DAY 2 - 11:00AM-12:00PM PDT

WELLNESS & SAFETY:
RISK AND THE WHOLE WORKER

JOHN DONY
Vice President, Workforce Strategy

DR. HILLARY BENNETT
Partner

JEANNIE A. S. NIGAM
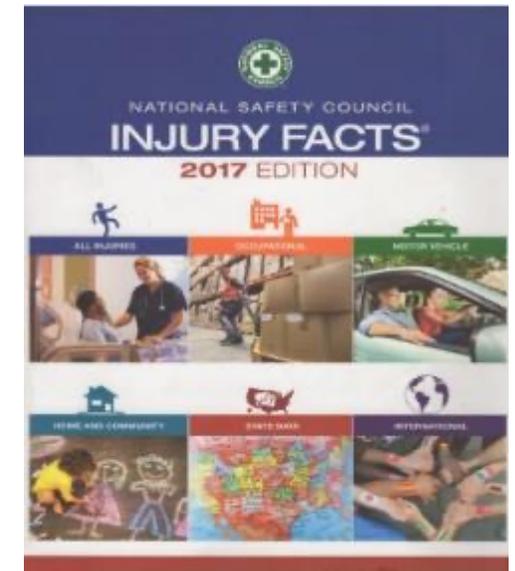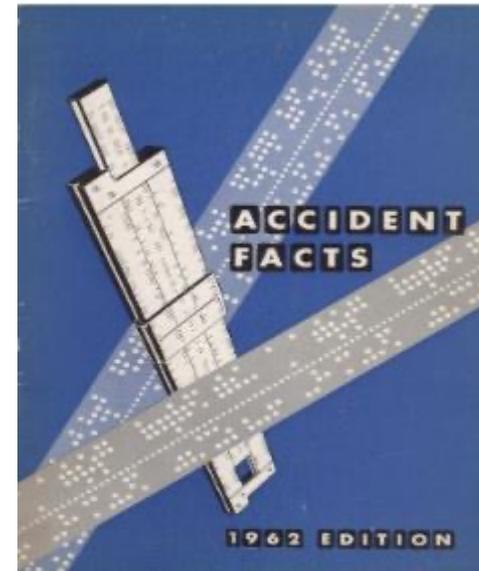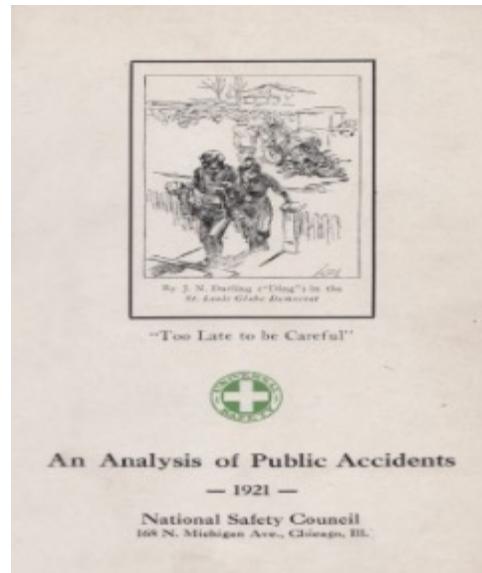Program Manager, Total Worker Health

About NSC

America's Leading Nonprofit Safety Advocate

- Over a century of safety leadership;
  15,000+ member companies covering over 7,000,000 million workers

- Eliminating leading causes of preventable death and injury so that people can live their fullest lives

- Focus efforts where we can make the biggest impact: workplace, roadway, impairment

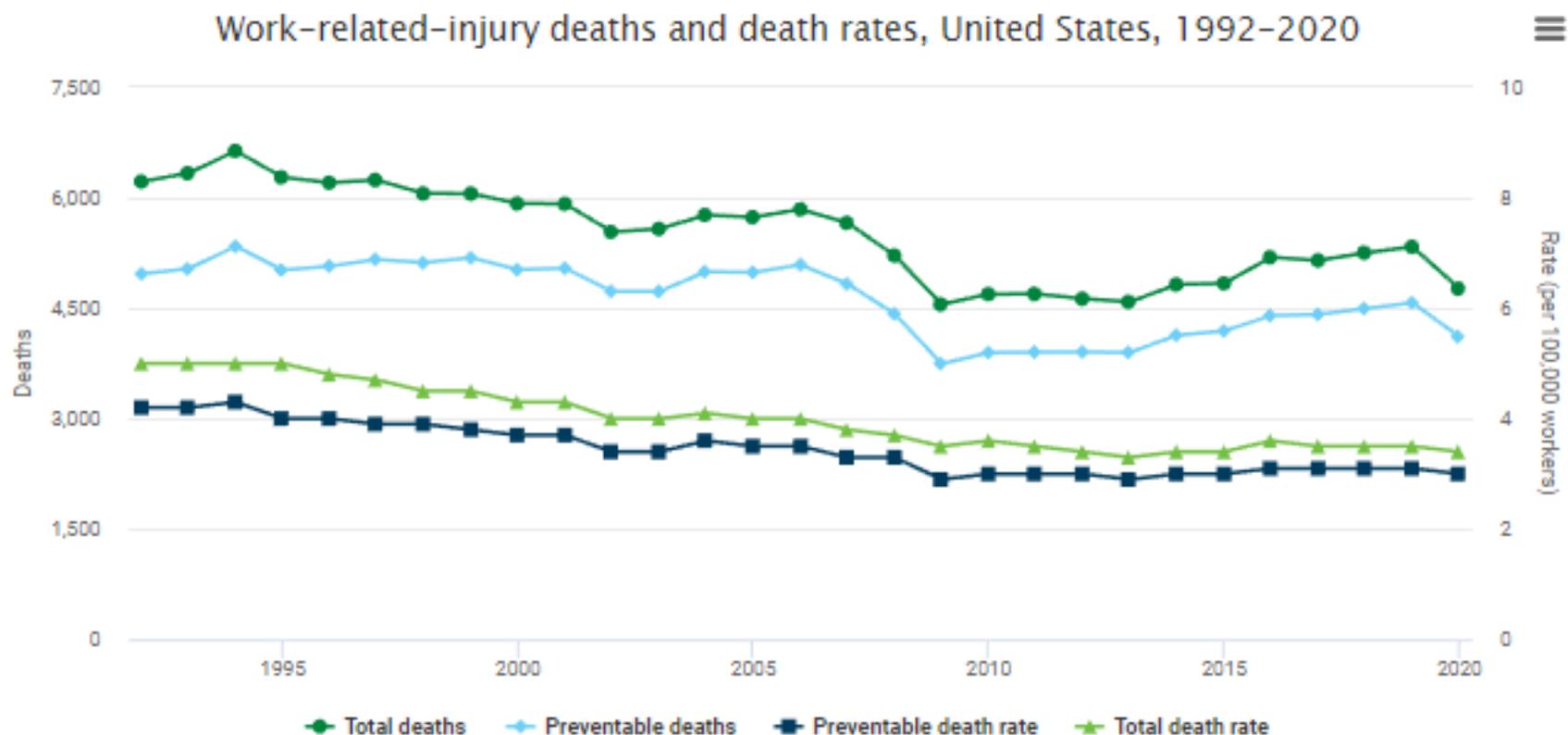- **Saving lives – from the workplace to anyplace**

Following the Data

NSC has a long history of building programs and approaches based on sound data analysis and rigorous research

Macro View – Progress Over Time

Work-related-injury deaths and death rates, United States, 1992–2020

Legend: Total deaths, Preventable deaths, Preventable death rate, Total death rate

Trends & Scope of Safety & Health

"Traditional" Safety & Health/OSH is:
- Focused on physical risk reduction
- Engineering & standards based
- Centered around a "Four walls" approach
- Very good at preventing tangible hazards
- Quick to address emergent operational risks

"Traditional" Safety & Health/OSH is NOT:
- Focused on non-physical risk reduction
- Well-versed in health & wellbeing
- Equipped to tackle "outside the fence" hazards
- Good at acknowledging the intangible
- Quick to address emergent external risks

Systemic & Risk-Based Wellbeing

SAMPLE RISK MATRIX FOR HEALTH AND WELLBEING:
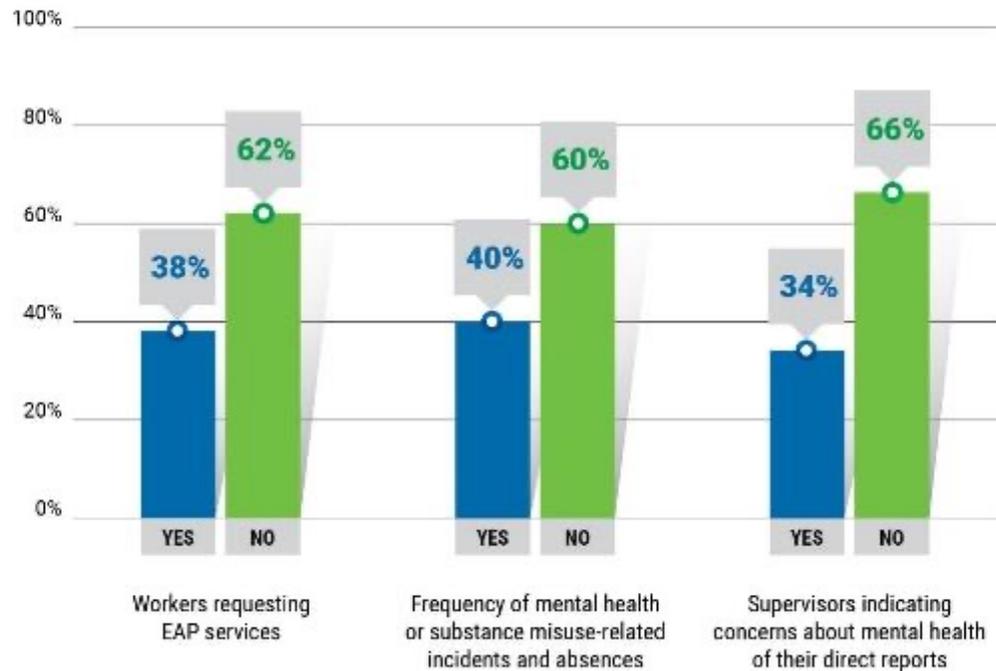Severity (x-axis) and Frequency (y-axis)
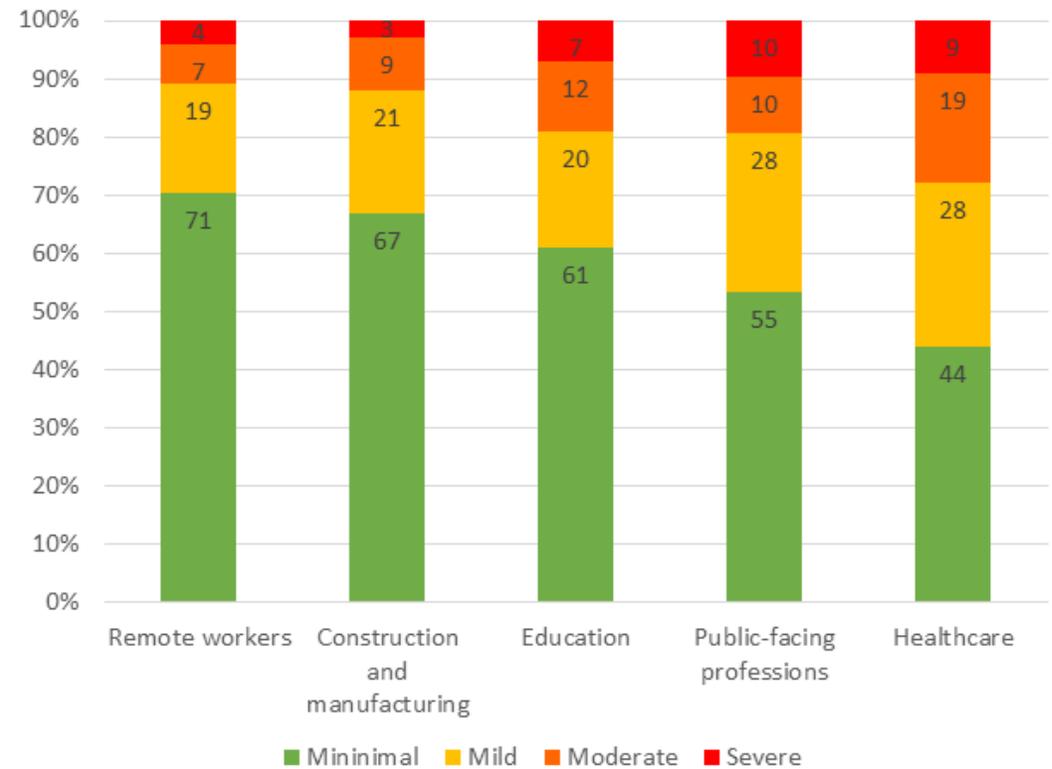(Severity axis adapted from Nevada Chapter of RIMS)
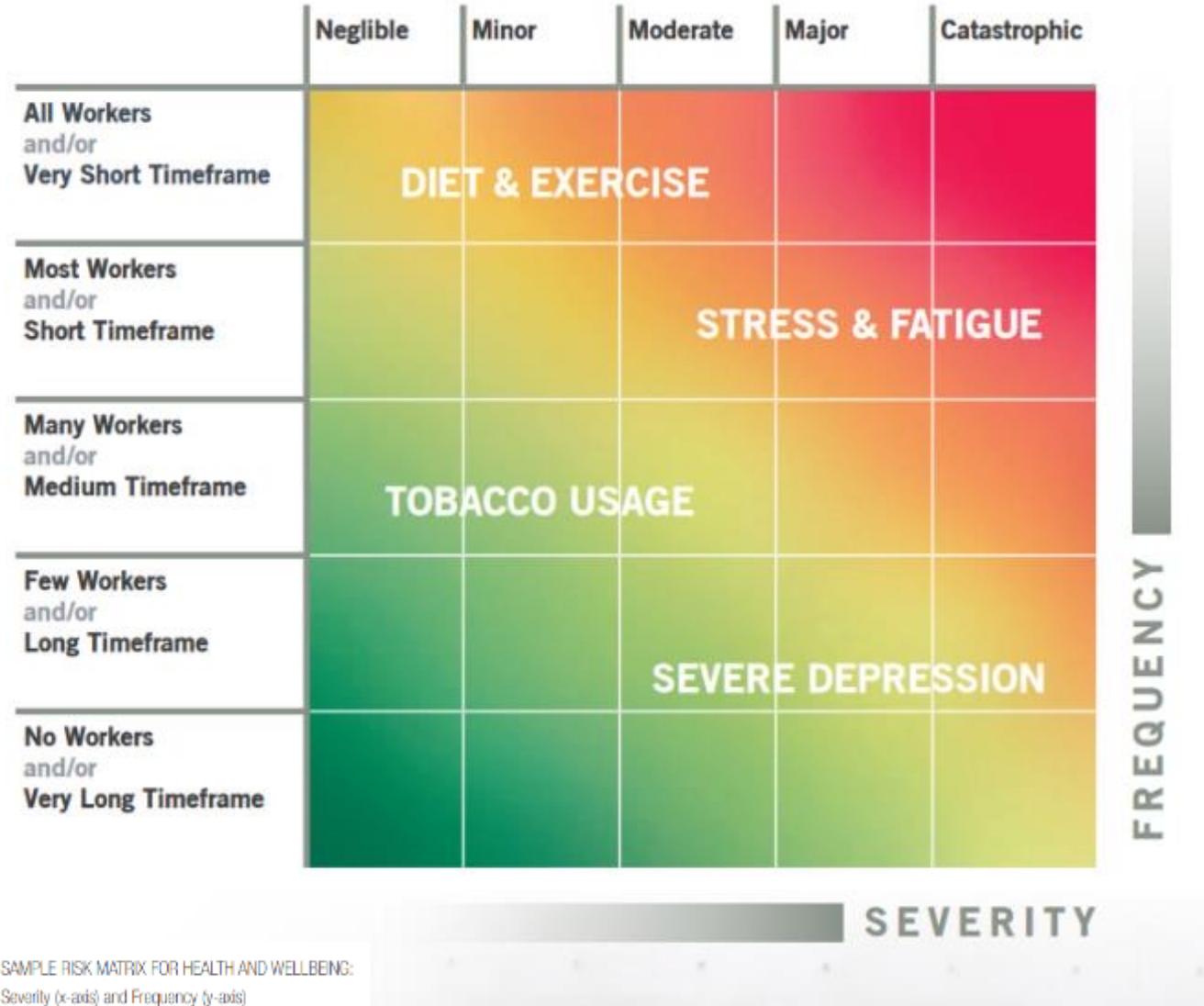
Connections between Mental Health & Safety

Percent of employers that noted an increase in mental health and wellbeing indicators over the pandemic.

Workers requesting EAP services: YES 38%, NO 62%

Frequency of mental health or substance misuse-related incidents and absences: YES 40%, NO 60%

Supervisors indicating concerns about mental health of their direct reports: YES 34%, NO 66%

Level of anxiety reported by survey respondents who work in different work environments

Work environment	Minimal	Mild	Moderate	Severe
Remote workers	71	19	7	4
Construction and manufacturing	67	21	9	3
Education	61	20	12	7
Public-facing professions	55	28	10	10
Healthcare	44	28	19	9

■ Mininimal   ■ Mild   ■ Moderate   ■ Severe

Psychological Safety – A Critical Approach

Psychologically safe workplaces...
- Promote inclusion amongst leadership and peers
- Empower individuals to challenge unsafe conditions and contribute diverse ideas
- Removes the fear of negatives consequences for speaking up
- Are created by organizations through culture and policy creation
- Save lives

Psychological Safety & Mental Health

Mental Health and Wellbeing of Workers in Relation to Workplace Safety

High mental health and wellbeing

WORKPLACE SAFETY

VERY SAFE

SOMEWHAT SAFE

SOMEWHAT UNSAFE

VERY UNSAFE

Low mental health and wellbeing
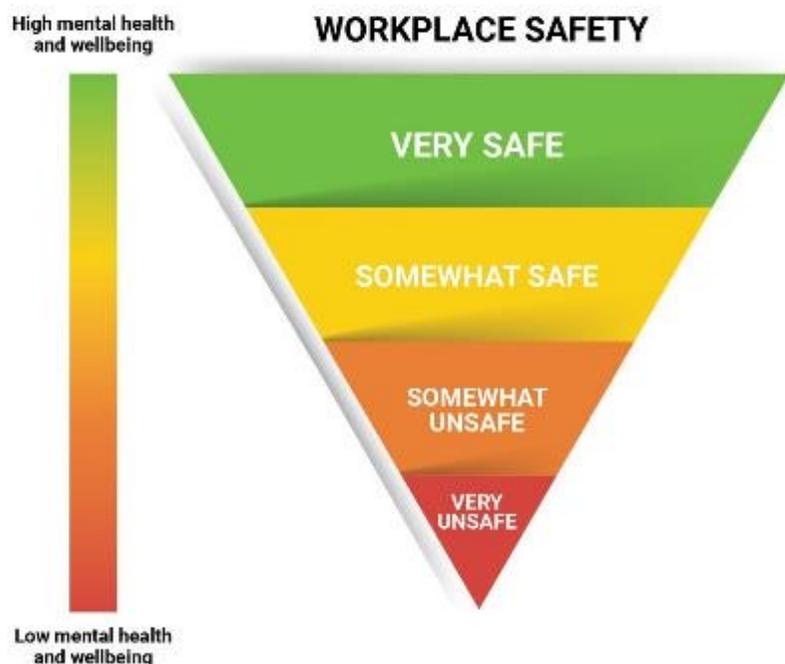
Feeling unsafe at work, physically or psychologically, is associated with negative mental health outcomes. Survey respondents who felt unsafe at work were **two to three times more likely** to experience symptoms of depression and anxiety disorders

DE&I and the Hierarchy of Controls

5 **Elimination**
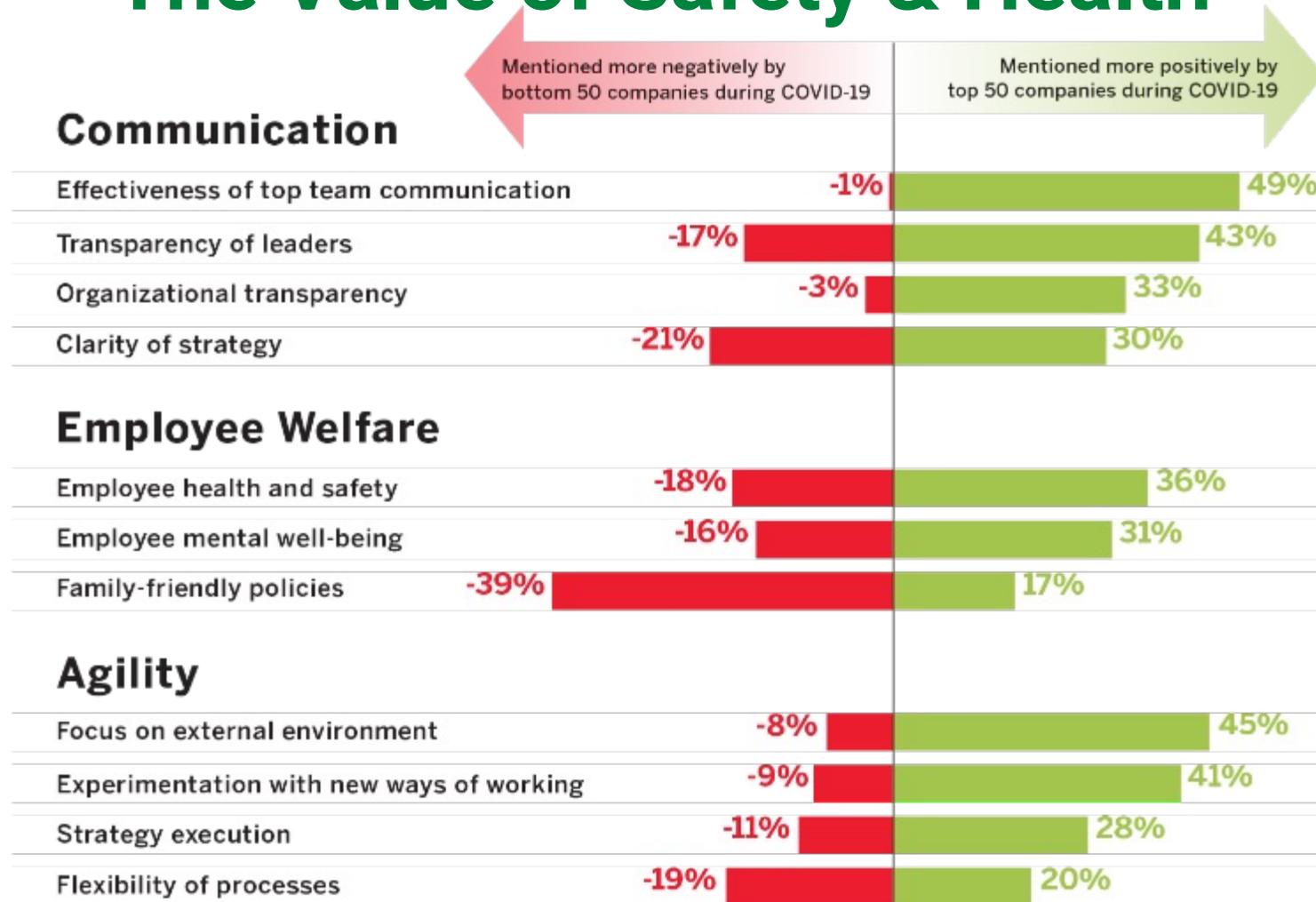*Design it out*

4 **Substitution**
Use something else

3 **Engineering Controls**
Isolation & guarding

2 **Administrative Controls**
Training & work scheduling

1 **Personal Protective Equipment**
Last resort

Change communication & review of new risks created to entire population

Engaging diverse audience for perspectives on relevant hazards & risks

Effective communication across an array of stakeholders and languages

Design & fit for women & wider range of body types

The Value of Safety & Health

Mentioned more negatively by bottom 50 companies during COVID-19 | Mentioned more positively by top 50 companies during COVID-19

Communication

	Negative	Positive
Effectiveness of top team communication	-1%	49%
Transparency of leaders	-17%	43%
Organizational transparency	-3%	33%
Clarity of strategy	-21%	30%

Employee Welfare

	Negative	Positive
Employee health and safety	-18%	36%
Employee mental well-being	-16%	31%
Family-friendly policies	-39%	17%

Agility

	Negative	Positive
Focus on external environment	-8%	45%
Experimentation with new ways of working	-9%	41%
Strategy execution	-11%	28%
Flexibility of processes	-19%	20%

Source: MIT Sloan Culture 500 Study

Thank You!

John Dony
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National Safety Council
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Mentally Healthy Workplaces:
A Wicked Challenge

We are obligated to prevent harm and encouraged to create workplaces that support the physical and mental health of all workers – and yet at the same time, run a business that has pressing demands.

If attention is the currency of leadership, then leading wellbeing requires paying *attention* to the wicked challenges of designing, organising and managing work for wellbeing.

There are many competing demands for our attention. My focus today will be on the mental health of workers.

Wellbeing: Rights, Obligations, and Opportunities

- Everyone has a role to play in creating a mentally healthy workplace.

- Mentally healthy work and worker wellbeing is a right for all, and an obligation for employers.

- Ultimately, mental wellbeing at work is a leadership issue.

- Leaders who allow a toxic workplace culture to emerge are breaching both their ethical and legal duties.

- Mentally healthy work starts with good leadership.

Understanding Mental Health

- Mental health is a state of wellbeing in which people can cope with the normal stressors of life, work productively, and contribute to their communities. (WHO)

- Wellbeing at work is the fulfilment of the physical, mental, and cognitive needs and expectations of a worker related to their work. (ISO 45003)

- Mental health ≠ Mental illness

What is mental wellbeing?

- An individual's ongoing state which enables a person to *thrive* or not.

- On a continuum.

- Universal, subjective, dynamic and holistic.

Thriving Going OK Struggling Unwell
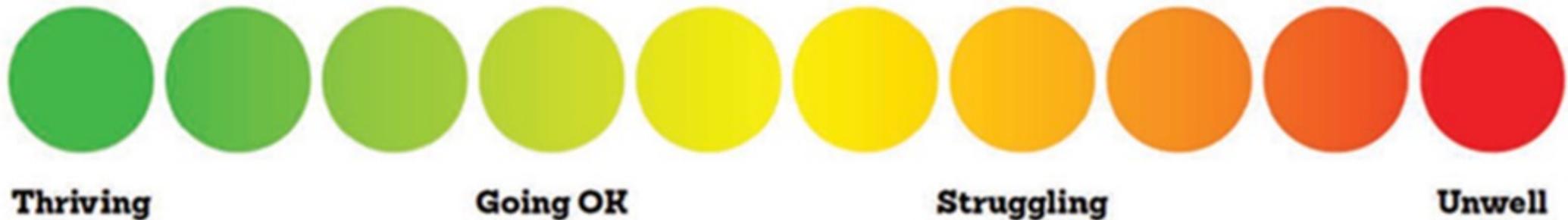
Reflection:
Is your focus on supporting workers who are struggling or unwell or enabling workers to thrive?

Not All Work is Equal

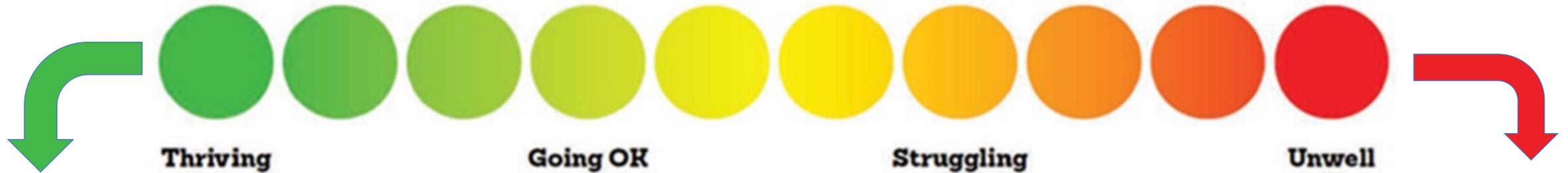Good work allows people to thrive, toxic work harms.
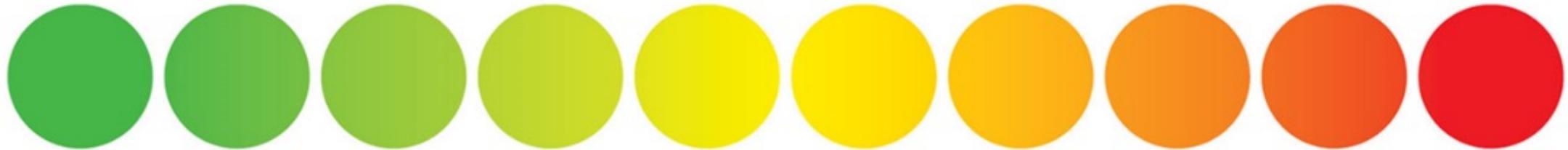
Good Work — Thriving · Going OK · **Decent Work** · Struggling · **Toxic Work** — Unwell

Obligation and Opportunities

Thriving   Going OK   Struggling   Unwell

Opportunity: To enable people to thrive.

Thriving occurs when a person is feeling and functioning well across multiple domains of their life.

Obligation: To prevent mental harm.

Mental harm occurs when a person experiences a significant cognitive, emotional, or behavioural impact arising from, or exacerbated by, one or more work-related risk factors.

Approaches to Mental Wellbeing At Work

An effective wellbeing strategy uses all four approaches.

By using all four approaches an organisation can meet its legal obligations as well as harness opportunities to help people to thrive at work.
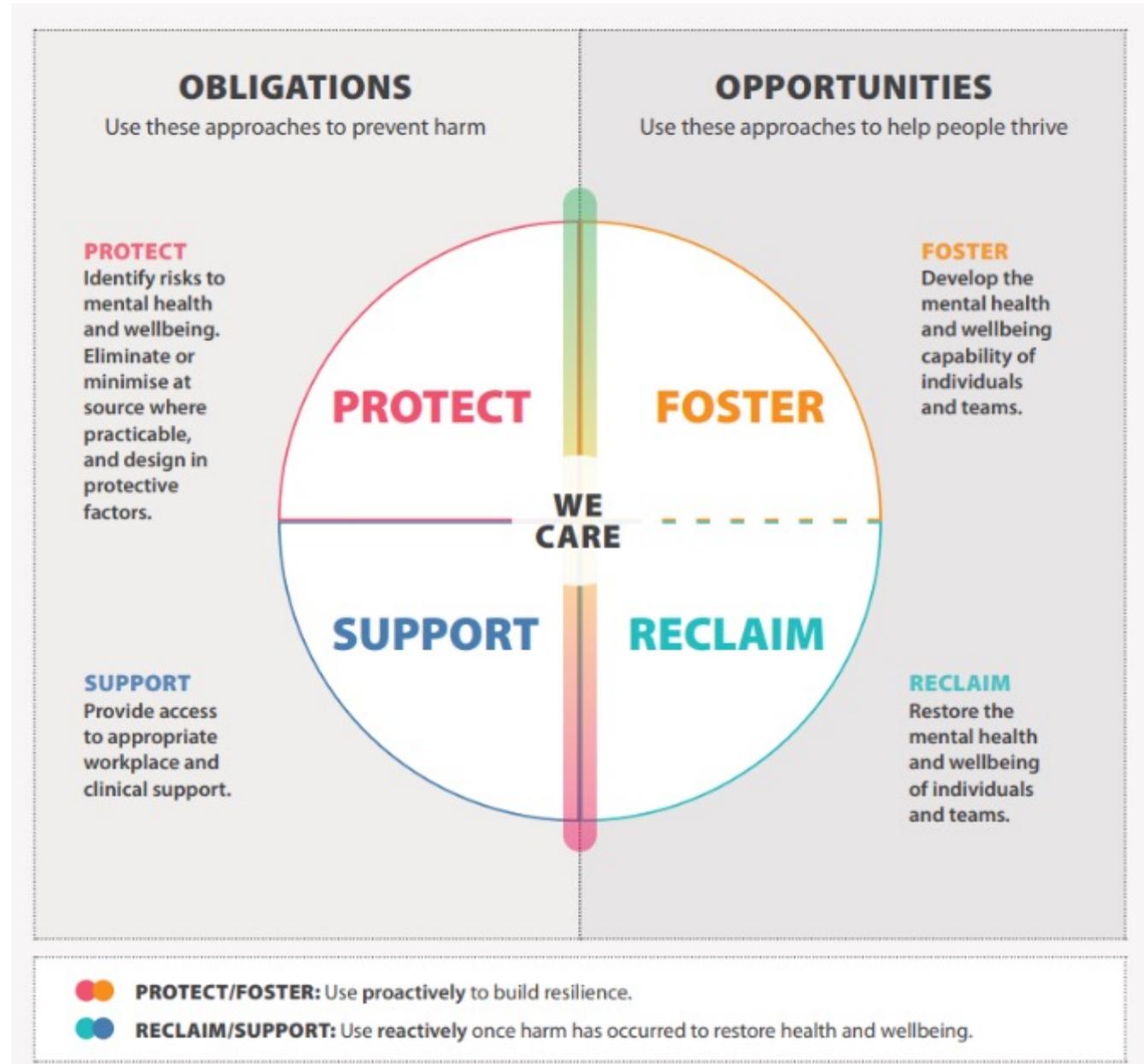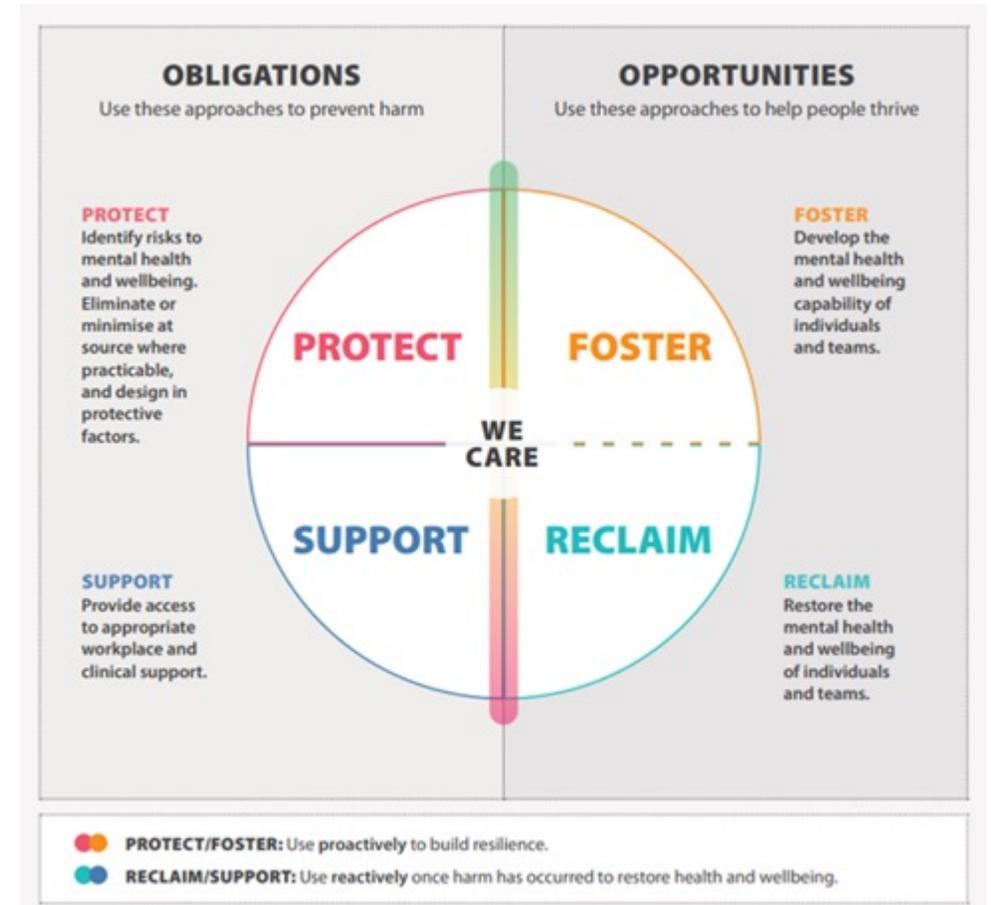

(CEO Guide to Mental Health and Wellbeing at Work, 2021)

Work or Worker? Proactive or Reactive?

Reflections

- Do your workplace interventions focus on the work (Protect) or the workers (Foster, Reclaim and Support)?

- Is your approach proactive or reactive?

- Is your focus on meeting your obligations or seizing your opportunities?

We need to stop pathologising the individual while ignoring the underlying structural causes of distress and passively accepting palliative care as the solution. (Costello, 2020)

OBLIGATIONS
Use these approaches to prevent harm

OPPORTUNITIES
Use these approaches to help people thrive

PROTECT
Identify risks to mental health and wellbeing. Eliminate or minimise at source where practicable, and design in protective factors.

FOSTER
Develop the mental health and wellbeing capability of individuals and teams.

PROTECT **FOSTER**

WE CARE

SUPPORT **RECLAIM**

SUPPORT
Provide access to appropriate workplace and clinical support.

RECLAIM
Restore the mental health and wellbeing of individuals and teams.

PROTECT/FOSTER: Use proactively to build resilience.

RECLAIM/SUPPORT: Use reactively once harm has occurred to restore health and wellbeing.

Forum (2022) Mental Health and Wellbeing At Work
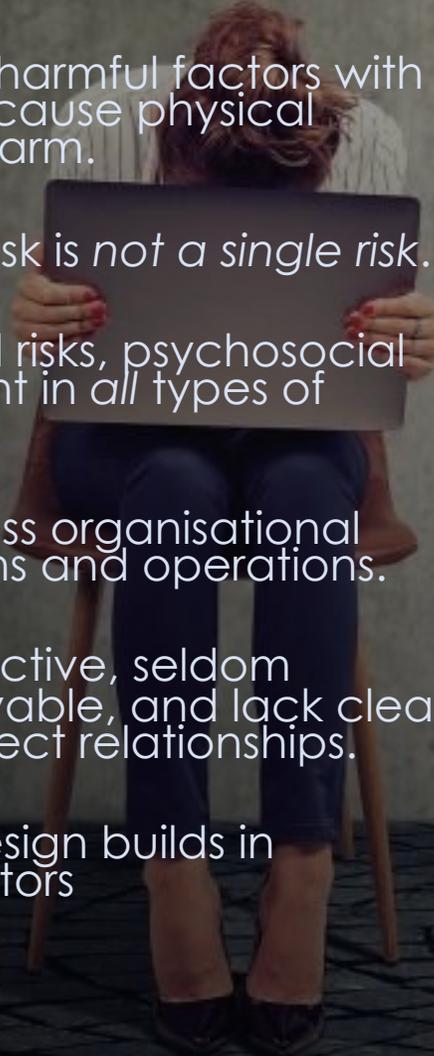
BEYOND THE NEW NORMAL

Psychosocial Risks

There are many harmful factors with the potential to cause physical and/or mental harm.

- Psychosocial risk is *not a single risk*.

- Unlike physical risks, psychosocial risks are present in *all* types of work.

- Risks *vary* across organisational levels, functions and operations.

- They are subjective, seldom directly observable, and lack clear cause and effect relationships.

- Good work design builds in protective factors

ISO 45003

Psychological Health & Safety in the Workplace

Mental Wellbeing By Design

TOXIC WORK				GOOD WORK
Harmed	Harmful Factors, Poor Work Design	Work Areas	Protective Factors, Good Work Design	**Thriving**
Individual costs: • Hypertension & heart disease • Anxiety, depression, addictions • Poor decision-making • Etc.	• Unacceptable workloads • Unchallenging tasks • Poor physical working conditions • Etc.	**Task** The nature and demands of the work and how it is organised	• Acceptable workload • Challenging tasks • Clear goals • Good physical working conditions • Etc.	**Individual benefits:** • No work-related illnesses • Positive engagement • Good decision-making • Etc.
Organisational costs: • High absenteeism & staff turnover • Low engagement • Injuries • Etc.	• Work lacks meaning • Lack of learning opportunities • Inflexible work schedules • Etc.	**Individual** The impact of work on a person and its meaning to them	• Work has meaning & purpose • Good internal progression • Good work-life balance • Etc.	**Organisational benefits:** • Higher productivity • Innovation • Reputation as a 'good employer' • Etc.
	• Difficult work relations • Unsocial working hours • Bullying • Etc.	**Social** Relationships and personal connections at work	• Respectful work relations • Regular working hours • Supportive leaders • Etc.	
Identifying and managing risk to wellbeing	• Lack of psychological safety • Lack of job security • Unacceptable rate of change • Etc.	**Organisational** The culture, systems, and employment processes at work	• Leaders value wellbeing • Fair contractual arrangements • Appropriate monitoring of work • Etc.	**Designing for 'good work'**

Mentally Healthy Workplaces Requires Leaders To...

Focus on work not just fix people

Question how things have always been done

Be curious about how things can be different

Be courageous to make changes

Be patient to allow changes to embed

Enable a culture of psychological safety

Be well to lead

Leaders create and embed culture by what they pay attention to, measure and control

(Edgar Schein)

We

Safety or Health?

Physical safety

Physical health

Mental health

BALANCING MENTAL HEALTH & PHYSICAL SAFETY

Wellbeing At Work: A Matter Of Design Not Luck.

To sustain long term wellbeing requires the courage to examine the work not just toughen up and fix the people.

Without the conditions that enable workers to thrive, individual-focused interventions will inevitably fall short.

As important as self-care or even collective-care is, it is not sufficient to build a workplace where people can thrive.

Hopefully, the conversations and robust debate at the conference be the start of an intentional, collaborative process to support mentally healthy work

Total Worker Health for Manufacturing Employers

Jeannie A. S. Nigam, MS

Research Psychologist, Division of Science Integration

National Institute for Occupational Safety and Health, USA

Presented in "Wellness and Safety: Risk and the Whole Worker" at the Manufacturing Safety Alliance of British Columbia's *Make it Safe Conference*.
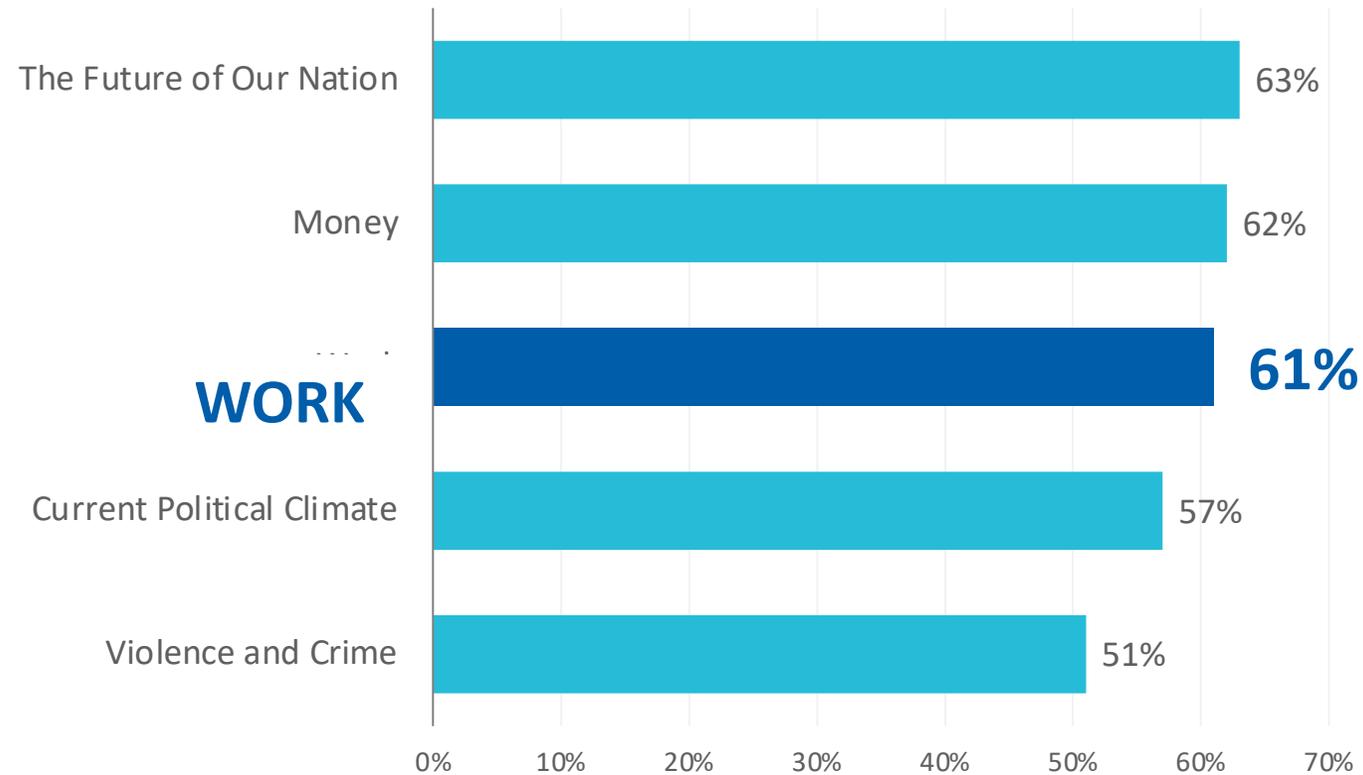
October 27, 2022

WORK ORGANIZATION & HEALTH

Work is a significant source of stress

MOST COMMON SOURCES OF STRESS

Source	Percentage
The Future of Our Nation	63%
Money	62%
WORK	**61%**
Current Political Climate	57%
Violence and Crime	51%

Work stressors lead to strain and illness

| Job Stressors | Job Strain | Illness & Injury |

Work design and safety risks

- Job tasks, risk in physical work environment = accidents and injuries
- Poor control, vibration
- Danger of getting trapped, faulty ladders
- **Management emphasis on productivity and efficiency at the expense of safety**
- Overload, underload, boredom
- Long work hours, overtime

In June 2020, 40% of U.S. Adults reported struggling with mental health or substance use*

ANXIETY/DEPRESSION SYMPTOMS

31%

STARTED OR INCREASED SUBSTANCE USE

13%

TRAUMA/STRESSOR-RELATED DISORDER SYMPTOMS

26%

SERIOUSLY CONSIDERED SUICIDE[†]

11%

*Based on a survey of U.S. adults aged ≥18 years during June 24-30, 2020

[†]In the 30 days prior to survey

For stress and coping strategies: **bit.ly/dailylifecoping**

CDC.GOV

bit.ly/MMWR81320

MMWR

Poor mental health impairs workers' ability to work

16%
Workers report depressive symptoms

44%
Workers had 1+ poor mental health day in past month

25%
Workers missed work because of poor mental health

Stress has a PROFOUND effect on well-being

Behavior
33% eat too much or unhealthy foods[1]

Mental Health
40% "often" to always feel burned out[2]

Physical Health
23% describe their health as only "fair" or even "poor"[1]

Sources: [1]APA Stress in America (2015); [2]NIOSH QWL (2018);

MANUFACTURING

Research Project: Toolkit to Assess Work Organization in Manufacturing

Manufacturing (MFG) workers

30% often feel stress @ work

Can't perform normal activities ~1.7 days/month

Focus Group Findings: MFG jobs are "good jobs"

- Unions
- Benefits: Dental, retirement contribution plans, tuition reimbursement
- Economic: Job security, weekly pay, lucrative compensation, option for overtime
- Work-Life: Rotating schedule, no expectation to "log-in" from home
- Skill utilization: Mechanical skills, proper lifting, safety, hazard identification

Findings: MFG Physical demands & safety

- Working conditions: concrete floors, lifting, noise, extreme temp

- Safety & health: injuries, poor health habits

- Threats to safety
  - Companies do not always address faulty equipment
  - Poorly trained workers (contractors and young workers)
  - Inadequate PPE
  - Insufficient emergency equipment like defibrillators
  - Safety training not comprehensive
  - Messaging for different groups

- Limited perspective on definition of safety

Findings: MFG Job design and stress

- Schedules – especially mandatory OT
- Economic – pay equity, job security, ability to support families, and other challenges
- Increasing work demands, production quotas
- Work across the lifespan, interpersonal conflict
- Inability to manage physical health concerns
- Fatigue, migraines, depression
- Work-family conflict

MFG Work schedules affect family life

"Even if you are not a single parent, the astronomical number of hours and non-traditional shifts you work essentially create a single-parent home."

"My work schedule and demands led to my divorce."

"Our jobs do not accommodate for our kids, especially infants and toddlers. You can get fired for just stepping out to call your child, and you must pay people to keep your children because your shifts are so long. I am at work, constantly worrying about them."

Findings: Organizational support in MFG

- Safety a priority
- Integration / TWH not addressed
- "Effective" Managers lead safe, productive workplaces
- Positive Co-worker relationships foster productive, safe, and less stressful job sites
- Tenure differences in perceptions of co-worker relationships
- Management styles drive many of the other work experiences

MOVING FORWARD: MANAGE WORK TO REDUCE STRESS & PROMOTE WELL-BEING

Healthy Work Design and Total Worker Health

The Power of Comprehensive Intervention

	INDIVIDUAL Change Only	INDIVIDUAL + ORGANIZATIONAL Change
HEALTH: Mental Health Blood Pressure	**85%** (short-lived)	**84%**
ORGANIZATIONAL: Absenteeism, productivity, and injury	**31%**	**97%**

INDIVIDUAL + ORGANIZATIONAL approaches combined are best

LaMontagne et al. (2007) A Systematic Review of the Job Stress Intervention Literature www.ijoeh.cm 13 (3)

Total Worker Health®
Taking a Holistic Approach to Worker Health

Keep Workers Safe

\+

Establish Workplace Policies, Programs & Practices

Create Worker Well-being

www.cdc.gov/niosh/twh

NIOSH Total Worker Health® Hierarchy of Controls
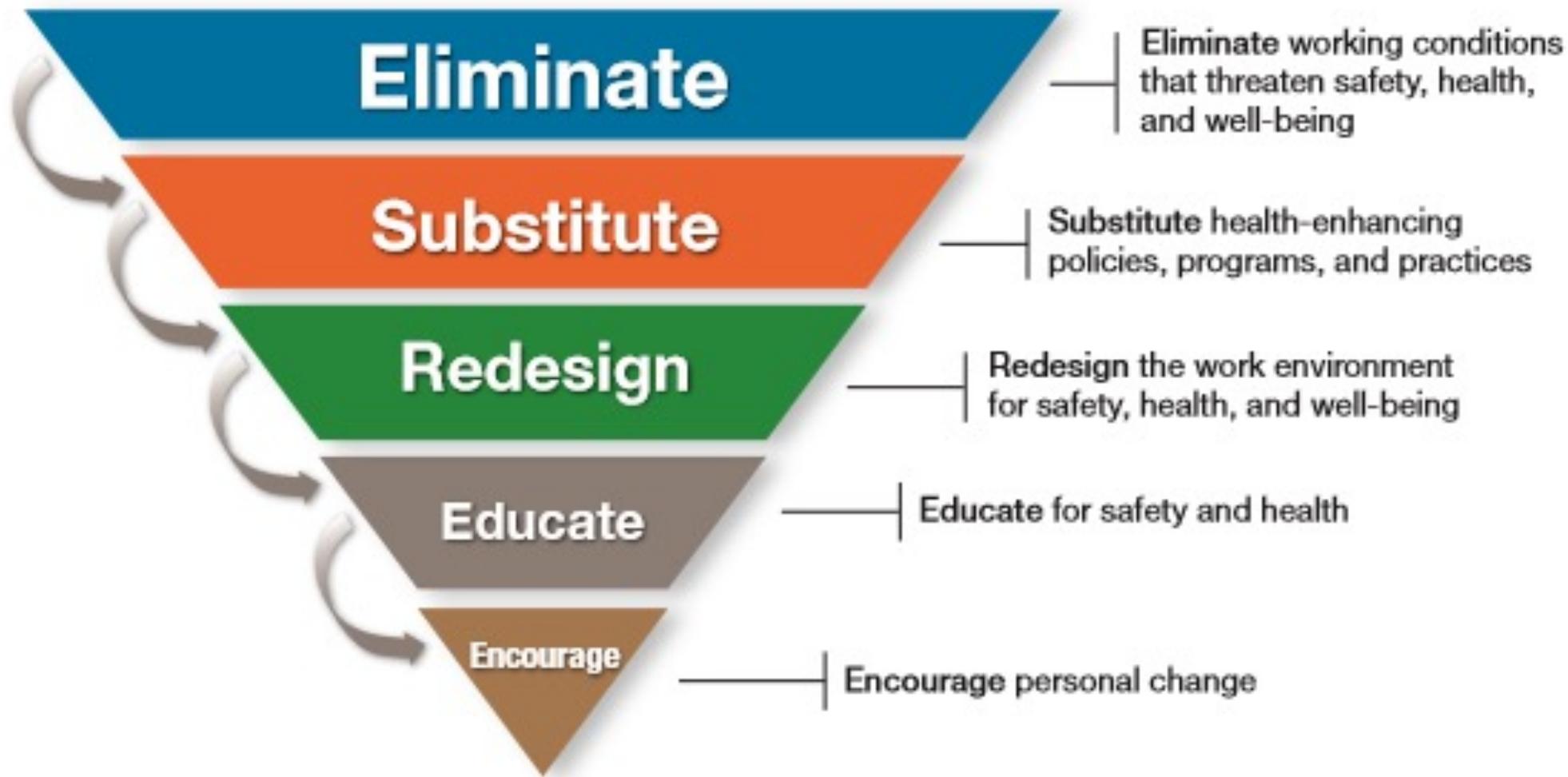
Support Total Worker Health through Job and Task Design

- Job Fit: Match individuals to jobs appropriately

- Workload & Demands:

  – Safe work. Prioritize tasks, cut out unnecessary work

  – Increase autonomy and control; reduce ambiguity and demands as possible

  – Increase variety of tasks as needed

- Utilize Workers' Skills:

  – Offer training to increase the scope of jobs for those who are over-trained

  – Give individuals (or a group) more responsibility

- Work Design:

  – Modify schedules to prevent fatigue (e.g., hours of work, shift work, rest breaks)

Promote Total Worker Health with Supportive Leadership

- Take a comprehensive approach to support performance and advance well-being

- Implement safe and healthy work design that utilizes worker skills

- Provide paid leave, adequate benefits, and supportive programs

- Develop workers with performance feedback and training

- Communicate, support, and encourage

- Be a role model, facilitate work-life balance

Summary: Manage Work Organization to Protect Workers and Promote Whole Health

- Work stress is an occupational hazard & strong predictor of worker health / well-being

- Must address root sources of stress at work (e.g., security, pay & leave; workload & control; hours & schedules; equity; work-life fit)

- Comprehensive approaches that consider the whole worker are beneficial

  - Design safe work that protects workers and support health

  - Design work to engage and allow workers advance professionally

  - Offer supportive programs to help workers manage their well-being on and off the job

Resources: Total Worker Health®

Fundamentals of Total Worker Health® Approaches

Essential Elements for Advancing Worker Safety, Health, and Well-Being

- Protect Workers
- Demonstrate Leadership Commitment
- Design Work to Eliminate Hazards
- Engage Workers
- Ensure Confidentiality
- Integrate Systems

https://www.cdc.gov/niosh/docs/2017-112/pdfs/2017_112.pdf.

Defining element of TWH	Where we are now/What we do well	Where we want to be/What must be improved
Demonstrate leadership commitment to worker safety and health at all levels of the organization		
Design work to eliminate or reduce safety and health hazards and promote worker well-being		
Promote and support worker engagement throughout program design and implementation		
Ensure confidentiality and privacy of workers		
Integrate relevant systems to advance worker well-being		

Defining element of TWH	Needs identified	Who should we include?	What obstacles might we encounter?	What are some solutions to those obstacles? What resources outside the workplace could we pull in to help?	What steps must we take to make this happen?

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For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348   www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

UP NEXT

MIS
MAKE IT SAFE

EXHIBITION HALL
NOW OPEN

MIS
MAKE IT SAFE

DAY 2 - 12:45PM-1:30PM PDT

UNDERSTANDING CHEMICAL SAFETY:

WHMIS AND TDG

DAY 2 - 12:45PM-1:30PM PDT

EMPLOYEE WELLBEING:

INNOVATIVE STRATEGIES TO BUILD AND ENGAGE A THRIVING TEAM

DAY 2 - 12:45PM-1:30PM PDT

ACCESSIBILITY & INCLUSIVE DESIGN:

HUMAN FACTORS & ERGONOMICS IN ACCESSIBLE WORK

DAY 2 - 12:45PM-1:30PM PDT

WELDING:

AN OCCUPATIONAL HEALTH PERSPECTIVE