



Canadian Association for Research on Work and Health Conference

Report on the closing panel:
A summary of conference highlights

June 2010 carwh2010.iwh.on.ca / acrst2010.iwh.on.ca

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2010 CARWH/ACRST conference: Worker Health in a Changing World of Work

Report on the CLOSING PANEL: A summary of conference highlights

By Institute for Work & Health, June 2010

Chair of the Closing Panel:

Renee-Louise Franche, (former) Director, Disability Prevention, Occupational Health and Safety for Healthcare in British Columbia, and Adjunct Professor, Faculty of Health Sciences, Simon Fraser University

Panelists:

Cameron Mustard, President and Senior Scientist, Institute for Work & Health

Linn Holness, Chief, Department of Occupational and Environmental Health, St. Michael's Hospital, and Director, Centre for Research Expertise in Occupational Disease

Patrick Loisel, Researcher, Division of Orthopaedics, University Health Network, and Program Director, Work Disability Prevention CIHR Strategic Training Program

Terry Bogyo, Director, Corporate Planning and Development, WorkSafeBC

bout 220 academics, policy-makers, employers, union representatives and injured worker advocates – all with a shared interest in the latest research on work and health – came together at the 2010 conference of the Canadian Association for Research on Work and Health (CARWH). Held May 28-29 in Toronto, Ontario, and hosted by the Institute for Work & Health, the conference centred on the theme "Worker Health in a Changing World of Work."

The conference closed with a panel chaired by Renee-Louise Franche, (former) director of disability prevention at Occupational Health and Safety for Healthcare in British Columbia and an adjunct professor in the Faculty of Health Sciences at Simon Fraser University. She asked each panel member to comment on the research strengths and gaps in a particular subject area, based on what he or she heard at the conference.

OCCUPATIONAL INJURY:

Cameron Mustard, President and Senior Scientist, Institute for Work & Health

For Cam Mustard, two areas in occupational injury and prevention research stood out as having made significant progress: observational studies and measurement methods.

The biggest advancements were in the area of observational, descriptive and surveillance studies. "This was the strength of the conference," he said. The advancements related to the degree to which researchers have been able to access populations or focus on topics that are typically challenging subject areas.

For example, several studies addressed the health of professional drivers, and "it's hard to get information on this group of workers," he pointed out. Similarly, strong research was presented on vulnerable workers, including immigrants — another hard-to-reach population. Finally, research was presented on vibration exposure, a source of injury that often goes unrecognized.

Measurement methods were another area in which Mustard noticed progress. "I heard some very thoughtful, creative work in this respect," he said.

For example, a systematic review of the French literature on participative ergonomic interventions and preventing musculoskeletal disorders "indicated that, when systematic reviews are restricted by language, some important evidence may get left out," Mustard said.

He also singled out the measurement methods described in poster presentations looking at melatonin levels and night shift work, which revealed more about the biological mechanisms that link night shift work and cancer.

Where the research seems to be falling short is in the area of high-quality intervention and cohort research. "It seems there is less being done here," Mustard said, commenting on what he heard at the conference. "I wanted more depth in this area."

OCCUPATIONAL DISEASE:

Linn Holness, Chief, Department of Occupational and Environmental Health, St. Michael's Hospital, and Director, Centre for Research Expertise in Occupational Disease

With respect to occupational disease research, steady progress is being made in the area of burden of exposure, according to Linn Holness. "There was a fair bit of work presented on exposure estimates; for example, regarding asbestos, pesticides and whole-body vibration."

She applauded this, because increasing awareness of exposures and adverse effects is key to preventing occupational disease. "If workers and the system are not aware, then prevention won't take hold," she said. "I was happy to see this addressed at the conference."

Another strength of the conference was the work on regulatory gaps. Holness pointed out, for example, that only two provinces "say anything about hand-arm vibration syndrome (HAVS)."

Also strong was the research on occupational cancer. Cancer seemed to be the major focus of occupational disease research at the conference. "Three exposures – shift work, asbestos and pesticides – were key areas of focus," she said.

Where the research may be falling somewhat short is in the area of non-cancer diseases. "We did hear about vibration, skin disease and heat," Holness said, "but in general we didn't hear as much from a non-malignant perspective."

As well, like Mustard, Holness noted "the relative lack of studies regarding primary prevention." Although some intervention research was presented with respect to firefighters and health care workers, "there was not a lot of work in prevention research overall."

This gap needs to be addressed, she added. Although increasing awareness regarding the burden of exposure and disease is certainly important, "we also need to reduce exposures," Holness concluded.

REHABILITATION AND RETURN TO WORK:

Patrick Loisel, Researcher, Division of Orthopaedics, University Health Network, and Program Director, Work Disability Prevention CIHR Strategic Training Program

The most impressive thing about the conference for Patrick Loisel was the degree to which the number and quality of papers in the rehabilitation and return-to-work field has grown — as evidenced by the three sessions devoted to sustainable return to work. It was only a short decade ago that CARWH presentations in this field were rare, he said.

Loisel noted four things in particular about the research being done in rehabilitation and return to work.

First, the importance of the workplace in work retention has come to the fore. "Twenty years ago, no one was thinking the workplace was a key player. Return to work was considered a personal problem," he said. "So it's nice to see the importance of the workplace and supervisors in return to work being looked at -- and not just for back pain, but for a diversity of disabilities, including mental health."

Second, the research is making it clear that the number of workers' compensation claims is diminishing, but the duration of these claims is increasing. "This is a problem in all of Canada and, likely, beyond," he said. "This is an important point to address."

Third, Loisel noticed a growing link between research, scientists and workers' compensation boards (WCBs), such as Ontario's Workplace Safety and Insurance Board. "The interest of WCBs in science regarding new interventions is good, and it's important that it continues," he said.

Fourth, but not least, Loisel said the notion of justice, especially regarding work disability prevention and return to work, was evident in the research. He was particularly pleased to see that some workers had attended the conference and were able to speak.

All in all, Loisel called for continued research in the field. "In our society, injured workers are sometimes unable to return to work for complex and social reasons," he said. "This is a pity, and it should be avoided. Research must continue to address this problem."

WORKERS' COMPENSATION:

Terry Bogyo, Director, Corporate Planning and Development, WorkSafeBC

Terry Bogyo, speaking from the perspective of a workers' compensation insurer, heard much that he liked at the conference.

He liked the universal concern for justice, workers and their families that he noticed throughout the research. He pointed out that workers' compensation authorities share researchers concerns; however, he reminded everyone that the historic compromise that is the basis for workers' compensation necessarily constrains policy-makers and decision-makers. He liked that scientists are trying hard to make their research useful and relevant to policy-makers, and that they take seriously their responsibility to make evidence-based recommendations about how to improve the system.

He especially liked that researchers are pointing to particular types of workers and employers whose needs are not currently being met by the workers' compensation system, such as vulnerable workers, precarious workers and night shift workers. Indeed, the theme "Worker Health in a Changing World of Work" particularly resonated with him.

"Based on what I heard, we need to pay attention to small businesses," he said. "We need to take into account the old *and* new risks for women and men. We need to take into account vulnerable workers who are at risk because of the characteristics of their work or their employment status."

The research papers that particularly stood out for him addressed subjects such as trends in the incidence and cost of workers' compensation claims, the adequacy and equity of long-term disability benefits within three Canadian workers' compensation boards, the stigmatization of injured workers, long-duration claims and the use of a call-centre model to improve disability management timelines and outcomes.

He also took note of the detailed comparative analysis completed by a multidisciplinary team of 13 researchers for the Commission de la santé et de la secruité du travail (CSST) regarding the occupational safety and health law and practice in Quebec. He found that many of the recommendations contained lessons for those workers' compensation agencies with a strong prevention mandate. Because the recommendations were all based on statutes or practices already in place, Bogyo believed the recommendations were in a form most useful to policy-makers.

Bogyo did identify gaps that he would like to see addressed. "We are dealing with the 95 per cent of cases that are accepted and return to work, return to work with another employer or decide not to return to work," he explained. "These standard cases, even if they involve issues or conflicts, fit the mold, so to speak."

However, the other five per cent – the population of denied claimants, those who don't claim or those who are discouraged from claiming – often remain invisible to the workers' compensation system. "The research can let us know more about this other five per cent," Bogyo said. "Although it might not be information that makes us comfortable, we need to know what happens to these people."

In particular, Bogyo said he would like to know more about who's not claiming and why, and about those who file for benefits and are denied – who they are, how they are different, what happens to them and who bears the cost. As well, he'd like to know more about the needs of aging claimants who were severely disabled 10 or 20 years ago are approaching the end of their time on benefits.

Most of all, while acknowledging that it can be difficult for workers' compensation boards to incorporate research evidence into their policies and practices because of legislative and historical constraints, Bogyo said action is necessary. "I am afraid that 20 years from now, we will be together in the same group saying, 'Why didn't policy-makers and researchers act on what they know.' I want to act now," he said.

After the panelists delivered their comments, the chair asked attendees for their feedback on the conference. Two people from the floor shared their particular perspectives.

INTERNATIONAL PERSPECTIVE:

Niki Ellis, CEO, Australian Institute of Safety, Compensation and Recovery Research

As the CEO of a new research institute in Australia devoted to injury prevention, recovery and compensation, Niki Ellis said she would like to see a CARWH-type forum in her country. As well, she appreciated the variety of mixed methodologies of the researchers she heard, and hoped there was room for collaboration in future.

A number of things about the CARWH conference stood out for her in a positive way:

- the presence of regulators and other stakeholders beyond the research world;
- the amount of research looking at the changing nature of work and its effect on worker health;

- the methodologies being used to evaluate and compare workers' compensation systems; and
- the work being done on the often-difficult journey of workers' compensation claimants, including their exposure to stigma.

FEDERAL SERVICES PERSPECTIVE:

Aron Spector, Senior Research Officer, Strategic Policy Research Directorate, Human Resources and Skills Development Canada

Because he works outside of the workers' compensation system, Aron Spector was struck by the degree to which Canada's disability support programs are compartmentalized.

For example, he pointed to workers on private long-term disability (LTD) benefits, where half of claims are related to mental health issues, to workers who fall through the cracks and end up on social assistance (such as the ODSP, or Ontario Disability Support Program), and to workers on Canada Pension Plan-Disability (CPP-D) benefits, where claims range from cancers to musculoskeletal disorders.

He noted that compensation varies depending on the type of support injured or ill workers get. "If they get WCB or LTD, they're relatively well off," he said. "If they are solely reliant on CPP-D or QPP-D, it's not great. If they get ODSP, tough luck."

Despite the compartmentalization of the disability support system, Spector commented that the different players within the system face share issues in common. To that end, he wanted to see the research take a more integrated approach. "I didn't see many LTD or social assistance people here, and they're both important groups," he said.

Mustard agreed with Spector, saying he was making an important point. The problem, Mustard said, is that sustained funding from workers' compensation boards means that the research capacity to understand and improve the workers' compensation system is strong.

"In the private sector, the total paid out in LTD disability payments is twice as large as it is for workers' comp, yet the LTD system doesn't tend to invest in external research," Mustard pointed out. "Similarly, CPP-D, also has no funding for research."

Mustard agreed that questions about Canada's "patchwork quilt" of disability support systems are the right questions to ask. "We need to determine how to build research capacity to address that and, for that, we need funding," he said.

CARWH closing panel comments: At a glance

Occupational injury research

- Progress is being made in observational studies
- Progress is being made in measurement methods
- More high-quality intervention research is needed

Occupational disease research

- Progress is being made on burden of exposure
- Progress is being made on identifying regulatory gaps
- Cancer research remains a key focus
- Non-cancer diseases are not as predominant
- More prevention research is needed

Rehabilitation and return-to-work research

- The importance of workplaces is being recognized
- Increased claim durations need to be addressed
- Workers' compensation boards are taking an increased interest in research
- Notion of justice is evident in research

Workers' compensation research

- Concern for justice, workers and their families is evident in research
- Scientists are trying to make research relevant to policy-makers
- Research is showing the needs of certain workers and employers are not being met (e.g. vulnerable workers, non-standard workers, small business)
- More research is needed on workers who do not claim, who are discouraged from claiming or whose claims are denied