



**Illinois Prevention
Research Center**

WHRN Collaborating Center for Underserved Workers

Workplace Health Research Network

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**WHRN Network Call Presentation
September 18, 2015**



WHRN Collaborating Center for Underserved Workers Institute for Health Research and Policy, School of Public Health

Naoko Muramatsu (PI) Community Health Sciences

PhD (health services organization and policy), MHS, MA (sociology)

Aging and health, health promotion of under-served populations



Lisa Brosseau (PI) Environmental & Occupational Health Sciences

ScD (environmental health sciences)

Employee health interventions in small and medium businesses.



Linda Forst (Co-I) Environmental & Occupational Health Sciences.

MD (medicine), MPH (environmental & occupational health sciences)

Surveillance, community-based interventions of underserved workers



Emily Stiehl (Co-I) Health Policy Administration

PhD (organizational behavior)

Outcomes among the working poor, certified nursing assistants



Ernestina Perez (Project Coordinator)

MPH (epidemiology)



Progress Overview:

Objective 1: Contribute to the development of the WHRN

- Employees Working Group (Muramatsu, Stiehl)
- Employers (Tools & Resources) Working Group (Brosseau)
- Capacity & Dissemination Working Groups (Forst)

Objective 2: Promote health and safety among underserved workers

Year 1 pilots focus on Home Care Aides (HCAs)

- Building a physical activity program into the job of caring for older home care clients → HCAs' own physical activity
- Analysis of secondary survey data (quantitative & qualitative) on slips, trips and falls



Progress: Year 1 Pilot on Home Care Aides (HCAs)

- One of the fastest growing occupational groups in the United States
- Work in clients' private homes
- Help older and disabled adults with housekeeping (e.g., cleaning) and daily activities (e.g., bathing)
- Employers lack resources for HCAs' health promotion



Building Health Promotion into the Caring Job: Goals

- **Examine how promoting health for clients might promote health for the HCAs.**
- **Train HCAs to deliver a safe physical activity program for their clients.**
 - **Builds on an on-going NIA-funded project, “Promoting Seniors’ Health with Home Care Aides: A Pilot”, which tests and enhances the feasibility of a physical activity program to be delivered by HCAs, focusing on client outcomes (R21AG042801).**

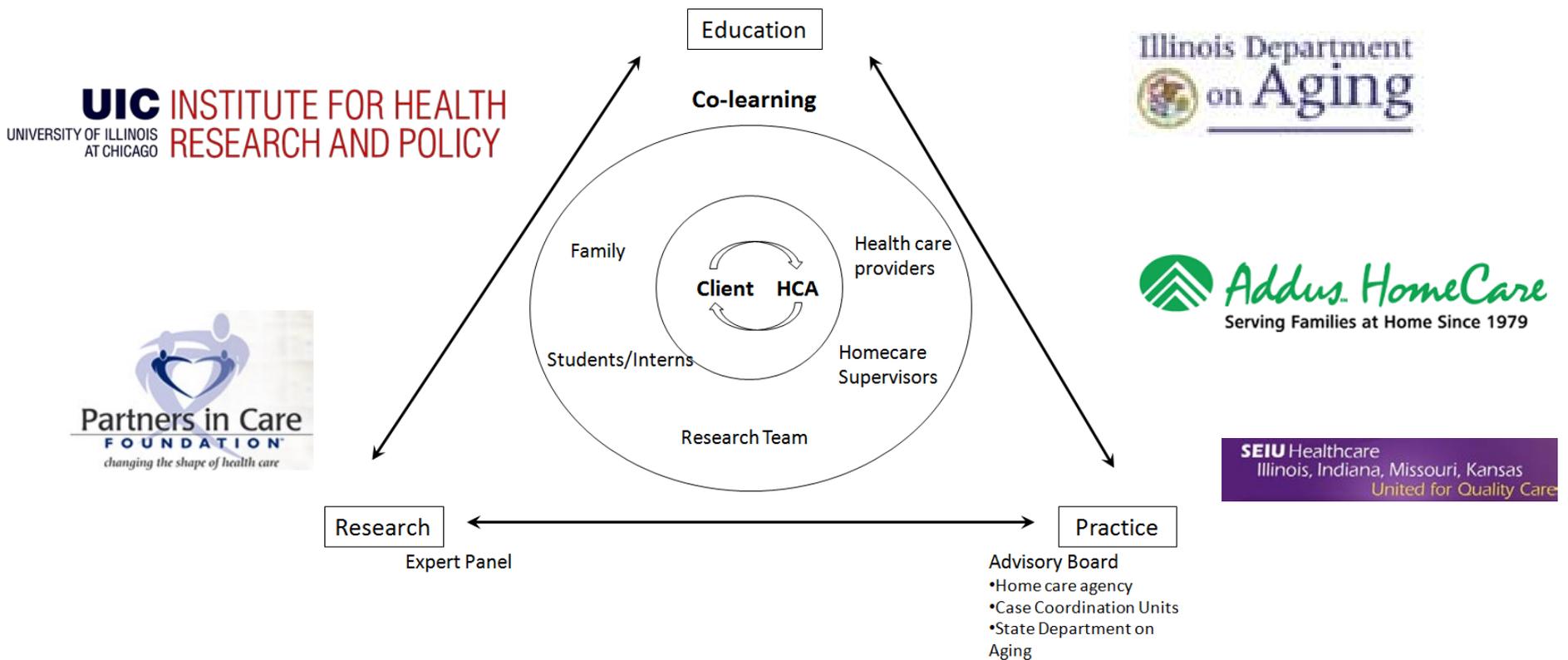


Project Contexts of Promoting Seniors' Health with HCAs

- **Community Care Program, administered by Illinois Department on Aging.**
 - **Helps senior citizens, who might otherwise need nursing home care (60+, assets \leq \$17,500).**
 - **In-home service: General, non-medical support by supervised home care aides who have received specialized training (15 hr pre-service & 12 hr in-service training annually).**
- **Funded by Medicaid and the state.**
- **Transitioning into managed care.**



Co-Learning Partners



Muramatsu, et al. 2015. Co-learning with home care aides and their clients: Collaboratively increasing individual and organizational capacities. *Gerontology and Geriatrics Education*, 36(3):261-77.



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Success Stories

- “Building health promotion into the job” was feasible and well received by HCAs, the employer and other stakeholders.
- WHRN has led to opportunities for collaboration and intellectually stimulating conversations
 - Externally with the WHRN network
 - Internally within the UIC team, who come from diverse backgrounds but have many shared interests.



Work Plan: WHRN Pilots

- **“Building health promotion into the job”:** Collaborate with other Centers to investigate on how “health promoters” become better at promoting and protecting their own health through their jobs (Muramatsu)
- **Lit review:** health promotion and protection interventions focused on underserved workers and employers (Stiehl)
- **Focus group** with insurance brokers (Brosseau)
- **Survey of State Health Departments** on their workplace health and safety activities (Linda)



Emily Stiehl Research

- **What factors influence behavior among individuals in low-wage jobs at work?**
 - **Low Income and extra-role behaviors at work**
 - **Factors (e.g., self-efficacy) can inhibit helping behaviors at work**
 - **Factors that Influence Turnover among Nursing Assistants in Nursing Homes**
 - **Three groups of workers—Stayers, Switchers, Leavers**
 - **Physical Injury**
- **Focus Groups**
 - **Models of Agency**
 - **Injury**



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Lisa Brosseau – Workplace Health & Safety Interventions in Small Businesses

- **3 local (MN) randomized controlled trials in small woodworking, metal fabrication and auto collision repair businesses**
- **1 national RCT in metal fabrication businesses (WC company partner)**
- **1 RCT smoking cessation & workplace safety intervention in small manufacturing companies**
- **1 RCT of H&S educational modules in technical colleges (on-going)**

Key findings

- **Safety committees are best target for intervention – need reps from all levels**
- **Easier to motivate improvements in programs/policies than in actual work conditions**

Key future issues

- **How to disseminate successful interventions to broader industry?**



Linda Forst Research Activities

- **Illinois Occupational Surveillance Program**
 - NIOSH funded state-based-surveillance program
 - Collect and disseminate occupational health indicators
 - Conduct research related to low wage worker populations
 - Partner with state agencies and community groups on special projects
 - Run the Adult Blood Lead Registry for Illinois
- **2 Participatory Action Intervention Projects**
 - CHW project to implement eye injury prevention program with migrant clinic
 - Peer educator project to train street corner day laborers on construction H&S
- **Needs assessment in FQHCs for occ health needs of the working poor**
- **Impairment rating—investigating AMA Guides**



Lessons Learned

- **Creating synergies with other funded projects and outreach activities is critical to producing meaningful results under limited resources.**

