Long Working Hours and Self-Reported General Health: Differences by Gender in Latin-American Immigrants and Natives Working in Spain

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Introduction
Long working hours (LWH) is related with adverse health outcomes, such as occupational injuries, mental health conditions, even motor vehicle crashes. Fewer opportunities for rest and a longer exposure to occupational risk factors explain these effects. Immigrant workers have been associated with adverse employment conditions, like LWH. However, to our knowledge, few studies published about immigrants and natives assess the relationship between the risk of LWH and self-reported general health status (SRGH), which is a predictor of mortality across numerous populations.

Objective
To assess the prevalence and association of LWH and SRGH by immigrant status and sex in a cohort of Latin American immigrant and native-born workers in Spain.

Methods
Data were drawn from first wave of recruitment from the Immigrant Cohort Studies Project (PELFI), a convenience sample of 250 families with members (1) residing in Spain; (2) born in Ecuador, Colombia, or Spain; and (3) reporting weekly work hours.

Methods (cont’d.)
Main explanatory variable: LWH (defined as >40 h/week).
Outcome of interest: poor SRGH.
Country of birth variable: workers born in Ecuador and Colombia were categorized into Latin American-born workers (n=217; 65.4% female) vs. Spanish-born workers (n=89; 51.7% female)
Prevalence was calculated. Differences among groups were analyzed by chi square tests. Crude and adjusted (by age) odds ratios (ORs) were calculated using binomial logistic regressions with 95% confidence intervals (95% CI). The models were stratified by migrant status and sex. Stata14 software was used for all analyses.

Results
Significant differences were seen in the samples of Spanish-born and immigrant worker demographics (Table 1).

Conclusions
Results show equivalent trends for both sexes in Latin American workers and native workers. The absence of statistical significance may be due to small sample sizes or the selection of a work hours cut point that lacked adequate discrimination.

Findings suggest that native and immigrant workers differentially experience poor SRGH when exposed to LWH. This may be due to the healthy immigrant effect. Further study is necessary to better understand this trend.

Table 1. Socio-demographic and occupational characteristics in Latin American immigrants and Spanish-born participants in a sample of immigrant and native workers in Spain: PELFI, 2015.

Table: Prevalence and adjusted odd’s ratios for the relationship of long work hours (LWH) and self-reported general health status (SRGH) stratified by sex and country of birth in a sample of immigrant and native workers in Spain: PELFI, 2015.

Results (cont’d.)
Males report higher prevalence of LWH; females have a higher prevalence of poor SRGH (Table 2). There were no statistically significant differences in the prevalence of LWH or SRGH by place of birth in males or females. Regression modeling suggested that LWH may increase the odds of poor SRGH in both male and female Spanish-born workers, though results were not statistically significant (Table 2).

Table 2. Prevalence and adjusted odd’s ratios for the relationship of long work hours (LWH) and self-reported general health status (SRGH) stratified by sex and country of birth in a sample of immigrant and native workers in Spain: PELFI, 2015.

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Table: Prevalence and adjusted odd’s ratios for the relationship of long work hours (LWH) and self-reported general health status (SRGH) stratified by sex and country of birth in a sample of immigrant and native workers in Spain: PELFI, 2015.