



the
WORKPLACE
anti-
STRESS
GUIDE

How to use this guide

This guide has information and ideas to help you fight workplace stress. You can:

- Share it with other people at work.
- Use the facts, research findings, and strategies when discussing working conditions with managers and supervisors.
- Photocopy graphics and text for your bulletin board or for handing out at meetings and lunch.
- Give copies to your Joint Occupational Health and Safety Committee (labour and management members), regional Health Board, and/or Community Health Council.

NOTE ON SOURCES

The research, studies, and quotations in this guide are fully cited in References, pp. 56–57

The Hospital Employees' Union Anti-Stress Initiative

This guide is part of HEU's Anti-Stress Initiative. We have other resources for organizing to reduce workplace stress, such as a pamphlet, reference materials, and stickers. We can also connect you to workers in other sites who have faced similar situations.

HEU has designed anti-stress workshops. Ask your local representative or executive for information about holding a workshop for you and your co-workers.

How to contact HEU

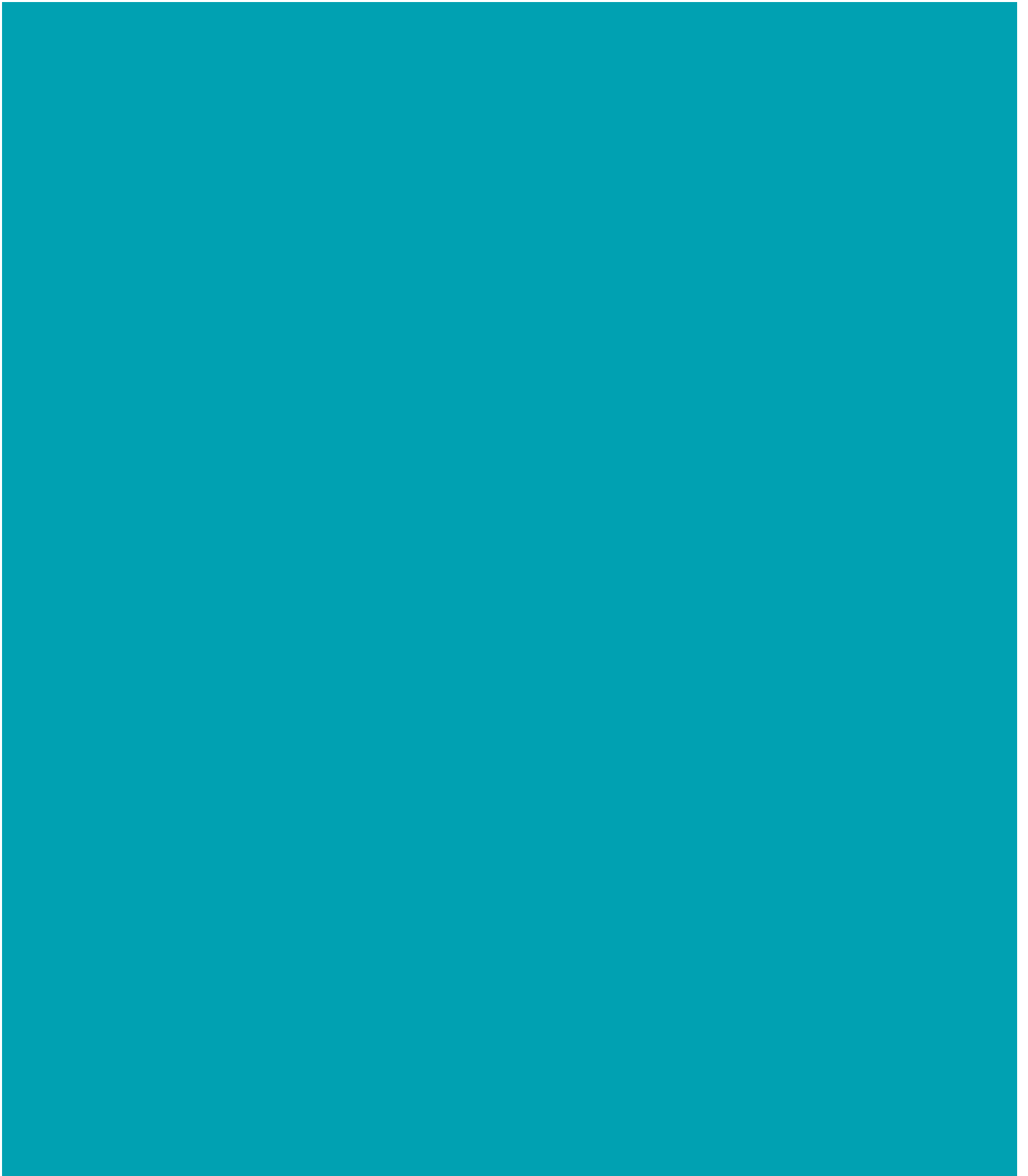
PROVINCIAL OFFICE

2006 W. 10th Avenue,
Vancouver BC V6J 4P5

Tel: (604) 734-3431

Fax: (604) 739-1528

Website: www.heu.org



Workplace stress

What's behind all this stress? How can we reduce the risks?

Workplace stress hurts people on a personal level, but it isn't a personal problem. Stress is an organizational problem caused by harmful working conditions and unhealthy work environments.

The Hospital Employees' Union offers this guide to tackling job stress. Get the facts. Get the strategies. Then get together.



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Hospital Employees' Union



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The Hospital Employees' Union is the BC Health Services Division of CUPE.

PROJECT COORDINATOR Marcy Cohen
WRITING Nancy Pollak, Denise Nadeau
RESEARCH Denise Nadeau, Marcy Cohen
DESIGN Working Design
ILLUSTRATIONS Terry Sunderland / Emerald City Communications
PHOTOGRAPHS Nancy Bleck
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HOSPITAL EMPLOYEES' UNION
Provincial Office:
2006 W. 10th Avenue, Vancouver BC V6J 4P5
Tel: (604) 734-3431
Fax: (604) 739-1528
Website: www.heu.org

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Introduction

“The work keeps piling up and we’re never listened to. Some of my co-workers have started fighting with each other – there’s lots of nasty rumours and not much cooperation. By the time I get home, I’m so exhausted I just plop on the couch.”

REENA, CLERICAL WORKER, LOWER MAINLAND HOSPITAL

“We’re always afraid of making mistakes and we never get caught up. People are booking off sick because they can’t stand it. I was a minesweeper during the Gulf War, but doing this job is much worse as far as stress is concerned.”

GEORGE, SHIPPER-RECEIVER, FRASER VALLEY HOSPITAL

These HEU members are talking about the most widespread complaint in the workplace today: Stress.

On-the-job stress is out of control, and workers are paying the price in injuries, poor health, anxiety, conflict – and worse.

Workers are familiar with the dangers of heavy loads, messy work sites, toxic substances, and unsafe equipment. Yet these physical hazards are no longer the leading cause of workplace injury and illness. Today, people are more likely to be hurt by poor management practices, badly designed jobs, and top-down power structures.

Employers often minimize stress or treat it as a personal problem. They may offer stress management programs to help staff deal with tensions created by job loss and restructuring. These programs imply that if you change your behaviour, learn a few relaxation techniques, eat better, smoke less, and exercise more, you will feel less stressed. There is proof, however, that stress management makes little difference to the workplace.

“The new world of work

... is one in which work-related musculoskeletal strains, sprains and pains constitute the majority of injuries and the bulk of [compensation] costs.”

INJURY AND THE NEW WORLD OF WORK (1999)

Stress management isn't the solution because stress is not a personal problem. It is a symptom of harmful working conditions. **Stress is an organizational problem that requires an organizational solution.** The only way to stop the damage and reduce the stress is to change the workplace.

Unions and workers are moving to head off this modern-day epidemic. Stress is a leading item on progressive occupational health and safety agendas. In Europe, it is the Number 1 focus of many union campaigns. Workers' compensation boards and other intergovernmental bodies are also concerned.

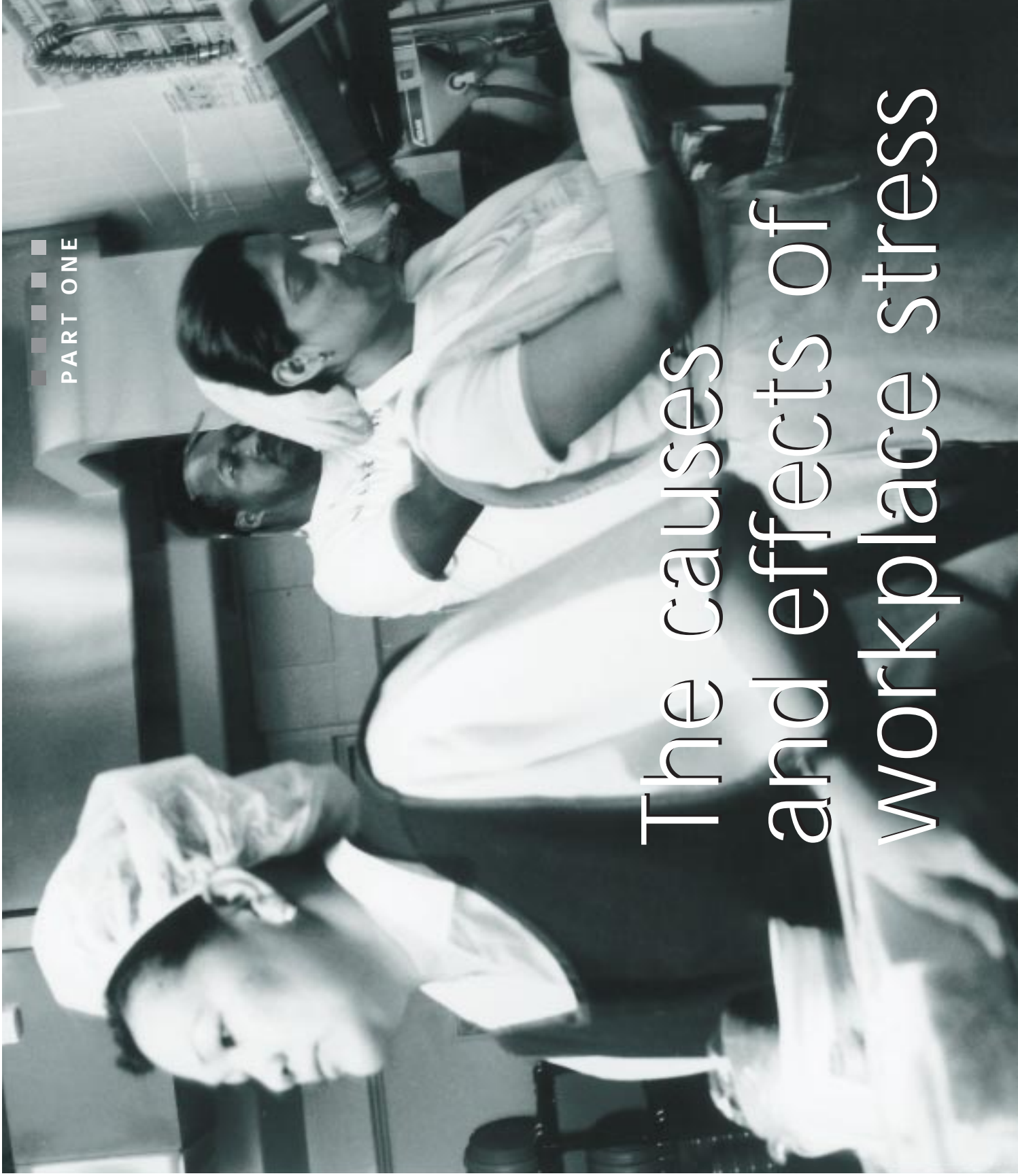
Some employers are finally figuring out that stress is bad for business. They see that stressed-out workers are sicker, less productive, and subject to high turnover. It is bad for health care too. New research proves what is evident on the job: Stressful working conditions can hurt patients and impede their rate of recovery.

Canadians are also realizing that workplace stress is a huge drain on the economy. Between 1997 and 1998, the number of work days that people missed for personal reasons increased by 6 million. Billions of dollars are spent every year on injury, sickness, and absence, many of which are stress related. Individuals and families suffer, as does the country's economic viability.

Workplace stress is preventable and fixable. There is plenty we can do together with co-workers, unions, employers, government, and other organizations to create safer, healthier, and more respectful ways of working.

■ ■ ■ ■ ■ ■ ■ ■ ■ ■
PART ONE

The causes and effects of workplace stress





What is stress – and how are you affected?

Stress isn't supposed to be a problem. In normal circumstances, it is a powerful physiological mechanism that allows people to deal with sudden dangers and immediate demands. The problem arises when you are exposed to constant pressure yet have no way to respond.

Stress is the body's natural reaction to external demands. These demands come in many forms and with many feelings: from life-threatening (a needle stick), to nerve-wracking (a 7-year-old's birthday party), frightening (an angry patient), infuriating (an unfair comment by a manager), thrilling (a surprise visit from a dear friend), anxious (too much work), and shocking (a sudden death).

These external demands are called **stressors**.

Stress: What happens in the body?

When faced with a stressor, the body goes through a series of biochemical and physical responses. The nervous system automatically kicks in. Adrenalin pumps through the bloodstream, causing the heart to beat faster. You may break into a sweat, breathe shallowly, and tense your muscles involuntarily. Every major organ system is activated.

This stress reaction is called the **fight-or-flight** response. It is an ancient survival tool that humans share with other mammals: a means of equipping the body to escape – or confront – an emergency.

How the body reacts to stress

What happens

Body fluids such as saliva are redirected into bloodstream

Airways widen to bring in more oxygen/energy for muscles

Blood pressure and heart rate increase to send oxygen/energy to muscles

Liver releases stored energy

Skin sweats to cool hot working muscles

Cholesterol, fatty acids, and sugar increase in bloodstream to supply extra energy

Protein production decreases; muscle tissue slowly breaks down

Muscles tense up

Calcium discharges from tense muscles

How you feel

Dry mouth, difficulty swallowing

Out of breath – or short, shallow breathing

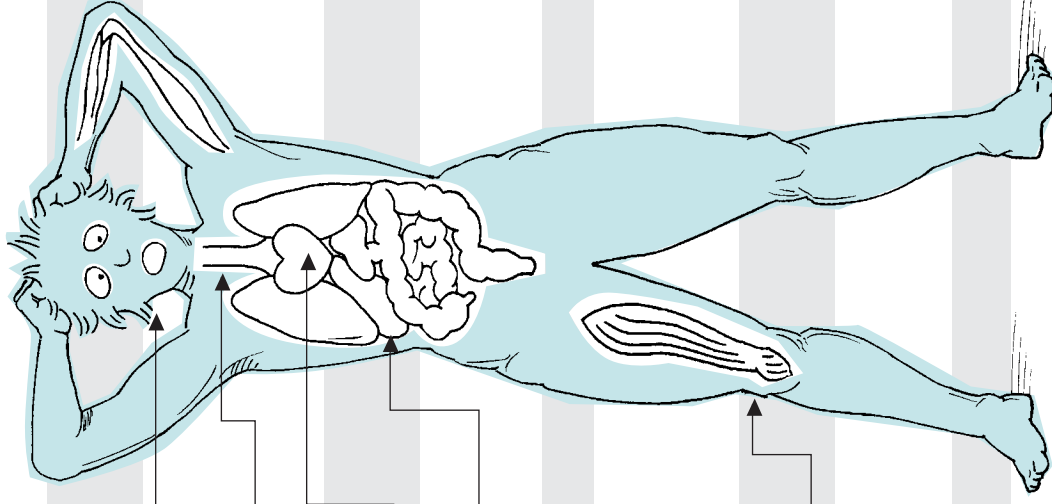
Heart races

Stomach feels “funny,”
i.e., butterflies, knots ...

Sweaty

Tense ... achy ... muscle pain ...
“shaky” feeling

Pins and needles



Normal stress lifts you up

In a normal situation, the flight-or-fight response comes and goes quickly, as does the stressor. Normal stress has three phases:

- facing an immediate threat/demand,
- dealing with the situation, and
- relaxing.

An example is running to catch the bus. Your body goes into high gear as you race down the sidewalk. *Whew*, you made it. Sliding into the bus seat, your whole body relaxes and returns to its normal operating level.

Another example is when you anxiously lie in bed, waiting for your teenager to return from a late-night party. He eventually arrives, you cool down and drift off to sleep.

In the first situation, the stress response was on your side – it strengthened and focused your energies so you could do what you needed to do. In the second, you were able to get a good night's sleep because your anxiety had a specific, short-term cause.

In both cases, stress followed a natural rhythm: It came, it went, you relaxed.

Toxic stress drags you down

Our bodies were not designed for prolonged or chronic stress. When it occurs, the natural stress response is thwarted and serious problems may arise. This is called toxic stress. It has three phases, too:

- facing a demand/threat that doesn't stop,
- having no way of dealing with it, hence
- never relaxing.

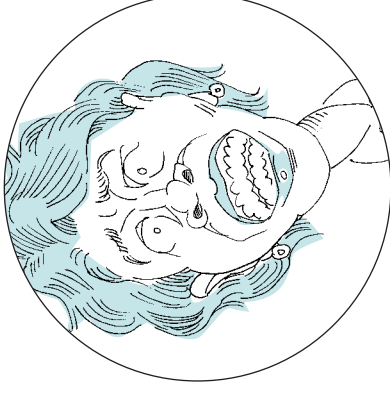
You might find this kind of stress at work: overwhelming demands, little control over the situation, and no relief in sight.

Toxic stress is real. A Canadian physician named Hans Selye was the first scientist to document how stress makes people sick. Since his discoveries in



Warning:

You might get a little stressed reading this, but the news isn't all bad. Many of these health problems will go away if changes are made to your working conditions.



Toxic stress: Physical health problems

- Heart disease and heart attack
- Headaches
- Diabetes
- Ulcers
- Neck and back pain
- Arthritis
- Colitis and irritable bowel syndrome
- Insomnia
- Colds and flu
- Asthma
- Loss of weight and appetite

Toxic stress: Psychological consequences

- Irritability
- Apathy and hopelessness
- Fatigue
- Increased alcohol and drug use
- Depression
- Inability to concentrate
- Low self-esteem
- Eating too much – or too little
- Obsessive thinking
- Sleep disorders
- Conflict with co-workers
- Paranoid feelings
- Withdrawal from social and community activities
- Sexual problems



the 1930s to the present day, medical researchers have compiled mountains of evidence about just how toxic stress can be.

Here are some well-documented impacts. When the body is under prolonged or chronic stress:

- The adrenal cortex releases glucocorticoids (e.g., cortisol), which normally help to regulate the immune system and metabolism. However, if glucocorticoids build up in the body, they can impair your memory, cognitive function, emotional state, and immune system.
- Extra fats and glucose released into the bloodstream are not used up. Fats cling to blood vessels, becoming a risk factor for heart disease. High glucose makes you vulnerable to diabetes.
- High blood pressure and rapid heart beat continue. Blood vessels lose their elasticity, again putting you at risk for heart disease.
- Muscles never fully relax from tension, leading to pain and malfunctioning in the musculoskeletal system. A condition called “sensory motor amnesia” may develop, in which you lose the ability to feel and control some muscles. This condition can lead to chronic pain, fatigue, shallow breathing, and high blood pressure.
- Less blood flows to the stomach and intestines, and the protective mucous lining of the gut becomes thinner. You become more prone to ulcers.

Toxic stress attacks the weak point in each person’s health defences. One person may get an ulcer; another a chronic neck ache, while another may suffer a heart attack.

The harm to the immune system is significant. In 1998, an important U.S. study showed that people with chronic stress were three to five times more likely to catch a cold (viral infection) than others. The same study found that people who faced a single major stressful event in a year were not especially vulnerable. The critical factor is how long the stress lasts.

Toxic stress affects your mind, too

What happens when you find yourself in a stressful situation, yet can neither fight nor run? (After all, neither option is acceptable on the job.) A common reaction is to suppress feelings and keep on working. But even when stress is internalized, you continue to experience its chemical, physical, and mental effects.

The psychological impacts of prolonged stress vary from person to person – and are also very real. Some people start to eat and/or drink a lot. Some people sleep too much or not enough. Others become weepy or have a hard time concentrating on anything. Anxious or angry feelings can lead to fatigue, frustration, and apathy. These emotions may erupt in conflict with co-workers or in rage at yourself. Workplace stress can also rob you of energy to meet your partner's and/or children's needs. **Stress takes a heavy toll on families in anger, impatience, and exhaustion.**

Physical and emotional effects can combine and snowball. A constant pain in the jaw can make you feel depressed. A sense of hopelessness can leave you prone to colds and flu. Stress drags down your ability to weather the give-and-take of life.

Stress causes injury and disability

Toxic stress doesn't just hurt your health, it also makes you susceptible to injury.

Researchers have found many links between stressful work and injured workers. Where stress levels are high, injury levels are also high. Stressed-out workers get hurt more often handling equipment, carrying heavy weights, moving patients, and using computers. There are two interrelated reasons:

- Working conditions that cause stress also cause injuries.
- When you are overworked, under pressure, unsupported, and distracted by anxiety – i.e., stressed – you are vulnerable to injuries.

Overtime is a real killer

Overtime is a huge problem in the health care sector. Instead of creating more full-time jobs, employers regularly demand overtime. Yet there is a documented relationship between number of work hours, stress-related health problems, and workplace injuries. A 1995 report from the Department of Health in Britain concluded that "working more than 48 hours per week doubles the risk of coronary heart disease."

More and more Canadians are working long hours, and overtime is taking its toll. In 1999, Statistics Canada reported that people who work more than 41 hours a week tend to smoke and drink more, gain weight, and exercise less than they did when working shorter hours. Why? Researchers believe they are trying to cope with the stress of too much work.



Re-engineering can hurt patients, too

In a groundbreaking study of a large Ontario teaching hospital, staff reported "significant increases in depression, anxiety, emotional exhaustion and job insecurity." The workers were tracked over a two-year period (1995–97) in which their facility underwent extensive re-engineering, downsizing, and other cost-cutting measures.

The hospital staff also believed there was "a significant decline in ... patient care" over the two years.

Divide and conquer: Is stress driving us apart?

Workplace stress makes some people turn on others. Recognize any of these symptoms?

- Getting mad at staff in another department because their work was shifted to yours.
- Accusing a co-worker of "not doing their share."
- Being afraid to speak out about work problems because co-workers may abuse or reject you.
- Talking behind someone's back, or starting rumours.

According to the International Labour Office, "Of all the personal factors related to the causation of accidents, only one emerged as a common denominator: a high level of stress at the time the accident occurred ... **A person under stress is an accident waiting to happen.**"

Stress-related injuries are a huge problem for workers and for the economy. Today, stress-related disabilities make up 26 percent of long-term disability claims. In 1998, workers in B.C.'s South Fraser Health Region lost 24,977 days to injuries, a 73 percent increase over the previous year. This figure is the equivalent of 96 employees absent for a whole year. The reasons? Long hours, work overload, short staffing, overtime, difficult labour relations, and an aging workforce.

And leads to low motivation and apathy

Studies also show that people under intense stress can lose their motivation to work or learn new skills. Your ability to be creative may diminish, along with the confidence to risk new things. This affects not only your job performance, but your capacity to enjoy and participate in community life. In Scandinavia, researchers discovered a link between high-stress jobs and political apathy/social withdrawal. In short, **toxic stress leads to burnout and passivity.**

Everyone suffers when this happens. The worker is cheated out of a satisfying job and an optimistic future. The employer can no longer draw on the full talents of a valuable employee. And society is deprived of an engaged, active citizen.

Stress creates conflict among workers

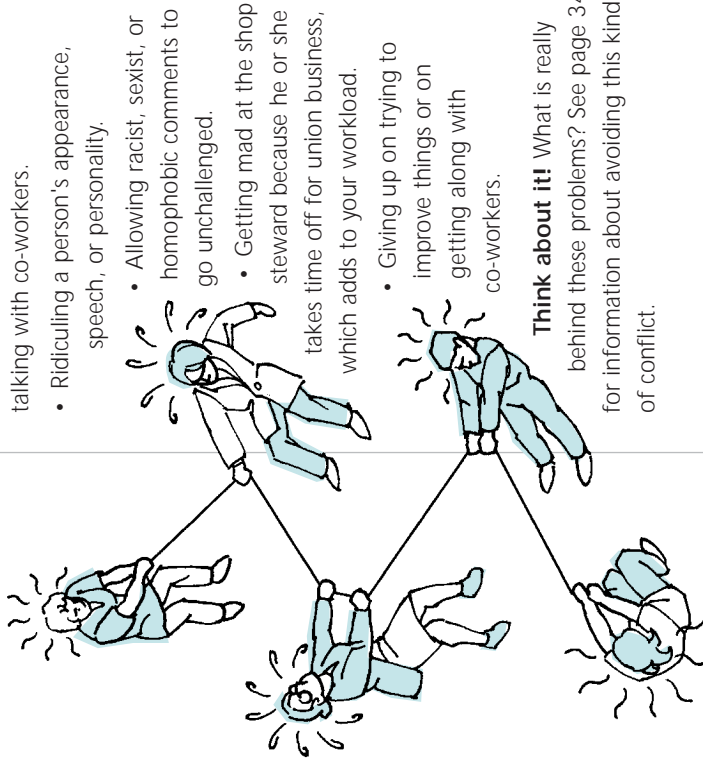
Stress often disguises itself as anger, so it's no surprise that worker-to-worker conflict is on the rise. People talk about the atmosphere of mistrust and hostility in facilities where they are overworked or at the mercy of poor management. Rather than pulling together, **workers start to feel isolated, resentful, and powerless.**

People act out their stress in different ways. Some are abusive to co-workers. Others get angry with the union – shop stewards, servicing representatives, local executive – because working conditions are so unpleasant, even though the union and co-workers are not to blame.

In some circumstances the anger is understandable. You may have been bumped from your job due to restructuring, or you may have waited a year for a grievance to be resolved. Nevertheless, worker-to-worker conflict is a dead-end street that masks the real problem: Toxic stress.



- Blaming your supervisor for work overload.
- Sabotaging a co-worker's job to get him or her in trouble.
- Making assumptions about someone's relationships at work and at home.
- Believing a co-worker has more power or privileges than he or she does.
- Becoming withdrawn and uncooperative – never smiling or even talking with co-workers.



Who is most at risk – and why?

Everyone knows that high-powered executives, brain surgeons, air traffic controllers, and senior managers have awfully stressful jobs. Their work is certainly much more stressful than a clerk's or a labourer's – right?

Wrong. In fact, medical research proves the opposite.

The Framingham Study was an eight-year project that compared the rate of heart disease in women in different jobs. It found that **clerical workers were almost twice as likely to develop heart disease as women in managerial, professional, service, or blue-collar positions.**

The study discovered that a worker's inability to express anger or frustration was a strong predictor of whether she would develop heart problems. This was especially true for clerical workers, who usually do not have enough control over their job to safely express opinions and feelings. This lack of control, and the stress it creates, was making them sick. Other stressful factors included having a non-supportive boss and little or no job mobility.

The Framingham Study revealed the connection between health and types of work. Most importantly, it uncovered the connection between health, stress, and job status.

The tango of health and wealth

Health is a complex matter. The World Health Organization defines health as a state of physical, mental, and social well-being, not merely an absence of disease and injury. Well-being includes self-esteem, job satisfaction, a sense of control over your life, and security. It means being able to

Less choice = more stress

"Administrators can insulate themselves from the problems with patient care. We don't have that choice."

CARE AIDE IN A HOME CARE ORGANIZATION



Stress often wears a dress

In the late 1980s, a U.S. study classified occupations according to whether they were high- or low-strain jobs.

Professions with high social status – such as doctor, lawyer, judge, engineer, manager, and executive – were classified as “active jobs” with lower strain. They face heavy demands but are able to make decisions about the conditions and flow of their work lives. These jobs are traditionally held by men.

Occupations with low social status – such as assembly-line worker, data processor, health care support staff, front-line service worker, clerk, waitress, and cook – were classified as higher strain. They face many demands yet have little decision-making power over how they do their work. These jobs are usually held by women.

Moreover, women report higher levels of stress than men due to family obligations and inadequate social support.

participate in your community, enjoy the fruits of society, and pursue personal and collective dreams.

There is a strong relationship between income and health. In Canada and elsewhere, statistics prove that rich people, on average, live longer and enjoy better health than middle-class people, who are themselves healthier than working class and poor people. University-educated people are healthier than those with high-school diplomas; employed people are healthier than the unemployed and so on. Our society has a hierarchy, and where you fit in the hierarchy affects your health. According to Health Canada’s Report on the Health of Canadians (1996), “Evidence suggests that living and working conditions are perhaps the most powerful influences on health.”

The workplace also has a hierarchy. And studies are proving that toxic stress is the ingredient that makes some employees get sick more often than others.

Unequal – and unhealthy – at work

The Whitehall Study was a famous research project that established a clear link between social hierarchy, stress, and health in the workplace. It tracked over 18,000 male English civil servants for nearly two decades. Everyone was studied, from secretaries and filing clerks to senior managers.

The Whitehall Study found that the lower a worker’s position in the hierarchy, the greater his likelihood of suffering from angina, chronic bronchitis, heart and circulatory problems, and other stress-related conditions. The blood of men in lower occupational groups had high levels of fibrinogen, a substance associated with stress and heart attacks. The stress response of clerical and manual workers lasted longer than senior administrators. (As we’ve seen, a prolonged stress response weakens the immune system, giving rise to disease.)

The survey also found that the death rate for men in clerical and manual jobs was 3.5 times higher than for senior administrators of the

same age (between 40 and 64 years). The data was adjusted to take into account factors like smoking, blood pressure, and diet. Even so, the result was the same:

“If a clerk and a manager both smoked 20 cigarettes a day, the clerk was more likely to die of lung cancer.”

The Whitehall Study found that people at the low end of the job ladder felt little control due to their rank and to the demands of the job. A 1998 Statistics Canada study on population health revealed a similar pattern: work stress was relatively high in service and blue-collar occupations, and low in administrative and professional categories.

The message of these studies is clear: Employees are at risk when they have jobs with high demands, yet have little control over their work environment.

Tools for talking about stress and work

Researchers have created useful terms to describe these findings. People are under a lot of toxic stress when they have a high-strain job. **A high-strain job is one where you face many demands and have little control and support.** Mai-Lynn the receptionist is a good example (please see “A Tale of Two Jobs”). She can’t control her noisy work area, the number of people and requests, the sudden disturbances – and she has nowhere to go for help or to complain.

In contrast, **a low-strain job is one where you face demands and have a good measure of control and support.** Jeanie the counsellor is an example. Her work is challenging, but she is able to control her schedule, make clinical decisions, take breaks, express her opinion, and get support from colleagues.

The great stress divide between high-strain jobs and low-strain jobs isn’t just income or status. It lies in the nature of the work and the working conditions. For example, you could be a clerical worker with high demands and low control, yet have a manager who is supportive and an

More responsibility, but less toxic stress

“When my boss is away and I take over the kitchen, I have twice as much work – and half as much stress. I just go out and do what needs to be done.”

HEU SUPERVISOR IN A
FOOD SERVICES DEPARTMENT

A Tale of Two Jobs

Mai-Lynn is the receptionist and secretary at a large alcohol and drug counselling centre. She works in an open space and is exposed to everyone who walks through the door.

Mai-Lynn has little control over the many questions and demands directed at her by counsellors and clients. She is expected to respond immediately and politely to all of them. Occasionally she is confronted by a violent or abusive client, whom she must try to calm down or usher out.

Mai-Lynn does a really good job but almost never hears a kind word. She is not invited to staff meetings – someone has to answer the phone. She is often blamed for problems. Mai-Lynn hears

counsellors say "It must be a clerical error" when they placate an upset client.

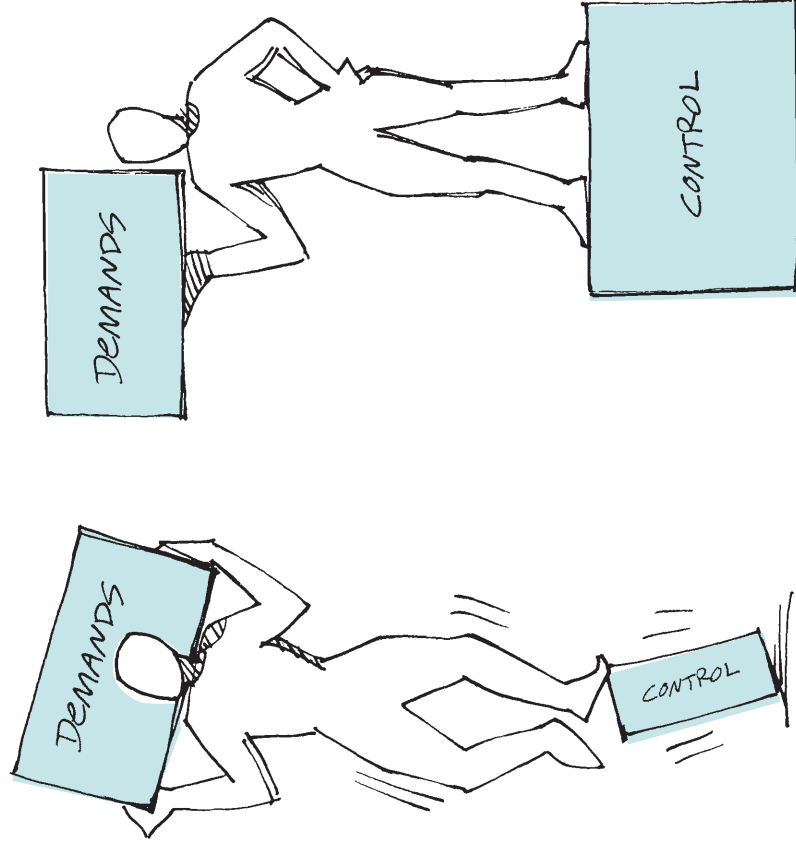
Jeanie is a counsellor at the centre. She has a private office and makes appointments to see clients at regular intervals. Many of her clients live in very painful circumstances, but Jeanie manages to take a 15-minute break between some appointments. Her room is quiet with a nice view.

She is invited to board meetings to give her opinion about the running of the centre, though the board doesn't always pay much attention. Jeanie and the other counsellors meet every week to discuss clients, and they sometimes strategize together – and laugh – about the board and other problems.

Mai-Lynn and Jeanie: Who do you think has the more stressful job?

employer who is respectful. Your job will be difficult, even moderately stressful, but it won't be a high-strain job.

Most HEU members work in high-strain jobs. Care aides, LPNs, freight handlers, clerical staff, food service and laundry workers, security technicians, and data processors all have demanding jobs with very little control over the work. And the strain is getting worse.



High job strain:

When you handle lots of demands yet have little control or decision-making power over your work.

Low or moderate job strain:

When you handle lots of demands but have sufficient control over your work.

What's behind all this stress?

People often think their job is stressful because they have too much work, or they're fighting with co-workers, or their manager is unreasonable, or some individual has poor coping skills.

The truth is, job stress is not caused by individuals or by personal qualities. It is rooted in the organization of the workplace. This phrase refers to structural issues such as:

- Who has the power, authority, and responsibility for a job?
- What degree of control and decision-making do workers have over their work?
- How repetitive/meaningful/challenging are tasks?
- What kind of relationship do workers have with supervisors and co-workers?
- What are the physical demands and hazards of the job?
- What is the nature of the organizational culture?
- What personal threats do workers face?

These elements can be grouped into four categories: job design, physical environment, organizational culture, and violence and discrimination. By understanding how these pieces fit together, we can figure out how to make the workplace less stressful.

Job design

Job design refers to how many **demands** you face, how much **control** you



HEU members: All stressed up

"We have staff shortages all the time. Before the cuts we were one staff to five residents. Now it's one to seven. And we have the highest injury rate in the region."

RAMINDER, CARE AIDE IN A VICTORIA FACILITY

The epidemic of workplace stress is relatively new – and growing. The health care sector provides an excellent case study of the roots of this suffering.

Since the early 1990s, health and public services in Canada have been reshaped in countless ways: squeezed, shrunk, frozen, stretched, merged, and terminated. But the demand for health care didn't diminish, so the employees left standing are working harder, longer, and with fewer resources.

Although health care reform in B.C. did not produce the harsh cuts that hit other parts of Canada, workers here are still under pressure to 'do more with less.' Many employees have seen almost nonstop restructuring, reorganizing, and re-engineering.

How are HEU members affected by

overwork, reorganization, and new management techniques? In two words: increased stress. Some workers have had their job classification downgraded. Some face heavy work overload due to shortstaffing and/or increased use of services. Others are dealing with new computer systems that are buggy or inefficient. Often these problems are aggravated by poor management practices.

The stressful environment has led to increased rates of injury, illness, and sicktime among all categories of HEU members. The health care sector itself is the most injury-ridden in B.C., with a 1996 injury rate 51 percent higher than the provincial average. In terms of injuries, health care is more dangerous than logging.

HEU members who work in direct care – licensed practical nurses, care aides, orderlies – have by far the highest injury rates of any group in B.C.: 2.5 times higher than the health sector's average, and more than 4 times higher than the provincial average.

have, and how much **support** you get. (This is also the formula for measuring job strain.)

Let's consider one HEU member's job:

“We are their family”

Patrice is a care aide in a Lower Mainland long-term care facility. Her patients include older people with dementia, younger people with MS, and some mentally ill patients with serious physical disabilities.

Some of the newer patients have very high needs. Yet nursing staff numbers have not changed, and care aides who leave are often not replaced. Patrice has seen a tremendous increase in her workload. She now finds it much more difficult to provide good care and support to residents.

“When you are working short and running just to keep up, you do not have the time to stop and talk,” she says, “or do the little extras that make life bearable for people living in long-term care facilities.” She doesn't feel supported by her supervisor and often finds herself isolated from co-workers, who are also running just to keep up.

Patrice's opinion about her patients' needs is rarely sought, even though she is the only regular human contact for many residents. “Some of them get no more than two visits a year,” she says. “We are their family.”

Job demands are psychological and physical. In Patrice's case, she faces the demand of having little time to spend with isolated people who are in great need of emotional and physical care. Some patients are easily riled, so she also faces the threat of violence. She doesn't always have time to take precautions when lifting patients; shortstaffing also means she is constantly on her feet.

Job control is measured by how free you are to make decisions and by how many skills you are allowed to use and develop. Job control also

relates to how many repetitive and/monotonous tasks you do. Patrice has little say in organizing her work, and her opinion is never sought on patients' concerns. She feels underutilized, which makes her job less than satisfying.

Job support refers to the quality of emotional, social, and intellectual interaction you have with co-workers and supervisors. Job support has a spiritual dimension: sharing life's joys and sorrows with co-workers and patients, and honouring the value of each person. Patrice is in a low-support workplace. She has almost no time to speak with co-workers or residents, and her supervisor pays little attention to what she says or needs. This lack of support is disrespectful – and depressing.

Physical environment

The physical work environment can be a source of intense stress, especially if you are unable to work safely, comfortably, and efficiently.

HEU members often do demanding work while in crowded or awkward positions, with continuous exposure to noise, chemicals, and dirty or contagious materials. Health care workers must be on constant guard against potential health risks, which in itself is a source of stress.

The following physical hazards can cause strain, injury, sickness – and stress:

- poorly designed work stations
- noise
- vibration
- repetition
- awkward posture
- poor ventilation
- manual handling
- patient lifting

Musculoskeletal injuries

A musculoskeletal injury (MSI) is an injury or disorder of the muscles, tendons, ligaments, joints, nerves, blood vessels or related soft tissue that may be caused or aggravated by work. MSI includes sprains, strains, and inflammation; repetitive strain injuries (RSI) are a specific kind of MSI.

MSIs are epidemic. They make up 60 percent of workers' compensation claims in Canada. In 1996 over 70 percent of injuries reported by HEU members were MSIs. Our rate of MSI-related claims and lost time is far above the provincial average.

European researchers were the first to document the link between workplace stress and MSI (also known as MDI, musculoskeletal disorder). A 1993 Dutch survey concluded that MSIs were associated with monotonous work, high-demand workload, time pressure, low control over the job, and lack of social support. Today, dozens of studies prove that work-related musculoskeletal pain and injury are caused by stress and physical workload.

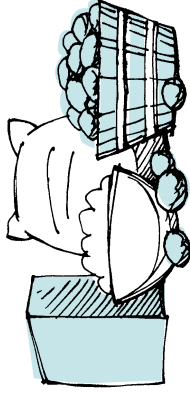
In a nutshell, a stressful job can produce upper-body tension, and the accumulated tension can lead to an MSI.

Job design is a strong factor in MSI.

A 1995 Swedish study of female nurses and nurse's aides showed that upper-body injuries (shoulders and neck) were

associated with an individual's lack of social support at work. Other European studies of nurses and home-care workers also found a link between MSI and "lack of control" and "lack of social support."

SURE-FIRE MSI RECIPE



LOTS OF DEMAND



1 TSP OF CONTROL



AND A PINCH OF SUPPORT

R-E-S-P-E-C-T

Respect is a core feature of a healthy organizational culture. Respect means:

- You have the power to make decisions about your work.
- Your skills and knowledge are valued and fully utilized.
- The realities of your job are acknowledged, and your needs and concerns acted upon.

- inadequate lighting
- chemical hazards
- infectious diseases
- lack of equipment

An ergonomically designed workplace attempts to reduce/eliminate the hazards listed above. Ergonomics looks at the relationship between people and their physical work environment. Ergonomics tries to maximize productivity by designing work areas and equipment to fit the worker, rather than by forcing the worker to fit unsafe, inefficient designs. It is a sound approach that benefits both employees and employers.

Organizational culture

Every workplace has a culture: the values and practices that reflect the organization's commitment to its workforce, clients, and mandate.

Organizational culture is a hot topic in some workers' compensation circles. Why? WCB claims are very high in North America, despite huge investments in workplace health and safety in the last two decades. This fact prompted researchers to ask: What does a job site need besides safe equipment, clean environment, and well-informed staff? The answer: An organizational culture that fosters positive labour relations.

A 1993 U.S. study discovered a link between high workers' compensation claims and workplace strife (measured in grievances, absenteeism, and turnover). Researchers found that "low claims employers only report 55 percent as many grievances as high claims employers, and they have annual turnover rates about one third lower." The study suggests that **sites where workers have few quarrels with management and high job satisfaction – in short, work sites with good labour relations – are safer places to work.** The researchers advised managers that "the subjective working environment can have a very significant influence on workers' compensation claims."

Recent Canadian studies analyzed the role that organizational culture plays in injury rates. Along with obvious ingredients – effective joint health

and safety committees; clear delegation of responsibilities; ongoing safety audits; and a concrete commitment by senior management – the following factors are known to foster safer workplaces:

- workers have decision-making powers and are encouraged to use their initiative
- positive labour relations
- low turnover (i.e., there are experienced workers with long seniority)
- clear job descriptions that match the real job

These studies prove that injury and illness rates are directly tied to how vigorously an employer promotes the overall well-being and job satisfaction of workers.

Violence and discrimination

Violence is a huge problem for health care workers, who make “approximately 10 times as many claims for violence-related injuries per capita than the work force in general.” The problem is growing. In the 1990s, B.C. workers in continuing care saw a 10-fold increase in their disability claims due to violence on the job. **Care aides have a higher risk of injury from aggression than B.C. police officers.**

A recent study of a Vancouver emergency department uncovered widespread abuse by patients and visitors. Over 60 percent of staff reported that verbal abuse, physical assaults, and threats were more frequent and more severe than before. The researchers stated:

“Violent incidents have a significant long-lasting effect on health care workers. Lower morale, anger, loss of confidence, burnout, time off work, disability and change in job status have been reported.”

A study entitled Gently Into the Night: Aggression in Long-Term Care found that women workers were the victims in 92 percent of violent incidents. Between 1992 and 1996, LPNs and care aides faced 74 percent of aggression directed towards staff. Most violent acts were by older male

Hospital workers and MSI

A groundbreaking study of MSI in a B.C. hospital confirmed what many of us suspected: work overload, low control, and little support from supervisors is causing injuries among HEU members.

The study looked at 4,020 workers in an acute care hospital in the Lower Mainland between 1992 and 1995. It measured personal and ergonomic factors (e.g., age, seniority, how often/long a worker was exposed to repetition, force, awkward postures, vibration, contact stress, manual handling, and patient lifting) and work organization factors (e.g., job control, job demands, support, pressure, and workload).

The study found:

- Employees in direct care, security, and housekeeping had the highest rates of MSI symptoms and WCB claims.
- These rates increased with the worker’s exposure to ergonomic stressors and low levels of control and support.
- Workers in low-support, low-control jobs had a three- to four-fold increase in upper-body injuries and WCB claims, compared with people in high-support, high-control jobs.
- People working shortstaffed (during periods of high sicktime) had a two-fold

increase in injuries and WCB claims, compared with people working during periods of low sicktime.

- Women had higher rates of upper-body MSI than men.

The study recommended a broad stress prevention strategy with educational, ergonomic, and job design components. Specifically, the study proposed:

- ▶ Facilitated discussions among management, supervisors, and workers to determine how workers could have some control over their work environment, at both the job level and within the organization.
- ▶ Additional staffing during critical levels of workload.
- ▶ Ergonomic improvements, e.g., mechanical lifts, redesigned work stations, and job variety.



patients with dementia. In such environments, even the threat of violence is a source of stress.

Discrimination and prejudice are other stressors. Health care workers may be subjected to subtle and not-so-subtle forms of racism, sexism, homophobia, and other harmful attitudes. Harassment can manifest as name-calling, jokes, slurs, insults, threats, rudeness, and written or physical abuse.

Research shows that women who are sexually harassed at work often have stress-related symptoms such as irritability, anxiety, insomnia, nausea, digestive problems, loss of self-esteem, and severe depression. Again, just the threat of harassment is stressful to body and spirit.

Beyond the job

Jobs don't happen in a vacuum. Social and economic conditions in the community and country also impact on personal well-being, workplaces, and families. These larger forces create and magnify stress on the job.

Work-family conflict It's hard to juggle a job and a family. Mothers and fathers often worry about child-care arrangements. Caring for a sick kid is stressful enough without having to scramble for time off or a babysitter. Single parents may face additional stresses such as an inadequate income, exhaustion, difficulties doing overtime, and unexpected shift changes. Many women are the main caregivers for their elderly parents. Some workers bear heavy responsibility for their extended family. This is especially true if you have relatives living in another country or in another part of Canada, and your pay cheque is needed to support more than one household.

These stressors are real. The Framingham Study found that **married clerical workers had at greater risk of coronary heart disease than single women without children**; the risk rose with the number of children.

Many Canadian employers don't consider it their responsibility to take

account of their employees' family obligations. The situation in Europe, however, is much more progressive. European workers often enjoy decent family and parental leave, flextime, and other employment standards that respect and enhance their ability to raise a family.

Job insecurity Although HEU succeeded in negotiating job security protection in recent contracts, the menace of joblessness still looms over health care personnel. Workers are reluctant to leave a stressful job when other opportunities are few and far between. Employment Insurance is often inadequate or unavailable, even if you quit for a legitimate reason. Social assistance is harder and harder to get, even for emergencies and brief transitions. This lack of security affects your energy to deal with a high-stress job.

Research shows that when workers are afraid of losing their jobs, they have more accidents, strain injuries, and sick leave. After the Finnish city of Raisio downsized its municipal workforce, accidents increased three-fold, MSIs increased six-fold, and sick leave increased between 16 and 31 percent (depending on the job category).

Health care workers in Quebec saw their own health deteriorate when the province went through major restructuring and program cuts. A survey of 100,000 health workers found that 25 percent had suffered a "serious health problem" in 1996 and 1997. Their workers' compensation claims rose from 13,386 to 20,395 in the same period.

And there were 18 suicides. In every case, the worker had told friends that he or she could no longer handle the job.

Isolation Canadian society is in constant flux, changing in ways that are both progressive and problematic. On the positive side, many people are no longer tied to outmoded and rigid social roles. Women work in previously male-dominated occupations, and many men enjoy a more active role as parents. On the other hand, we often seem disconnected from one another. People may live far from their extended family; many don't even know their next-door neighbours.

It is well known that individuals become vulnerable to illness when

People who hang together, thrive together

A famous study of an American town showed the connection between a strong community and healthy individuals. In the 1950s and 1960s, people in the largely Italian immigrant community of Roseto, Pennsylvania, were half as likely as other Americans to die of heart disease. The Rosetans ate plenty of very rich food and smoked heavily. What was their secret?

The answer seemed to lie in their community and home life. Several generations lived together, with relatives supporting each other through illness and unemployment. Most Rosetans shared the same economic status, belonged to community groups, and socialized together. They were involved in each other's lives, in good times and bad.

Conditions started to change in the 1970s. People moved away. Some became wealthy and built large houses on the outskirts of town; they walled off gardens and no longer asked relatives to move in. By 1985, Roseto's heart attack rate was the same as in neighbouring towns. The main thing that had changed was the degree of cohesion in their social life.

they are isolated and/or burdened by economic insecurity. During the twentieth century, Canadians built a social safety net to deal with problems created by modern social and economic conditions. Today, many programs and services are under attack. The safety net is in rough shape, and it's easy to feel exposed and unsupported.

A word to the stressed

When you're under a lot of pressure, it's hard to imagine finding the energy, time, or mental concentration to tackle anything new. If this is your situation, start with a small step. Talk with a co-worker or friend about this guide. Or try something bigger, such as taking a break from work.

The important thing is to start somewhere.


Coming up...

The next part of this guide looks at how we can prevent and reduce workplace stress by:

- moderating stress in our own lives
- organizing to change working conditions
- developing anti-stress campaigns within the workplace
- joining with other organizations to fight for regulatory measures that address the problem of workplace stress



What can we do about stress?



Self-care and mutual support

People need to work together to get at the roots of job stress. But it's also essential that you learn how to reduce the impact of stress in your own life. Self-care and mutual support are the keys.

Say goodbye to self-blame

Workplace stress is like pollution. It contaminates the atmosphere and makes people feel bad. The smog of stress makes it hard to pinpoint the real cause of all the tension, anger, and unhappiness. You may blame yourself and start doubting your ability to do the job. You may end up fighting with co-workers. **It's very important to avoid falling into these guilt-and-anger traps.**

Popular attitudes towards stress often encourage a blaming attitude. People talk about the need to have good coping skills in this hectic, downsized world. Employers give stress management courses that "teach" their overwhelmed employees how to handle the job better. The secret to living with stress, they say, is to practise relaxation techniques and develop a healthier lifestyle. If you don't reduce your stress symptoms, or if you fall back into old habits, it must be your own damn fault.

In a stress-filled workplace, people may be accused of being lazy or incompetent. There may be heavy pressure from managers and co-workers not to take time off for stress-related health problems. If you succeed in taking a break, you may worry about being stigmatized and resented when you return.

These attitudes reflect society's individualistic view of the world: the belief that each of us is personally responsible for our successes and

Did you hear the one about the "disorganized" employer?

When a worker complains about being stressed, some managers are quick to blame – the worker. Common criticisms are:

- "You're just disorganized ..."
- "You've got problems at home ..."
- "You're spending too much time on union business ..."
- "You need better coping skills ..."

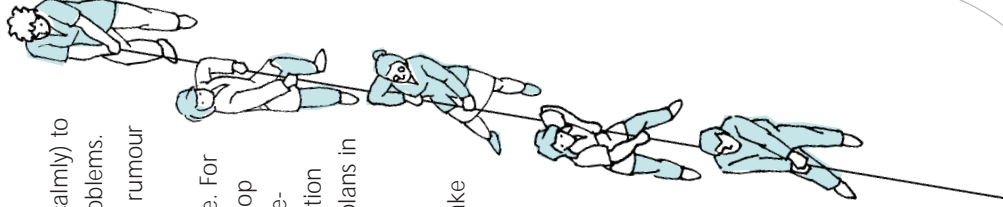
The common denominator? It's your fault.

Pull together, don't fall apart

Conflict among workers is often caused by stressful working conditions, but gets fuelled by misunderstandings, fear, and pettiness. People become really angry at each other without bothering to learn the facts or talk over their concerns.

It takes courage and goodwill to rise above anger – plus communication skills. Start here:

- Talk directly (and calmly) to co-workers about problems.
- Check out what is rumour and what is fact.
- Get the big picture. For example, ask your shop steward or local representative for information about restructuring plans in your organization.
- Support your co-workers' efforts to take care of themselves.
- Show respect to everyone – and encourage others to do the same.



failures. Yet your response to a stressful job is not a private matter that can be controlled by sheer will power – it is your body's automatic reaction to unhealthy circumstances. Coping skills and relaxation techniques will not make stressors go away. Your situation will improve only when conditions in your workplace improve.

Work with co-workers, not against them

You may also blame co-workers or get mad at them for stressful conditions. Blaming a colleague is just another form of self-blame. It finds fault with individuals rather than with structural problems such as overtime pressure, unclear job duties, restructuring, and nonexistent support.

Although you and your co-workers are in the same boat, you may have very different personal reactions. Take time to talk together. Ask about each other's job situation and about stress at work and at home. Be positive about the efforts people are making to look after themselves.

You have a common interest in diffusing worker-to-worker anger if only because you need each other to demand a healthier workplace. The anti-stress strategies in this book depend on solidarity.

Self-care

“Your body is your life. If you don't take care of it, no one else will.”

HEU MEMBER AT THE 1998 NURSING TEAM CONFERENCE

Self-care means making a conscious decision to take care of yourself, especially in situations that may be harmful. For health care workers, self-care can be extraordinarily hard to do. You are dedicated to giving the best possible service to patients, even in onerous circumstances. As a worker, you have learned to put your own needs second. If you are a woman, you may have learned to put your own needs last. It's a challenge to make 'me, my body, and my health' a priority.

When you are overwhelmed by workplace stress, it's difficult to figure out what to do. Sometimes the best way to care for yourself is to take time off. A

break from work can help you regain the clarity and energy needed to tackle new things.

Self-care has three basic steps:

- tuning in to your body,
- recognizing what is good for your body, and what is bad, and
- doing things that will make you feel better.

Even a small amount of self-care can strengthen your immune system and make you feel better. The more time you spend really 'in' your own body, the more you'll be able to listen to its wisdom (also called gut feelings). When you know what your body needs, it's easier to say no to harmful things. You'll learn to set limits, to ask for what you need, and to demand changes.

Mutual support: An essential part of healthy work

Human caring and support are just plain good for your health. And lack of support is a well-documented stressor.

'Support' refers to interpersonal relationships that give you positive energy and a sense of belonging. We've already seen that people who live in a supportive community have stronger immune systems than people who don't. Support at work is also essential. It satisfies the human need for contact and companionship, and can actually decrease job strain. Researchers say that co-worker and supervisor support may be twice as important as family support in reducing the impact of a stressful job.

Co-worker and union support Support from co-workers comes in different forms. **Anything that breaks isolation and shows mutual respect is helpful.** You can simply thank one another for the good work you are doing. You can acknowledge the pressures each person is under. You can listen sympathetically when a co-worker has a problem. When problems multiply, you can call a meeting to discuss what to do together.

The union can also be an important source of support, from activists to shop stewards, local executive, servicing representatives, and provincial



Self-care has many rewards ...

Feeling relaxed and comfortable at work should be possible – at least some of the time! Stretches, good posture, relaxation techniques, exercise, healthy diet, dancing, walking, and other activities that are fun and joyful – all these will help you feel better. For example:

- Breathing consciously and deeply can relax and energize you. Take a few moments to breath consciously when you feel stress building up.
- Stretches can relieve pain, fatigue, and tension.
- Correct methods of sitting, lifting, and keyboarding can prevent injury.
- Running, walking fast, or working out can release endorphins (your brain's own muscle relaxant and pain killer).
- Meditation and other relaxation techniques can calm and balance your nervous system.

The working wounded

Coming to work when you're sick is a risk factor for injury. You may do this when management tightens up the sickness absence policy and/or doesn't backfill. You drag yourself into work, fearing the consequences of staying home. In this weakened state, you are at increased risk of injury or repeat injury, even long-term disability.

Caught in this stressful cycle, you can become one of the 'working wounded.'

Take time, take care

Sometimes people feel self-conscious, guilty, and even 'stupid' about doing stretches, deep breathing, and other kinds of self-care at work. Negative emotions may also arise if you try to rearrange your work area to improve the ergonomics.

Don't let these feelings stop you.

Talk to co-workers about the importance of taking your bodies seriously. And encourage one another to take time to take care – it really helps!

office. By getting more involved in the union, you will find – and give – the support needed to change stressful working conditions.

Supervisor support A job is less stressful when supervisors have a supportive attitude and take action to back up their staff. Supervisor support means: 1) listening to workers; 2) giving credit for people's skills and problem-solving abilities; and 3) responding in a timely and direct manner to concerns. One group of HEU members described tangible supervisor support in these terms:

- including you in the team (at meetings, etc.)
- dealing with problems when you raise them
- helping you to get the job done
- acknowledging (and helping) when there is work overload

Caring for stressed workers

Unions have two main aims when negotiating about stress:

- preventing stress-related health problems from occurring in the first place, and
- ensuring that members suffering from stress are cared for and represented.

Any person who suffers from workplace stress deserves to be helped. For this reason, you have a right to use support groups, counsellors, Employee Assistance Programs (EAPs), and other workplace and community-based services.

Many employers know that stress is a huge issue for their staff. They are often willing to invest in counselling programs, stress and anger management courses, and EAPs. Unfortunately, these one-to-one approaches are not designed to prevent or eliminate the causes of workplace stress.

The International Labour Office (ILO) studied various programs and

concluded that most counselling and relaxation programs were ineffective in improving the work environment.

The ILO's research also showed that **when unions developed and/or participated in counselling programs, there was more success in changing the stress-producing situation**. Counsellors in these programs were trained to look at the sick workplace, not just the stressed-out worker. Part of our challenge is to insist that workplace programs have genuine union involvement.

Counselling and courses have limited benefits, but do offer some relief. A decent program can help you to feel stronger, which means you will be better equipped to fight for healthy working conditions.



A stretch a day ...

At a long-term care facility in Nelson, B.C., the entire staff do a 10-minute stretching session together every day. Workers are given time off for these mandatory exercises, which are led by a different person each day. The joint health and safety committee proposed the sessions, and the manager agreed.

How do workers feel about these group stretches? "I can't get by without it," says one worker.

Changing the work, changing the workplace

The only way to really reduce toxic stress is to change the work and change the workplace.

The keys are a healthy job design and a democratic organizational culture. These are not idealistic or touchy-feely notions. They are highly practical approaches that reduce workplace stress and bring concrete benefits to workers, patients, and employers.

Stress busters: Healthy job design, democratic workplace

Most employers operate as though there were only one way to design a job or run a workplace: in a hierarchical, centralized manner. Today, this old-style organizational culture is being challenged on pragmatic grounds.

Recent studies show that job sites with participatory management practices have lower accident rates than traditional sites. In other words, when workers have greater involvement in decision-making, they have lower rates of sicktime and injury. Although these studies don't talk explicitly about stress, it is well established that control (i.e., decision-making latitude) is a key factor in whether a job is stressful.

HEU members often talk about wanting more control at work, more say in how things get done. In effect, you are asking for a **healthy job design**: one that would reduce stress by giving you the right tools to do a demanding job well. A related idea is **workplace democracy**, which means all employees have some decision-making powers about their work

Don't be fooled by fake empowerment

Administrators have a poor track record when it comes to genuinely involving workers in decision making or restructuring plans. Watch out if:

- There is lots of talk about "consultation," "empowerment," "worker involvement," "Total Quality Management," "quality teams," "focus groups," but you have no real power to make decisions.
- Outside consultants are hired to do a redesign, and front-line workers and unions are barely (or rarely) involved.
- Job redesign schemes are created by upper management, and you and your team are left to implement their agenda.
- Your brain is picked about the small details of your job, but you aren't involved in defining the real-life demands and consequences of the work.
- A few token staff people are consulted or designated as "design team" members, but there are no formal mechanisms for all workers to have input or give ongoing feedback.
- You are offered a retreat, a one-time meeting, or a seminar to ease you into new working conditions, but there is no formal opportunity to influence what happens to your job.

Workplace democracy: Good for workers, good for health care

A 1990–92 study of Ontario work sites looked at the relationship between lower WCB claims and organizational culture. It found a correlation between lower claims and management practices that encouraged workers to 1) use their own initiative and 2) participate in decision-making. Lower WCB claims were also associated with lower grievance rates, high-functioning Joint Occupational Health and Safety committees, and better labour relations.

Moreover, these healthier work sites had low staff turnover and more experienced workers with considerable seniority.

The research suggests that good labour relations and participatory management practices can cultivate a stable, experienced, and motivated work team. And these workers will be relatively free of toxic stress, a prime cause of lost time.



and job design. Workplace democracy can also mean that workers participate in decisions about the organization itself.

Most employers have a long way to go in improving their organizational culture. HEU members have had mixed experiences with enhanced consultation and with various management schemes to ‘empower’ employees. Nevertheless, it is to everyone’s advantage to reduce workplace stress – and job design/organizational culture are big pieces of the puzzle.

Blueprint for a healthy job design

In a job with a healthy design, you would have:

- a clear job description and duties, including how you should respond to demands
- a degree of control in carrying out tasks (how, when, what order, etc.)
- a reasonable workload and fair pace of work
- a clean, comfortable environment with ergonomically designed work areas
- a variety of tasks performed in a variety of locations
- mutual support from supervisors and co-workers
- work processes and social relations that do not expose you to physical or psychological hazards
- job-sharing, flextime, and other options to help with family obligations
- time for caring contact with patients and/or clients (where applicable)

Blueprint for a democratic workplace

In a workplace run on democratic principles, you would have these kinds of rights and responsibilities:

- some decision-making power about how your job is done – and how it may be redesigned

- the capacity to see how your tasks fit into other people's tasks to make a complete work process
- formal ways to work with management on problems, including time lines for action
- maximum use of your skills, and opportunities for training and future growth
- employer support to attend ESL, adult basic education, literacy, and other courses that help you to participate fully in the workplace
- acknowledgment that your job is meaningful within the larger goals of the organization

Who benefits?

Everyone. It isn't just workers who thrive when a workplace is committed to healthy job design and democratic principles. The benefits are wide-reaching and extremely significant. In a nutshell:

- workers have fewer injuries, illnesses, and disabilities
- job satisfaction increases
- patient care improves
- health authorities, employers, and government save money due to reduced injuries, sicktime, rehabilitation costs, turnover, etc.
- the economy and society as a whole is strengthened

Improved health for patients There is a direct connection between how much control you have over your job and the quality of patient care.

An important U.S. survey found that hospitals with a reputation for good nursing practice were also good places for patients. To be exact, the hospitals had a 5 percent lower mortality rate. These "magnet hospitals" have an organizational culture that emphasizes collaboration and joint problem-solving among staff. "The research suggests the better control that people close to patients have, the better the [patient] outcomes," says Linda Aitken, author of the study.



What goes up can come down

Job strain can lead to hypertension, but the damage is reversible. According to a U.S. researcher, Dr. Peter Schnall, people whose jobs become less demanding or who are given more scope for decision-making see a decrease in their blood pressure.

Caring counts

"The risk is that as all staff in hospitals and community units get squeezed tighter to achieve maximum output of processes at minimum labour costs, human relations may be increasingly ignored ... [Yet] without caring, real health outputs fall" despite faster and more 'efficient' systems of work.

THE LANCET



A real drag

Work-family conflict is not just a drag for individuals, it's a drag on the economy and health care system. A 1999 Health Canada report on work-life conflict found that employees with high levels of conflict miss an average of 13.2 work days per year (compared with 5.9 days for other workers) and visit their physician an average of 4.62 times per year (compared with 3.17 times).

The price of this conflict between work and family? The excess work absences cost Canadian employers at least \$2.7 billion annually in lost output. And the excess doctor visits cost the public health care system at least \$425.8 million.

Research proves that patients who receive caring attention can heal faster, live longer, and enjoy a better quality of life. This phenomenon is called **caring effects**. Studies reveal that when workers have the time to talk to patients and offer emotional support, even briefly, patient outcomes can improve. One survey of people with chronic arthritis showed that, with caring contact, their pain diminished and their mobility improved.

The monetary costs of this human connection are relatively low, the health benefits high. The opposite is also true. "New management techniques emphasize efficiency through outputs – waiting times, number of interventions done, time taken, etc.," say researchers Hart and Dieppe. "The result is an increasingly unhappy workforce who are having to sacrifice what most motivates them as health care workers: flexibility, sensitivity and caring."

Employers are rewarded, too Research proves that workplace stress leads to lower productivity, increased sicktime and stress leaves, and higher workers' compensation claims. In Canada, more than \$11 billion is spent on direct payroll-financed disability claims every year. A considerable amount is stress related.

The problem is escalating, according to a recent Statistics Canada report. In 1998, employees lost approximately 72 million work days for personal reasons, up from 66 million in 1997. The report's author believes on-the-job stress is the prime culprit behind the increase.

Besides the direct financial costs of workplace injuries/sicktime, there are **massive indirect costs relating to employee recruitment and replacement, and legal/dispute resolution fees.** The Workers' Compensation Board of B.C. estimates these costs to be three times the direct costs.

Employers are also hindered when stressed-out workers suffer from low motivation or have difficulty learning new skills. If job satisfaction is low, turnover is likely to be high – a negative dynamic that will certainly hurt productivity and increase costs.

Employers ignore these direct and indirect costs at their peril. Healthy jobs and democratic workplaces are good for the future of health care.



Organizing to reduce and prevent workplace stress

Every crusade to improve working conditions was launched by ordinary people who stood up, spoke out, and organized. Workplace stress is one of the crucial issues of our times. It will be up to us to focus attention on the problem in a way that creates tangible, long-term change. We can tackle workplace stress by:

- making stress prevention a central issue among workers, employers, and Health Authorities
- organizing to improve specific working conditions, job designs, and ergonomics
- fighting for changes to collective agreements, Workers' Compensation Board regulations, and legislation

Stress prevention policies: An idea whose time has come

To make a real difference, workplace stress must be dealt with at the organizational level. One way to ensure this broad approach is through stress prevention and stress reduction strategies.

Some European workers have negotiated anti-stress policies with employers, and we can learn from their experience.

It is essential that you play an active role in developing such policies. Worker participation will ensure the policy acknowledges the structural causes of stress, the benefits of healthy job design, and your

The stress of restructuring: How one department fought back

In 1998, Vancouver Hospital did a major restructuring of its Health Records Department. Based on recommendations by an outside consultant, clerical positions were deleted, hours of operation decreased, work processes drastically changed, and supervisory personnel cut.

Within a few weeks the department was in big trouble. Workload increased, backlogs piled up, error rates skyrocketed, clients were angry – and workers were very stressed. Individuals tried unsuccessfully to get the new manager to respond to their concerns. Many people filed work overload reports with the health and safety committee. After five months of frustration, the entire department walked out.

Finally waking up, management

agreed to a series of facilitated meetings to look into the crisis. HEU researched and wrote an in-depth report, largely based on workers' experiences. Staff conducted their own survey, asking physicians what they thought of service quality in the restructured department. Senior administrators decided to hire external experts to review the situation, and the union insisted on having a say in who was hired. HEU also insisted that front-line workers be a key part of the review.

The external review was a strong vindication of workers' concerns. In the aftermath, a committee of Health Records staff started meeting with the new managers to hammer out an ongoing process of consultation, communication, and evaluation.

right to be involved in solutions. Don't let the employer simply hand out their own policy – it is unlikely to address these core issues.

In the 1990s, the national association of physiotherapists in Great Britain launched a “Less Stress Campaign.” They created the following guidelines for negotiating an effective stress prevention policy.

A good stress prevention policy includes ...

- A definition of work-related stress.
- A statement by management that stress is an organizational problem that they are committed to tackling.
- An agreement about key factors that cause/contribute to stress, such as excessive workload, lack of support, and lack of control over the job.
- A comprehensive list of stress symptoms, plus a willingness to add new symptoms.
- Techniques for assessing stressors, such as inspections, confidential surveys, audits, etc.
- Tools for assessing stress hazards, comparable to risk assessments for established hazards (e.g., manual lifting).
- Simple, clear procedures to use when a worker is showing stress symptoms. To encourage prompt reporting, the procedures should offer the worker ample representation and support.
- The right of every worker to receive training and ongoing information about workplace stress.
- A review of the policy at regular intervals.



The A-B-Cs of organizing

Whether you are seeking specific improvements to working conditions or developing a general stress prevention strategy, you need to follow the basic steps of organizing. Think of what you're doing as a campaign.

Campaigns are designed to educate, mobilize, persuade, and pressure people to make changes. A successful campaign has the following ingredients:

Educate, and raise awareness

- Talk with co-workers about the issue. Many people say they're stressed out, but they may not have the big picture. Give them information about what causes workplace stress and how it can be prevented.
- Pass out graphics, stickers, posters, cartoons, and diagrams about workplace stress. (Use this guide!)
- Raise the issue at your local union meeting and with your shop steward and local executive.
- Talk about the problem wherever you go, not just at work. Workplace stress is a social and economic disaster for working people, as unacceptable as high injury rates and exposure to toxic substances.

Document the problem

- Keep a daily journal of workload problems and other stressors, either as individuals or as a department.
- Identify the stress hazards in your department. "Risk assessment" means mapping and identifying the aspects of your job that make you vulnerable to stress-related injury and illness.
- Use this guide's statistics on workplace stress, lost time, and MSI. You can also gather information from groups listed in Resources.

Get other people involved

- Inform staff in your facility/organization by distributing survey results, pamphlets, this guide, stickers, newspaper articles, etc.

Calling all members

You don't need to be a shop steward to take on workplace stress. Except for filing a grievance, any union member can take the steps listed here. And anyone can start raising awareness that stress is a collective issue, not a personal problem.

Research is action

Here are four things you could do to document stress in your workplace:

- 1) Do a job strain questionnaire (see page 58).
- 2) Do a survey of the pains, strains, and chronic conditions among your co-workers: the number of headaches, jaw aches, back aches, neck aches, other muscle strains, and worse ...
- 3) Do a survey that measures how stress levels have changed over a period of time (see page 59).
- 4) Find out how many sick days and injuries occurred in your department over a fixed period of time.

Document the problem, propose concrete solutions

At a retirement facility in the Okanagan, the food services department was in turmoil. Years of lax management and incompetent supervision had produced widespread conflict. A few workers had taken on the supervisor's role and were bossing the others around. Some workers weren't speaking to each other; others had filed harassment grievances against HEU members.

A complaints investigator was brought in under the collective agreement. She interviewed various parties and made recommendations. Some changes were eventually made to management and supervisory positions. But the department was still full of hostility, and stress levels were high.

Two food services workers joined the local executive and decided to take action. The union developed an anonymous questionnaire – "Work Environment/Stress Survey" – that asked workers what they thought was causing the stress and what would improve the situation (see page 59). Before distributing the survey, the local wrote to management explaining its purpose. The employer was very supportive, and eager to hear the results.

Most workers filled out the survey – and their responses were an eye opener.

- Call a meeting of your co-workers to discuss workplace stress. Ask more people to get actively involved. If possible, meet outside the job. This gives you time to explore issues in depth and figure out where to go for further action and support.

- Hold an anti-stress workshop.
- Look for allies: the Joint Occupational Health and Safety Committee (JOHSC); sympathetic managers; members of the regional Health Board or community health councils; workers in other HEU locals who have waged campaigns; other unions and community activists who are concerned about the issues, etc.

Get support from the union

- Get involved with the local. Ask your shop steward, JOHSC members, local executive, Labour Adjustment Committee, and workers in other departments to participate in an anti-stress campaign.
- Ask for research materials, province-wide statistics, and other anti-stress resources from provincial office.

Identify concrete demands and pressure points

- Develop specific demands, not just vague ideas. Figure out your priorities, make concrete proposals, and include a time line for action and evaluation.
- Figure out where you can get results, and apply pressure: Is the manager sympathetic? Is the JOHSC active and strong? Is the regional Health Board concerned about growing WCB claims and absenteeism? Would a general (policy) grievance be a good strategy?
- Hold management accountable: Find ways to publicize what you're doing – and what you expect management to do.

Support each other

- Do things in a group – it's easier to get results when you present a united front. For example, if you decide to file a grievance, make it a general (policy) grievance. This prevents management from targeting an

individual and/or making cosmetic changes.

- Spread organizing tasks around. Don't let one or two people carry all the weight.
- Show appreciation for each other's contribution to the anti-stress campaign.

Making your case

This guide has solid information, statistics, and arguments for making your anti-stress case to management and/or health authorities. Remember these key points:

▶ **Stress is preventable**

Unhealthy stress is not inevitable. Hospitals and other health care facilities will always be intense places to work. But when people have good support and some control over their work, even a highly demanding job can be a healthy job.

▶ **Stress is an organizational problem**

Stress management courses and relaxation techniques are of limited value in reducing workplace stress. What will make a difference is an organizational commitment, at all levels, to tackle the roots of stress. Work overload, excessive overtime, poor job design, and ill-conceived re-engineering are common causes of stress-related injuries and sickness.

▶ **Cost benefits**

It pays to reduce workplace stress. Whether through sicktime, high turnover, or WCB claims, stress costs money – lots of money. For example, the failure to backfill is costly to both workers and employers. A study of MSI in a large B.C. hospital found that people who worked during periods of high sicktime had a two-fold increase in injuries and WCB claims, compared with people working during periods of low sicktime.

▶ **Prevention is best**

Once a worker is injured, he or she is at high risk of being injured again. This is clearly the case with MSI, which are common among HIEU

Although people felt stress levels had improved under the new manager, they were still upset about unhealthy dynamics among co-workers. To fix the problem, they wanted:

- management and supervision that were fair, active, consistent, and free of favouritism
- clear and direct communication by management regarding who makes decisions about job descriptions, what is expected of staff, and consequences of changes
- cooks to be given formal supervisory powers (and supervisory training)
- regular staff meetings
- in-services courses on conflict resolution and team building

The findings were shared with the manager, who committed himself to working with the local on improvements.

The survey included one inspired suggestion: an "Amnesty Day Celebration." Many workers wanted to put the past behind and make a fresh start. On Amnesty Day, everyone – management and workers alike – would write their old complaints on a piece of paper, walk outside, tear up the paper, throw it into a barrel, and then return to the facility together. This department intended to move on.



So many strategies, so little time: What's the best approach?

Grievances, JOHSC investigations and Labour Adjustment Committees are tools to help workers deal with workplace stress. They each have strengths and weaknesses, and can be deployed separately or together:

- ▶ **A JOHSC investigation** uses existing resources, doesn't focus on an individual worker, and can be a more cooperative and proactive approach. The downside? Management can refuse to make recommended changes.
- ▶ **A grievance** can cost the employer money – a threat that can work to your

members and are frequently caused by stress (see page 27). Prevention is key.

- ▶ **Patient care improves**
Patients do better when their care providers have the time and support to pay attention to them. This improves quality of life for patients and job satisfaction for workers.
- ▶ **Workers are more productive**
Research proves that toxic stress is an enemy of productivity, motivation, skill development, initiative, and loyalty. The opposite is also true. Workers with sufficient support and control are more productive, trusting, motivated, etc.
- ▶ **It's the law**
B.C. has new Ergonomic Requirements that oblige employers to do prevention and education on stress-related injuries (see page 50).

Shop stewards: What can you do?

Shop stewards are often called upon to help stressed-out members. What is the steward's role? The basic steps are to support the worker, investigate and document the problem, get other workers involved, and advocate solutions.

- Let's look at a common scenario. A worker comes to you with a problem such as excessive workload, in-fighting, unclear job responsibilities, or a difficult manager. The person is really upset and on edge.
 - **First, listen sympathetically.** Acknowledge the worker's feelings and reassure them the problem is real. Ask them to identify the exact problem(s).
 - **Encourage them to do self-care.** In some cases, this could mean suggesting they take a break from work. **Note:** Some people obviously need a break, yet won't feel entitled (or safe enough) to ask for one. If this happens, tell them it's okay to take a break and they are entitled to

do so. Advise them of their rights and protection from loss of pay, such as using accumulated sick banks or Employment Insurance sick leave benefits. If applicable, put the member in touch with a physician who will support their request for extended leave.

- Go to the department and start investigating and documenting the situation. Collaborate with the worker who made the original complaint, if possible. Find out if their actual work is consistent with their written job duties. Talk to other workers and supervisors.
- Ask other members in the department to get involved. You'll get a better sense of problems – and possible solutions – by working together. You'll also present a united front.
- Make contact with other activists, and **work together** on the issue. This includes JOHSC and Labour Adjustment Committee members, and people active on other labour/management committees.
- Choose a strategy (see margin) and a remedy. Here are a few standard remedies you can propose:
 - changes in job design, physical work space, etc.
 - changes to supervisory structure
 - full replacement of absent staff
 - reimbursements to sick banks
- Keep in touch with the member who made the original complaint. Let them know what's happening (and be honest about chances of improving the situation). If someone is on stress-related leave, phone them at home. Fill them in, and ask if they will help when they return.
- Finally, look after yourself! You too have the right to get support from co-workers.

What tools can you use?

Joint Occupational Health and Safety Committees (JOHSC) HEU's collective agreements require every employer to have a worker-

advantage. You can also launch a general (policy) grievance, which means no individual worker is targeted. Grievances can also achieve remedies that are outside the JOHSC's reach, such as reimbursing sick banks. The downside? Grievances take a long time and may lead to polarization.

► **The Labour Adjustment Committee** is supposed to address problems caused by health care restructuring and reform. This includes downsizing or re-engineering that creates excessive/unsafe workloads – a genuine situation for many HEU members. The downside? LACs are relatively new, and workers are still figuring out how to make them effective.

► **A direct approach** works best in some situations. You could ask for a face-to-face meeting between concerned workers and the manager or supervisor. The downside? The manager or supervisor may be unsympathetic, or may lack authority/resources to make necessary changes.

Two case studies

Getting together to stop the damage

In the Simon Fraser Health Region, workers and employers pioneered a region-wide Occupational Health and Safety Committee. The reason? Workers were suffering high levels of MSI and strains, which are frequently associated with stress. High injuries meant high costs, so regional managers were well motivated. The regional JOHSC applied to WCB and received funding for projects with ergonomic and educational goals, including improvements to patient handling and lifting.

"Increase, activate, and elevate"

The JOHSC has an important mandate, yet is often hampered by a low profile and insufficient resources. In 1998, health authorities and senior managers in the South Fraser Health Region became very concerned about rising injury and sicktime costs. Unlike many employers, they recognized that cost reductions would only be achieved if workers and managers worked together to strengthen JOHSCs. They saw the need for committee members who were active, well-trained, self-directed, and visible.

Unions and employers approached WCB to fund a special project to train JOHSC members in risk assessments,

management health and safety committee. The JOHSC can be a valuable place to 1) raise the issue of workplace stress; 2) document the problem; and 3) propose solutions. These days, some employers are themselves looking to JOHSCs to tackle the epidemic of workplace injuries and lost time. As workers, you can start insisting that toxic stress be treated as part of the problem.

What are the advantages of using your JOHSC for stress prevention?

- The employer is obliged to give data on sicktime and injuries to the committee. This data can be used to make your anti-stress case.
- Representatives from management can be good people to work with – they are often more concerned and positive than others within the organization.
- The committee has a legal mandate to ensure the employer complies with WCB's Ergonomics Requirements.
- You can use the committee to negotiate a formal anti-stress policy and/or to conduct confidential surveys about job strain, workplace stress, etc.
- The committee can sponsor in-service training and education on lifting, body mechanics, back injury prevention, violence, stress-reducing exercises, and related issues.
- You are on paid time when meeting with the committee and doing HS investigations.

Workers' Compensation Act / Ergonomics (MSI) Requirements

Under HEU's collective agreements, employers are obliged to have a health and safety program, and the program is obliged to comply with WCB regulations. In 1998, B.C. introduced new Ergonomics (MSI) Requirements (sections 4.46 to 4.53) under the revised Occupational Health and Safety Regulation. "The purpose [of the Ergonomic Requirements] is to eliminate or, if that is not practicable, minimize the risk of musculoskeletal injury to workers."

Employers are required to identify and assess factors that expose workers to MSI risks. These factors include:

- physical demands of work (such as repetition, posture, and duration)
- organization of work (such as task variability and rate of work)
- layout of work areas
- characteristics of objects handled
- environmental conditions

As part of their obligation to eliminate/minimize the risk of MSI, employers are also required to:

- educate and train workers to identify MSI risks, potential health effects, and early signs and symptoms of injury
- train workers to use equipment, mechanical aids, and work procedures that control the risk of MSI
- consult with the JOHSC regarding MSI risk identification and control, worker education and training, and evaluation of compliance measures

Get involved with your JOHSC and make sure your employer is in compliance with these and other WCB regulations.

Workers' Compensation Board There is documented evidence that work-related stress leads to illness, injury, and disability. Even so, some workers' compensation boards in Canada do not recognize stress claims.

In B.C., the WCB acknowledges a few types of workplace stress conditions, including 1) post-traumatic stress syndrome; 2) emotional/mental health problems arising from a physical injury; and 3) health problems caused by harassment. However, the WCB does not compensate chronic or cumulative stress cases. The refusal is based on a 1976 policy. B.C. is not alone: New Brunswick, Manitoba, Newfoundland, and Ontario (since 1996) also forbid chronic stress claims.

HEU members need to join with other unions and progressive organizations to challenge this restrictive policy. We have some leverage:

- Workers' compensation boards in Quebec and Saskatchewan recognize

ergonomics, hazard recognition, and other core skills. The project paid the wages of committee members in one hospital while they promoted health and safety among workers for several hours each month.

A clear case of stress

One workers' compensation case concerned an unnamed Ontario worker who died of a heart attack in 1991.

The man was the coordinator of an Employee Assistance Program. His job involved long hours, an irregular schedule, and travel. He was in constant demand as a counsellor, dealing with serious personal problems such as domestic crises, psychiatric breakdowns, and alcoholism. He worked alone, was scrupulous about the confidentiality of clients, and had little formal support from his employer.

WCB concluded that "the worker's occupational mental stress made a significant contribution to the development of his coronary artery disease which, in turn, resulted in two [heart attacks.]" His widow was awarded benefits.

Ouch!

A healthy fear of lawsuits may motivate employers to reduce workplace stress.

In Britain, workplace stress is the subject of an increasing number of civil liability cases. The famous Walker case involved a social worker who suffered a nervous breakdown. His union went to bat for him, and Mr. Walker was eventually awarded £175,000 (about CDN \$350,000) in 1996. The High Court judge ruled that Mr. Walker's collapse was due to an "impossible workload," lack of control and insufficient help from senior management.

some chronic stress claims. Quebec has hundreds of cases on record (mainly for psychological impacts). Other jurisdictions also provide useful precedents.

- In the workers' compensation field, the definition of 'accident' is flexible. An accident isn't necessarily a sudden, one-time event, but can be many small incidents that develop into an injury. This is the scenario in MSI and numerous stress-related impairments.
- History may be on our side. More and more individuals could be forced to launch civil lawsuits against negligent employers if the WCB refuses to compensate people unable to work due to stress. This is already happening in Great Britain. The pressure to change the WCB will come from workers and from employers who fear lawsuits.

Occupational Health and Safety Agency for Healthcare (OHSAH)

This new agency was created during B.C.'s 1998 health sector bargaining. The agency has a \$11-million budget over three years to fund programs, do research, and support workers and employers to develop strategies that prevent workplace injuries.

In general, we can use OHSAH to document the health impacts of restructuring on HEU members. Specifically, the agency is focusing on MSI and will fund projects relating to patient lifting and transferring. See Resources for OHSAH's address.

Collective agreements Changes to the collective agreement can help reduce stressful working conditions and prevent further stress. For example, you can bargain for stronger contract language on:

- backfilling and minimum staffing levels
- flextime, child care provisions, job sharing, parental leaves, and other measures that address work-family issues
- breaks, work rotations, and shift work
- the powers of joint health and safety committees, including training, education, and research/investigation skills for committee members

- training and education on injury prevention, ergonomic hazards, and stress reduction for all workers

Legislative approaches Unions in Europe have had some success in pushing for legislative and statutory action on workplace stress. In Britain, the Trades Union Congress is calling for a legally binding code of practice that requires employers to reduce stress at work. An amendment to the Swedish Work Environment Act gives workers protection from the “psychosocial hazards” of badly organized work.

Stress can also be tackled through laws and regulations relating to employment standards, parental leave, Employment Insurance, patient care standards, etc. For example, unions and community groups in New Jersey are campaigning for state laws to enforce safe staffing levels in hospitals and nursing homes. The campaign is a quality-of-care issue for patients and families, but would also directly reduce worker stress.

Other angles Broad-based organizing to reduce and prevent workplace stress can take many forms. The keys are education, raising awareness, developing alliances, and creating resources. As a union we can:

- educate the general public about how downsizing and other health care “reforms” are hurting patients and threatening Canada’s public health care system
- form alliances with unions, consumer groups (patients and families), and other citizens affected by cutbacks and inadequate services
- raise the consequences of workplace stress with the media, politicians, employers, bureaucrats, and health authorities
- provide anti-stress education programs for workers
- create union-influenced and union-run counselling programs that acknowledge the structural causes of – and solutions to – stress-related problems
- encourage the development of labour-friendly health clinics that support workers making stress-related claims to the WCB

The hidden costs of re-engineering

A major study of an Ontario teaching hospital raised serious questions about the true costs of re-engineering and amalgamation.

The 1995–97 study found that re-engineering the hospital resulted in “increased emotional distress among staff, less social support in the workplace and a loss of trust in the ... employer.” Staff also believed the quality of patient care had seriously declined.

These problems arose despite “considerable efforts by the hospital to communicate the need for change and to involve staff in the change process ...

“When combined with the costs of increased illness and absenteeism during the time period, ... the impact of these [re-engineering] changes may cost the health care system and society more than the savings initially anticipated by instituting the changes.”

Resources

Organizations **Canada**

Hospital Employees' Union

2006 W. 10th Avenue, Vancouver BC V6J 4P5
Tel: (604) 734-3431

Fax: (604) 739-1528

Website: www.heu.org

HEU's provincial office has annotated lists of reports, articles, and research on stress and related topics. Contact: Research & Communications.

B.C. Federation of Labour

5118 Joyce Street, Suite 200,
Vancouver, BC V5R 4H1

Tel: (604) 430-1421

Website: www.bcfed.com

Email: bcfed@bcfed.com

Canadian Auto Workers

Health and Safety Department

205 Placer Court, Toronto, ON M2H 3H9

Toll-free: 1-800-268-5763, ext. 558

Tel: (416) 495-6558

Fax: (416) 495-3785

Website: www.caw.ca/departments/hs_e.html

Email: cawhse@caw.ca

Canadian Centre for Occupational

Health and Safety (CCOHS)

250 Main Street East, Hamilton, ON L8N 1H6

Toll-free: 1-800-263-8466

Tel: (905) 572-4400

Fax: (905) 572-4500

Website: www.ccohs.ca

Email: inquiries@ccohs.ca

Canadian Injured Workers Alliance

PO Box 3678, Thunder Bay, ON P7B 6E3

Tel: (807) 345-3429

Website: www.indie.ca/ciwa

CUPE National – Health & Safety Branch

21 Florence Street, Ottawa ON K2P 0W6

Tel: (613) 237-1590

Fax: (613) 233-3438

Email: cupehs@cupe.ca

Manitoba Federation of Labour

Occupational Health Centre

Suite 102 – 275 Broadway,

Winnipeg, MB R3C 4M6

Tel: (204) 949-0811

Fax: (204) 956-0848

Website: www.mflohc.mb.ca

Email: library@mflohc.mb.ca

Occupational Health and Safety

Agency for Healthcare (OHSAH)

Suite 301 – 1195 W. Broadway,

Vancouver, BC V6H 3X5

Tel: (604) 775-4034

Fax: (604) 775-1885

Website: <http://test.bus.ualberta.ca/ohsah>

Occupational Safety and Health

Administration, Internet Sites

Website: www.osha.gov/safelinks.html

Windsor Occupational Health

Information Service

547 Victoria Avenue, Windsor, ON N9A 4N1

Tel: (519) 254-5157

Fax: (519) 254-4192

Workers' Compensation Board of B.C.

The WCB has a Prevention Information Line that handles questions about the Occupational Health and Safety Regulation. See Publications (below) for information about ordering WCB's resources.

Toll-free: 1-888-621-7233

Tel: (604) 276-3100

Website: www.wcb.bc.ca

Workers Health and Safety Centre

15 Genvais Drive, Suite 802,

Don Mills, ON M3C 1V8

Toll-free: 1-888-869-7950

Tel: (416) 441-1939

Website: www.whsc.on.ca

Organizations **International**

European Work Hazards Network

c/o Peter Rozemond, NIA, De Boelelaan 30, Postbus

75665, 1070 AR, Amsterdam, Netherlands

Tel: (31 20) 549-2554

Fax: (31 20) 644-1450

Job Stress Network of the

Center for Social Epidemiology

1528 6th Street, Rm 202, Santa Monica, CA 90401

c/o Peter Schnall (310) 319-6595 or

Paul Landbergis (212) 799-4843

Website: www.workhealth.org

Email: cse@workhealth.org

A clearinghouse for information on job stress.

Kerr Ergonomics Institute

Department of Work Environment,

University of Massachusetts, 1 University Avenue,

Lowell, MA 01854

Tel: (508) 934-3250

Website: www.uml.edu/dept/we/jcq/hytm

Robert Karasek, a leading researcher on workplace stress, is co-director of the institute.

International Labour Organisation (ILO)

Occupational Health and Safety Branch Secretariat,

4 route des Morillons, 1211 Geneva 22,

Switzerland

Tel: (41 22) 799-6715

Fax: (41 22) 799-6878

Website: www.ilo.org

National Institute for Occupational Safety and Health (NIOSH)

4676 Columbia Parkway,

Cincinnati, OH 45226-1998

Website: www.cdc.gov/niosh/jobsstress.html

A branch of the U.S. government.

Publications

- Stop Stress at Work: A Training Workbook for Working People
Cydney Pullman and Sandra Jean-Louis
NY: Institute for Labor and the Community, 1999
Mailing address: ILC, 541 E. 12th Street, New York, NY 10009
Tel: (212) 505-3184
Fax: (212) 505-3194
Email: ilc@pipeline.com
An accessible and practical guide to organizing/educating workers to deal with and prevent workplace stress.
- Europe under Strain: A Report on Trade Union Initiatives to Combat Workplace Musculoskeletal Disorders
Rory O'Neill
Brussels: European Trade Union Technical Bureau for Health and Safety (TUTB), 1999
Mailing address: Bd. Emile Jacquain 155, B-1210 Brussels, Belgium
Tel: (0322) 224-0560
Fax: (0322) 224-0561
Website: www.etuc.org/tutb
Email: tutb@etuc.org
An excellent resource: detailed and up-to-date account of European campaigns, analyses, regulations, and statistics relating to workplace stress.
- "Work-related musculoskeletal disorders among health care workers: The role of individual, ergonomic and work organization factors"
Mieke Koeboorn et al
Occupational Hygiene Program, Department of Health Care and Epidemiology, UBC, February 1999.
The groundbreaking study of MSI in B.C. health care workers.

Hazards
PO Box 199, Sheffield, UK S1 4Y1
Tel: (0114) 276-5695
Fax: (0114) 276-7257
Email: sub@hazards.org
A good resource for OHSC members everywhere, published four times a year.

New Solutions: A Journal of Environmental and Occupational Health Policy
26 Austin Avenue, PO Box 337,
Amityville NY, USA 11701
Tel: (516) 691-1270
Fax: (519) 691-1770

Wounded Workers: The Politics of Musculoskeletal Injuries
Penny Kome

Toronto: University of Toronto Press, 1998

Awareness through Movement
Moshe Feldenkrais
New York: Harper Collins, 1990

Full-Catastrophe Living: Using the Wisdom of Your Body and Mind to Face Stress, Pain and Illness
Jon Kabat-Zinn
New York: Delta-Dell Publishing, 1990

Somatics: Reawakening the Mind's Control of Movement, Flexibility, and Health
Thomas Hanna
Don Mills: Addison-Wesley, 1988

Workers' Compensation Board of B.C.

The WCB produces handbooks, reports, posters, manuals, and videos on health and safety. These include Back Talk: An Owners Manual for Backs and How to Make Your Computer Workstation Fit You, free booklets with information and advice (including exercises) to help workers avoid injury and strain. Booklets on MSI risk identification are forthcoming.

To order these materials, contact:
Films and Posters Section – WCB of B.C.
PO Box 5350, Stn. Terminal, Vancouver BC V6B 5L5
Toll-free: 1-800-661-2112 (local 3068)
Tel: (604) 276-3068
Fax: (604) 279-7406
Website: www.wcb.bc.ca

Trades Union Congress (TUC) Publications
Congress House, Great Russell Street, London, UK,
WC1B 3LS

Tel: (01 71) 636-4030
Fax: (01 71) 636-0632

TUC is a source of valuable reports, research, and pamphlets on workplace stress, including Tackling Stress at Work: A TUC Guide for Safety Reps and Union Negotiators (1998) and Stress at Work: Trade Union Action at the Workplace (1996).

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- "and other intergovernmental bodies ..." The European Trade Union Technical Bureau for Health and Safety, for example.
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PART 1

What is stress – and how are you affected?

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- "Of all the personal factors' ..." International Labour Office (Geneva), 1993 World Labour Report.
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PART 2

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Do you have job strain?

- | | | | |
|------------------|---|---|--|
| 1 Demand | I have to work very hard.
I am asked to do too much work.
I have enough time to get my work done. | Yes
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> | No
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> |
| 2 Control | I do not have to do a lot of repetitive tasks.
My job allows me to be creative.
My job allows me to learn new things.
I have a lot of say about what happens at work.
I have a lot of freedom to decide how I do my work. | Yes
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> | No
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> |
| 3 Support | I work with people who are helpful to me.
I work with people who take a personal interest in me.
My supervisor is helpful to me.
My supervisor cares about my welfare. | Yes
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> | No
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> |

Scoring

Calculate a separate score for each part (Demand, Control, Support). Give yourself one point for every "Yes" answer, then write either Low, Moderate, or High

My job demands are _____
(0-1 is "Low"; 2-3 is "High")

My control at work is _____
(0-2 is Low, 3-5 is High.)

My support at work is _____
(0-1 is Low, 2 is Moderate, 3-4 is High.)

My job strain is _____
(See Interpretation)

Adapted from Stress at Work: A Training Workbook for Working People by the Institute of Labor and the Community (1999), based on a questionnaire by Dr. Robert Karasek.

Interpretation Job strain is based on the combination of high demand, low control, and low support. The degree of job strain depends on how these factors fit together. For example, if you scored High on demand and Low on control and support, you have high job strain. If you scored High on demand, High on control, and Low on support, you have moderately high job strain. Jobs with the least job strain combine high control and high support with moderate demand.



HANDOUT SURVEY

Job stress: Has it increased – and what would make a difference?

1 On a scale of 1-10 (10 being maximum stress), please indicate:

My stress level at work 18 months ago:

1 2 3 4 5 6 7 8 9 10 CIRCLE NUMBER

My stress level at work now:

1 2 3 4 5 6 7 8 9 10 CIRCLE NUMBER

2 What causes you the most stress and/or agitation at work?

3 How would you suggest making the work environment in this department better? What would help?

4 Do you feel that you and your co-workers would benefit from any courses? What kind would you recommend?

Any other comments or ideas? _____

SIGNATURE (OPTIONAL) _____

PLEASE RETURN THIS SURVEY TO _____ by _____ DATE

PERSON / PLACE

HANDOUT CHART

On-the-job stress relief

Regular exercise and self-care can make you less prone to the workplace problems listed below. You can also try these quick fixes for immediate relief.

THE PROBLEM	POSSIBLE CAUSE	EXERCISES TO HELP	QUICK FIX
Headache	Computer work poor lighting poor ventilation noise stress from management	Eye exercises neck and head rotation temple and head massage calming breath meditation/relaxation	With your eyes closed, massage your temples with your fingertips while breathing deeply through your nose
Neck, shoulder, and upper back tension	Keyboard work poor posture driving manual work mental stress	Neck and head rotation shoulder rotation arm rotation chest expansion forward bend	Rotate each shoulder in a slow, circular movement. Shrug each shoulder up to your ears three times and let drop.
Lower back ache	Standing or sitting for long periods lifting driving	Forward bend backward bend spinal twist	<ul style="list-style-type: none"> Clasp the hands in front of the body; round the spine and drop the chin down to the chest; hold this stretch gently. Take the palms of your hands and place them in the small of your back. Lift chest toward ceiling and slightly raise the chin.
Aching legs or ankles	Standing for long periods poor circulation when sitting	Toe and ankle exercises squatting leg bends	Flex and point each foot. Rotate in one direction and then the other.



Adapted from Stress at Work: A Training Workbook for Working People by the Institute of Labor and the Community (1999), based on Yoga at Work by M. Freedman and J. Hanks, Element Press (1996).

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Muscle and joint stiffness	Overwork	Fingers and wrist exercises arm stretch toe and ankle exercises squatting	Get up and stretch your arms above your head. Give your legs and arms a good shake and go for a quick walk.
Breathing problems	Poor ventilation toxic air panic anxiety	Breathing exercises relaxation chest expansion	Find a clean source of air immediately. With your hands on your diaphragm and your eyes shut, breathe in and out slowly and deeply. Breathe in four counts and out four counts. Repeat.
Repetitive strain injuries	Intensive computer work repetitive tasks lack of breaks	Arm stretch finger and wrist exercises	Flex your wrists upward and then downward gently. Hold the wrist of one hand and then the other. Move fingers as if playing the piano.

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