Author's response to reviews

Title: Effects of de-industrialization on unemployment, re-employment, and work conditions in a manufacturing workforce

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Effects of De-industrialization on Unemployment, Re-employment, and Work Conditions in a Sample of Manufacturing Workers.

Reviewer: Dr. J. Siegrist.

1. The paper does not present data on health or healthcare utilization, and selected health behaviours are analysed in one of the tables only.

In the first paragraph of the introduction this paper indicates clearly that its focus is on the effects of de-industrialization on unemployment history, and work conditions. The focus is clearly not health but on the very important intermediate determinants of health; unemployment, physical and psychosocial work conditions. This confusion arises because the sample was linked to the BC Linked Health Database which was used primarily to obtain address information for members of the sample. We have obtained health information for the sample and will develop a paper on this in the near future.

2. Authors give no justificaiton for missing almost all health-related data from this report. In view of their repetitive emphasis on the relevance of de-industrialization for health this seems a major shortcoming of this paper.

I think the reviewer has misunderstood the focus on the paper which is on the ways in which the sociological process of de-industrialization has impacted unemployment and work conditions for workers in this industry. There is NOT a repetitive emphasis on the relevance of de-industrialization for health in this paper. In the introduction I clearly state that the focus of the paper is understanding the process of de-industrialization as it effects unemployment and working conditions NOT health.

This paper is a first step, the purpose of which is to delineate clearly what has happened to workers in terms of unemployment and work conditions over this 20 years period because these are major determinants of health in the workforce. The next step is to build on this work and produce a paper with a health focus.

3. The methods section provides relevant information on the sample although sample attrition would need more comments.
This has been addressed under limitations in the discussion.

4. In tables 6 and 7 authors should give additional information on the range of reported adjusted mean work scores.
   Done. See tables.

5. Authors are requested to address the following questions:
   a) What are the typical employment sectors of those who were re-employed outside of the sawmill industry?
      Done. See the last paragraph in Section 3.1. This information is clearly indicated.
   b) What is the relevance of statistically significant differences concerning job control, job support, job demands? In view of a large sample size one may wonder about statistical significance. Clearly concerning noise, there are rather substantial differences? The issue here is whether statistically significant differences observed for physical and psychosocial variables other than noise are in fact meaningful. This is now addressed in the discussion.

6. The Discussion part, in my view, is too much repetitive whereas the critical issues of generalizibility of reported findings and of their significance in the framework presented in the introduction are not addressed with adequate intensity.
   The paper has been intensively re-edited. It is 20% shorter as the repetitive elements have been edited out.

7. Minor point: Several typing errors and missing words need to be addressed.
   The article has been extensively re-edited and typing errors and missing words fixed.

Reviewer: Dr. D. Cole.

1. Some more details on the ways the conditions scales were constructed out of the items would be helpful.
   In appendix A I have detailed the relationship between items and psychosocial and physical work conditions scales as requested.

2. I would make editorial changes. The writing is acceptable but the paper needs to be edited for understanding and conciseness. Considerable redundancy between methods and results and between results and discussion.
   The article has been extensively re-edited with attention to this criticism. Redundancy has been eliminated between these 3 sections in the paper and the paper has been shortened by 20%.

3. Link to health is less clear in this article.
   Please see my first and second responses to Dr. Siegrist's comments which were similar to Dr. Coles.