



Baker IDI
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Integrated Approaches to OHS & Health Promotion

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Addressing the Chronic Disease Burden

- **Renewed government interest in workplace health promotion (WHP) to address rising chronic disease burdens**
 - **Cardio-metabolic syndrome (CVD & Type 2 diabetes)**
 - **Cancers**
 - **Depression**
 - **Anxiety**

Why Health Promotion in the workplace?

- **A setting where individual behavior and work environment changes can be made**
- **Most adults spend a considerable portion of their time at workplaces and typically eat at least one meal at work**
- **Allows a culture of health to be created and allows for peer support amongst employees**

Workplace OHS

- **Victorian OHS Act 2004, Objectives**
- **(a) to secure the health, safety and welfare of employees and other persons at work**
- **(b) to eliminate, at the source, risks to the health, safety or welfare of employees and other persons at work**
- **(d) to provide for the involvement of employees, employers, and organisations representing those persons, in the formulation and implementation of health, safety and welfare standards**

International best practice WHP

- **Integrated intervention on OHS and health behaviour, or ‘integrated health protection and health promotion’ (Sorensen et al 2002)**
- **‘Comprehensive’ WHP... “in which both individual and organisational influences on health are targeted simultaneously” (Shain & Kramer 2004)**

International best practice WHP

- **Current US NIOSH *WorkLife* Initiative**
- **‘Comprehensive approach to reduce workplace hazards and promote worker health & wellbeing’**

www.cdc.gov/niosh/worklife/essentials.html

International best practice WHP

- **“The premise of this initiative, based on sci research and practical experience in the field, is that...**
- **...comprehensive practices and policies that take into account the work environment—both physical & organizational—while also addressing the personal health risks of individuals, are more effective in preventing disease and promoting H&S than each approach taken separately.”**

International best practice WHP

- **European Network for Workplace Health Promotion, 1997 Luxembourg Declaration:**
- **“The combined efforts of employers, employees, and society to improve the health and well-being of people at work...**
- **...can be achieved through a combination of**
 - **improving work organisation and the working environment**
 - **promoting active participation, and**
 - **encouraging personal development.”**

Integrating Health Promotion and Health Protection: Rationale

- **Both health behaviors and occupational exposures contribute to chronic diseases...**
- **...so both should be targeted.**
(WHO Ottawa Charter for Health Promotion)
- **Limited success of WHP interventions addressing only health behaviours—need for new approaches**

Burden of Occupational Injury & Disease

- **Hazardous working conditions and associated disease burden disproportionately borne by lower paid/lower occupational level workers—the same groups with worst health behavioral profile**

Integrating Health Promotion and Health Protection: Rationale

- **Working conditions can influence health behaviours**
- **Smoking**
 - **Job stress, shift work, long working hours, hazardous substance exposures**
- **Body mass index (BMI)**
 - **Job stress, shift work, long working hours, sedentary work environments**
- **Alcohol consumption**
 - **Job stress, work culture**

Integrating Health Promotion and Health Protection: Rationale

- **Awareness of combined effects of health behaviours and occup exposures:**
 - May increase worker motivation to change health behaviors...
 - **Should increase employer and government motivation reduce occup exposures**
- **Simultaneous intervention on working conditions increases worker motivation to change health behaviors**

Integrated OH&S and workplace health promotion example

- **Wellworks-2: reducing cancer risk by integrated intervention on:**
 - **Smoking and eating habits**
 - **Hazardous substance exposures**
- **RCT involving 15 large Boston-area manufacturing sites (~9,000 employees)**
- **Sites randomly assigned to integrated vs HP-only**

Wellworks-2 Findings: Health Behaviour Change

- **Double the smoking quit rate at integrated intervention sites versus HP-only controls**
- **No significant change in nutritional behaviours**

Wellworks-2 Findings: OHS

- **Organisational Level: OHS Management Systems**
 - Greater improvements in integrated versus control group in OHSMS overall, but not statist significant
 - Significantly greater improvement in “Management commitment & employee OHS participation”
- **Physical Work Environment Level: Exposure Prevention Index**
 - Slightly greater improvements in hazardous substance exposure control at integrated versus control sites, but not significant

WHP/OHS integration

- **Make chronic disease prevention the primary goal, with two main objectives:**
 - **Improvement of relevant health behaviors**
 - **Improvement of relevant working conditions**
- **Articulating and addressing OHS contributions to targeted chronic diseases as well as individual behaviour**

Preventive Intervention Targets for Cardio-Metabolic Health

Health Behaviours

- Physical activity
- Diet
- Smoking

Occupational Hazards

- Sedentary work
- Long working hours
- Shift work
- Job control
- Job demand

Integrated OHS WHP

- **Highlight links between individual and occupational risks (to optimize motivation for change in both workers and orgs)**
- **Ensure that legal OHS obligations met for addressing relevant occupational risks**
- **Prioritize intervention on OHS contributions**
 - **Clear duty of care and legal mandate on known work-related risks (employer responsibility)**
 - **Clear method of how to act, through employee consultation and involvement of existing OHS reps**

International Best Practice WHP

- **Integrated/blended/comprehensive approach combining person-directed and work-directed strategies:**
 - **Mutually reinforcing**
 - **Person-directed health behaviour change (which also requires supportive org/envt)...**
 - **Work-directed OHS improvements (which also requires individual participation and safe work practices)**

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