

How can stress and other mental health challenges be prevented in the workplace?

Stressforskningskonferencen, Copenhagen, 23 October 2019

Outline

Mental health problems and the workplace

- A selection of challenges.
- Prevalence of mental health problems.
- The role of the workplace in prevention and management of mental health problems.
- An integrated approach for the workplace (LaMontagne).

Key points



Mental health problems are prevalent in the working population in Denmark.



Some mental health problems are attributable to working conditions.



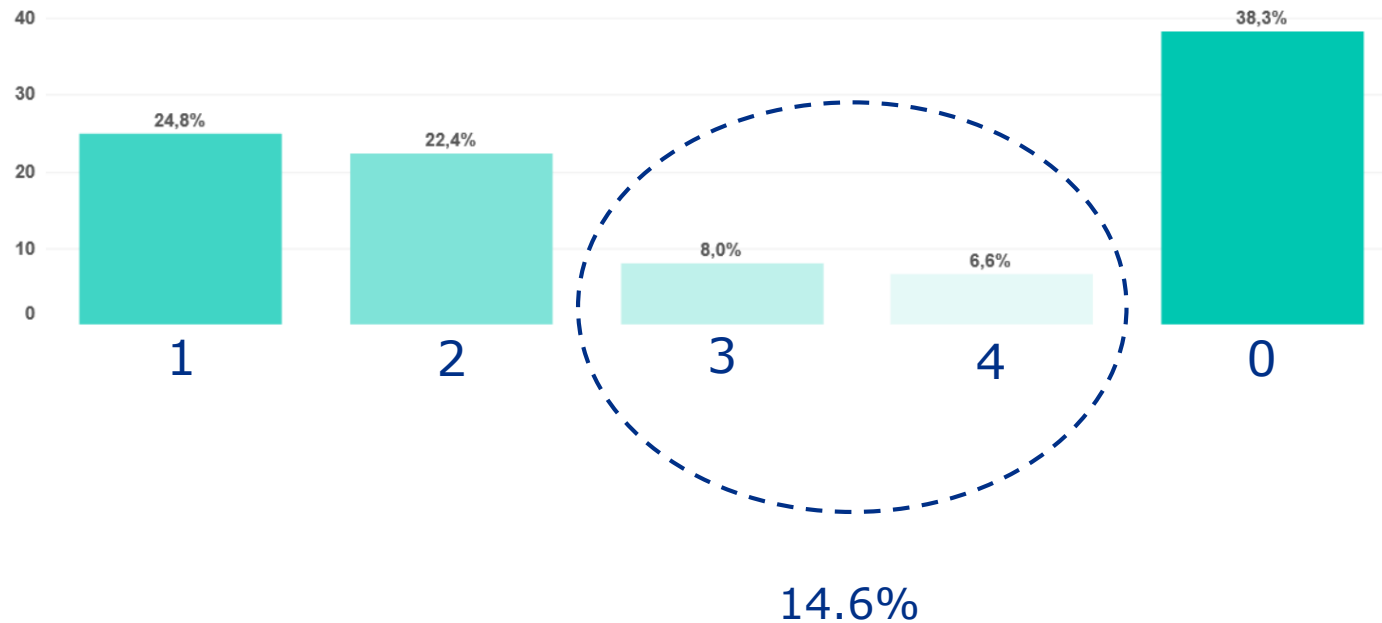
The workplace is a key arena for managing mental health problems regardless of their cause.

A selection of challenges

- How to recognize mental health problems in the workplace?
- Should nonwork-related mental health problems be dealt with the same way as work-related mental health problems?
- How should the workplace's approach to mental health problems be organized?

Prevalence of mental health problems

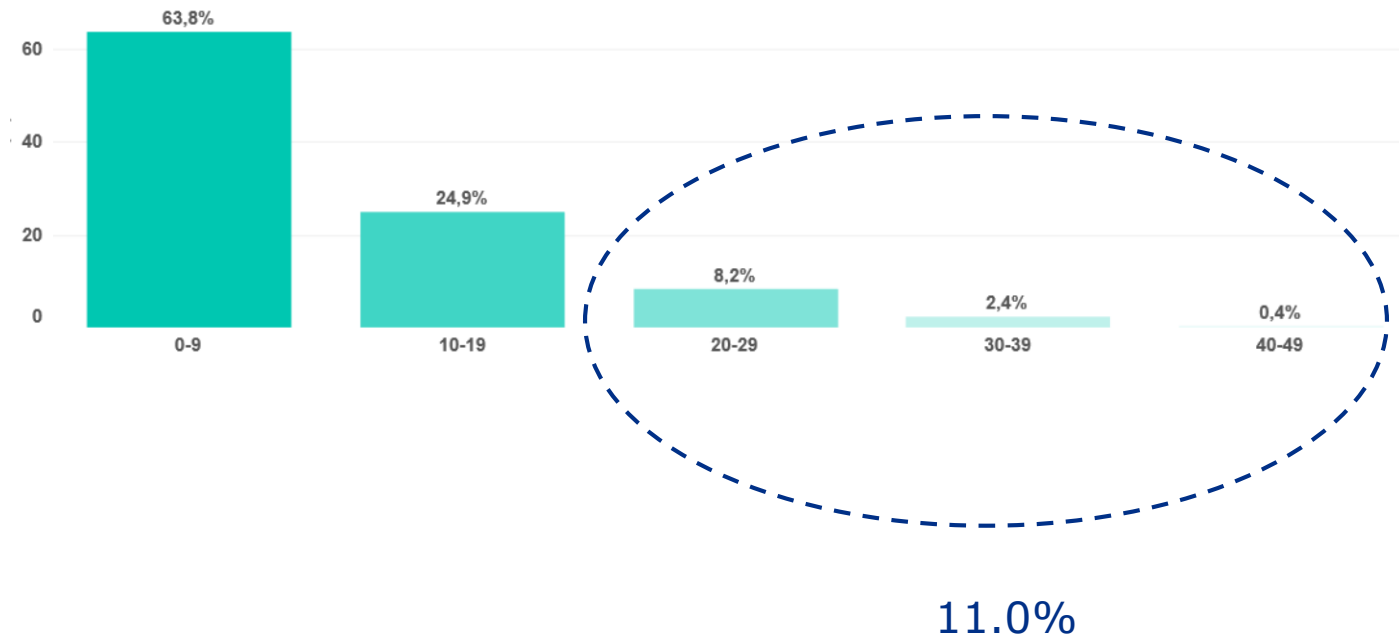
Number of anxiety symptoms the last 4 weeks in persons in job in DK (2018)



14.6% reported at least 3 out of 4 anxiety symptoms at high level

Prevalence of mental health problems

Depressive symptoms the last 2 weeks (MDI score) in persons in job in DK (2018)

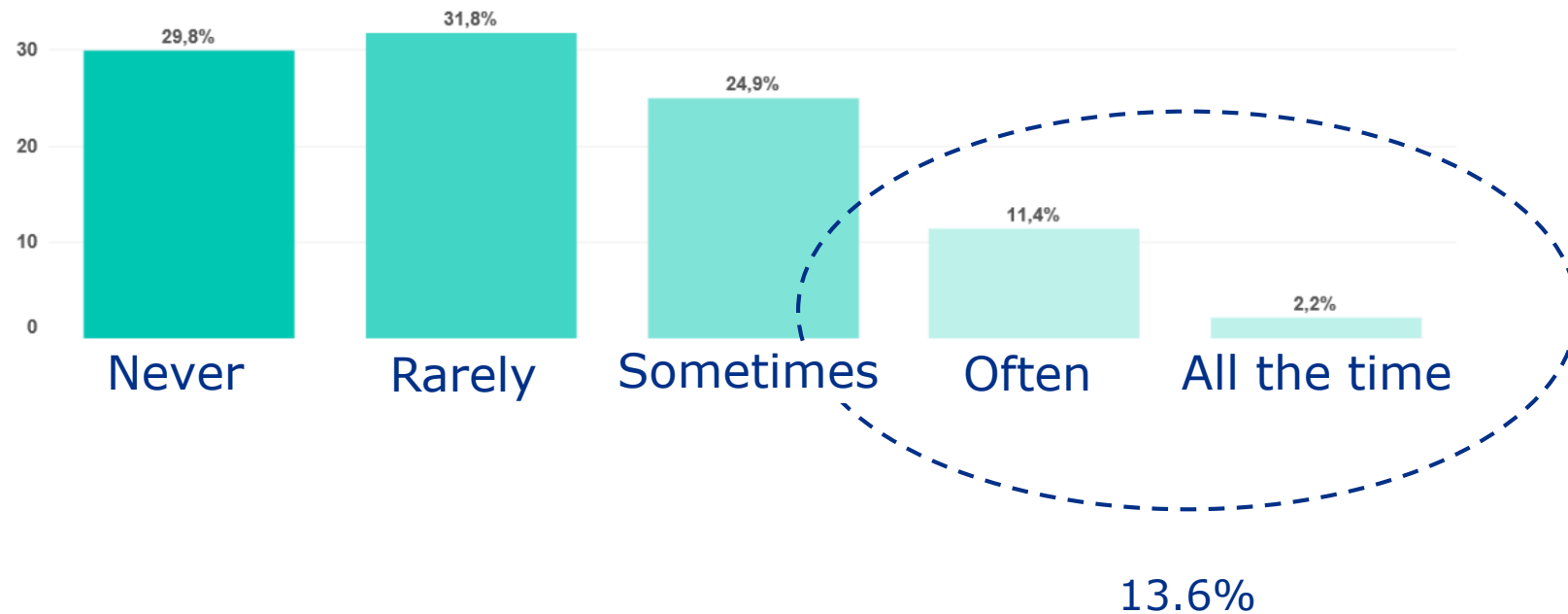


10.6% had an MDI score of at least 20.

Prevalence of mental health problems

Perceived stress in persons in job in DK (2018)

How often have you felt stressed during the last 2 weeks?



13.6% have felt stressed 'often' or 'all the time' the last 2 weeks

Absenteeism

Work performance

At least 15% of the working population in DK report high levels of anxiety, depressive symptoms or stress

Relationships
at work

Staff attitude
and behavior

Role of the workplace

Mental health problems attributable to work conditions

European countries, attributable fractions (95% CI):

- Job strain: **18.2%** (0.8–35.6%), DK: 13.8% (-0.1–27.7%).
- Effort-reward imbalance: **14.8%** (8.2–21.5%). DK: 11.9% (6.2–17.6%).
- Job insecurity: **4.5%** (0.6–8.4%). DK: 2.3% (0.2–4.5%).

Korea, attributable fractions (95% CI):

- Job strain: **13.6%** of MDDs, **4%** of suicides.

Denmark, self-reported:

- Self-reported stress: **60,6%** report that work has been a significant source of stress the last 2 weeks.

The Job&Mind project

Objective

To develop Danish recommendations and practical tools to help workplaces' to identify, prevent and manage the negative consequences of mental health problems among the employees.

Review of 17 international and national guidelines (Nexø et al., 2018)

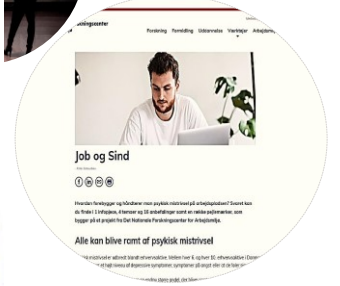


Intervention focus of reviewed guidelines (Nexø et al., 2018)

All three levels

6

Job&Mind: Developing Danish recommendations



Review

Labour market partners

Other stakeholders

Development

Labour market partners

Other stakeholders

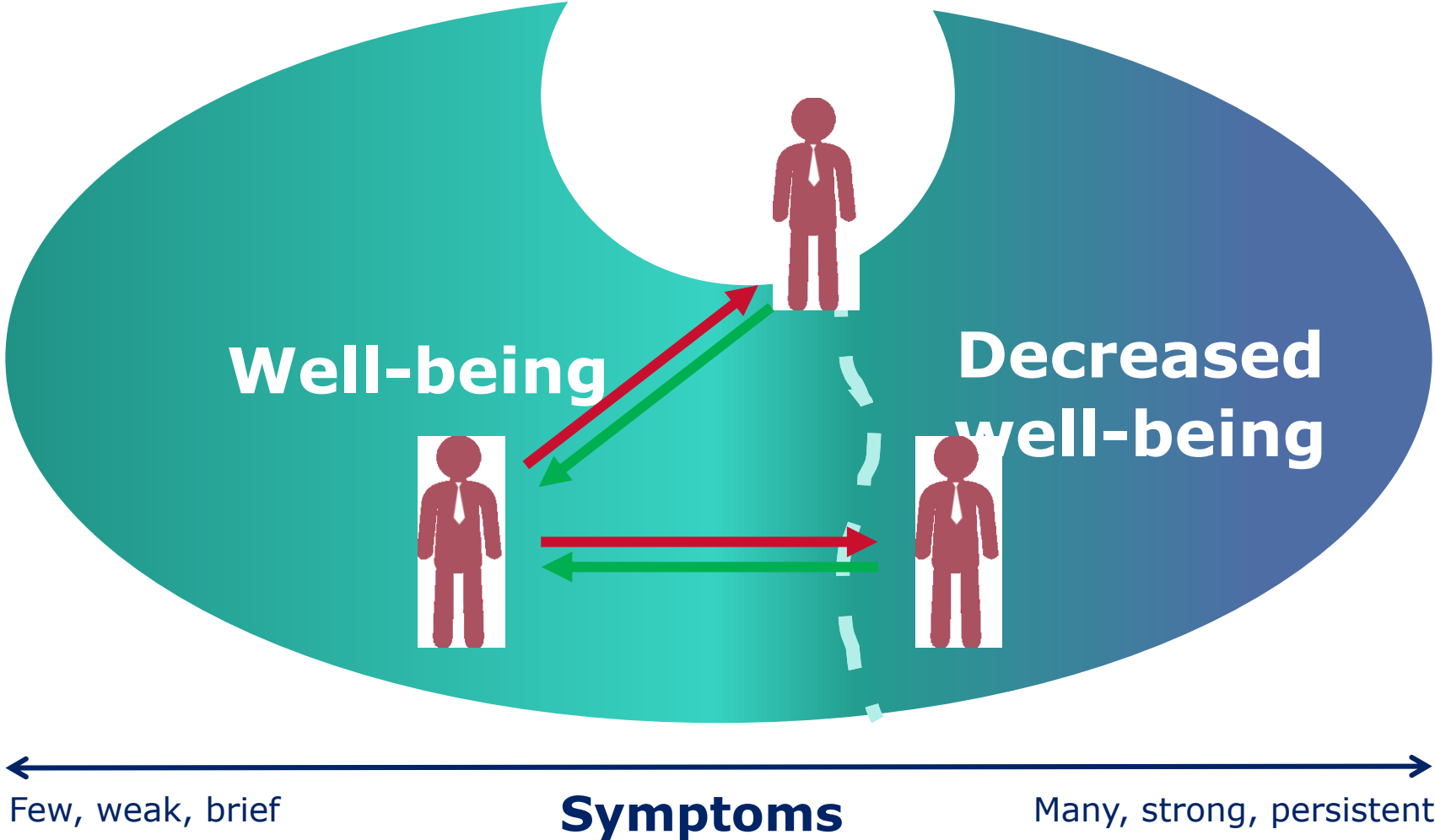
Dissemination

Labour market partners

Other stakeholders

Inclusion of stakeholders and experts

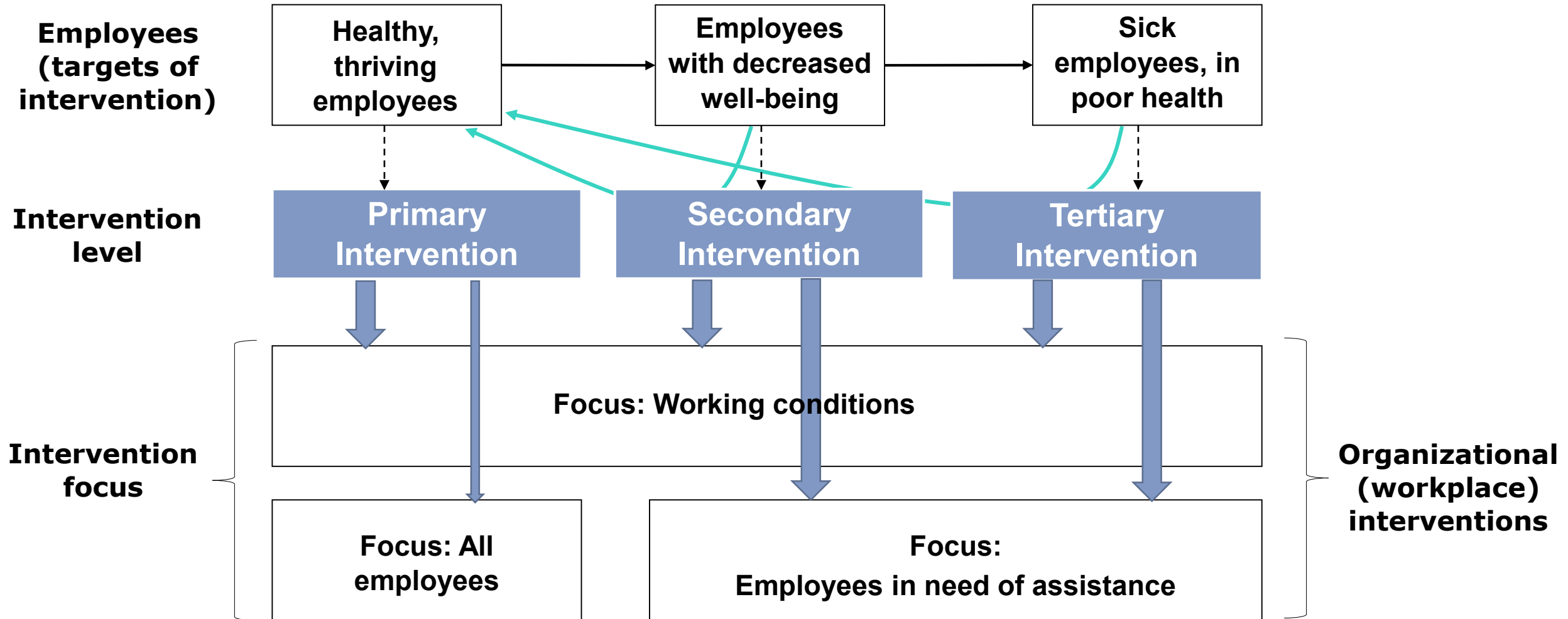
Job&Mind perspective: Recognizing mental health problems in the workplace



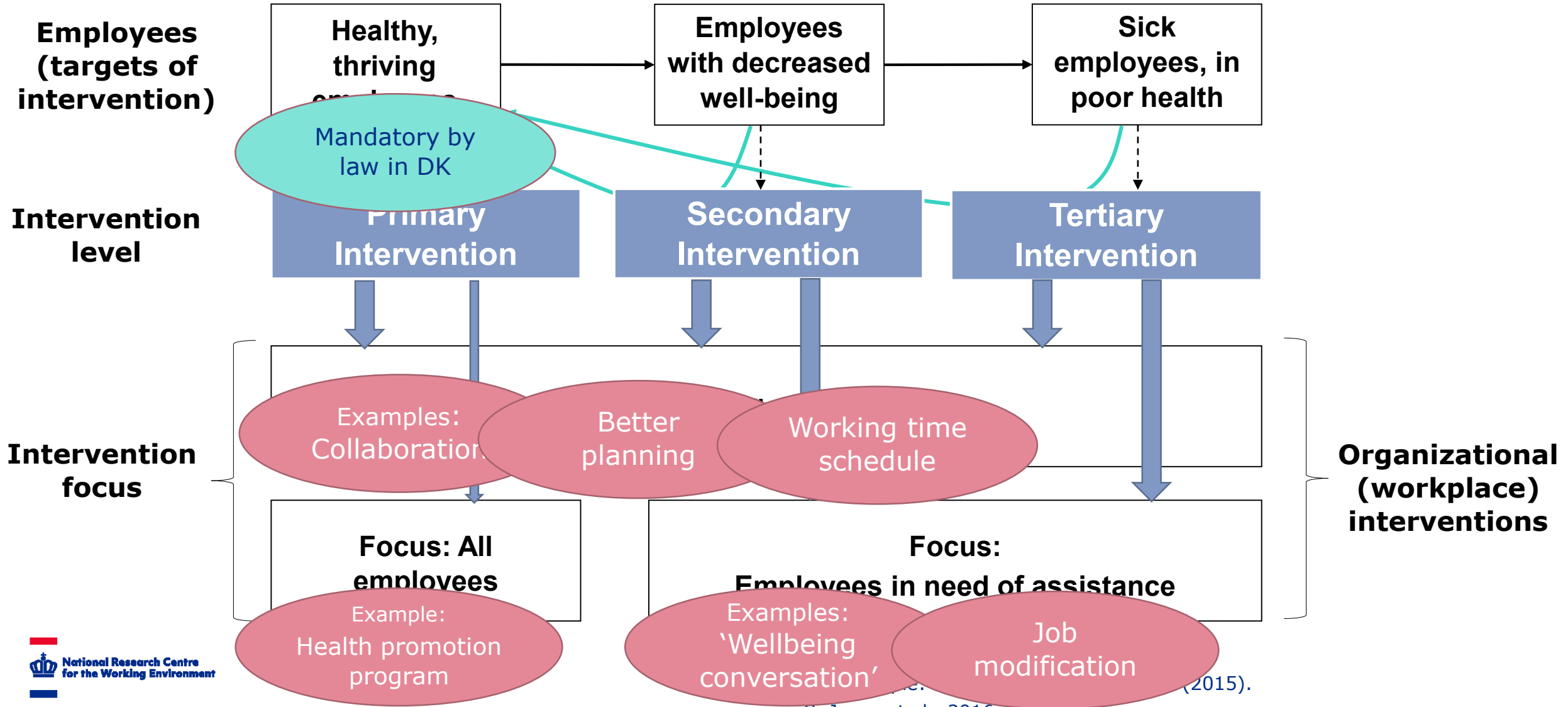
Addressing mental well-being in workplace context

- 'Labels' on different mental health problems not useful ('stress', 'depression', 'burnout', etc.) – there are no experts in diagnoses in the workplace!
- Mental health problems are common: Around 1/3 of the DK population will seek treatment for a mental disorder in their lifetime (CB Pedersen et al., 2014). All employees will experience decreased well-being from time to time.
- Having mental health problems (decreased well-being) is not a permanent state - the state of well-being changes over time.
- Mental health is (also) a workplace concern when:
 - ...caused by job stressors.
 - ...work is affected.
- The workplace can be instrumental in improving well-being regardless of the type of mental health problem or its' cause.

Workplace prevention levels



Workplace prevention levels



Secondary prevention of mental health problems

Challenges identified in the Job&Mind recommendations:

- Stigmatization of mental health problems.
- Lack of information about mental health.
- Lack of support to managers.
- Lack of tools to support the workplace, e.g.:
 - Conversation tools
 - Guides on job modification.

Secondary prevention

Recognizing mental health problems in the workplace

Signs that can be observed in the workplace include, for example:

- Withdrawal from social interactions
- Difficulties in planning and organizing activities
- Unusual or out of place emotional reactions (frustration, anger, strong reactions to feedback, etc.)
- Complaints of insomnia, fatigue, lack of appetite, pain, etc.

Secondary prevention – recommendation from Job&Mind:

Building a social climate of openness about decreased well-being in the workplace

It is recommended that the workplace...

- Establish a policy on inclusiveness of employees struggling with decreased well-being.
- Work to reduce stigmatization of employees with decreased well-being.
- Make clear who employees can contact if they struggle with decreased well-being.
- Ensure organizational support to employees that struggle with decreased well-being.
- Make it easy to find information about decreased well-being.

Workplace motivations to prevent and manage mental health problems

- Comply with the law (primary prevention).
- Ethics – it is the 'right thing to do'.
- Reduce sickness absence and job turnover.
- Retain employees and their expertise.
- A climate that is inclusive of employees that struggle with decreased well-being is considered desirable (increase motivation, engagement, job satisfaction, etc.).
- Strengthen the reputation in the local community and the business network – strengthen the recruitment options.
- Economy (business case).

Which approach can be used by the workplace to tackle the mental health challenges?

An integrated approach to workplace mental health

1. Prevent harm

To protect mental health by reducing work-related and other risk factors for mental health problems (reduce the negative).

Primary (and secondary) prevention

2. Promote the positive

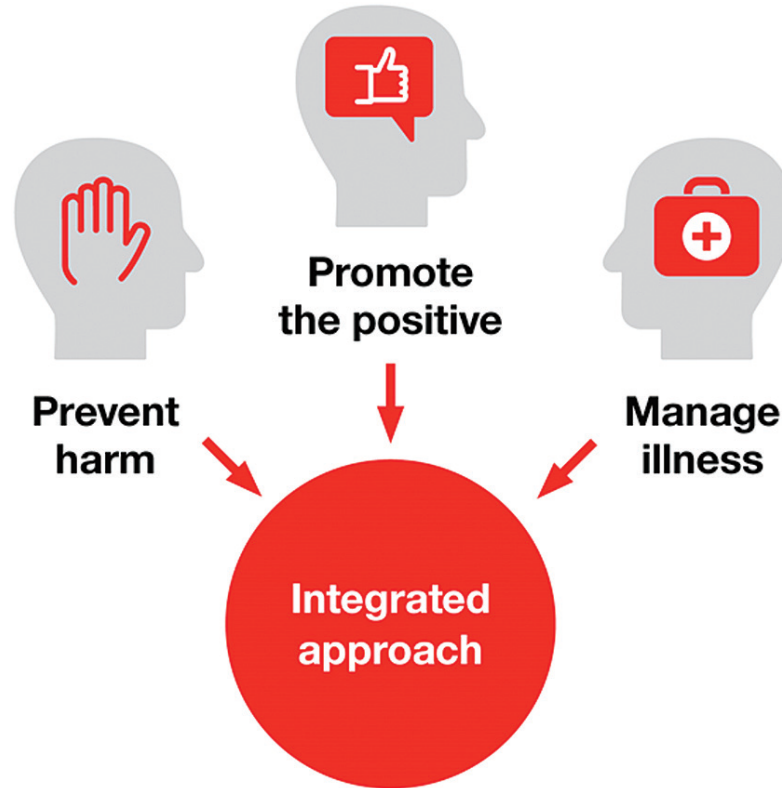
To promote mental health by developing the positive aspects of work as well as worker strengths and positive capacities.

Strengthening engagement, job satisfaction, etc.

Secondary and tertiary prevention

3. Manage illness

To address mental health problems among working people regardless of cause.



Review article in SJWEH

Review

Scand J Work Environ Health. 2018;44(6):443-457. doi:10.5271/sjweh.3731

Content and quality of workplace guidelines developed to prevent mental health problems: results from a systematic review

by Mette Andersen Nexø, PhD,¹ Josefine Vejlbj Kristensen, MA,² Majbritt Thorhaug Grønved, MA,² Jesper Kristiansen, PhD,² Otto Melchior Poulsen, PhD²

Nexø MA, Kristiansen JV, Grønved MT, Kristiansen J, Poulsen OM. Content and quality of workplace guidelines developed to prevent mental health problems. Results from a systematic review. *Scand J Work Environ Health*. 2018;44(6):443-457. doi:10.5271/sjweh.3731

Objectives A wide range of guidelines have been developed to prevent work-related mental health problems (MHP), but little is known about the quality of such guidelines. We systematically reviewed the content and quality of workplace guidelines aiming to prevent, detect, and/or manage work-related MHP.

Methods We conducted systematic online and database searches (MEDLINE; Web of Science; PsychNET; occupational safety and health databases) to identify guidelines. Eligibility criteria included guidelines recommending primary, secondary, or tertiary preventive interventions to be implemented at the workplace by employers, employees or organizational staff. A minimum of minimum three independent reviewers assessed the quality of guidelines using the Guidelines for Research and Evaluation (AGREE II). Guidelines rated $\geq 65\%$ with regards to domain I, II, and III were considered to be of good developmental quality.

Results Seventeen guidelines were quality assessed. Guidelines mainly targeted employers; eight guidelines recommended primary preventive interventions (eg, reduction of psychosocial hazards by risk management procedures), three recommended tertiary (eg, stay at work or return to work procedures for management), and six recommended a combination of primary, secondary and tertiary interventions (eg, facilitate return to work by increasing mental health literacy of all staff and coordination of sick-listed employees). Four guidelines had developed recommendations of good quality, but the evidence of two guidelines was outdated and studies documenting the effect of implementation were not yet available.

Conclusions Few guidelines have been developed with sufficient rigor to help employers prevent or manage work-related MHP and evidence of their effectiveness remains scarce.

Key terms depression; sick-leave; work disability; workplace intervention.

Mental health problems (MHP) severely challenge work force productivity (1). Anxiety, depression and stress-related disorders are common and the leading causes of work disability and early retirement in most Western countries (2-5). The workplace plays an essential role in relieving the burden of disability due to MHP (6). Therefore several international organizations have called for new policies, regulations and accompanying guidelines to help prevent work-related MHP (7, 8).

Guidelines providing evidence-based recommendations may enable workplaces to prevent work-related MHP in at least four ways. Primary preventive interventions aim to prevent MHP before they develop, by

either reducing or eliminating exposure to occupational risks (9) or promoting positive factors that make the organization, teams or the individual employee more resilient to workplace stressors (10, 11). Secondary preventive interventions target individuals at risk of developing MHP. The workplace can intervene early when an employee exhibits signs of MHP, which may relieve symptoms and prevent unnecessary sickness absence (12). Tertiary preventive interventions aim to manage and rehabilitate workers with MHP, who need sick-leave due to MHP. Workplace interventions facilitating employees return to work (RTW) may accelerate recovery and prevent prolonged or recurrent sick-leave

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Scand J Work Environ Health 2018, vol 44, no 5 443

Overview of the 16 recommendations:

Anbefalinger til arbejdspladser om forebyggelse og håndtering af psykisk mistrivsel

Temo A: Sådan kan man skabe en rummelig og åben kultur om psykisk mistrivsel på arbejdspladsen

1. Der anbefales, at arbejdspladsen udarbejder en politik om rummelighed som supplement til en politik, som adresserer mistrivsel, medarbejdertilbud, medarbejdernes eller lignende.
2. Der anbefales, at fremme en åben og rummelig kultur, hvor alle er opmærksomme på hinandens mistrivsel, og hvor diskrimination og stigmatisering ikke opstår.
3. Der anbefales, at arbejdspladsen tilbyder støtte til medarbejdere, der oplever psykisk mistrivsel.
4. Der anbefales, at arbejdspladsen sørger for, at ledere og medarbejdere ved, hvor de kan finde information og yderligere viden om psykisk mistrivsel.
5. Der anbefales, at arbejdspladsen sørger for, at medarbejdere ved, hvem de kan tale med på arbejdspladsen, hvis de oplever psykisk mistrivsel.

Temo B: Sådan kan arbejdspladsen støtte ledere

1. Der anbefales, at arbejdspladsen sørger for, at ledere kender deres rolle i forhold til medarbejdere, som oplever psykisk mistrivsel eller sygdomme.
2. Der anbefales, at arbejdspladsen tilbyder støtte og sparringsforhold til ledere og således, at de har de nødvendige kompetencer til at tage hånd om medarbejdere, der mistrives psykisk på arbejdspladsen.

Temo C: Sådan kan ledere være opmærksomme og reagere på tegn på psykisk mistrivsel

1. Der anbefales, at ledere jævnligt taler med sine medarbejdere om deres mistrivsel.
2. Der anbefales, at ledere er opmærksomme på forandringer i sine medarbejders adfærd.
3. Der anbefales, at ledere reagerer, hvis hun/han bliver opmærksom på psykisk mistrivsel hos en medarbejder ved at gå i dialog med medarbejderen på en åben og hensynfuld måde.

Temo D: Sådan kan ledere tage hånd om medarbejdere, der mistrives psykisk

1. Der anbefales, at ledere sammen med medarbejderen psykisk mistrivsel vurderer medarbejdernes arbejdsopgaver og på den baggrund tilpasser arbejdet.
2. Der anbefales, at ledere og medarbejdere taler om, hvordan det er forholdt arbejdet, der kan have været medvirkende til psykisk mistrivsel, og om der kan gøres noget for at ændre disse forhold.
3. Der anbefales, at ledere og medarbejdere sammen udarbejder en handplan, der styrker medarbejderen i at blive i arbejdet eller vende tilbage til arbejdet efter en sygdomsperiode. Ledere og medarbejdere følger op på handplanen og justerer den som nødvendigt.
4. Der anbefales, at arbejdspladsen jævnligt har kontakt med sygemeldte medarbejdere fra arbejdspladsen for at sikre tilbagegang til arbejdspladsen.
5. Der anbefales, at ledere følger op på medarbejdernes tilbagegang til arbejdspladsen.

Pamphlet:

Four guideposts for SMEs:

Forebyggelse og håndtering af psykisk mistrivsel

4 pejlemærker for små og mellemstore arbejdspladser

Det Nationale Forskningscenter for Arbejdsmiljø har udarbejdet 4 overordnede pejlemærker, der vil forebygge og håndtere psykisk mistrivsel. Pejlemærkerne består af 4 udvalgte, som arbejdspladsens ledere og medarbejdere i lille og mellemstore virksomheder kan vælge at tilføje til deres egen skriftlige politik.

Pejlemærker – vi bestræber os på ...

- ... at være en arbejdsplads, hvor der også er plads til de medarbejdere, som ikke lige er på toppen, og hvor arbejdsopgaverne tilpasses og medtages til den enkelte – også hvis arbejdskapaciteten er nedlagt.
- ... at være en arbejdsplads, hvor der er åbenhed omkring psykisk mistrivsel, hvor der er rogen, man kan tale med, hvis man har brug for det; og hvor vi tager ansvar for hinanden, holder øje med hinanden og styrer hinanden.
- ... at arbejde for at fjerne de faktorer på arbejdspladsen, som forårsager, forværrer eller forlænger psykisk mistrivsel, herunder skadelig stress.
- ... at være en arbejdsplads, som både husker på og tager hånd om kolleger, der er langtidssyge, og støtter dem, når de vender tilbage til arbejdet.

Job&Mind pejlemærkerne er en del af et værktøj udviklet af forskere fra Det Nationale Forskningscenter for Arbejdsmiljø. På baggrund af internationale standarder og retningslinjer har de udvalgt 16 anbefalinger, der kan bruges til at forebygge og håndtere psykisk mistrivsel blandt ansatte og kolleger.

Se mere på www.nfa.dk/jobogmind

Det Nationale Forskningscenter for Arbejdsmiljø | Lene Parbo 011 2700 København Ø | T 88 14 02 00 | E: info@nfa.dk | W: www.nfa.dk

Job&Mind website (jobogsind.dk):

Mental Sundhed.

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arbejdslivet.**

**Særligt for private
små og mellemstore
virksomheder.**

vellivforeningen.dk



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Thank you for your attention!

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