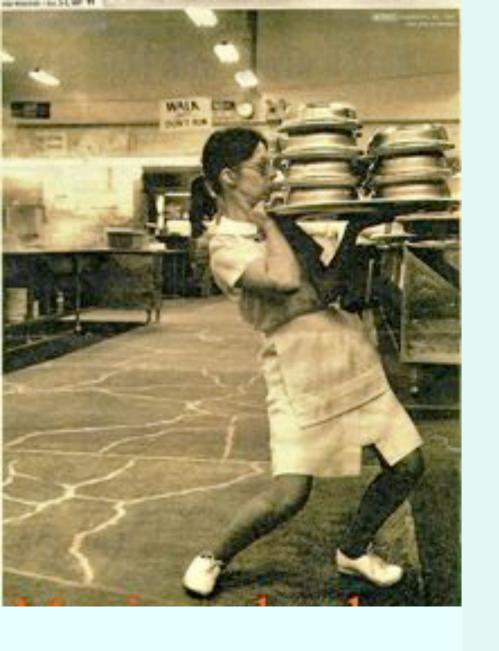
Work re-organisation --A hazard to workers' health and safety What is to be done?

Dorothy Wigmore, MS Work, Stress and Health conference 2011

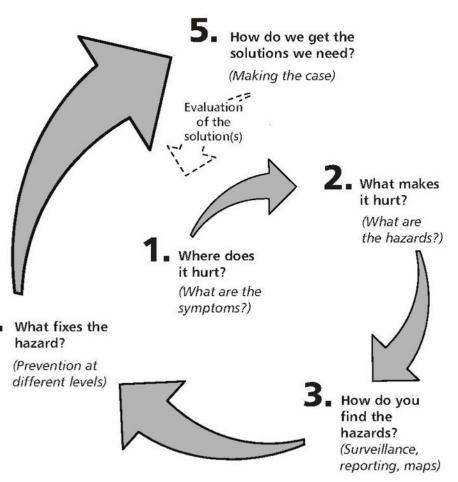


What do you see?

- symptoms/injuries/ health effects?
- hazards?
- solutions?



Five steps to a healthy and safe workplace



A framework to get to healthy and workplaces -- whatever the hazard

> Wigmore, et al. 2008 Seeing the Workplace with New Eyes





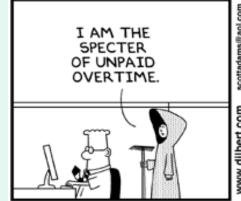
Work organisation matters --

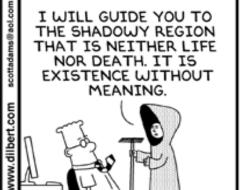
it has, it does and it will The irregularity of employment and of income must be a fruitful source of disease.

For instance, while there is much enforced idleness, a tailor has often to perform "nine days' work in a week."

The insufficient sleep, the strain to the eyes, the lack of proper time to take meals or outdoor exercise, and the prolonged confinement in unwholesome and over-heated workshops are naturally important factors in undermining the constitution of even the most fortunate among the journeymen tailors.

Report of the Lancet Special Sanitary Commission on 'sweating' among tailors in Liverpool and Manchester. The Lancet, April 14, 1888.

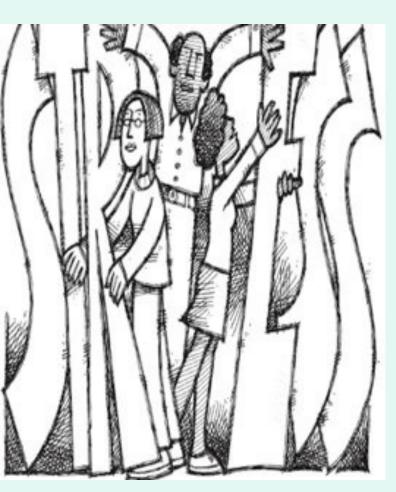






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We know a lot about:



 the harm that hazardous work organisation and work-related stressors does to workers, organisations and our communities

Look at the stress stickers around you. What do you see?

From: *Enough workplace stress. Organising for change*. Canadian Union of Public Employees. 2003

We know this from:

- history
- our own experience
- research
- conversations with others

Evidence about the health effects of work organisation in the 19th and early 20th century

- Government inquiries/commissions into sweating, child labour, navvies, capital/ labour, shops (e.g., U.K. Child Labour Commission, 1867)
- Government agencies (e.g., inspectorates, Board of Trade, public health)
- Arbitration & related industrial tribunal hearings
- Medical and health journals on both sides of the Atlantic (e.g., Lancet, American Journal of Public Health)
- Union/sympathetic group reports
- Incidental employer material
- Academic journals (economics, law, medicine, sociology)

Michael Quinlan, 2011. Why work organisation matters — and matters even more today: a reflection on the contribution of Theo Nichols to research on occupational health and safety. Presented at: Safety or profit? A conference to celebrate Theo Nichols' contribution to a sociological understanding of health and safety at work. Cardiff.



Health effects included ...

✓ Fatigue, exhaustion, sleep deprivation

Poor diet, malnutrition (wasting disease)

✓ Cramped posture, repetitive strain injuries

 Overcrowded, poor ventilation, unhygienic working and living conditions

✓ Increased risk of infectious disease (workers and communities)

✓ Insecurity and mental well-being

 Children -interrupted physical/ mental development and early onset chronic injuries





Strain (long-term) physical effects include ...

Sleep disorders, insomnia, fatigue, exhaustion

Headaches, tension, grinding teeth

Cardiovascular problems (e.g. high blood pressure, heart attacks, other changes to the heart and circulation system)

Chest pains/problems

Immune system problems, which make it easier to get sick

Asthma

Digestive system problems (eg. spastic colon, ulcers, impaired digestion, irritable bowel syndrome); weight gain or loss

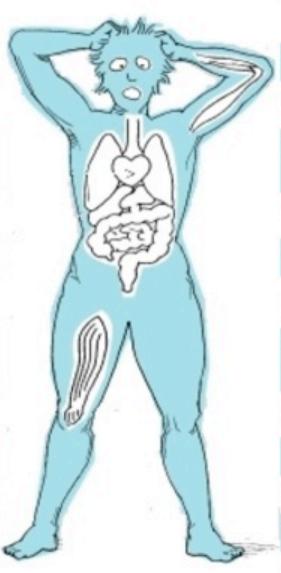
Diabetes

Menstrual disorders

Sexual dysfunction

Joint and muscle pains; arthritis

Burnout



Strain (long-term) non-physical effects include ...

Anxiety, increased tension and fearfulness

Feeling apathetic, low self-worth, blaming ourselves for our stressed state

Social isolation, withdrawal at home and work, stop participation in family, sports and community activities

Inability to concentrate and finish tasks

Mistrust, blaming others (including "the union"), paranoia

Drug and alcohol abuse

Conflict with family and friends (sometimes violent), fights with co-workers and supervisors

Anger, frustration, envy

Depression, mood changes, constant negativity

Suicidal thoughts

Over-reaction, irrational behaviour

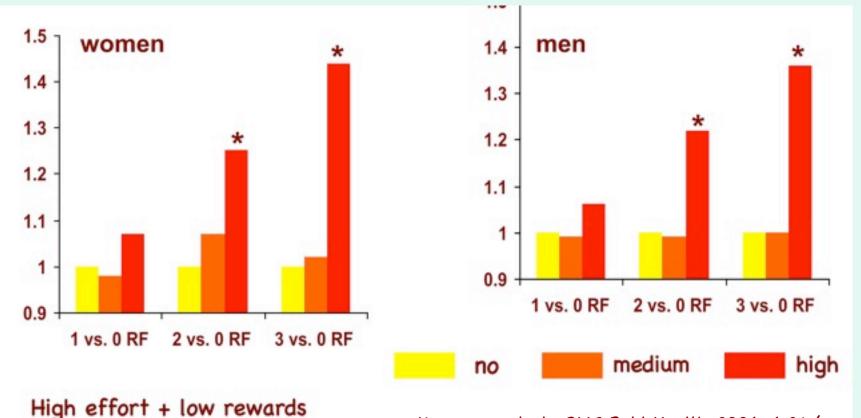
Job dissatisfaction

DEW: March/2010

Long-term, less visible effects are well-known too

"lifestyle" health issues (smoking, overweight, little exercise, heavy alcohol use) can be related to high effort + low rewards at work)

8,844 women and 7,233 men, Finnish public service. Risk factors (RF): BMI ≥ 25, smoking, heavy alcohol use, physical inactivity; Odds ratios, adjusted for age, SES, marital status.



Kouvonen, et al., BMC Publ Health, 2006, 6:24 (as

summarised by Paul Landsbergis, 2010)

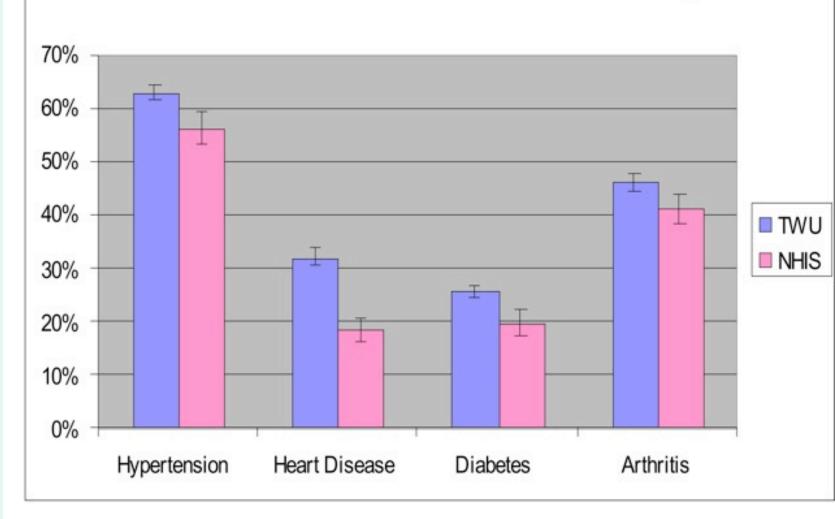
Downsizing increases injury risk (6 U.S. electric utility companies, 1995-2002)



- 4 Black lines: Companies with major downsizing 2000-2002 (increases in injury rates in nearly all occupations)
- 2 Red lines: Companies with no downsizing

Stressful work takes a toll on health Transit Want

Transit Workers Union Local 100 retirees vs retirees from National Health Interview Survey



workers affected in the early reports included ...

- Sweated labour and outwork (mainly women)
- Child labour
- Casual labourers (e.g., dock, agriculture, navvies)
- Indentured immigrants (especially non-European)
- Shop workers
- Merchant seamen
- Subcontracted/outsourced labour

Quinlan, 2011

Sound familiar?



We know a lot about:

 what kinds of work organisation and stressors (and other hazards) harm workers, organisations and communities



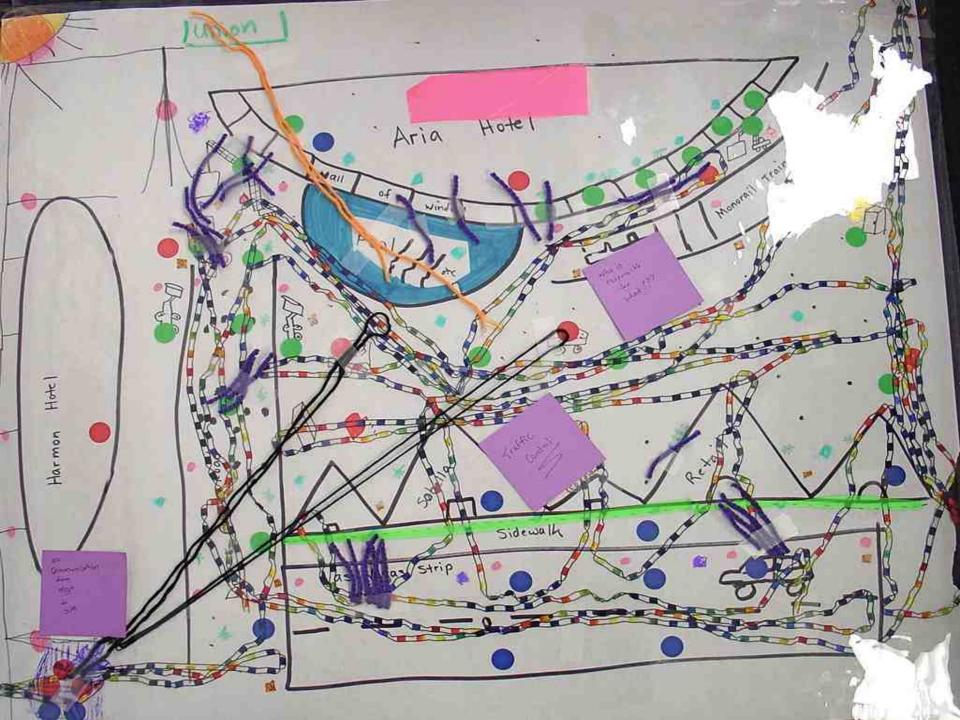
Typical responses for "what makes it hurt?"

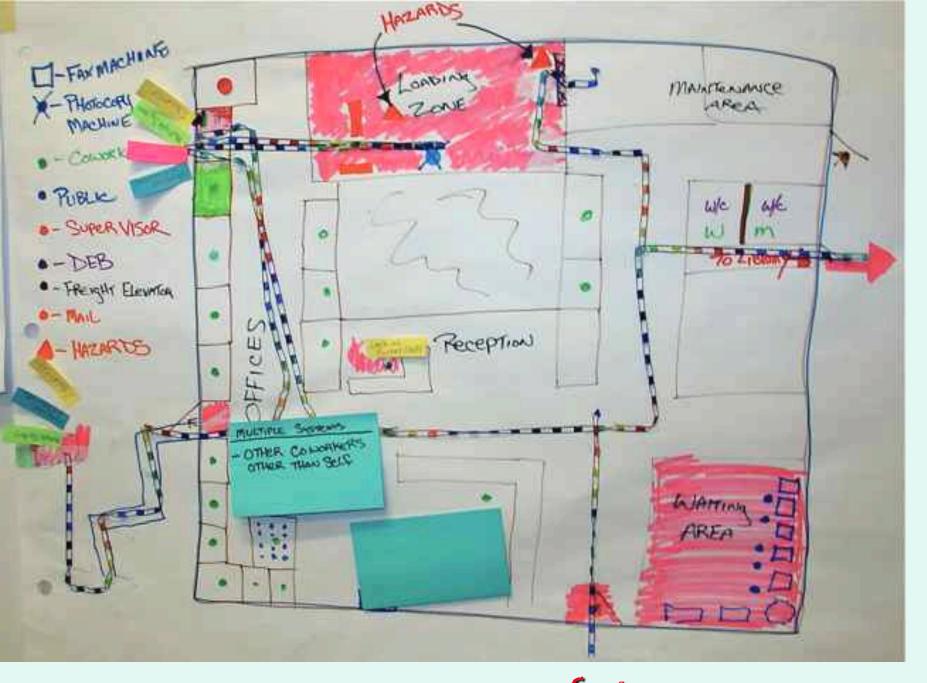
" putting work organisation and stressors at the centre, linked to all other hazards



Given the opportunity, we integrate our knowledge and integrate our knowledge and experiences to describe workplace hazards, including work organisation and stressors work organisation and stressors



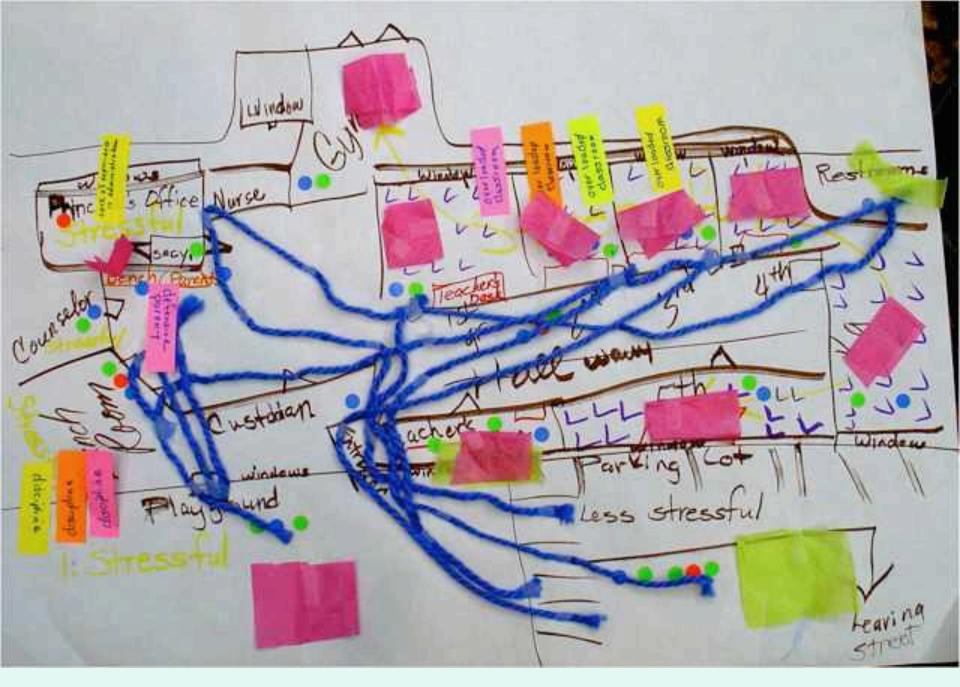




" or workers making sense of stressors







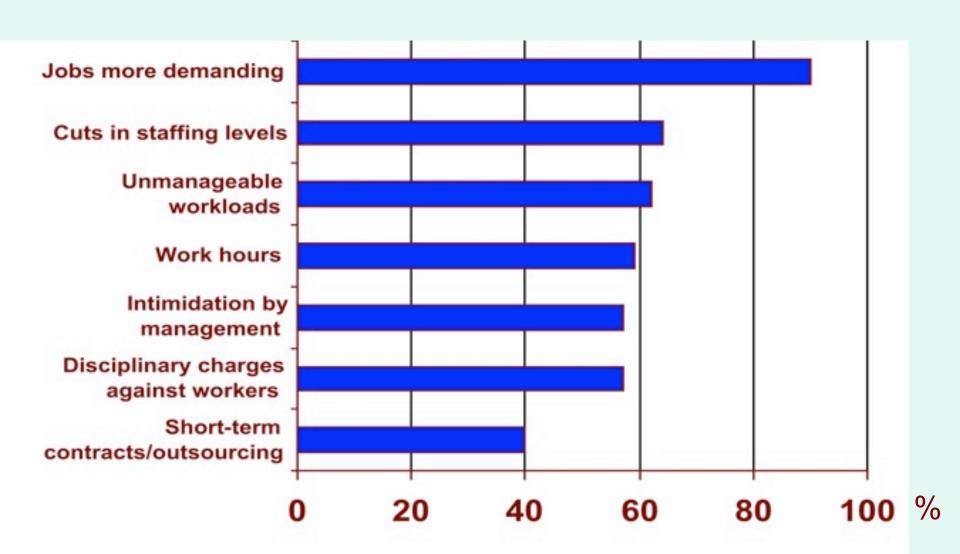
.. in a school setting



US and Canadian workers and union health and safety representatives increasingly say key factors causing or contributing to injuries, illness and stress in their workplaces include:

- downsizing/understaffing
- mandatory overtime
- longer hours of work (e.g., 12-hour shifts)
- push for production
- cross-training/multi-tasking
- lack of effective and on-going training for extra duties
- work overload
- increased work pace

ITF global study found increases in ... (2000-2007)



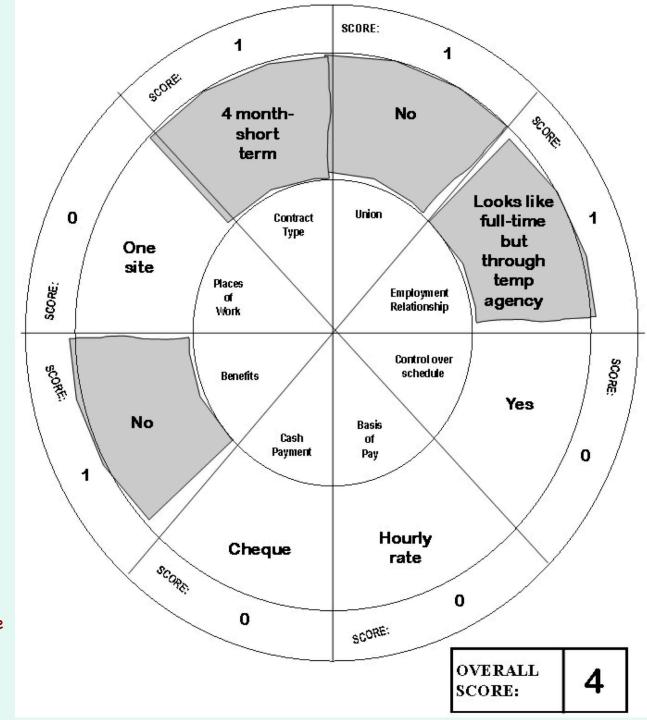
Many of these hazards are features of precarious or contingent work, an increasingly common form of work organisation

Listen to what some workers say about this.

The precarious work wheel - eight dimensions

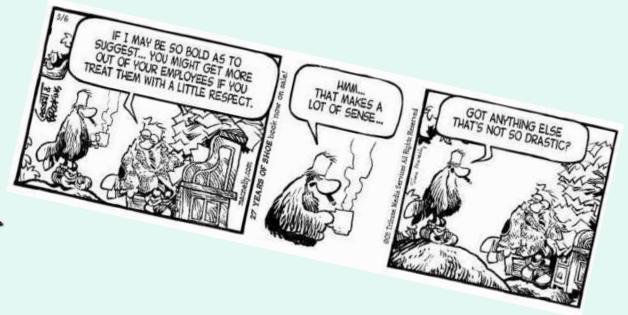
Community service worker - clerical work, temp contract, legal office (was a lawyer)

From: Immigrants and
Precarious Employment
A Popular Education Workshop
Spring 2009, prepared for the The
Immigrants and Precarious
Employment Project, Toronto.



Other work organisation hazards and stressors at the top of workers' minds these days are forms of violence linked to the changing structures of work:

- verbal abuse
- physical abuse
- bullying
- harassment
- lack of respect



Many employers are turning to "Behaviourbased Safety" (BS) methods. A form of bullying, they are a work organisation hazard, not a solution, and ...

- include practices such as:
 - "safety incentive" programs that offer rewards to workers who don't report injuries
 - ☐ injury discipline policies that threaten and deliver discipline to workers who do report injuries
 - □ behavioral observation programs that blame workers for being inattentive or working "carelessly" if they are hurt or get sick, and take the focus away from hazards
 - □ are effectively used to hide increases in work-related injuries and illnesses
- ignore workplace social relations, as part of the responsibilisation of health and safety (see Gary Gray, 2009)
- become part of the "iron cage" that stands in the way of collective responses and solutions

We know a lot about:

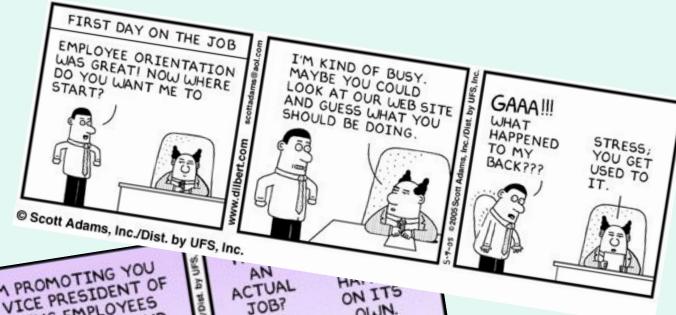
 the solutions that would prevent and do little harm to workers, organisations and communities

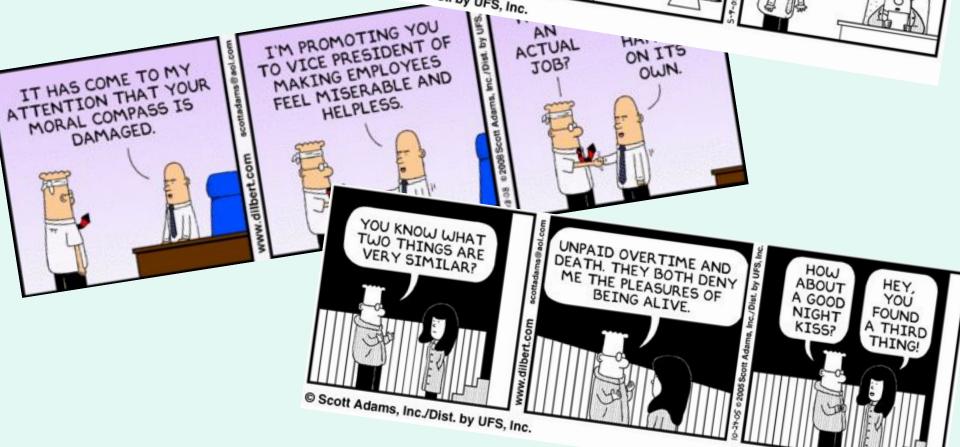
We know the principles ...

The stress prevention triangle - - - principles for tackling stressors at work Least effective Level 3 limit the harn (change responses to the stressor and/or create relaxation and recovery time) Level 2 Reduce harm -- lessen the amount of the stressor or its effects Level 1 Prevent harm Most (deal with the stressor and its root causes) effective

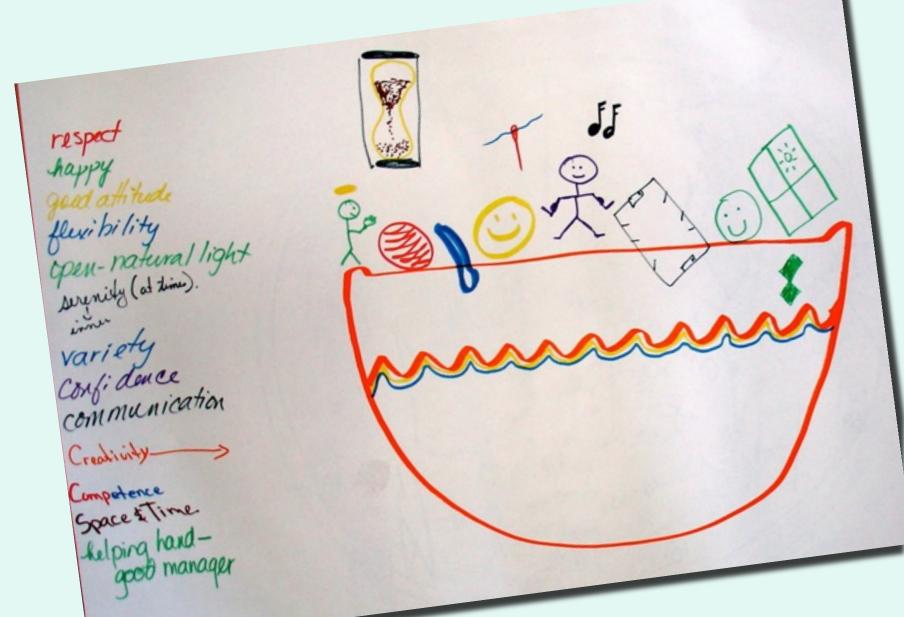
DEW: Version 8 (2008), thanks to Robin Baker (Labor Occupational Health Program, UC Berkeley), Canadian popular educator Bev Burke and the Belgians who use levels of prevention (see http://www.meta.fgov.be).

We learn from what doesn't work





We have our visions ...





From research and experiences, we know the kinds of solutions we need for work-related stressors

- □ the best solutions get rid of the hazard, using a "better safe than sorry" approach (the precautionary principle)
- collective solutions work better than individual ones -- and they're fairer (we still need to be able to do things for ourselves)
- we want to <u>prevent</u> people getting "stressed out"
- we want solutions that match the real problem (participatory actions with unions and workers)
- ☐ we don't want solutions that try to "fix" or blame us
- ☐ it can be difficult to get to Level 1 (on the prevention triangle) right away, or at all; we need to look at short-term solutions, as well as longer-term ones
- □ participatory action research and other studies provide useful lessons about effective solutions (e.g., Barbara Israel, Pam Tau Lee)

And we have international guidelines about "decent work" from the ILO

Decent Work involves opportunities for work that is productive and delivers:

- a fair income,
- security in the workplace
- social protection for families
- better prospects for personal development and social integration
- freedom for people to express their concerns, organize and participate in the decisions that affect their lives
- equality of opportunity and treatment for all women and men.

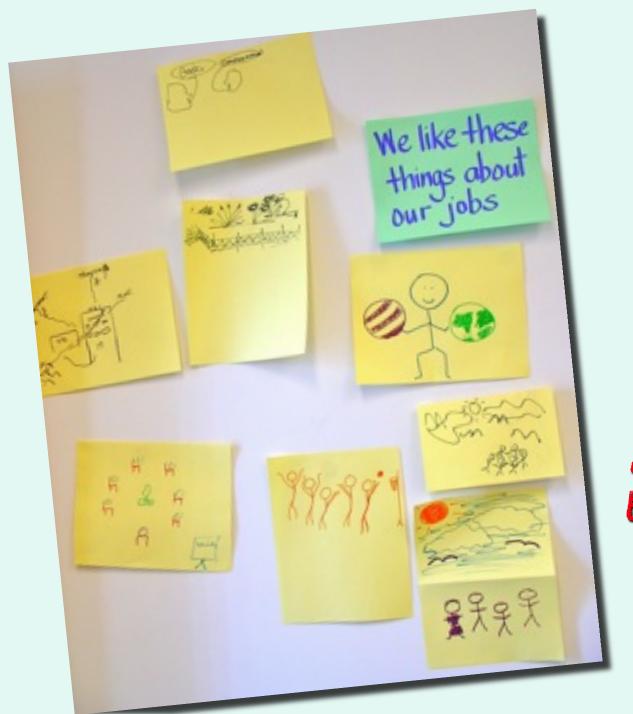
Decent work can be understood as the opposite of precarious work, and as a goal to strive for, individually and collectively.

So, how do we get the "fixes" we need?

This is the oft-neglected step towards a healthy and safe workplace, organisation and community

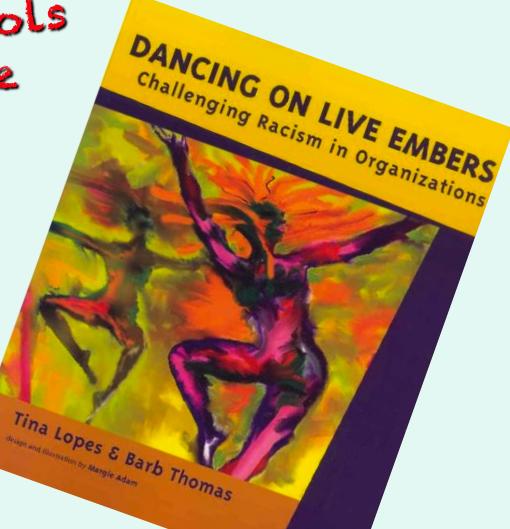
Think about the images you've seen in this presentation. Who made them?

Respect workers, their knowledge, experiences and visions. Work with them, their unions and their collaborators.

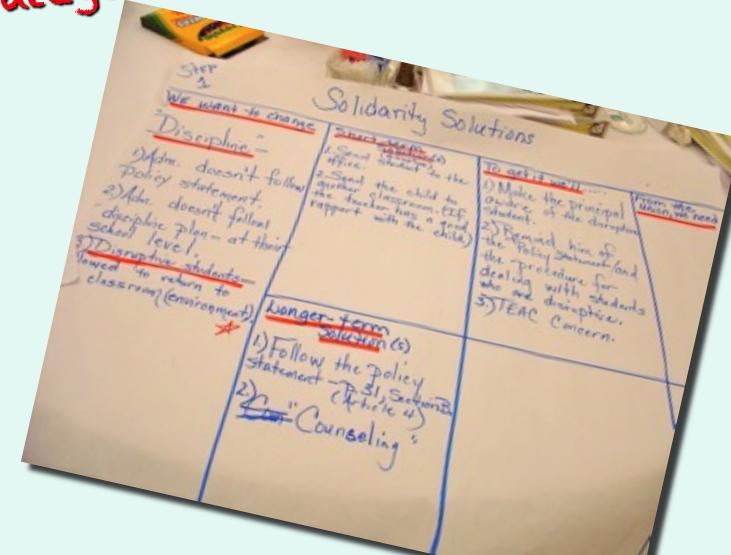


Individually and collectively we can build on what we like -where we have the opportunity to do that

We need to use what we already what we already know and the tools and resources we have



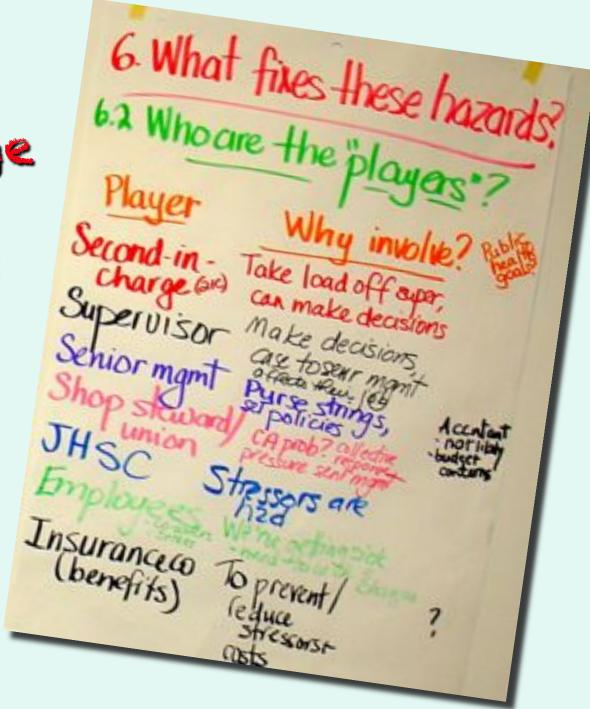
We have to separate solutions from strategies



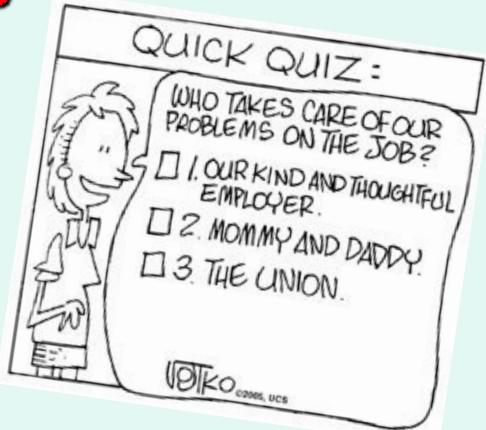
... and work on solidarity/ healthy solutions together



We need to acknowledge power and deal with it



We need unions
for precarious
workers too



We need coalitions to resist current forms of work organisation, especially the false solutions that blame and harm workers and ignore social relations

Think big. Think tools. solutions. Think tools. Think collective action.

We need to put research, community and public health energies into getting "the fixes", rather than focusing on the problems we know much about.

What can you do?

What is one thing you will do?

Think about Pete Seeger's version of "Over the rainbow".