated with both better self-assessed health and better objective health.
Title: Long-term transportation noise exposure and incidence of ischaemic heart disease and stroke: a cohort study

Author/s: Pyko, A et al

Source: Occupational & environmental medicine 2019 76 4 201-207
http://dx.doi.org/10.1136/oemed-2018-105333

Abstract: Background There is limited evidence from longitudinal studies on transportation noise from different sources and development of ischaemic heart disease (IHD) and stroke. Objectives This cohort study assessed associations between exposure to noise from road traffic, railway or aircraft and incidence of IHD and stroke. Methods In a cohort of 20 012 individuals from Stockholm County, we estimated long-term residential exposure to road traffic, railway and aircraft noise. National Patient and Cause-of-Death Registers were used to identify IHD and stroke events. Information on risk factors was obtained from questionnaires and registers. Adjusted HR for cardiovascular outcomes related to source-specific noise exposure were computed using Cox proportional hazards regression. Results No clear or consistent associations were observed between transportation noise and incidence of IHD or stroke. However, noise exposure from road traffic and aircraft was related to IHD incidence in women, with HR of 1.11 (95% CI 1.00 to 1.22) and 1.25 (95% CI 1.09 to 1.44) per 10 dB L_{den}, respectively. For both sexes taken together, we observed a particularly high risk of IHD in those exposed to all three transportation noise sources at≥45 dB L_{den}, with a HR of 1.57 (95% CI 1.06 to 2.32), and a similar tendency for stroke (HR 1.42; 95% CI 0.87 to 2.32).

Conclusion No overall associations were observed between transportation noise exposure and incidence of IHD or stroke. However, there appeared to be an increased risk of IHD in women exposed to road traffic or aircraft noise as well as in those exposed to multiple sources of transportation noise.

Title: Mortality and cancer incidence among female Australian firefighters

Author/s: Glass, D

Source: Occupational & environmental medicine 2019 76 4 215-221 http://dx.doi.org/10.1136/oemed-2018-105336

Abstract: Objectives To investigate the mortality and cancer incidence of female firefighters, a group where there are limited published findings. Methods Participating fire agencies supplied records of individual firefighters including the number and type of incidents attended. The cohort was linked to the Australian National Death Index and Australian Cancer Database. Standardised mortality ratios and standardised cancer incidence ratios were calculated separately for paid and volunteer firefighters. Volunteer firefighters were grouped into tertiles by the duration of service and by a number of incidents attended and relative mortality ratios and relative incidence ratios calculated. Results For volunteer firefighters (n=37 962), the overall risk of mortality and risk from all major causes of death were reduced when compared with the general population whether or not they had ever attended incidents. Volunteer firefighters had a similar cancer incidence when compared with the general population for most major cancer categories. Female volunteer firefighters have usually attended few fires. Of those who had turned out to incidents, only one-third had attended more than 12 fires about half the number for male volunteers. Mortality and cancer incidence for paid female firefighters (n=1682) were similar to the general population but the numbers were small and so power was limited. Conclusions Female volunteer firefighters have a cancer incidence similar to the general population but a reduced risk of mortality which is likely to be a result of a ‘healthy volunteer’ effect. Most of the paid female firefighters were relatively recent recruits and it will be important to monitor the health of this group as more women are recruited to front-line firefighting roles.
Title Need for a new workplace safety and health (WSH) strategy for the fourth Industrial Revolution

Author/s Chia, G et al


Abstract We are on the cusp of the fourth Industrial Revolution which promises to revolutionize the way we live and work. Throughout history, as society and technology progress, so too have our workplace safety and health (WSH) strategies in regard to better knowledge and enhanced regulation. In this paper, we argue for a new WSH 4.0 strategy which requires us to adopt an adaptive and highly responsive approach to promote Total Worker Health in the face of rapid technological advancements and changes in employment relationships. To do so, we propose a multi-pronged strategy comprising (i) adaptive WSH solutions in regard to surveillance, risk assessment, and control measures leveraging on new technologies; (ii) effective multi-stakeholder dialogues for collaborative and sustainable solutions; (iii) an anticipatory WSH governance framework based upon shared values and cooperative responsibility; and (iv) professional development among WSH practitioners. This new WSH 4.0 strategy will enable WSH professionals to remain effective in this coming Industrial Revolution.

Title Occupational exposures and incidence of chronic bronchitis and related symptoms over two decades: the European Community Respiratory Health Survey

Author/s Lycras, T et al

Source Occupational & environmental medicine 2019 76 4 222-229 http://dx.doi.org/10.1136/oemed-2018-105274

Abstract Objectives Chronic bronchitis (CB) is an important chronic obstructive pulmonary disease (COPD)-related phenotype, with distinct clinical features and prognostic implications. Occupational exposures have been previously associated with increased risk of CB but few studies have examined this association prospectively using objective exposure assessment. We examined the effect of occupational exposures on CB incidence in the European Community Respiratory Health Survey.

Methods Population samples aged 20–44 were randomly selected in 1991–1993, and followed up twice over 20 years. Participants without chronic cough or phlegm at baseline were analysed. Coded job histories during follow-up were linked to the ALOHA Job Exposure Matrix, generating occupational exposure estimates to 12 categories of chemical agents. Their association with CB incidence over both follow-ups was examined with Poisson models using generalised estimating equations.

Results 8794 participants fulfilled the inclusion criteria, contributing 13 185 observations. Only participants exposed to metals had a higher incidence of CB (relative risk (RR) 1.70, 95% CI 1.16 to 2.50) compared with non-exposed to metals. Mineral dust exposure increased the incidence of chronic phlegm (RR 1.72, 95% CI 1.43 to 2.06). Incidence of chronic phlegm was increased in men exposed to gases/fumes and to solvents and in women exposed to pesticides.

Conclusions Occupational exposures are associated with chronic phlegm and CB, and the evidence is strongest for metals and mineral dust exposure. The observed differences between men and women warrant further investigation.

Title Physical capacity, occupational physical demands, and relative physical strain of older employees in construction and healthcare
Purpose: To assess age-related differences in physical capacity, occupational physical demands, and relative physical strain at a group level, and the balance between capacity and demands at an individual level, for construction and healthcare workers.

Methods: Shoulder strength, back strength, and aerobic capacity were assessed among construction (n = 62) and healthcare workers (n = 64). During a full working day, accelerometers estimated upper-arm elevation, trunk flexion, and occupational physical activity as indicators of occupational physical demands. Simultaneously, normalised surface electromyography (%sEMG_{max}) of the upper trapezius and erector spinae muscles, and normalised electrocardiography (percentage heart rate reserve (%HRR)) estimated relative physical strain. Differences between younger (≤ 44 years) and older (≥ 45 years) workers, as well as the moderating effect of age on the associations between capacity and demands, were analysed per sector.

Results: Compared to younger workers, older workers had similar strength and lower aerobic capacity; older construction workers had similar demands while older healthcare workers had higher demands. Compared to younger workers, older employees had unfavourable muscle activity patterns; %HRR had a tendency to be lower for older construction workers and higher for older healthcare workers. Among construction workers, age moderated the associations between shoulder strength and arm elevation (p = 0.021), and between aerobic capacity and occupational physical activity (p = 0.040). Age did not moderate these associations among healthcare workers. Conclusions: In both sectors, the level of occupational physical demands and the higher relative physical strain in older employees require addressing to promote sustainable work participation among an aging population.

Title: Systematic literature review on the effects of occupational safety and health (OSH) interventions at the workplace

Objectives: The aim of this review was to assess the evidence that occupational safety and health (OSH) legislative and regulatory policy could improve the working environment in terms of reduced levels of industrial injuries and fatalities, musculoskeletal disorders, worker complaints, sick leave and adverse occupational exposures.

Methods: A systematic literature review covering the years 1966–2017 (February) was undertaken to capture both published and gray literature studies of OSH work environment interventions with quantitative measures of intervention effects. Studies that met specified inclusion criteria went through an assessment of methodological quality. Included studies were grouped into five thematic domains: (i) introduction of OHS legislation, (ii) inspection/enforcement activity, (iii) training, such as improving knowledge, (iv) campaigns, and (v) introduction of technical device, such as mechanical lifting aids. The evidence synthesis was based on meta-analysis and a modified Grading of Recommendations, Assessment, Development and Evaluation (GRADE) approach.

Results: The search for peer-reviewed literature identified 14,743 journal articles of which 45 fulfilled the inclusion criteria and were eligible for meta-analysis. We identified 5,181 articles and reports in the gray literature, of which 16 were evaluated qualitatively. There was moderately strong evidence for improvement by OHS legislation and inspections with respect to injuries and compliance. Conclusions: This review indicates that legislative and regulatory policy may reduce injuries and fatalities and improve compliance with OHS regulation. A major research gap was identified with respect to the effects of OSH regulation targeting psychological and musculoskeletal disorders.
**Title**  
Testing the associations between leading and lagging indicators in a contractor safety pre-qualification database

**Author/s**  
Manjourides, J Dennerlein, JT

**Source**  
*American journal of industrial medicine* April 2019 62 4 317-324  
https://doi.org/10.1002/ajim.22951

**Abstract**  
Background: Safety prequalification assessing contractors’ safety management systems and safety programs lack validation in predicting construction worker injuries.  
Methods Safety assessments of leading indicators from 2198 construction contractors, including Safety Management Systems (SMS), Safety Programs (e.g., falls, hearing protection), and Special Elements (drug testing, return to work) scales as well as the history of citations from the Occupational Safety and Health Administration (OSHA) were compared to contractors’ lagging indicators of recordable injury case rates (RC) and rates of injuries involving days away, restricted, or transferred (DART).  
Results Increased SMS scores were related to lower injury rates. Each one-point increase in SMS values was associated with 34% reduced odds of a recordable case rate greater than zero (Odds ratio (OR): 0.66, 95% Confidence Interval (CI): (0.57, 0.79)), and a 9% reduced recordable case rate, if one occurs (Risk Ratio (RR): 0.91, 95% CI: (0.88, 0.94)). A one-point increase in SMS was associated with 28% reduced odds of a DART (OR = 0.72, 95%CI (0.56, 0.91)), and 9% reduced DART rate, if one occurs (RR = 0.91, 95%CI (0.87, 0.95)). Safety programs did not show consistent associations with injury outcomes. Having additional Special Elements related to drug and alcohol programs was associated with lower injury rates while the Special Element related to return to work showed no consistent associations with injury. Having more OSHA Citations was associated with lower injury rates for companies with injuries.  
Conclusions These results support pre-qualification methods based on SMS and suggest the need for safety management systems in contractors.

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**Title**  
Wet work exposure: comparison of observed and self-reported data

**Author/s**  
Lund, T et al

**Source**  
*International archives of occupational and environmental health* April 2019 92 3 317-326  
https://doi.org/10.1007/s00420-018-1383-7

**Abstract**  
Purpose Wet work is the most important exposure leading to occupational hand eczema; however, the prevalence and character of wet work in various wet work professions remain not fully covered. Self-reported data are widely used in studies of wet work although the validity of these remains uncertain. The objective of the present study is to provide information on validity of self-reported wet work exposure in different professions by comparing work place observations with self-reported data.  
Methods 114 workers from 15 various wet work professions were observed. The observations covered duration and frequency of wet work activities. The observed population as well as a non-observed population from each work place were given a questionnaire covering the same wet work activities.  
Results Correspondence analysis between self-reported and observed wet work showed that misclassification was larger regarding duration than frequency. 29.2% overestimated and 23.9% underestimated total wet work with more than 2 h/day. Professions with high wet work prevalence overestimated duration of wet work activities, but underestimated frequency. Females overestimated frequency, but not duration. The observed group (45%) significantly more often, than the non-observed group (32%), reported having more than 2 h of wet work/day (OR 2.8, 95% CI 1.6–4.9). Sensitivity and specificity of the questionnaire regarding total wet work in the observed population showed 51% sensitivity and 59% specificity.  
Conclusion Over- and underestimation of wet work were found to be equally distributed. The correspondence analyses illustrate a noticeable misclassification between the estimations and the observations on all wet work variables, but largest for total wet work.
Title When team member familiarity affects transactive memory and skills: a simulation-based training among police teams

Author/s Cotard, C & Estelle Michinov, E

Source Ergonomics 61 12 1591-1600 DOI: 10.1080/00140139.2018.1510547

Abstract The goal of this study was to evaluate the impact of team member familiarity on both technical and non-technical skills of police officers and to examine the mediating role of transactive memory components (specialization, coordination and credibility). Student police officers \((N=150)\) carried out professional simulation sessions in groups of three, with either familiar \((n=22\) teams) or unfamiliar \((n=28\) teams) team members, followed by a skills evaluation exercise. Professional instructors evaluated skills through direct observation of team member behaviours. The results revealed that training in familiar teams improved police officers’ technical and non-technical skills and transactive memory system. The effect of team familiarity on skills was mediated by transactive memory and specifically by the tacit coordination component. The findings are discussed in relation to the literature on the effects of team member familiarity on team performance, and implications for team training and staffing (turnover of personnel) in actions teams.

Practitioner Summary: This study examined the effect of team member familiarity on both the technical and non-technical skills of police officers. Training in familiar teams improved skills and transactive memory. The positive effect of team member familiarity on skills was mediated by the coordination facet of transactive memory.

Title An exploratory study of the injured worker’s experience and relationship with the workplace return to work coordinator in NSW, Australia

Author/s Bohatko-Naismith, J James, C Guest, M Rivett, DA Ashby, S


Abstract Purpose The purpose of this paper is to provide insight into the injured worker’s perspective of experiences with their workplace return to work coordinator (RTWC), and explore some of the barriers they encountered in the return to work process. Design/methodology/approach Semi-structured interviews were conducted with ten injured workers from New South Wales, Australia. The thematic analysis of transcripts was completed. Findings The findings provide an insight into the experiences of injured workers and their relationship with RTWCs. Five key themes emerged from the data: return to work experiences and the RTWC role, high turnover and lack of consistency in the role, RTWC “ideal”, knowledge and skills, communication skills and the RTWC role and GP visits privacy and conflict of interest with peer RTWCs. Practical implications The role of the workplace RTWC in the return to work process for injured workers is important and these findings are highly relevant to the return to work sector. Consistency within the role at the workplace and careful consideration of the specific traits and characteristics required by an individual to perform the role need to be observed during the selection process by employers when appointing a workplace RTWC to assist injured workers return to work. Originality/value This is the first Australian study to examine the injured workers views and experiences with the workplace RTWC and other factors that shape the return to work process.
Embracing innovation in government: Global trends 2019

Observatory for Public Sector Innovation (OPSI)

Organisation for Economic Co-operation and Development (OECD) 2019

An unprecedented technological revolution continues to disrupt the world around us. Changes are underway on a vast scale, with digitalisation transforming economies, governments and societies in complex, interrelated and often unpredictable ways. Government policies and practices have often not kept up with the speed of change. However, some at the edge of government innovation are using fantastic, novel solutions to solve today’s challenges for the collective good.

How your office space impacts employee well-being

Kohll, A

Forbes January 2019

A quality workspace design leads to a less stressful and more productive atmosphere. It’s essential that employers take the physical work environment of their employees into consideration. Employees need to feel comfortable and calm in their physical work settings to produce their best work.

Renewing regulation: anticipator regulation in an age of disruption

Armstrong, H Gorst, C Raie, J

Nesta March 2019

This report explores how regulators can adapt to secure the benefits of technological innovation while managing the risks, an approach we call anticipatory regulation.

Cross sector toolkit for health

Pew April 2019

The Cross-Sector Toolkit for Health is a collection of health impact assessments (HIAs), data sets and indicators, research articles, policy briefs, tools, guides, and other resources to support policymakers’ efforts to consider health when making decisions across sectors such as housing, planning, transportation, and education. The toolkit:

- Builds on data that was previously housed within the project’s map of HIAs.
- Features refined filtering capabilities that allow users to sort the resources by location, sector, drivers of health, community type, and more.
- Allows users to download all data and create maps, charts, and other visualizations in Microsoft Excel.
- Promotes interactive data visualization to represent key HIA data in graphic form.

WORK STRESS
**Title**: Gender assessment of job stress in healthcare workers. Implications for practice

**Author/s**: d’Ettorre, G., Pellicani, V., & Vullo, A.

**Source**: La Medicina Del Lavoro, 2019 110 1 22-28. [https://doi.org/10.23749/mdl.v110i1.7421](https://doi.org/10.23749/mdl.v110i1.7421)

**Abstract**

Background: Work-related stress (WRS) in the healthcare sector is a major issue for both workers and organizations. To date, no consensus exists regarding differences in gender susceptibility to WRS in healthcare workers (HCWs). Objectives: The purpose of this study was to analyze how male and female HCWs employed in emergency departments experienced WRS. Methods: A cross-sectional study was conducted regarding the perception of WRS in registered nurses employed in emergency departments. The Italian version of the Job Content Questionnaire and the Rapid Stress Assessment scale were administrated to 710 registered nurses. Results: The WRS assessment showed that significantly more females than males were in a situation of isostrain (18.5% vs 9.8% p<0.05). In females, low social support was associated with high levels of job strain (18.5% vs 4.4% p<0.05). Conclusion: This study reflects the need for a gender-specific approach in the evaluation of WRS in the healthcare sector, and is consistent with literature that evidenced gender differences in the perception of WRS. Lack of social support proved to be a determinant of WRS in female HCWs. Organizational interventions aimed at providing a more suitable workgroup design are required in order to minimize WRS in female HCWs.

**Title**: Job stress in users of an Employee Assistance Program and association with presenting status

**Author/s**: Milot, M Borkenhagen, E

**Source**: Journal of workplace behavioral health, 2018 33:3-4, 153-167, DOI: 10.1080/15555240.2018.1502044

**Abstract**

Job stress is a top source of distress for many and one of the reasons why workers seek help through their Employee Assistance Program (EAP). Little is known about the prevalence of job stress in EAP users and its relationship with presenting status at time of program access. In this study, slightly over one third (34.5%) of a sample of at-work employees (N= 322) accessing their assistance program through an external EAP vendor reported experiencing job stress. The top reported stressors were those related to job demands and relations, followed by job features. EAP users experiencing job stress reported lower work engagement, health, and quality of life, as well as increased work distress relative to other EAP users. Notably, only this group of EAP users reported a negative health change in the last year. The number of job stressors also had a cumulative negative effect on all but one measure. The primary service area for the greater majority of EAP users was however not work-related, and most sought help for another area. Greater promotion of the use of EAPs to address work-related issues may consequently help to improve employee health and performance. Assessments of working conditions by EAP providers may also help inform the delivery of organizational-level assistance aimed at enhancing the workplace environment.

**Title**: Work intensification and health outcomes of health sector workers

**Author/s**: Chowhan, J Denton, M Brookman, C Davies, S Sayin, K Zeytinoglu, I

**Source**: Personnel review 2019 48 2 342-359, [https://doi.org/10.1108/PR-10-2017-0287](https://doi.org/10.1108/PR-10-2017-0287)

**Abstract**

Purpose The purpose of this paper is to examine the mediating role of stress between work intensification and musculoskeletal disorders (MSDs) focusing on personal support workers (PSWs) in home and community care. Design/methodology/approach The analysis sample of 922 comes from the 2015 survey
of PSWs employed in Ontario, Canada. The endogenous variable is self-reported MSDs, and the exogenous variable is work intensification. Stress, measured as symptoms of stress, is the mediating variable. Other factors shown in the literature as associated with stress and/or MSDs are included as control variables. Structural equation model regression analyses are presented.

Findings The results show that stress mediates the effect of work intensification on PSW’s MSDs. Other significant factors included being injured in the past year, facing hazards at work and preferring less hours – all had positive and significant substantive effects on MSDs.

Research limitations/implications The survey is cross-sectional and not longitudinal or experimental in design, and it focuses on a single occupation in a single sector in Ontario, Canada and, as such, this can limit the generalizability of the results to other occupations and sectors.

Practical implications For PSW employers including their human resource managers, supervisors, schedulers and policy-makers, the study recommends reducing work intensification to lower stress levels and MSDs.

Originality/value The findings of this study contribute to the theory and knowledge by providing evidence on how work intensification can affect workers’ health and assist decision makers in taking actions to create healthy work environments.

WORKERS’ COMPENSATION

Title Causality advocacy: workers’ compensation cases as resources for identifying and preventing diseases of modernity
Author/s Gilbertson, M Brophy, J
Abstract An appeal process for an injured worker compensation case is a unique opportunity to debate and integrate evidence concerning a potential causal relationship between observations of occupational disease and exposures to various putative risk factors that may also be of significance in public health protection. Through application of Hill’s indicia to the evidence presented in a recent appeal process concerning a breast cancer case for a female border guard, a novel epidemic, tentatively called “occupational BRCAness” has been identified and a causal relationship with exposures to traffic-related air pollution and shift work and possibly secondhand tobacco smoke is inferred. Application of the audit method by worker advocates to other compensation appeals processes for other diseases might similarly yield causal relations with exposures to occupational risk factors with relevance to public health.

WORKPLACE BULLYING

Title Antecedents of ethical infrastructures against workplace bullying: The role of organizational size, perceived financial resources and level of high-quality HRM practices
Author/s Einarsen, K Salin, D Valvatne Einarsen, S Skogstad, A Mykletun, RJ
Source Personnel review 48 3 672-690 https://doi.org/10.1108/PR-10-2017-0303
Abstract Purpose Drawing on the resource-based view, the purpose of this paper is to examine the extent to which the level of the organization’s human resource management (HRM)
practices, perceived financial resources and organizational size predict the existence of a well-developed ethical infrastructure against workplace bullying.

**Design/methodology/approach** The human resource (HR) managers or the main health and safety representatives (HSRs) in 216 Norwegian municipalities responded to an electronic survey, representing some 50 percent of the municipalities.

**Findings**
The level of high-quality HRM practice predicted the existence of an ethical infrastructure against workplace bullying, particularly informal systems represented by a strong conflict management climate. Perceived financial resources did not predict the existence of such ethical infrastructure. Organizational size predicted the existence of policies and having training against bullying.

**Practical implications** This study informs practitioners about organizational resources associated with organization having a well-developed ethical infrastructure against workplace bullying. A high level of high-quality HRM practices seems to be more important for the existence of a well-developed ethical infrastructure against workplace bullying compared to financial resources and organizational size, at least as perceived by HR managers and HSRs.

**Originality/value** This study provides empirical evidence for the importance of having a high level of high-quality HRM practices as predictors of the existence of ethical infrastructure to tackle workplace bullying. An essential finding is that the existence of such an infrastructure is not dependent on distal resources, such as organizational size and perceived financial resources.

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**Title** Perceptions of supervisor competence, perceived employee mobility, and abusive supervision: Human capital and personnel investments as means for reducing maltreatment in the workplace

**Author/s** Meglich, P Valentine, S Eesley, D

**Source** Personnel review 2019 48 3 691-706, https://doi.org/10.1108/PR-08-2017-0239

**Abstract**

**Purpose** In response to the call for deeper investigation of abusive supervision (Martinko et al., 2013), the purpose of this paper is to examine perceived supervisor competence and perceived employee mobility (an individual’s perception of his/her ability to obtain new employment) to better understand contextual and individual factors that potentially influence the degree of harmful supervisory behaviors experienced by employees.

**Design/methodology/approach** Responses from 749 survey participants were analyzed to determine the impact of perceived supervisor competence and perceived employee mobility on perceptions of abusive supervisory conduct. A bootstrapping-based mediation analysis (Hayes, 2012) was used to test for mediation by the variables of interest.

**Findings**
The authors found that perceived supervisor competence is associated with weakened perceptions of abusive supervision, and that this relationship is partially mediated by respondents’ perceived occupational mobility.

**Research limitations/implications** The data are cross-sectional and were collected with a self-report questionnaire and compiled utilizing student-enumorators. The sample was also regional in scope and lacked information that would indicate if respondents were also supervisors.

**Practical implications** These results imply that perceptions of abusive supervision can be mitigated by building stronger competencies in supervisors, which translates into greater individual employee perceived mobility. Human resource (HR) professionals can implement practices to decrease the likelihood of abusive supervisory conduct by ensuring that supervisors are competent in their jobs, facilitating a coaching/mentoring process between supervisors and subordinates and establishing/maintaining an effective developmental performance feedback process for supervisors.

**Social implications** Since perceived supervisor competence is one element of reducing abusive conduct, while also enhancing subordinate perceived mobility, selection and training efforts should focus on hiring and preparing individuals to be effective work supervisors. Enhancing worker capabilities and marketability may result in greater perceived occupational mobility and reduced perceptions of abuse by supervisors.
Originality/value These results lend support to the argument that perceptions of abusive supervision can be mitigated by building stronger competencies in supervisors, which translates into greater perceived mobility among employees. Organizations may benefit through lowered employee turnover, employees may enjoy more harmonious, supportive relationships with their supervisors and HR staff may benefit by having competent supervisors who do not generate employee complaints and intentions to quit.

Title Prevention through job design: Identifying high-risk job characteristics associated with workplace bullying.

Author/s Li, Y., Chen, P. Y., Tuckey, M. R., McLinton, S. S., & Dollard, M. F.


Abstract Work environment hypothesis, a predominant theoretical framework in workplace bullying literature, postulates that job characteristics may trigger workplace bullying. Yet, these characteristics are often assessed by employees based on their experience of the job. This study aims to assess how job characteristics, independently assessed via Occupational Information Network (O*NET), are related to perceived job characteristics reported by employees, which, in turn, are associated with self-reported workplace bullying. Multilevel mediation analyses from 3,829 employees in 209 occupations confirmed that employees, whose work schedules are more irregular and whose work involves a higher level of conflictual contact (as assessed by O*NET), report experiencing higher job demands, which are associated with higher exposure to bullying. Moreover, employees working in jobs structured to allow for more discretion in decision-making (as assessed by O*NET) report experiencing more job autonomy and are less likely to experience bullying. The results offer some clues as to how the way in which a job is structured is related to how that job is perceived, which in turn is associated with exposure to bullying. Our findings also suggest that a job design perspective to redesign certain job characteristics may offer an additional viable approach to prevent workplace bullying.

Title Witnessing workplace bullying and employee well-being: A two-wave field study

Author/s Sprigg, C. A., Niven, K., Dawson, J., Farley, S., & Armitage, C. J.


Abstract This article aims to (a) explore the impact of witnessing workplace bullying on emotional exhaustion, work-related anxiety, and work-related depression and (b) determine whether the resources of trait optimism, coworker support, and supportive supervisory style buffer the effects of witnessed bullying. In a two-wave study involving 194 employees, we found that witnessing bullying undermined employees’ well-being (work-related depression and anxiety) 6 months later, but only if the employees were low in optimism (personal resource) and lacked supervisor support (contextual resource). Strong coworker support weakened the relationship between witnessing bullying and well-being (emotional exhaustion and work-related depression). Our findings demonstrate for the first time some of the factors that protect against the impact of witnessing workplace bullying. Future research should focus on the development of workplace interventions that foster feelings of social support and optimism among employees.
Title  Workplace bullying: an examination of power and perpetrators

Author/s  De Cieri, H Sheehan, C Donohue, R Shea, T Cooper, B


Abstract  Purpose: The purpose of this paper is to apply the concept of power imbalance to explain workplace and demographic characteristics associated with bullying by different perpetrators in the healthcare sector.
Design/methodology/approach All 69,927 members of the Australian Nursing and Midwifery Federation (Victoria) were invited to participate in an online survey in 2014; 4,891 responses were received (7 per cent response rate). Participants were asked about their exposure to workplace bullying (WPB) by different perpetrators. The questionnaire addressed demographic characteristics and perceptions of workplace characteristics (workplace type, leading indicators of occupational health and safety (OHS), prioritisation of OHS, supervisor support for safety and bureaucracy). Analysis involved descriptive statistics and regression analyses.
Findings The study found that the exposure of nurses and health workers to bullying is relatively high (with 42 per cent of respondents experiencing WPB in the past 12 months) and there are multiple perpetrators of bullying. The research revealed several demographic predictors associated with the different types of perpetrators. Downward and horizontal bullying were the most prevalent forms. Workplace characteristics were more important predictors of bullying by different perpetrators than were demographic characteristics.
Research limitations/implications There are limitations to the study due to a low response rate and the cross-sectional survey.
Practical implications Practical implications of this study emphasise the importance of focussed human resource strategies to prevent bullying.
Originality/value The key contribution of this research is to draw from theoretical explanations of power to inform understanding of the differences between perpetrators of bullying. The study highlights the workplace characteristics that influence bullying.