

Guest Editorial

Occupational Concerns and Workplace Well-Health

Herbert C. Biggs

Institute of Health and Biomedical Innovation, School of Psychology and Counselling, Queensland University of Technology, Beams Road, Carseldine, QLD 4122, Australia
E-mail: h.biggs@qut.edu.au

1. Introduction and overview

This issue provides a series of articles that canvass conceptual development, policy development, model development, and practical industry research that is a snapshot of contemporary issues of occupational concerns. The literature remains focussed on workplace stress remediation, but over the past decade has also moved consistently to address proactive considerations of well health and capacity and resilience building. The organisational environment is now concerned generally in equal part with strategies of proactive prevention, and should they prove ineffective, strategies of effective remediation. Whatever the organisational focus, the debate is moving to secure knowledge and practice to avoid the deleterious consequences of occupational stress. These developments are of major importance to both employers and employees and allow for a range of strategies to be trialled that fit the well-health and work-life balance environment as well as retain needed notions on productivity and performance. Allied health professionals, both practitioners and researchers, have a vital role to play in these developments. I am confident that the articles in this Special Issue will provide contemporary discussion across both the proactive and remediation environments, and I hope they are enjoyable and informative to the reader.

2. Organisational responses

The responsibility sets of employers in relation to their employees have arguably changed considerably over the last decade. Legislation generally in areas such as anti-discrimination, disability management, occupational and environmental health and safety has been strengthened and practices imbedded in policy and guidelines. Additionally OECD countries have been experiencing a reduction in unemployment and this resultant shrinking labour pool has given employers generally a need to re-think strategies for recruitment and more importantly, retention. Many of these strategies are additional to financial remuneration and include job sharing, job enrichment, family friendly hours of engagement, and workforce well-health initiatives. A number of articles in this Special Issue examine organisational responses to some of these challenges. The article by Wynne and McAnaney is a pan-national examination of European return to work practices. It does not seek to offer remedies or definitive solutions but rather examines in some detail national systems of policy, legislation and regulation and clearly derives a set of strengths and weaknesses via a policy analysis tool. The authors then propose a number of key considerations in return to work issue which have derived from studies in Europe and Canada. The overall intention and result of this paper is to provide a legislative and praxis underpinning to further encourage the prevention of social exclusion through illness or dis-

ability. Two articles with authors from Norway and Sweden continue the theme of organisational support. In the first of these, Larsson, Landstad and Vinberg sought to develop and test a reflective generic model for workplace health management in organizations. . Four private and four public organizations in northern Sweden were selected for the study. The Model of health control outlined in the articles was implemented throughout the eight organisations over a two year period. The results from the leader and subordinate interviews are presented over categories of health closure and other health and working environment indicators, monetary accounting of health related indicators, and changes in methodologies and behaviour concerning leadership and organizational practises. The authors on the results described, support the importance of both a structured model including health- and organizational oriented measurements and figures, and a simple transparent monetary analysis for supporting the prioritizing of the work health promotion aspects. The second of these articles by Landstad, Hedlund, Wendelborg, and Brataas examine workforce re-entry issues for workers on long term sick leave and in particular the effect of professional support in the re-integration process in Norway. The respondents were either challenged by musculo-skeletal or mental health conditions and were asked to respond and rate a number of professional support services intended to assist re-integration. An important shared concern across both groups indicated that waiting time for treatment was a significant factor in return to work. The authors found several other systemic and organizational concerns that related directly to the respondents views of successful return to work. Although the organisational entities cited were Norwegian, most if not all countries have institutions with similar responsibilities and the learnings gained here are readily transferable. The final article in this section is by Muller, MacLean and Biggs and details the effect of a supported leadership initiative in a police service. This initiative is described within the broader context of cultural change and examines the role of leader behaviour and the link with potential stressors in leader-subordinate roles. The authors found that involvement in the process of understanding and exploring the elements of supported leadership was a useful first step in developing workplace strategies such as participative decision-making, consultation meetings, an open-door policy and giving feedback.

3. Stress and fatigue

As the authors of the first two articles in this section have noted “. . . Successful management of stress at the workplace has become a topic of great interest over the last decade. Motivated by escalating costs, associated workplace injuries and the increasing demands placed on workers in the work context, the need to effectively manage stress within acceptable timeframes and at minimal cost is paramount. . .” Most authorities would concur with this statement and almost certainly inject a strong argument for organisational strategies, such as were outlined in the previous paragraph to avoid, if at all possible, the management of stress by ensuring its minimisation. The first two articles by Kendall and Muenchberger are useful and contrasting. In the first of these the authors take a fresh look as a work-stress process model and add a slingshot capability which allows both employers and employees to track the trajectory of stress injuries and understand their impacts more fully. The work-stress-process model presented highlights the critical impact of the occupational bond and, importantly, documents the potential organisational intervention points over time. The model stresses the importance of the occupational bond between employer and employee and serves to remind of the importance of the inclusive, supportive and participatory workplace culture in the disability management process. The authors note that although the model does not purport to provide suggestions for the management of stress at work, it clearly notes that the less coordinated and less timely the employers’ approach to the employment relationship, the greater the likelihood the stress. In the second article, the authors investigate the impact of stressors and supports in both work and non-work domains on occupational health. Respondents completed the survey of occupational health (SWS-Survey) to assess both stress and mental health among claimants and non-claimants. The SWS-Survey aims to measure stress and supports present in the current situation, the general workplace and in the worker’s personal life and is a survey is a multi-dimensional, cross-cultural instrument sponsored by the World Federation for Mental Health and supported by the World Health Organisation Co-ordinating Centres for Occupational Health. The results were wide ranging and informative. Among them: Claimants reported a significantly higher level of poor mental health than the non-claimant sample. They also reported significantly higher levels of work stress and lower levels of work supports; Claimants reported significantly higher levels of personal stress

and substantially lower levels of personal supports (i.e., confidence etc.); Significantly higher levels of work stress were found in mining/construction and personal services (i.e., emergency services etc.) compared to health and education sectors. The article provides relevant data and suggestions for future research initiatives. McKimmie, Jimmieson, Mathews, and Moffat explore an aspect of a more routine stressor, fire in the workplace, in the broader context of social support and how social support in the workplace impacts on coping effectiveness. This preliminary investigation provided evidence to show that fire in the workplace was a stressful event and resulted in a range of instrumental and emotional stressors for employees. These findings are interesting and indicate that group identification may positively affect employee outcomes, such as job satisfaction, both on its own and when coupled with social support. Similarly, group identification also may have some stress-buffering properties and lead to better employee adjustment, such as reduced turnover intentions, in times of demand. The study overall, clearly demonstrates the practical application of a relatively research quiescent set of stressors such as fire in the workplace and its linkage with broader social psychological considerations such as social support and group identification. The final article by Biggs, Dingsdag and Stenson examines fatigue issues in the stressful working environment of metropolitan bus drivers. This article represents an attempt to identify the unique antecedents of driver fatigue in this population through consultation with the drivers themselves. Bus driver fatigue has been identified as stemming from personal factors, such as stress and perceptions of support, as well as the more traditional structural aspects of the job, relating to scheduling and work environment. One concern of the study, and recommended for future research, was a failure to gain evidence linking bus driver commute times to issues of fatigue although it was established that commute times had, on average, risen significantly.

4. Industry examples

Employees' well-health needs to be maintained across an extraordinarily diverse occupational spectrum. Research is a valid and leading edge activity in ensuring that contemporary occupational concerns are moved from discussion and negotiation to guidelines, policy, and legislation. Industry research is one of the key means of participating in this process. The articles by Wills, Watson and Biggs and Fleiter, Walsh and Biggs are incorporated in this issue as examples of relevant industry research. In the former, the authors conceptualized safety climate and work-related fleet driver safety within a model informed by Bandura's Reciprocal Determinism and the Ajzen's Theory of Planned Behavior. The model proposed that proposed that fleet driver behaviour and intentions are influenced by a combination of safety climate, person-related variables, and situational factors. The results of this study provide a starting point for further research, by presenting support for the general influence of overall safety climate. Research has also started to deepen the level of analysis by focusing upon more specific elements of driver safety, and investigating whether specific dimensions of safety climate are more influential than others. The latter article investigates the psychological factors which influence the adoption of a postural training device. A new postural training device that utilises basic biofeedback principles was chosen to examine perceived barriers to purchase and use from a psychological perspective. The authors discuss the evidence over a number of considerations such as the Stages of Change model, message framing, use of messages in persuasion, the attitude/behaviour relationship, motivated reasoning, behavioural learning, and cost objections. The study aims to highlight the broad range of factors that impact on treatment choices using a psychological perspective with a view to providing a more holistic approach to treatment.