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Re: Nabe-Nielsen K, Garde AH, Clausen T, Jørgensen MB. Does workplace health promotion reach shift workers? *Scand J Work Environ Health*. 2015;41(1):84-93. doi:10.5271/sjweh.3469
by [Nabe-Nielsen K](#), [Garde AH](#), [Clausen T](#), [Jørgensen MB](#)

See also the article: [2015;41\(1\):84-93](#)

Key terms: [amendment & correction](#); [availability](#); [erratum](#); [evening work](#); [health behavior](#); [health promotion](#); [night work](#); [participation](#); [shift work](#); [shift worker](#); [variable working hour](#); [workplace](#); [workplace health promotion](#)

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This erratum concerns the numbers in table 3 regarding participation in health promotion in a subsample of participants. The reported numbers in the original report are identical to the numbers in the whole study population reported in table 2.

The changes imply that we find a significantly lower participation in health screenings among fixed night workers (OR 0.3, 95% CI 0.1–0.8) and a significantly higher participation in health promotion activities involving contact with health professionals among employees working variable shifts without night work (OR 1.8, 95% CI 1.1–2.8) (table 1). These changes do not alter the conclusion that – contrary to our hypothesis – overall, day and shift workers did not differ systematically with respect to their participation in workplace health promotion once it was available to them.

Table 1. The table shows the association between shift work and the availability of workplace health promotion during and outside working hours compared to day workers in the sub-sample consisting of 2064 people employed in job groups undertaking shift work. The table also shows the association between shift work and participation among those to whom workplace health promotion was available. The reference group is day workers (not shown), and the analyses are adjusted for age, gender, influence, job demands, social support, smoking, fruit and vegetable intake, leisure-time physical activity, and body mass index. Significant estimates are written in **bold face**. The range of the number (N) for the day workers was 974–1156 (“During working hours”), 1053–1180 (“Outside working hours”), and 220–499 (“Participation”). [OR=odds ratio; 95% CI=95% confidence interval.]

	N range	Smoking cessation		Healthy diet initiatives		Exercise facilities		Weekly exercise		Contact to health professionals		Health screening	
		OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI	OR	95% CI
Fixed evening													
During working hours	79–97	1.3	0.6–2.7	1.1	0.6–1.9	1.7	0.9–3.2	0.8	0.3–2.8	0.7	0.3–1.3	1.2	0.6–2.3
Outside working hours	93–105	1.8	1.1–3.0	1.4	0.6–3.1	1.1	0.7–1.7	1.6	1.01–2.7	1.6	1.02–2.5	2.2	1.1–4.4
Participation	23–49	0.2	0.03–2.0	0.4	0.2–1.1	1.1	0.6–2.2	0.5	0.2–1.6	1.2	0.6–2.4	0.8	0.3–2.0
Fixed night													
During working hours	40–52	0.2	0.03–1.5	1.3	0.6–2.7	1.0	0.3–2.8	0.8	0.2–3.7	0.6	0.3–1.5	3.4	1.8–6.6
Outside working hours	45–55	1.9	0.9–3.7	0.3	0.04–2.5	1.5	0.8–2.6	0.9	0.4–2.0	2.1	1.2–3.8	6.1	2.9–12.5
Participation	9–27	2.0	0.5–8.2	1.2	0.3–4.1	1.1	0.4–2.9	0.5	0.1–4.0	0.6	0.2–1.5	0.3	0.1–0.8
Variable without night													
During working hours	184–230	1.1	0.7–1.9	0.9	0.6–1.4	1.1	0.6–1.7	1.5	0.8–2.8	0.8	0.5–1.2	1.1	0.7–1.7
Outside working hours	213–240	1.1	0.7–1.7	0.8	0.4–1.6	1.2	0.9–1.6	0.7	0.5–1.1	1.5	1.1–2.1	1.4	0.8–2.5
Participation	41–114	1.1	0.4–3.1	1.0	0.5–1.9	1.4	0.9–2.3	0.7	0.3–1.6	1.8	1.1–2.8	0.9	0.5–1.8
Variable including night													
During working hours	119–154	2.1	1.2–3.5	1.0	0.6–1.6	1.4	0.8–2.5	2.1	0.99–4.2	0.8	0.5–1.3	1.4	0.8–2.3
Outside working hours	135–160	1.0	0.6–1.8	0.5	0.2–1.3	1.3	0.9–1.8	1.1	0.7–1.8	0.9	0.6–1.4	1.7	0.9–3.2
Participation	29–80	1.9	0.7–5.4	0.9	0.4–2.0	0.7	0.4–1.2	0.6	0.2–1.5	0.8	0.4–1.5	0.9	0.4–1.8