Implications of an Aging Workforce: Work Injury, Returning to Work and Remaining at Work

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• The views expressed in this document are those of the authors and do not necessarily reflect those of the Province of Ontario.

• Thank you to Jonathan Fan for updates on ongoing research.
The Research Team

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Our Stakeholders

CRE-MSD researchers and students
Presentation Overview

1. Background
2. WHO Ageing and Health Framework
3. Synthesis project
   a. Objective
   b. Literature searches
   c. Qualitative synthesis
4. Findings
5. Summary and Questions
The Institute for Work & Health (IWH) is an independent, not-for-profit research organization based in Toronto, Canada.

Our goal is to protect and improve the health and safety of working people by providing useful, relevant research in two key areas: (1) preventing work-related injury and illness, and (2) promoting recovery and work functioning following injury and illness.

Our work provides impartial, evidence-based guidance to government policy-makers, health and safety associations, workers and employers, union and labour representatives, occupational health & safety professionals, disability management professionals and clinicians.
Background

• The global population is aging with a projection that one in five people will be over the age of 60 by 2050

• The Canadian population aged 65 and over is expected to double over the next 25 years, with the average age of Canadian workers predicted to continue to rise until 2031

• It is unclear whether Canadian companies have addressed the impact of an aging workforce on occupational health
By now, you may be aware that Canada’s seniors recently crossed a significant threshold. Statistics Canada announced for the first time ever that people over 65 now officially outnumber children under 15.

The story is similar all over the world.

Historians will say one day that this global shift in demographics was one of the most important events of the 21st century. Indeed, it’s certainly a triumph of public health and modern medicine. For many, though, this shift is seen as a problem — and that’s a perception that needs to be corrected.
Musculoskeletal disorders (MSDs) are a substantial burden to workers of all ages in all industrial sectors.

- In Canada, MSDs account for between 40 to 60% of lost-time claims since 2000.

- There are concerns that MSDs may be more prevalent and costly among older workers.

- Workplaces should consider strategies for healthy aging to address an aging workforce.
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WHO Ageing and Health framework

• The World Health Organization (WHO) released the *World Report on Ageing and Health* in September 2015

• The report defines healthy aging as “the process of developing and maintaining the functional ability that enables well-being in older age”
WHO Ageing and Health framework (2015)

- The WHO report provides a framework and strategies for healthy aging. The framework highlights priority areas for action:
  1. align health systems with needs of older populations
  2. develop systems for long term care
  3. create age-friendly environments
  4. improve measurement, monitoring, understanding
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Objective

• To present some recent research addressing the WHO Report on Ageing and Health strategies and how they may apply to workplaces
Methods

• Literature searches:
  - Scoping review of the literature on Aging and MSD
    - Aging and return to work*
    - Return to work*
    - Upper extremity MSD prevention*
      • * systematic reviews carried out by Institute for Work & Health researchers as part of the prevention review program
  - Literature searches (WHO Ageing and Health Framework)

• Qualitative synthesis using WHO Ageing and Health Framework
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WHO Ageing and Health framework strategies (2015)

Strategies for creating environments that support healthy aging that can be adapted for workplaces:

• Combating ageism
• Enabling autonomy
• Supporting healthy aging in policies
Combating ageism

• There is inconclusive evidence that MSD are more prevalent in older workers or that older workers are less productive, yet these attitudes prevail
  • Older workers recover from injury more quickly than younger workers (Pransky, 2005)
  • Smith (2015) found no association between age and the probability of a lost time claim
  • Guest (2014) showed older workers did not sustain more injuries than younger workers in construction jobs
Combating ageism

- More research regarding MSD and aging is required so workplaces/employers can better develop policies regarding older workers
Enabling autonomy

• Increased autonomy can support older workers work longer
  • Studies show benefits when older workers are involved in creating solutions for MSD hazards (Steenstra, 2009; Koolhaas, 2015)
  • Many studies support increased autonomy for older workers to maintain productivity and assist them in working longer (Ng, 2015; Vantilborgh, 2015; Binneweis, 2008; Leijten, 2015)
  • Bal and colleagues (2015) report I-deals are most useful in retaining older workers
Enabling autonomy

• The I-deal approach could be potentially useful for older workers with MSD
Supporting healthy aging in policies

• Workplace policies that support flexibility, accommodation and development are required
  • The perception that older workers can do less, get injured more and require more resources is unfounded but impacts on workplace policies and practices (Malinen, 2013; Lagace, 2016)
• Research examining workplace policies on aging workers reveals inconsistent support for healthy aging (Nilsson, 2015; van Dalen, 2014; Bal, 2015; Timmons, 2011)
Supporting healthy aging in policies

- Workplace policies supporting accommodation and development may be most useful to address MSD in older workers.
New (ongoing) research

• Jonathan Fan, PhD Student University of Toronto

• Understanding age differences in work outcomes using survey and administrative data

• Objectives:
  • Examine age-related differences in RTW and sickness absence duration across time and jurisdiction
  • Develop improved measures of aging using existing population-based surveys
  • Examine role of age dimensions in explaining age differences in RTW
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Summary 1

• An aging population and workforce is a reality

• Overall, we noted a lack of literature evaluating interventions or strategies related to older workers and MSD

• The link between aging and MSD is not clear and specific research related to strategies to reduce MSD suggests that age is but one of many factors to address
Adopting (or adapting) strategies such as those of the WHO are important for workplaces to consider:

- Combating ageism
- Enabling autonomy
- Supporting healthy aging in policies
Example from Workplace Safety & Prevention services (WSPS) tip sheet:

- Create a safe work environment
- Commit to training
- Work together (engage)
- Encourage an active and healthy lifestyle
Summary 4

• strategies for older workers = strategies for ALL workers
Additional Resources

• WHO - World report on ageing and health

• Healthy Workplaces for All Ages (European Agency for Safety and Health at Work)
  • https://www.healthy-workplaces.eu/en

• Aging and MSD: Strategies for older workers
We invite the global prevention community to the XXII World Congress on Safety & Health at Work

October 4-7, 2020
Toronto, Canada
Metro Toronto Convention Centre

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