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journal homepage: [sciencedirect.com/journal/annals-of-epidemiology](https://www.sciencedirect.com/journal/annals-of-epidemiology)**Does the distribution of adverse workplace psychosocial exposures differ by gender, race/ethnicity, or nativity?**

Toni Alterman, PhD\*, Jia Li, MS, Centers for Disease Control and Prevention, Cincinnati, OH

**Purpose** Health inequities are believed to result from differential accumulation of experiences, including exposure to adverse workplace psychosocial characteristics. We investigated whether national prevalence estimates for adverse workplace psychosocial exposures differ by gender, race/ethnicity, or nativity (born in the U.S. or not).

**Methods** Adverse workplace psychosocial factors examined included high job demands, low job control, low supervisory support, work-family interference, bullying, and job insecurity. Data from the 2015 National Health Interview Survey were stratified by gender and weighted. After adjustment for age, education, class of worker (e.g., private company, federal, state, or local

government, self-employed, working without pay in family-owned business or farm), and family income, prevalence's and prevalence ratios were calculated for each workplace psychosocial exposure by race/ethnicity, and nativity. Rao-Scott  $X^2$  test and adjusted Wald F test were used to assess pairwise associations between each workplace psychosocial exposure and demographic characteristic.

**Results** Findings suggest that gender, race/ethnicity, and nativity are each associated with differential exposure to multiple adverse workplace psychosocial job characteristics.

**Conclusions** We do not know whether workers self-select into specific jobs having these characteristics, or whether the experience of these adverse psychosocial risk factors may be due to unconscious or conscious differential treatment by the organization. Sociodemographic characteristics can be important determinants of occupational exposures, independent of the industry or job in which the workers are employed.

**Supplementary materials** Supplementary material associated with this article can be found, in the online version, at doi:[10.1016/j.annepidem.2022.06.028](https://doi.org/10.1016/j.annepidem.2022.06.028).