Addressing psychosocial factors at work: practical approaches

MEDICHEM Conference 2016

Georg F. Bauer

georg.bauer@uzh.ch
Agenda

1. The increasing challenge of psychosocial factors @ work
2. Risk management approaches
3. A balanced perspective: two faces of work
4. Complementary practical intervention approaches
   - Individual level
   - Team level
   - Company level
The increasing challenge of psychosocial factors @ work

- Physical -> psychosocial working processes
- Physical health -> psychosocial health
- Acceleration, intensification of work
- Flex-work / Life-Domain Balance
- Continuous change of organisations
- Precarisation of work – limited contracts
- Trend to „self“-responsibility: Management by Objectives, self-actualization, self-management
25-40% Employees Stress
80% Managers in EU concerned about stress
Consequences of work stress

- Musculoskeletal disorders
- Other inflammation-related chronic disease (diabetes, cancer)
- Exposition to hazards -> Cancer etc.
- Accidents -> impairment
- Increased life-style risk-factors
- Social disorder (conflicts, mobbing)

Recent international reports (2014, 2016)

Psychosocial risks in Europe
Prevalence and strategies for prevention

A joint report from the European Foundation for the Improvement of Living and Working Conditions and the European Agency for Safety and Health at Work

WORKPLACE STRESS
A COLLECTIVE CHALLENGE
WORLD DAY FOR SAFETY AND HEALTH AT WORK
28 APRIL 2016
Prevalence of actions

Figure 29: Measures in place to deal with psychosocial risks at work (% establishments)

Figure 27: Procedures in place to deal with psychosocial risks at work, by country (% establishments)

Legal requirements – implemented/enforced!

Well established health & safety system

Management support

Employee participation

Support by practical guidelines / tools
Company approach: Stress Management Standards
(UK Health & Safety Executive)

Figure 1 The Management Standards approach

1. Identify the stress risk factors: Understand the Management Standards
2. Decide who might be harmed and how: Gather data
3. Evaluate the risks: Explore problems and develop solutions
4. Record your findings: Develop and implement action plan/s
5. Monitor and review: Monitor and review action plan/s and assess effectiveness

Prepare the organisation

http://www.hse.gov.uk/STRESS/standards/index.htm
Toolkits and guidance for risk assessment of psychosocial hazards

There are a number of general toolkits developed for psychosocial hazards:

- the ILO’s guide *Stress prevention at work checkpoints*;
- the SOBANE strategy applied to the management of psychosocial risks (Malchaire et al, 2004);
- in the UK, the HSE Management Standards (Cousins et al, 2004);
- in Ireland and Northern Ireland, the Health and Safety Authority’s ‘Work Positive Project 2005–2007’;
- F-PSICO 3.0 from INSHT (2011) and the CoPsoQ-istas 21 method from ISTAS, both from Spain;
- the Scandinavian QPSNordic questionnaire (Norden, 2000);

- Germany: START
- Italy: INAIL-ISPESL
- prima-ef.org
(Zoni & Lucchini, Saf Health Work 2012)
Balanced perspective: Two faces of work

Aim: balancing job demands & job resources
- Engagement
- Self-fulfilment
- Work-Life Balance
- Customer relationships

75% managers: seek new leadership style
Selecting indicators & testing of model
Data-Base: S-Tool; SWiNG Intervention Project; 8 companies; wave 1: n=3036
Public and Organizational Health, EBPI

SEM: stability across organizations, job level, gender, time

PATHOGENESIS

Job Demands → Negative Health

- Time pressure / Work Interruption
- Role unclarity
- Qualitative overload

.35

Negative Health → Positive Health

- Insomnia
- Exhaustion
- Pain

-.43

ns

SALUTOGENESIS

Job Resources

- Manager support / appreciation
- Peer support / appreciation
- Control / holistic Task

.86

Positive Health

- Satisfaction
- Commitment
- Enthusiasm

Bauer/2016
Practical approaches: Individual level

- **Self-management training** – emotional
  - E.g. mindfulness based stress reduction

- **Problem solving training** – task-related
  - E.g. time management, goal setting

- **Job Crafting** – changing your job
  - Reducing demands vs. strengthening resources

- **Work Life Balance** – boundary management
  - Integration vs. segmentation

- **Active / passive recovery** – detachment
  - Low-effort (reading, music); social; high-effort activities
Company-wide employee surveys

Team Health Development

Controlling & top-down solutions

Dialog
- Exchanging perspectives
- Local, situation-specific solutions

Individual tools for self-management

Self-optimization

Bauer/2016
Linked to relevant outcomes

- Absenteeism (-3 days low/high tertiles)
- Exhastion
- Work engagement
- Job performance (+10% low/high tertiles)
Reflecting CH-Index

Developing own measures

Team-Leader-Workshop

Joint development of measures

Team-Workshop

Reflecting CH-Index

Corporate Health Index

Positive health

NEGATIVE HEALTH
(mental, physical, social)

POSITIVE HEALTH
(mental, physical, social)

INTERACTION

JOB DEMANDS
(Factual processes, Social processes)

JOB RESOURCES
(Factual processes, Social processes)

Online Team Health Coach

Shared mental model

Job Demands-Resources Health Model
CH e-coach for team leaders
CH e-Coach for team leaders
www.chsolutions.ch
1. The increasing challenge of psychosocial factors @ work
2. Risk management approaches
3. A balanced perspective: two faces of work
4. Complementary practical intervention approaches
  - Individual level
  - Team level
  - Company level

ggeorg.bauer@uzh.ch

Bauer/2016