Management practices can
make employees sick.

The Leadership Factor

When Amex Canada won Canada's Award for Excellence (CAE) for Healthy Workplaces in October 2001, it was as much for the company's management practices and leadership development as for the onsite gym and fitness classes. Amex Canada, previous winner of a CAE Quality Award, knows the value of treating people fairly, not only for the health of employees, but for the bottom line. But few companies connect leadership with employee health. That's a big mistake.

For decades, Health Canada has been preaching a three-pronged approach to workplace health:
1. ensuring a safe and healthy physical environment
2. encouraging healthy lifestyles, and
3. ensuring a healthy psychosocial environment for employees and supporting their personal resources *(see figure 1)*.

In 1998, the National Quality Institute adopted these pillars as the three elements of the CAE Healthy Workplace Award. And in November 2000, the Conference Board of Canada released a report that recommended organizations include these three aspects in their policies and programs if they wish to succeed and prosper in a global economy *(see "References")*. Yet the concept of a "psychosocial environment" or "psychosocial hazards" is ignored by many companies, and remains a mystery to most.

What, you ask, are psychosocial hazards, and what do they have to do with leadership and management practices?

The answer is — everything in the world. In fact, sometimes management practices are psychosocial hazards. And ensuring a healthy psychosocial environment requires looking long and hard at the leadership style and management practices of your organization.
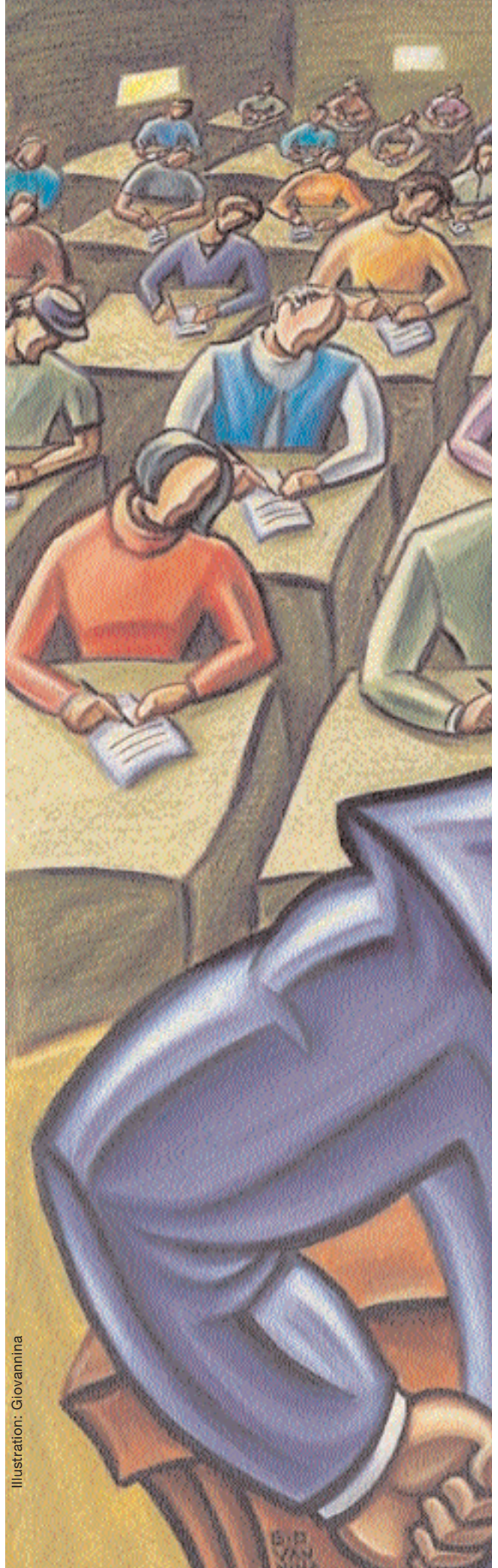
BY J O A N B U R T O N

Illustration: Giovannina

The psychosocial environment and H&S

Another phrase for psychosocial hazards is workplace stressors — things related to the way work is organized that can threaten the mental and physical health and safety of employees. Examples include:

- work overload and time pressure
- lack of influence over day-to-day work
- lack of training or preparation to do the job
- too little or too much responsibility
- ambiguity in job responsibility
- lack of status rewards (appreciation)
- discrimination or harassment
- poor communication
- neglect of legal and safety obligations, and
- lack of respect or support for work/family balance.

Research shows that high job demands, or having too much to do over too long a period, with constant imposed deadlines, is one of the most harmful workplace stressors. Another is low job control, or having too little influence over the day-to-day organization of your own work. Having social support at work from co-workers or supervisors can help overcome the effects of high demands and low control. The most stressful combination is having high demands and low control, in the absence of social support at work. This is often referred to as Karasek and Theorell's "demand-control-support model."

A similar model developed by Sigriest is the effort/reward imbalance model. This model shows that high job strain also results when high mental or physical job effort, expended to achieve organizational goals, is combined with low rewards (low compensation for or acknowledgement of effort in terms of bestowed status, financial gain or career advancement).

Most people would say they know intuitively that these sorts of conditions are unpleasant and stressful. Many are under the control of supervisors or managers, and may vary widely within any one organization, depending on the skills, abilities and values of the individual managers. But what is not widely appreciated is the effect these stressors have on the workers who experience them.

Dr. Martin Shain, from the Centre for Addiction and Mental Health and the University of Toronto's Centre for Health Promotion, summarized much of the research in this area in a Health Canada document, *Best Advice on Stress Risk Management in the Workplace*. This document describes the effects of organizational sources of stress on workers' health and safety, and shows that some

Figure 1

Employee Health and Safety

Health Practices

Psychosocial Environment

Physical Environment

stressors are worse than others, in terms of their effects.

Data show that people working with high demands and low control, compared with workers who have a high level of control, experience significantly higher rates of heart and cardiovascular disease, anxiety, depression, alcohol abuse, infectious diseases, back pain and repetitive strain injuries (RSIs). Workers required to exert the highest effort while experiencing the lowest rewards, compared to workers who receive high rewards and recognition for their high efforts, experience much higher rates of cardiovascular disease, depression, conflict, back pain and RSIs. When workers experience all these conditions together — high demands, high effort, low control and low rewards — they may be at five times the usual rate of colorectal cancer.

Figure 2 summarizes all the negative health and safety effects that research has shown result from constant exposure to high demands and low control, or high effort and low rewards in the workplace.

Fairness — the missing link

Recent research shows that, while demand/control and effort/reward are powerful influences on the health of employees, the effect of these influences is multiplied when workplace conditions are perceived as unfair or indicative of the employer's lack of respect for employees.

Two kinds of fairness are involved:
1. distributive — who gets what, and when
2. procedural — the processes through which decisions are made

Feelings associated with a sense of unfairness are anger, depression, demoralization and anxiety. Feelings associated with fairness include satisfaction, calmness, enthusiasm and happiness. The strong negative feelings translate chemically into compromised immune systems, setting the stage for a variety of adverse physical and mental health outcomes. In other words,

feelings of unfairness magnify the effects of perceived stress on health. On the other hand, a sense of fairness is related to trust, which is key to employer-worker relations, high morale and productivity.

Understanding this point is key. In today's fast-paced society, businesses cannot succeed without making high demands on employees, and often expecting a lot of sustained effort. No one is saying that employers have to back off and let employees take it easy. It's the fairness that counts — the balance between the stressors (demands and effort) and the satisfiers (control and rewards). Most employees can cope with high demands if given appropriate control over the way they work, and can put out sustained high efforts if they feel appropriately rewarded and appreciated.

Psychosocial hazards and workplace accidents

When employers investigate workplace incidents, they usually look for physical conditions or workplace practices that contributed to the incident. Rarely do they look at psychosocial contributors. But in fact, research shows that people experiencing high demand/low control or high effort/low reward situations experience two to three times the number of accidents compared to their peers *(see figure 2)*.

In fact, psychosocial hazards can directly or indirectly lead to accidents and injuries. When employees lack sufficient influence over hazardous conditions, they lack the control necessary to abate threats to life and limb. Thus lack of control can contribute directly to an incident. But indirect influences can be just as dangerous. Workers experiencing the psychosocial hazards we're discussing may

- sleep badly
- over-medicate themselves
- drink excessively
- feel depressed
- feel anxious, jittery and nervous, and
- feel angry and reckless (often due to a sense of unfairness or injustice).

When people engage in these behaviours or fall prey to these emotional states, they are more likely to

- become momentarily distracted
- make dangerous errors in judgment
- put their bodies under stress, increasing the potential for strains and sprains, and
- fail in normal activities that require hand-eye or foot-eye coordination.

In the context of organizational research, Dr. Julian Barling of the Queen's University School of Business has looked at the effects of transformational leader-

ship on occupational safety. His research found that leadership style affects occupational safety through the effects of perceived safety climate, safety consciousness and safety-related events.

In another study, Barling found that the existence of high quality jobs, meaning jobs that include a lot of autonomy (control or influence), variety and training, directly and indirectly affect occupational injuries through the mediating influence of employee morale.

Psychosocial hazards and workplace violence

Workplace violence is an increasing concern in Canadian workplaces. An imbalance between effort and reward, or demands and control frequently result in a sense of injustice or unfairness in workers, with feelings of anger as a result. The anger may manifest itself in many ways that are expressions of violence or potential violence:

- threatening behaviour
- emotional or verbal abuse
- bullying
- harassment
- assault
- domestic violence
- road rage
- suicidal behaviour, and
- recklessness.

Clearly, the effects spill over into our homes and communities. Thus, the workplace can contribute to increased societal costs for law enforcement and social services.

Psychosocial hazards and RSIs/back injuries

Researchers at Ontario's Institute for Work and Health are doing a lot of work related to the development of back pain and repetitive strain injuries. In recent studies with General Motors and with the Toronto Star, they concluded that lack of control or influence over the job is highly linked to the development of lower back pain and repetitive strain injuries.

The idea that psychological stress can contribute to or cause musculoskeletal injuries is not intuitively obvious, and much research is being done to determine how it happens. Many different physiological mechanisms that occur during stress likely contribute to this relationship, including increasing non-voluntary muscular tension, increased cortisol levels, changes in pain perception, decreasing muscle repair (anabolism), and decreasing blood testosterone levels. *(For a detailed discussion of possible mechanisms, refer to Moon & Sauter.)*

Work-family balance and supportive supervisors

High demand/low control and high effort/low reward are psychosocial factors about which we have a lot of data. But they aren't the only ones. Work-life-family imbalance is another potential hazard, and information in this area is growing. Some fascinating

Workers required to exert the highest effort while experiencing the lowest rewards, compared to workers who receive high rewards and recognition for their high efforts, experience much higher rates of cardiovascular disease, depression, conflict, back pain and RSIs.

work has been done on work-family balance in Canada by Dr. Linda Duxbury, from the Carleton University School of Business. Studies done in 1991 and repeated in 2001 show that work-family balance has deteriorated significantly in the past 10 years *(see also "Y2K Workplace Reality," p. 27)*. Employees experience much of this imbalance as role overload and work interference with family life.
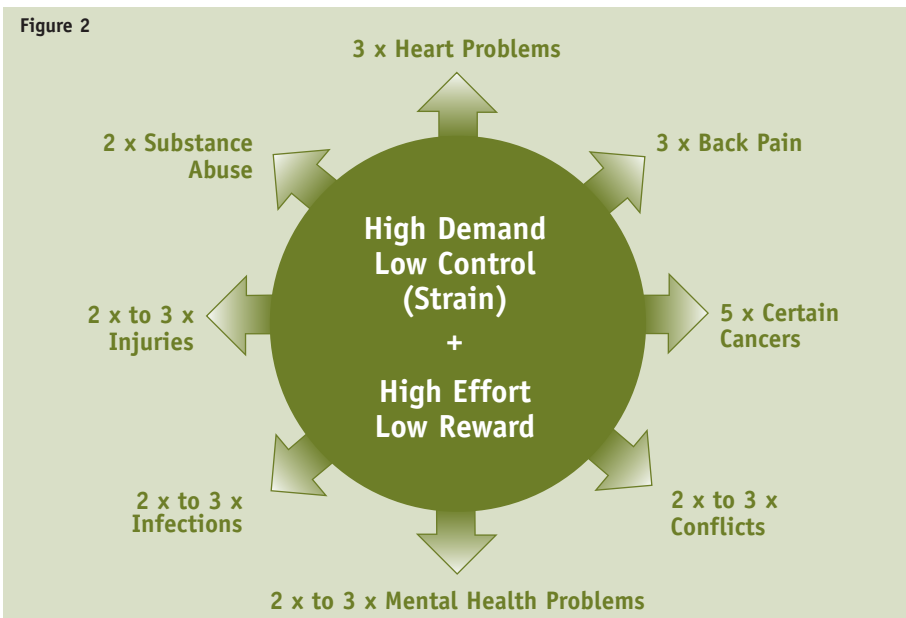
The implications for employers are serious. Duxbury states, "High levels of role overload and work to family interference affects the organization's bottom line. [These] employees... are significantly less committed to the organization and satisfied with their jobs. They also report significantly higher levels of job stress, absenteeism, EAP use, prescription drug

use and intent to turnover." Yet in these same companies, employees with "supportive supervisors" reported significantly higher job satisfaction, trust of managers and commitment to the organization, and less role overload, job stress, depression, poor health, work-life interference, fatigue, absenteeism and inten-

tion to leave the company. What defines a supportive supervisor? In this study, simply those who demonstrate:

- giving positive feedback to employees
- two-way communication (good listeners)
- respect
- focus on output, not hours
- consistency, and
- coaching and mentoring of employees.

How about the bottom line?

Many employers believe that health and safety efforts must be "balanced" with productivity and financial concerns to ensure that the company stays in business. Their idea is that money spent on health and safety is money taken away from profit. Not so. The same management practices that lead to healthy employees

Figure 2

3 x Heart Problems

2 x Substance Abuse

3 x Back Pain

High Demand Low Control (Strain) + High Effort Low Reward

2 x to 3 x Injuries

5 x Certain Cancers

2 x to 3 x Infections

2 x to 3 x Conflicts

2 x to 3 x Mental Health Problems

also lead to a healthy bottom line.

Sometimes psychosocial hazards in the workplace are referred to as "mental health hazards" because their first impact is on the thoughts and emotions — or mental processes — of workers. And the research

The leadership factor: due diligence

Occupational health and safety legislation requires employers to take every precaution reasonable under the circumstances to protect their workers' health and safety. This general duty of due diligence has histori-

- instituting 360° feedback for performance measurement
- supporting work/life/family balance with policies and practices, and
- measuring employee stressors and satisfaction regularly, and then acting on the results in consultation with employees.

None of these options are simple or can be accomplished overnight by spending money or issuing edicts. They require, in most cases, a serious commitment from a company's leaders, a transformational leadership style to change the culture of the organization, and patience to make change over the long term. The theory is fine, but how do real companies achieve this? In an upcoming issue, *Accident Prevention* will look at how Amex Canada, a 2000-worker company in Markham, Ontario, has achieved the highest possible marks for both quality and healthy workplaces. It can be done, with enlightened leadership, and Amex is the proof.

"If you are a lousy leader," says Bill Wilkerson, "you are making people sick."

clearly shows that these hazards do result in increased risk of various mental disorders, especially depression, in addition to decreased mental functions such as innovation and creativity. Bill Wilkerson, president of the Global Business and Economic Roundtable on Addiction and Mental Health, and Michael Wilson, former federal finance minister and honorary chair of the Roundtable, have repeatedly stated that the costs of mental illness in Canada are staggering. At IAPA's most recent annual conference and trade show, Wilkerson compared the cost of depression in Canada to the cost of the softwood lumber dispute that has so mobilized Canadian politicians. He also noted that "the issue of emotional work hazards has replaced the traditional conduits of disability and pain in the workplace on an order of magnitude." While workers who go out on stress leave likely will not affect a company's compensation costs, the costs will be felt in increased short-term and long-term disability, as well as increased absenteeism. And depressed employees who make it in to work each day will be decidedly less productive than they could be.

Recruitment and retention

While generous benefits and perks may attract employees, it's the workplace culture that keeps them. In two surveys carried out by AON Consulting and Prudential Life,[1] the top seven drivers for employee retention were (not in rank order):

- management/supervisory quality
- management recognition of work/life balance
- opportunities for personal growth
- keeping pace with skills needed for the job
- open communication
- satisfying customer needs, and
- competitive pay.

Five of the seven are clearly related to the psychosocial work environment.

cally been applied only to the physical aspects of the workplace. As we learn more and more about the negative health and safety implications of demand and control, effort and reward, do employers have an increasing responsibility to "do no harm" to workers, by controlling psychosocial hazards in the workplace? Martin Shain, a lawyer by profession, argues that "there is a solid legal basis to support claims that certain types of stress at certain levels are hazards under health and safety rules, and that employers have a duty to abate such hazards at source under the general requirements of due diligence." *(The Health Canada article referenced below includes his detailed citations from case law.)*

Solutions?

So, knowing how hazardous certain types of stressors can be to workers' health and safety, what can be done? In his conference address, Bill Wilkerson didn't pull any punches. "If you are a lousy leader," he said, "you are making people sick. Ambiguity, inconsistency, uncertainty, insecurity, arbitrariness, bad decision-making, self-centredness, rewarding the wrong things in the office, the fostering of office politics, and rewarding political behaviour — that's the earmark of weak leadership."

The literature clearly suggests that many changes in organizational culture, management practices and style can eliminate or reduce the exposure to and effects from, these hazards. Some examples are:

- encouraging workers to participate in decision-making
- encouraging workers to voice concerns and make suggestions — and then listening
- improving workers' trust in the company, and managers' trust of workers
- demonstrating fairness in management style, and application of policies
- improving supervisors' communication effectiveness and "people skills"
- training and evaluating supervisors in giving rewards and appreciation appropriately
- instituting flexible work options

REFERENCES

1. Barling, J.C., Houghlin, E., Kevin Kelloway. *Safety-specific transformational leadership: Development and test of a model linking safety-specific transformational leadership and occupational safety.* In press Journal of Applied Psychology.

2. Barling, J.E., Kevin Kelloway, and R.D. Iverson. *High quality work, employee morale and occupational injuries.* Manuscript submitted for publication.

3. Conference Board of Canada, *More than Just Hard Hats and Safety boots: Creating Healthier Work Environments.* November 2000.

4. Duxbury, L and Higgins, C. *Work-Life Balance in the New Millennium: Where are We? Where Do We Need to Go?* CPRN Discussion Paper No W/12, October 2001. Available on website, http://www.cprn.com/docs/work/wlb_e.pdf.

5. Duxbury, L. *Work-Life Balance: Rhetoric Versus Reality 2001.* Presentations at Health, Work and Wellness Conference, Calgary (October 2001), and Spirit 2001, IAPA Conference, Peterborough (September, 2001).

6. Health Canada, *Best Advice on Stress Risk Management in the Workplace.* Available on website at: http://www.hc-sc.gc.ca/hppb/ahi/workplace/resources.htm.

7. Karasek, R and Theorell, T, *Healthy Work: Stress, Productivity and the Reconstruction of Working Life,* 1990. New York, New York: Basic Books Inc.

8. Moon, SD and Sauter, SL, *Beyond Biomechanics: Psychosocial Aspects of Musculoskeletal Disorders in Office Work.* 1996. Bristol, PA: Taylor & Francis.

9. National Quality Institute, *Canada's Healthy Workplace Criteria.* Available on website at http://www.nqi.ca/english/healthyworkplace.htm.

1. Pratt, D. *The Healthy Scorecard: Delivering Breakthrough Results that Employees and Investors will Love!* 2001. Victoria, BC: Trafford Publishing.

Joan Burton is IAPA's manager, health initiatives.