

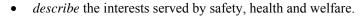
Module 8

Employee Safety, Health and Welfare

Overview

This module is designed to introduce you to with employee safety, health and welfare. In this module, factors important to health and safety, safety and health programmes, causes of work accidents and work-related illnesses, organisational responses to health and safety challenges, work stress and occupational health and safety are explained. It is the responsibility of employers to provide a safe and healthy workplace for their employees. It is also the responsibility of all employees to comply with safety rules and regulations to ensure their own safety and health.

Upon completion of this module you will be able to:



- *state* the legal framework within which health protective measures are enforced
- *comment* on the key issues in health and safety protection.



Outcomes

Terminology



Terminology

Burnout: Physical and mental exhaustion caused by

excessive striving to reach an unrealistic work-

related goal.

Employee assistance

programmes:

Employee Assistance Programme is employee benefit programmes offered by many employers which is intended to help employees deal with personal problems that might adversely impact their work performance, health, and well-being.

Hazard: A hazard is a situation or condition that poses a

level of threat to life, health, property, or

environment.

Prevention (wellness)

programme:

A programme instituted within an organisation to

achieve a high.

Quality of work life A term that had been that is broader describe job-

related experience an individual has such as in job



(QWL): satisfaction, work stress etc.

Safety: A state of feeling safe. Safety can also be defined

to be the control of recognised hazards to achieve

an acceptable level of risk.

Stress: A person's physical, chemical, and mental

reactions to stressors or stimuli in the environment.

Unsafe condition: The mechanical and physical conditions that cause

accidents.

Work-life balance: A concept that prioritising between work and

lifestyle of individual in order to maintain a healthy and balance work-life relationship.

Historical background

In the late 19th and early 20th centuries, employers ran their businesses as they saw fit to make a profit. Employee safety and health were not their concern. In fact, in official terms these things were nobody's concern. In the U.S., injured employees had to litigate to obtain compensation for their injuries. The cost of doing so effectively prevented employees from going to court. Besides, employees were rarely successful since the employer was not liable under common law if the employee had been aware of the hazards the job entailed or if the injuries were brought about as a result of the negligence of the employee or a co-worker.

From these origins, there has emerged an approach and practice with regard to health, safety and welfare issues. The main antecedents to today's practice are:

- The common law
- Employer paternalism
- Public outcry
- Legislation
- Decided cases
- Major accidents or disasters
- Employer pragmatism.

Evolution of the concept

Although the National Safety Council had been established in 1913 in the U.S. after safety-conscious managers and engineers spearheaded its founding, major disasters led to changes in thinking. By the early 1900s, state governments in the U.S. had brought in worker compensation laws. These provided compensation to injured employees irrespective of fault on the part of employers. The compensation was provided from a fund to



which employers were required to contribute. By the 1950s, all states in the U.S. had adopted these compensation laws in some form or the other.

Significantly, the ILO in 1959 made Recommendation No. 112 which provided that:

"Occupational health services should be established in or near a place of employment for the purpose of:

- Protecting the workers against any health hazard arising out of work or conditions in which it is carried on.
- Contributing towards workers' physical and mental adjustment.
- Contributing to establishment and maintenance of the highest possible degree of physical and mental well-being of the workers."

However, it was soon realised that such compensation or safety standards did not reduce occupational hazards. For example, research on industrial disease had uncovered links between certain toxic materials and a number of diseases prevalent in particular industries. As a result, the need to have disease preventive measures in industry was realised. It led to the passage of the Occupational Safety and Health Act of 1970 in the U.S. and the Health and Safety at Work Act of 1974 in the U.K.

The purpose of the U.S. Act was "to assure so far as possible every working man and woman in the nation, safe and healthful working conditions and to preserve our human resources". Its coverage was also extensive. Under this law, each employer had a general duty to provide a place of employment free from recognised hazards. They also had a special duty to comply with all standards of safety and health established under the Act.

The U.S. legislation also established three government agencies: (1) the Occupational Safety and Health Administration (OSHA) (2) the Occupational Safety and Health Review Committee, and (3) the National Institute for Occupational Safety and Health (NIOSH).

Since its establishment, OSHA has issued a large number of detailed standards covering numerous environmental hazards. Most have been useful but some have been petty. Compliance requires a good deal of paperwork.

OSHA has been controversial from the beginning and its effectiveness in improving workplace safety and health has been questioned by organisations it seeks to regulate. Employers complain of the high costs in complying with regulations. They argue that the regulatory framework ignores business realities. However, organised labour has praised OSHA for identifying and restricting exposure to health hazards that were "part of the job" and for imposing safety protection and participatory rights for workers. Small businesses have praised OSHA for delivering on its regulatory reform promises.



It must also be noted that these legal or other safety requirements seek to prevent unsafe work conditions (physical and work environment conditions). Employee behaviour is in no way governed. In short, behavioural factors (that also cause accidents) are not areas to which OSHA has application.

In India and Sri Lanka, the principal enactment is the Factories Act/Ordinance that contains many provisions relating to the safety and health of workers in industry.

Factors important to health and safety

Environmental, organisational and individual factors affect worker protection. Let us consider these factors.

Nature of the task

Some jobs are more likely to cause injury than others. The very nature of certain jobs is hazardous. For example, a construction worker on a high-rise building is exposed to more risk than a clerk in an office. A worker in an asbestos factory is more likely to contract a respiratory disease (asbestosis) as he/she is more exposed to asbestos dust.

Employee attitudes

Employee attitudes play a significant part in health and safety. If employees are committed to the idea of safety and cooperate with safety initiatives, then safety measures become more effective. Therefore, any safety measure or action on the part of government or employer may prove ineffective if employees are not committed to the idea of safety.

Government

Government (whether federal, state or provincial) plays a significant part in health and safety (H&S) because it legislates to improve H&S factors. Some of the more important enacted laws in Malaysia have been included in Module 1.

Trade unions

Trade unions have been more appreciative of H&S measures than the employees they represent. It is easy to see why this is so. The objectives of H&S initiatives and trade unions both improve the quality of working life of employees. They have pressurised employers for better programmes and use their clout to lobby for legislation to improve the H&S of employees.

Management's goal

Socially responsible managements had active H&S programmes long before they were made mandatory by law. Some others complied only because they were required to and that too only to meet the minimum requirements of the law. Attitudes of the management to H&S will determine the significance of such programmes to that organisation.



Economic conditions

Lastly, quite apart from the wilful avoidance of H&S measures, some employers face the dilemma of ignorance about the consequences of some dangerous working conditions. Furthermore, even where there is knowledge, prohibitive costs could prevent them from doing what is necessary. For example, uranium workers can expect that 10 per cent –11 per cent of them will die of cancer within 10 years. As long as there are no alternative methods and as long as there is a need for uranium, some employees will risk shorter lives in their jobs. Although work is being done to determine the dangers and to prevent or mitigate the consequences of such work, the costs of some of these preventive programmes are so high that it would not be economically viable to adopt them.

The nature of safety and health programmes

Some businesses are large and profitable enough to employ H&S specialists. Smaller businesses employ consultants. The reason is that there are many hazards in any working place with potentially far-reaching consequences and expert knowledge is required to effectively identify and address them. In the U.S. for instance, if a firm subjects its employees to defined or recognised risks, it could be fined or shut down by OSHA. If workers are injured or killed, the cost of workers' compensation insurance or similar coverage increases.

Although statistics are available, studies indicate that only about half of all occupational accidents are reported. Accidents and illnesses are not evenly distributed among employers either as some jobs (even in white-collar work) are potentially dangerous.

The costs of injuries and illnesses are innumerable to both employee and employer. Pain (both physical and psychological) and suffering affects the employee while there is financial loss to both employee and employer. Employers can also suffer a damaging loss in reputation.

Work-days are lost to an employer. There are losses in productivity and additional costs to be borne. The desire to reduce suffering as well as the need to contain direct and indirect costs of accidents, deaths and illnesses have moved organisations to create improved safety and health conditions at work.

Unions are only too concerned with workers' safety and health. In the U.S., some unions subsidise interns and medical students to help study occupational health conditions in plants where their members work. In Canada too, the Canadian Labour Congress sponsors regular health and safety conferences to increase awareness of health and safety at work.

Definitions

Safety hazards are those aspects of the work environment that have the potential of immediate and sometimes violent harm to an employee – for



example, loss of hearing, eyesight, or body parts; cuts, sprains, bruises, broken bones; burns and electric shock.

Health hazards are those aspects of the work environment that slowly and cumulatively (often irreversibly) lead to the deterioration of an employee's health. Typical causes include physical and biological hazards, toxic and carcinogenic dusts and chemicals, and stressful working conditions. Health conditions suffered can include cancer, poisoning and respiratory diseases.

Causes of work accidents and work-related illnesses

The causes of occupational accidents may arise from:

- The task to be done for example, poorly designed or repaired machines, lack of protective equipment, and the presence of dangerous chemicals and/or gases.
- Working conditions excessive working hours that lead to fatigue, noise, lack of proper lighting, boredom, horseplay and fighting at work.
- The employee for example, where the employee is accidentprone. Studies have shown that employees who are under 30 years of age, lack psychomotor and perceptual skills, and who are impulsive and easily bored, are more likely than others to have accidents.

Organisational responses to health and safety challenges

Some organisations have placed responsibility for employee health and safety with their CEOs. This approach is typical of smaller organisations with threats in this area or with medium—sized organisations with few such threats.

The larger organisations have set up safety departments usually under the purview of the human resource management team. In the U.S., a safety director should be appointed for every 2,000 workers. In India, it is mandatory under the Factories Act 1948 to appoint safety officers in factories with a workforce of 1,000 or more.

Safety and health must become the responsibility of everyone in an organisation if programmes are to be successful. The duties associated with a specialist or a department responsible for safety would include:

- Analysis of the job environment to prevent accidents and health hazards.
- Education and training in safety to prevent accidents and health hazards.
- Inspection of job conditions to determine causes and prevent the recurrence of accidents.
- Accident research to prevent future accidents.



Safety committees in organisations prove very effective if everyone in the organisation gets involved in the work of the committee. This work covers the organisation's entire programme – inspection, design, record keeping, training and motivation.

Here are some details about the three approaches. Glueck (1982) suggests approaches to safety committees for improving the safety of working conditions:

- Prevention and design
- Inspection and research
- Training and motivation.

Safety design and prevention

Organisations have adopted measures to build in safety through what is known as safety engineering. It makes jobs more comfortable, less confusing and less fatiguing. It keeps employees more alert and therefore less prone to accidents.

Safety engineers analyse all factors around jobs. As a result, they are able to improve safety precautions such as protective guards for machinery and equipment, colour coding to indicate hazards or dangers, protective clothing/devices and belts/lifelines to prevent falls. They may also recommend suitable rest periods to increase safety as well as productivity, and also demarcate certain areas as being no smoking or hard-hat areas.

It must be noted that studies done by Heinrich revealed that 88 per cent of accidents were caused by the unsafe acts of employees and only 10 per cent were caused by unsafe mechanical and physical conditions.

Inspection, reporting and accident research

Safety departments and specialists have another approach to reducing accidents and illnesses. They inspect the workplace to find answers to questions such as the following:

- Are safety rules being observed?
- Are safety guards and protective equipment being used?
- Are there potential hazards in the workplace that safety redesign could improve?
- Are there potential occupational health hazards?

Their observations and collected data help them in setting things right. They would also investigate accidents or close calls and use their findings chiefly to ascertain the steps that ought to be taken to prevent a recurrence. Reporting accidents and occupational illnesses is also an important part of the safety department's or specialist's job. Besides, OSHA requires that each recordable incident be logged on an OSHA form. Under the Act, a recordable incident is one which has resulted in:



- Death
- A non-fatal occupational illness
- An injury which caused loss of consciousness
- Restriction of motion or transfer to another job
- Required medical attention (other than first aid).

Safety and/or personnel specialists also carry out accident research at regular intervals during the work year. They systematically evaluate the evidence on accidents and health hazards. They gather data from both internal and external sources and also review available studies/findings that facilitate looking for hazardous conditions at the workplace.

This research often involves the computation of organisational accident rates which are compared with national figures and/or industry figures to determine the organisation's relative safety performance. For instance, OSHA prescribes a specific method of reporting accidents.

Safety training and motivation

Safety training is usually part of the orientation programme for new employees. Training can also take place at any time during an employee's career. Although workers often learn the ropes from each other in safety as in other areas, some training is also required by government agencies. Those responsible for safety have also devised motivational devices such as safety contests and communication programmes in their efforts to create a safer environment for employees. They are intended to reinforce safety training.

Auditing safety programmes

The National Safety Council in the U.S. recommends a particular approach to accident prevention. It involves engineering, education and enforcement. Stemming from this is a safety audit, a periodic inspection by safety specialists and/or committees to ascertain:

- To what extent safety prevails and the lapses they have observed
- Any new hazard or potential threat to health.

This in turn leads to an audit report that seeks to correct any threat to safety or health.

Organisational safety programmes and the manager

The management of an organisation is primarily responsible for the safety of its employees. This does not mean that a worker is absolved from responsibility for his/her own safety and health. It only fixes the point of responsibility. Safety being a team effort requires managers to have a responsibility to ensure that everyone cooperates to ensure that safety and health programmes are not only implemented but also effective.



According to Pigors and Myers (1981), a "wider view of occupational safety and health is necessary for them (managers) to formulate correct policies in regard to industrial safety which is commensurate with international standards, compatible with national policies and at the same time, meet the organisational objectives of profit and personal satisfaction".

To be able to do this, managers would have to focus on:

- The immediate workplace
- The adjacent community
- The regional environment
- The international environment.

It must be noted that legislation and changed attitudes towards employees has made safety and health priority areas for managers. In their role of managing bottom lines, they should realise that support and commitment to safety and health is ultimately cost-effective.

Health programmes for employees

Larger organisations are likely to have their own medical and health facilities. The activities that are handled within these facilities vary from organisation to organisation and may include the following:

- Treating accidents and medical emergencies at work.
- Performing physical examinations in conjunction with the selection of employees.
- Evaluating possible health hazards involved in transfers of employees to different regions or countries.
- Advising management on health hazards associated with the use of materials, chemicals in manufacture and/or consumer usage of products.
- Advising management on health-related problems of employees such as substance abuse and emotional problems.
- Undertaking preventive medicine through periodic examinations, immunisation and group surveys for diabetes, cancer, tuberculosis (TB) and heart disease.

Many of these functions are more important today than ever before due to far-reaching government regulations. The extent of the facilities found in an organisation would depend on organisation size and the extent of health hazards on the job. Do note however that health programmes are less widespread than safety programmes.

Occupational diseases and accidents

You have by now considered background issues and the nature of managerial responsibilities in regard to the health and safety of employees



in organisations. In spite of various measures to ensure that employees are not subjected to any hazards, some are inevitably afflicted with diseases caused by their working conditions and environment. The following section is intended to acquaint you with the nature of these diseases as well as accidents that occur in workplaces.

Continuous exposure to a range of factors can seriously increase the probability of contracting occupational diseases. NIOSHA in the U.S. has identified more than 15,000 toxic substances of which 500 might need regulation as carcinogens. The list of harmful chemical, physical and biological hazards is a long one. It includes carbon monoxide, vinyl chloride, dusts, particulates, gases and vapours, radiation, excessive noise and extreme temperatures. When present in high concentration, these agents can lead to respiratory, kidney, liver, skin, neurological and other disorders.

Typical diseases

The potential sources of work-related diseases are distressingly varied as the way they affect the human organism. Schuler and Youngblood (1986, p. 492) cites Ashford (1977) who says thus:

Typical health hazards include toxic and carcinogenic chemicals and dust, often in combination with noise, heat, and other forms of stress. Other health hazards include physical and biological agents. The interaction of health hazards and the human organism can occur either through the senses, by absorption through the skin, by intake into the digestive tract via the mouth or by inhalation into the lungs.

Schuler and Youngblood (1986) notes that OSHA is concerned with all of the following categories of occupational diseases and illnesses on which employers are required to keep records of:

- Occupation-related skin diseases and orders
- Dust diseases of the lungs
- Respiratory conditions due to toxic agents
- Poisoning
- Disorders due to physical agents
- Disorders associated with repeated trauma
- All other occupational diseases.

Nair and Nair (1999) define occupational diseases as those caused by prevailing working conditions. In India, the Factories Act 1948 identified the following as occupational diseases which (when noticed) must be reported to the government authorities:

- Lead poisoning
- Lead tetra-ethyl poisoning
- Phosphorous poisoning



- Manganese poisoning
- Mercury poisoning
- Arsenic poisoning
- Poisoning from nitrous fumes
- Carbon bisulphide poisoning
- Benzene poisoning
- Chrome ulceration
- Anthrax
- Silicosis
- Halogen poisoning
- Radiation
- Primary skin cancer
- Toxic jaundice
- Mineral oil poisoning (dermatitis)
- Bysionosis
- Asbestosis
- Toxic anaemia
- Chemicals and point poisoning (occupational or contact dermatitis)
- Loss of hearing due to noise pollution
- Occupational cataract caused by infrared radiation
- Telegraphists' cramp
- Carpal tunnel syndrome.

Continued research is underway to identify additional hazards that firms will want to diagnose and remedy for the future well-being of their workforce. The following are some courses of action that organisations are already taking to protect their workforces from occupational diseases.

Protection against diseases

As Nair and Nair (1999) write, protection afforded by organisations can either be preventive or curative. Once the sources of harmful conditions on the job are identified, strategies to improve an organisation's occupational safety and health ratings can be developed. Nair and Nair (1999) list some of the preventive and curative measures highlighted by the National Commission on Labour and other committees in India as follows:

Preventive measures:

Pre-employment medical examination.



- Periodic post-employment medical examinations.
- Removal of hazardous material/processes wherever possible.
- Surveillance of employees exposed to health hazards.
- Emergency treatment in case of accidents.
- Availability of first-aid equipment.
- Training employees in first-aid.
- Education of employees in health and hygiene.
- Special surveillance of the health of those more susceptible to disease.
- Proper layout of factory and proper illumination.
- Proper design of buildings with adequate ventilation.
- Proper effluent disposal systems and/or treatment plants.
- Careful design and selection of handling equipment.
- Ergonomic design of workspaces and tools.
- Proper design of job to remove monotony and fatigue.
- Proper schedule of work with adequate rest periods.
- Registration with Bhabha Atomic Research Centre (BARC) in Trombay, India, and their periodic inspection wherever radiation materials are used.

Curative measures:

- Adequate medical treatment.
- Allowing adequate time for convalescent rest and recuperation.
- Adequate compensation.

Accidents

Typical safety legislation in India offers the following definitions of an accident:

An occurrence, mishap or untoward event which is not expected or designed for and arising out of and in the course of employment of an industrial worker. (Workers' Compensation Act, 1923)

An occurrence in an industrial establishment causing bodily injury to a person which makes him unfit to resume his duties in the next 48 hours. (Factories Act, 1948)

Nair and Nair (1999) also define "accidents". Their words are:

Any occurrence taking place within the premises of industrial establishment arising out of and in the course of employment



which is not planned or intended which might disrupt orderly progress of scheduled work and might cause injury or death to person(s) or result damage to equipment, material, buildings or infrastructure but exclude self inflicted personal injuries of employees of the organisation.

Nair and Nair (1999) present the following arising from the above definitions.

- Accidents are occurrences unexpected and undersigned.
- Employers are liable to pay compensation to workers for personal injuries suffered by such workers due to an accident, provided such injuries occurred arising out of and in the course of employment.
- Self-inflicted injuries are exempted for payment of compensations as these do not occur "arising out of and in the course of employment".
- Natures of total personal injuries are total disablement, partial disablement, permanent disablement (total or partial) and temporary disablement (total or partial).
- Injuries suffered by an employee are subject to compensation
 even if the cause of such injuries is carelessness and negligence
 by the said employee as long as the occurrence was found to be
 "arising out of and in the course of employment" in the
 organisation.

According to Dessler (2001), there are three basic causes of workplace accidents: (1) chance occurrences (2) unsafe conditions, and (3) unsafe acts on the part of employees. Chance occurrences are more or less beyond management's control. So, your responsibilities as a manager also focus on unsafe conditions and unsafe acts.

Types of accidents

It is important that you understand the nature and types of accidents in the workplace. On one hand, it is necessary to prevent any injury to employees. On the other hand, compensation to be paid to employees in the event of an accident will depend on the type and nature of the accident.

- Industrial injury This is a personal injury to an employee
 which has been caused by an accident or an occupational disease
 and which arises out of or in the course of employment and which
 would entitle such an employee to compensation under the laws
 of the land.
- **Disablement** This is a loss of capacity to work or move due to an accident resulting in loss of reduction of earning capacity. It could be total, partial or temporary.
- **Total disablement** This is a disablement whether of a temporary or permanent nature which incapacitates a worker for



all work that he/she was capable of performing at the time of the accident.

• **Partial disablement** – This is a disablement that may be of a temporary or permanent nature which reduces the earning capacity of a worker as a result of an accident.

Causes of accidents

The causes of workplace accidents fall into four categories. The descriptions of these categories – intrinsic, extrinsic, personal and exogenous – should help you recognise how to prevent and manage the consequences of accidents.

Intrinsic causes

Intrinsic causes are those that reside in the jobs themselves such as:

- Inhaling dangerous chemical fumes (for example, chrome vapour) while dealing with processes like electroplating.
- Overexposure to radiation while working with X-ray and gamma ray machines.
- Overexposure to heat or being burnt when working in and around furnaces such as those in the steel industry.
- Falling from tall towers, chimneys and cranes that are part of work processes.

Extrinsic causes (Environmental causes)

These relate to causes that are not of the job itself but arise from the environment in which the job takes place such as:

- Lack of adequate lighting and ventilation that result in accidents.
- Injuries due to atmospheric/environmental pollution that include that caused by poor air, water and excessive noise.
- Use of defective machinery.
- Lack of protective equipment and safety devices.
- Poor layout and faulty location of equipment, tools and workstations/places.
- Work stress due to anxiety, monotony and fatigue.
- Dangerous stacking of materials.
- Improper maintenance of electrical systems, gas supply systems and/or poor housekeeping.
- Slippery floors, however caused.
- Lack of cautionary notices.
- Poor work schedules.
- Insufficient training and/or supervision.



Some of these conditions are subject to control. Good management could minimise the probability of related accidents.

Personal causes

These relate to accidents caused by the physical, mental, psychological and physiological state of the worker. These are causes that only the employee can control such as:

- Lack of knowledge and skill.
- Lack of physical characteristics like stamina or the presence of any physiological infirmity.
- Failure to follow a prescribed set of instruction and/or safety precautions.
- Behavioural causes such as the unnecessary taking of risks (e.g., speeding).
- Psychological aspects such as forgetfulness, carelessness, indifference, lack of interest, daydreaming, frustration, anxiety, etc.
- A poor mental state brought about by substance abuse such as alcoholism and addiction to drugs.

Exogenous causes

Any causes not covered by the above are classified under this category and usually include "acts of God" which is a phrase used to denote natural occurrences unconnected with human action or behaviour. Examples of these are lightning, floods and earthquakes. However, it also includes causes (such as enemy actions like bombing) that are not of either the employer or the employee.

According to Schuler and Youngblood (1986, p. 498), accident prevention can also be seen as a function of how well people in an organisation communicate and work together. For example, the HR department must work with supervisors and managers in the recording of accidents. Effective records produced by both groups can highlight the causes of accidents as well as their severity and frequency.

Theory of accidents

Nair and Nair (1999, p. 350) cites Heinrich (1980) who formulated a theory called the **chain of injury occurrence** empirically derived from a study of 75,000 accidents. Heinrich stated that in every accident there is a chain of events that occurs in a logical and hierarchical order. This theory fundamentally states that there is a chain of events that can be traced for most accidents. An injury results from an accident which results from an unsafe act or unsafe working conditions which result from the faults of individuals which result from preceding experiences and conditions.

Personal causes contribute to the majority of accidents. Thus, it can be said that accidents are caused and do not occur by themselves. It follows



then that accidents can be avoided through proper planning, training and precaution.

Cost of accidents

The cost of accidents will vary with the type of accident, the nature of the injury/damage and the location. Such costs will include direct and indirect costs.

Direct costs include the following:

- 1. Cost of damages/destruction of equipment, machines, material, building and infrastructure involved.
- Compensation paid to an injured worker or the estate of a dead worker.
- Payment to an injured worker during medical treatment and convalescence.
- 4. Cost of medical treatment of the injured worker.
- 5. Loss of production/wastage or inefficiency involved in the case of replacement of the injured worker with another less competent worker.

Indirect costs include:

- 1. Loss of production until the injured person/equipment is replaced/substituted and production resumed.
- 2. Expenses incurred on persons such as factory inspectors or engineers employed by the government or the company for improving safety standards and preventing accidents.
- 3. Loss of production time of other workers/supervisors/managers engaged in tasks associated with the accident such as:
 - Sending the injured worker for medical attention.
 - o Investigating the cause of the accident and preparing reports.
 - Attending proceedings of the investigation into t the accident.
 - Overheads during the period production are temporarily disrupted due to the accident.

Prevention of accidents

An organisation's management has a great responsibility to ensure that the workplace is free from any cause for accidents. Ivancevich (1998) suggests that the safety department or unit in the organisation can take three approaches to improve the safety of working conditions. They are:

- Prevention and design
- 2. Inspection and research
- 3. Training and motivation.



There is much to know about all these three approaches. For the purposes of this course, prevention and design lend themselves to the most detailed discussion.

The National Safety Council of the U.S. has a three-pronged approach called the **3Es approach** to accident prevention:

- 1. Engineering
- 2. Education
- 3. Enforcement

You have seen that accidents are either caused by unsafe working conditions or by unsafe acts of workers. The proper **engineering** of work centres, machines, equipment, tools and layout to reduce or eliminate unsafe working conditions is a critical measure in accident prevention.

While engineering can reduce many of the causes of accidents, they cannot eliminate them in many situations where inattention, carelessness or other worker behaviour is the cause. In fact, the majority of accidents are caused by human errors and these can only be addressed through education and enforcement.

Education involves training and development, conducting seminars, workshops and safety weeks, publishing material on safety and many other steps to inculcate safety consciousness in the minds of workers.

Enforcement involves positive actions to recognise and perhaps reward good practice and behaviour as well as negative actions and reprimands to discourage or even punish reckless and/or unsafe acts. Examples of enforcement include expressions of praise and the awarding of rewards for the proper use of safety clothing, goggles, slippers/shoes and the prevention of trespass or presence of unauthorised persons on the premises.

Safety audits would also help in preventing and reducing accidents. The findings of such audits can provide the basis for educational programmes grounded in the actual circumstances of the workplace and/or provide evidence that calls for measures of such enforcement.

The development and evaluation of safety and health programmes

Major responsibility for occupational health and safety resides with the organisation and its management. Organisational safety and health programmes can have a much greater impact on the safety and health of employees than government inspections can. Managers are there every day while the government inspector is not.

You have seen that the 3Es approach can improve health and safety in an organisation. Inadequate programmes lead to increased worker compensation payments, larger insurance costs, OSHA fines and union pressure. Odiorne (1971) suggests the following steps to develop a safety management programme:



- 1. Establish meaningful systems of indicators (e.g., accident statistics)
- 2. Develop effective reporting systems
- 3. Develop rules and procedures
- Reward supervisors for effective management of the safety function.

While management support for such a programme is necessary, none of it will prove effective unless employees participate.

Health and safety programmes can be evaluated directly through a costbenefit type of analysis. The costs of safety specialists, new safety devices and other measures can be calculated. Reduction in accidents lowered insurance costs and lowered fines can be weighed against these costs. Studies have shown that safety is cost-effective and that the most cost-effective programmes were not necessarily the most expensive ones. Rather, they were those programmes that combined a number of safety approaches:

- Clearly stated safety rules
- Promotion of off-the-job safety
- Safety training
- Safety orientation
- Safety meetings
- Medical facilities and staff
- Strong top management participation and support of the programmes
- Engineering and non-engineering methods of prevention.

The management can make a greater impact on health and safety at work than a government or any outside agency can or ever will. For responsible, safety-conscious managements, no cost/benefit ratio will ever have the same impact as that of safety efforts which prevent accidents, deaths and illnesses.

Safety organisation

So, you have seen that the responsibility for safety in an organisation rests primarily with its management. At every level of management and supervision, there is a responsibility for the safety of those whom they supervise and the equipment under their purview. However, management alone cannot ensure safety without the cooperation of everyone in an organisation. For example, a worker is responsible for taking every safety measure he/she is required to take in order to ensure his/her own safety and the safety of his/her colleagues and the property of his/her organisation. Despite every effort the management would have taken to ensure safety, safety is compromised or breached with consequences for the management if the worker is careless, negligent or reckless in



following safety requirements. Thus, safety has to be everyone's responsibility. The management has to formulate comprehensive safety policies considering international standards, national policies and the interests of their business and employees.

Safety policy

The need for organisations to take a broader view of safety and health requires that they should formulate a clear policy on safety. In the U.K., all organisations (except those of less than five employees) are required under the Health and Safety at Work Act 1974 to prepare and keep up-to-date written statements of their safety policies. These statements should reflect the employer's commitment to safety and health at work and indicate the standards of behaviour that are to be aimed for in health, safety and welfare matters. The Act requires that the policy statement should be drawn to the attention of all employees. This means that focused attention must be given to ensure that employees have been given or made to understand the policy. For example, the policy could be dealt with at induction and/or employees may be issued a booklet that contains the safety policy among other information about the organisation.

A holistic policy requires attention to at least the following:

- The immediate workplace
- The adjacent community
- The regional environment
- The international environment.

A typical safety policy would include the following:

- A **general statement** about how the organisation looks at and/or deals with safety and health.
- The **safety organisation** that would establish and maintain the structure of responsibility for safety and health matters throughout the company premises.
- A statement on individual responsibility that would make every employee realise the need to be equally responsible for his/her own safety and that of those around him/her.
- A review procedure by which the policy is reviewed periodically to ensure that it is relevant to current needs of safety and health in the organisation.

It is the management's responsibility to develop a safety policy. In some countries, this may be mandatory. A safety policy is more than just a legal requirement. It educates the whole organisation on the need to pay attention to safety in the workplace. A policy helps the management and the employees to adhere to standard practices throughout the organisation.



Work stress

According to Ivancevich (1998), stress is a common experience that is part of everyone's life. It can be good for a person. Good stress (also called eustress) helps a person complete a report on time or generate a good, quick problem-solving procedure. Unfortunately, stress can also be a major negative aspect of the workplace. Ivancevich (1998, p. 642) cites Waxler and Higginson (1993) who have estimated the cost of stress in the workplace to be at least USD 150 billion per year. Heneman et al. (2000) say that some employees may not feel capable of adequately responding to demands of their job and the work environment. When this happens, employees are said to experience job stress. As a result, they may have a number of adverse reactions to it.

Definition

Stress can be defined as a person's physical, chemical and mental reactions to stressors or stimuli in the environment. (Ivancevich, 1998)

You may wonder what Ivancevich (1998) means by "stressors" in this definition. Some experts view stress as the pressures or conditions in the world that produce emotional discomfort. Other experts (Ivancevich, 1998 cites Cooper and Payne, 1988) view stress in terms of physiological or body reactions such as blood pressure, heart rate or hormone levels. In summary, stress occurs whenever environmental forces (stimuli) throw bodily and mental functions out of equilibrium. Nair and Nair (1999) also point out that stress is:

- A dynamic condition that changes in intensity with time.
- Associated with demand or desire where the outcome is important but uncertain.
- Takes place when there is a constraint on such demand or desire.
- A perception.

For instance, look at the state of mind of students who prepare for an upcoming competitive examination. The stress increases closer to the day of the examination and is probably at a peak when the students enter the examination centre. The demand or desire of the stress is the need to score well in the examination. The constraints are many. They can be a wide syllabus, difficult/easy questions, limited places at universities based on the results, and so on. The outcome is important to the students as it will determine what they do in the future. The outcome is uncertain. However, much also depends on how the individuals perceive the outcome. Depending on how severe they perceive the outcomes to be, some would be quite stressed while others may not be stressed at all.

Stress in individuals can be defined as any interference that disturbs a person's healthy mental and physical well-being. It occurs when the mind or body is required to perform beyond its normal capabilities. The results of stress may be harmful to individuals, families, society and



organisations. Not surprisingly, the complexity and expectations typical of organisations can impose organisational stress.

Stress affects:

- Society and brings pressure on public services.
- Individuals and brings on illness and behavioural problems.
- Industry and causes industrial accidents as well as inefficiency.

Stress, as such, is not bad. On occasions, all of us experience stress. Beneficial stress can help drive some people to become Olympic champions but harmful stress can drive others to despair. It is prolonged harmful stress that concerns you in your management role.

Globalisation and technological advances have increased the speed at which employees are now required to work. Besides, liberalisation and the recent spate of worldwide acquisitions and mergers have brought in its wake large-scale retrenchment that in turn has spawned stress-induced industrial illnesses. In other words, it has increased stress among employees.

Sources and causes of stress

Nair and Nair (1999) repeat the opinion that some employees withstand stress much better than others and that the stress levels varies widely between different individuals for a given situation or factor. For instance, a threat of retrenchment may make one person crestfallen and highly tensed; another person may take the same situation in their stride as a spur to looking for another job. Nonetheless, Nair and Nair (1999, p. 360) acknowledge the presence of factors as a "necessary condition" to cause stress to workers. Their model groups the sources and causes of stress in three broad categories:

- 1. Environmental factors
- 2. Organisational factors
- 3. Individual factors

Environmental factors

Many factors outside an organisation cause worker stress. According to Nair and Nair (1999), they could be socio-economic, religio-cultural and/or political factors. Poverty, unhygienic living conditions, the number of dependents, maternity, recession and fiscal policies are socio-economic factors that cause uncertainty that can lead to stress.

In multi-linguistic, multi-religious and multi-ethnic societies such as India, the various religious and cultural festivities can bring about stress in workers because of the economic demands that such festivities create. Note that some of these factors are more relevant in developing economies than in developed ones.



Political incidents, changes in power/governments and political tensions can cause much anxiety in the minds of workers and cause stress

With new technology constantly changing the way organisations do business, workers have to constantly change their work patterns and acquire new skills in order to retain their jobs. Some do not have the option of changing jobs but are rendered jobless as a result of changes in technology. Consequently, technological change can also produce much stress.

Organisational factors

Nair and Nair (1999) note that both extrinsic and intrinsic factors contribute to organisational factors that cause stress. In their schema, the extrinsic factors would include:

- 1. **Supervision and leadership**: A task-oriented supervisor as opposed to a relationship-oriented supervisor could cause work stress in workers whom he/she supervises. Similarly, autocratic leaders cause stress in subordinate managers.
- 2. **Organisational structure**: The structure of an organisation influences inter alia the span of control, the degree of delegation of authority, the lines of communication, interpersonal relationships, career paths, promotional avenues and job satisfaction. All these aspects cause anxiety due to uncertainties associated with various outcomes of individual aspirations and expectations. This naturally causes stress.
- 3. **Organisational culture**: Organisational culture can play an important role in causing work stress through:
 - Difficulties in matching the values and norms of individuals with those of the organisation.
 - One's own behaviour not meeting the expectations of colleagues.
 - Poor interpersonal relationships.
 - The extent of rules and regulations as well as the methods in which they are implemented.

Just as products go through stages of a life cycle, organisations also go through such cycles – for example, establishment, growth, maturity and decline. Employees experience the highest work stress during the "establishment" and "decline" phases because of higher anxieties brought about by greater uncertainties during these phases.

The Nair and Nair (1999) schema notes these intrinsic factors:

- 1. **Task structure**: The intrinsic motivation of workers is greatly influenced by the design of their work task variety, autonomy, and so on.
- 2. **Work situation**: The availability of proper tools, sufficient illumination, ventilation, fresh air, proper layout, efficient



handling equipment and other features of the work situation can have an impact on work stress.

- 3. **Role perception**: The way an employee sees his/her role vis-àvis the organisation and its other roles can significantly influence the work stress experienced. The worker may perceive his/her role as involving:
 - o **Role overload** where there is unequal distribution of work.
 - o **Role conflict** where the expectations of both organisation and employee concerning their roles are at variance.
 - Role ambiguity where the employee is not clear about his/her responsibility and expectations.

Thus, it is clear that various factors within an organisation can contribute to the stress experienced by its workers.

Individual factors

The third category of factors that can produce stress is those that have to do with the individual (Nair and Nair, 1999). Individuals differ widely in their physical, physiological, psychological and mental make-ups. Therefore, the way in which they react to a common set of causes in similar environmental and organisational settings varies.

Physical aspects

The physical features of an individual can affect the levels and types of stress experienced by individuals. In work involving physical labour, the person with less stamina is more likely to be stressed when engaged in work that requires (for instance) the ability to lift heavy loads. The converse is also true.

Physiological aspects

The physiological differences between male and female undoubtedly have an impact on the stress created in a male or a female. For instance, stages in the menstrual cycle of a female can produce stress in various types of work

Psychological aspects

Psychological aspects are more difficult to identify and attribute. Personality is determined by psychological factors. Some persons cope with stress much better than some others. For example, retrenchment may cause most people to be depressed but there are some who take it in their stride and look at it as a challenge to find better employment opportunities. The personality or the individual make-up of a person translates potential sources or causes of stress into actual stress.

Consequences of stress

Stress is perfectly normal and even necessary. Our bodies usually cope to maintain a stable psychological state. However, prolonged exposure to



stress has been shown to cause a variety of serious consequences – physical, psychological and behavioural.

Physical problems

Some physical symptoms of stress can be life-threatening such as high blood pressure and heart disease. Less life-threatening physical signs include insomnia, a feeling of constant fatigue, headaches, skin rashes, digestive disorders, ulcers, colitis, loss of appetite, overeating and cramps. Most of these occur at some point after a stressful event. Other symptoms of stress are more immediate – nausea, breathlessness or dry mouth.

Psychological problems

The emotional symptoms of stress can include general irritability, acute anxiety attacks, depression, lack of libido, the loss of a sense of humour and an inability to concentrate on the simplest of tasks. Understanding unusual emotional responses and related changes in behaviour is the key to recognising stress. Some of the most common indications of stress are:

- Becoming unnecessarily over-emotional or aggressive in conflict situations.
- Loss of interest in personal appearance, other people, social events or previously enjoyed activities such as a favourite sport.
- Poor concentration, difficulty in remembering and an inability to make decisions.
- Sadness, guilt, fatigue, apathy and a pronounced feeling of helplessness or failure.
- Loss of confidence in personal ability often coupled with a lack of self-worth.

Behavioural problems

As a temporary relief from stress, many people indulge in excessive eating, smoking, drinking or spending. Stress can turn an occasional smoker into a chain-smoker and the social drinker into an alcoholic. Individuals may not recognise they are overindulging and those who do may go to some lengths to keep their self-destructive behaviour from friends, families and colleagues. Inattentiveness can result in errors or accidents. Loss of motivation can affect sales levels.

Executive stress

You have seen that stress acts on individuals differently. It is clear that certain roles in organisations induce more stress than others do. Work environments of executives are such that they are exposed to many sources of stress.

Causes

- Constant changes in work patterns/routines
- Pressure from superiors for better performance
- Pressure to obtain better results from subordinates.



Pareek (1981), through research, has identified ten causes of executive stress:

- 1. **Inter-role distance stress**: Such stress is experienced when there is a conflict between organisation and non-organisation roles.
- 2. **Role stagnation stress**: This arises from stagnation in one position or role for a long time.
- 3. **Role expectation stress**: This is stress that arises from conflicting demands from various levels in the organisation superiors, peers and subordinates.
- 4. **Role erosion stress**: This stress arises out of the fact or a perception that a person's role has diminished in value or when someone else takes or gets credit for the work done by him/her.
- 5. **Role overload stress**: This stress is caused when there is overloading of a person's work due to inequitable distribution.
- 6. **Role isolation stress**: In this, stress is caused by the isolation of the job from other jobs it prevents interaction with other people in the organisation.
- Personal inadequacy stress: The lack of education, qualifications, skills, knowledge and competence causes this type of stress.
- 8. **Self-role distance stress**: This is caused by a gap between one's concept of self and the demands of the role.
- 9. **Role ambiguity stress**: This arises out of a lack of clarity about the demands of the job.
- 10. **Resources inadequacy stress**: Where constraints exist on resources, this stress may occur.

According to Nair and Nair (1999), certain executive job requirements create anxiety in almost every psychological type – constant change in work patterns/routines, pressure from superiors for better performance, and efforts to get better results from subordinates. The work-related dangers of modern managers have been studied long enough to produce profiles of the stress syndromes as described here.

Burnout stress syndrome (BOSS)

Nair and Nair (1999) cite two useful sources on burnout. One is Baron and Hartman who define burnout as "chronic emotional stress with (i) emotional and/or physical exhaustion (ii) lowered job productivity and (iii) over-depersonalisation". Also cited is Paine (1982):

Burn-out stress syndrome – a consequence of a high level of job stress, personal frustration and inadequate coping skills have major personal, organisational and social costs. All these costs are probably increasing.

BOSS is a debilitating psychological emotion brought about by unrelieved work stress. It leads to:



- Depletion of energy
- Decreased resistance to illness
- Increased dissatisfaction and pessimism
- Increased absenteeism
- Inefficiency at work

Rust-out stress syndrome (ROSS)

Nair and Nair (1999) also present another condition called ROSS. This stress is brought about by a situation where an executive has an inadequate load of work. It could happen where he/she is side lined or where he/she is underemployed. In side lining, it is a deliberate action to isolate a subordinate by their superior due to lack of confidence, prejudices or demonstrated misdeeds/incompetence. Nair and Nair (1999) state that underemployment or mis-employment is a condition when the requirement of the job in which the employee is placed is much less compared to their education level, experience and competence.

Remedial measures against work stress

The costs of stress and its remedies are lowest if the conditions causing stress are identified early. So, managers must be attentive to everyone's morale including their own. Individuals who recognise that they are in danger of burning out should be helped to realise that the condition is avoidable. Personal hardships have been averted by:

- Meditation. This halts and reverses burnout.
- Individual regimens that may include medication and exercise.

Organisations can help by introducing meaningful efforts to mitigate or eliminate work stress from their organisations. Here are some:

- Carrying out stress audits: Data pertaining to the working climate, role stress, job satisfaction or frustration levels are gathered and analysed. An attitude or morale survey is one method. Mass interviews, counselling and exit interviews are sources of good information.
- Using scientific inputs: Information on causes, symptoms and consequences of work stress is collected and employees are educated to overcome the ill effects of work stress.
- Providing medical assistance: Progressive organisations obtain
 the services of doctors and psychologists to advise them on the
 causes of work stress in their organisations and to recommend
 preventive measures. They also identify physiological,
 psychological and psychosomatic symptoms of work stress and
 help both individuals and organisations overcome the effects.
- **Education and training**: Publicity to create awareness on the causes of, effect on and remedies for work stress is given through educational and training inputs.



While it is essential that organisations take the aforementioned measures to minimise work-related stress, individual workers have an equal responsibility to deal with this issue. Individuals can and should help themselves by:

- Taking a hard look at themselves: Finding out the occasions and reasons for stress as well as critically examining one's own contribution to stress.
- Varying activities: Doing things (other than the job) that bring inner peace and satisfaction such as sports, aesthetic activities, social service.
- **Taking risks**: Calculated and moderate risks give better meaning to life and bring satisfaction.
- Avoiding isolation: Although time alone may be necessary at times, it is better to seek company at home or at work.
 Communicating with those close to one and talking openly about feelings and emotions help to bring stress levels down.
- **Stretching for success**: Having a positive attitude and optimism helps. It gives you something to reach for when you set your sights on achievement. These efforts help to overcome obstacles and constraints.
- Improving knowledge and skills: One of the best ways by which a person could minimise stress is to improve his/her competence and succeed in today's highly competitive environment
- **Learning to relax**: This is not simply doing nothing but learning techniques to relax. Meditation is one approach.
- **Improving diet**: Knowing which foods are healthy and which are not is the first step. The next is to find a balanced diet. This is an integral part of any programme to reduce stress levels.

As Ivancevich (1998) points out, changes in the work and personal environment are inevitable. Too often, managers underestimate how changes can throw a person off balance. A person who does not feel comfortable with their work or the work environment is in what psychologists refer to as a state of disequilibrium. Ivancevich (1998, p. 643) cites Marcus (1990) and points out that lack of fit between the person and the environment can have results on several levels –subjective (feeling fatigued), behavioural (mental block), physiological (elevated blood pressure) and organisational (higher absence rate).

The whole issue of stress can be well managed by managers throughout the organisation. It is not the sole responsibility of the HR manager or his/her department. However, the HR department has a role to play in programmes for coping with stress. It can provide specialists, facilities, monitoring or evaluation, and certain other important resources. World over, increasingly more organisations have become concerned about and are becoming more involved in stress management. Ivancevich (1998, p.



644) points out that stress at work in Japan is alarming and has given rise to a phenomenon called "stress death".

Quality of work life and work-life balance

Quality of work life (QWL)

QWL involves the implementation of HR policies and programmes designed to improve the quality of work environment and to promote employee well-being. QWL programmes attempt to integrate employee needs and well-being with the desire of the organisation for higher productivity. They bring management, the union (if present) and employees together to identify what needs to be done to improve the working conditions, job satisfaction and job performance. These may include the management style, freedom to make decisions (empowerment), pay and fringe benefits, meaningful work, working facilities, and occupational safety. In essence, QWL changes the orientation of employment relationships within the organisation—from conflict to cooperation. QWL aims to promote cooperative relationships among the employees, the union and the management.

Stone (2008) has discussed the criteria for improving QWL and the cautionary measures that HR managers should take in implementing a QWL programme.

The criteria for improving QWL include:

- Adequate remuneration how adequate is compensation in providing employees an acceptable of standard of living?
- **Safe environment** are job conditions jeopardising employees' physical and psychological well-being?
- **Development of human capabilities** to what extent does the job enable employees to use and develop their skills, knowledge and abilities?
- **Growth and security** is there any potential for career advancement for employees?
- **Social integration** is there an opportunity to build relationships with fellow workers?
- **Constitutionalism** are employees' rights protected and given due respect?
- **Total life space** is there a balance between work life and personal life?
- **Social relevance** is the organisation socially responsible for employees, customers and the community?

HR managers should take precautions in implementing QWL programmes:

 Recognise that there is no guarantee in success when introducing a QWL programme.



- Obtain commitment and support from the management in implementing a QWL programme. The programme is bound to fail without company-wide understanding and support.
- Ensure that employees accept and are willing to participate in a QWL programme.
- Prepare to share financial gains resulted from a QWL programme with the employees, especially if the QWL programme requires additional responsibilities from the employees.
- Prepare to accept possible criticism since the effectiveness of a QWL programme is difficult to measure.

Work-life balance

A typical employee may spend nine hours a day at the workplace from Mondays to Fridays, and another four hours on Saturdays. On top of this, the employee spends two to three hours a day travelling to the workplace in congested traffic. How about the need to work overtime to finish assignments and to meet deadlines? So, how much personal time left for the employee to spend with the family, parents, relatives and friends?

A number of factors have contributed to blurring the lines between an employee's work life and personal life, and the increasing work-family conflict (the conflicting demands made on an individual by work and home):

- **Dual-career couples**. More and more women are entering into the workforce due to the rising costs of living, the liberation of women, increased education and career opportunities. Most of today's married couples are also career couples fewer families have only a single breadwinner. This makes it increasingly difficult for married employees find the time to fulfil family obligations.
- Job demands. Organisations are asking employees to put in longer hours to sustain business operations. Consequently, work demands and longer hours have intruded into family life and personal time.
- Globalisation. It means that the world never sleeps. Employees
 of multinational companies are standing by 24 hours a day to
 discuss and solve problems with fellow employees and
 customers.
- Information and communication technology (ICT) advancement. ICT enables employees to do their work at home, in their cars, in public transportation, and even on holidays and vacations. It makes people in technical and professional jobs do their work anytime and anywhere.

One Managing Director says he expects his employees to be thinking about customers even when they are taking shower. A Cisco employee states: "Working at Cisco is like being strapped to a rocket. It never stops." According to another worker: "Wal-



Mart will only choose somebody for promotion who thinks Wal-Mart, sleeps Wal-Mart, and eats Wal-Mart, and who puts Wal-Mart before absolutely everything – before their family even. (Stone, 2008)

Employees have recognised that work demand is squeezing out personal lives, creating work-life conflicts and stress; and they are not happy about it. A work-life imbalance may impose significant costs in terms of physical well-being, mental health and high turnover. In contrast, employees who experience a work-life balance are more satisfied with their jobs, more productive and more committed to their organisations. They would be happier as individuals, parents and spouse.

Today's employees want organisations to take care of their well-being and help them to manage work-life conflicts. For example, they want jobs that give them flexibility in their work schedules so that they can fulfil both work and personal responsibilities. For university students, a family-friendly schedule is one of their job criteria. They want a life as well as a job. Attaining a balance between work and personal life is a primary career goal. Organisations that fail to help employees achieve a better work-life balance will find it difficult to attract and retain capable and motivated employees.

It is a big challenge for employees and HR managers in dealing with the competing demands of work and family. How do employees cope with their dissatisfaction with their work-life balance?

- Downshifters. Downshifters are employees who make a
 deliberate decision to cut back on their time spend at work in
 order to regain their lives. They voluntarily make a long-term
 lifestyle change by working less, earning less income and
 spending less.
- 2. **Flame-out track**. It refers to the situation where employees work extra hard, make and save a lot of money, acquire many assets and then quit after five to 10 years, to opt for an open-ended sabbatical.

What can employers do to help employees reduce work-life conflicts? The following provides a number of suggestions to guide managers to improve employees' work-life balance in designing workplace and jobs:

- Develop family-responsive policies such as the provision of childcare or assistance with childcare expenses. Indeed, may organisations nowadays have on-site day care centres. Employees can drop off and pick up their children within the business premises.
- Introduce flexitime or flexible work hours. Flexi options allow
 employees some discretion over when they report to work and
 when to leave the workplace. However, employees must work
 during a common core time period (core band) but have the
 discretion over the time they arrive at and leave during the flexi
 bands. Of course, they still have to fulfil a specific number of
 working hours per day.



For example, the core band is usually six hours from 9:00 a.m. to 3:00 p.m. inclusive of lunch hour. The flexi bands would be from 6:00 to 9:00 a.m. and from 3:00 to 6:00 p.m. All employees must be at their respective work stations at the core hours but they are free to come and leave during the flexi bands as long as they fulfil an eight-hour workday.

- Implement compressed workweek. Instead of working eight hours per day for five days per week, employees now work 10 hours per day for four days in a week. This allows employees to have a longer weekend to spend quality time with their families and to recuperate from their exhaustive workweek.
- Offer alternative employments such as part-time, job sharing and telecommuting. Job sharing allows two or more individuals split a traditional 40-hour-a-week job. For instance, one individual takes the morning shift from 8 a.m. to noon, while another takes the afternoon shift from 1:00 to 5:00 p.m. Or, each individual works full day on alternative days.

Telecommuting allows employees to do their work at home at least two days per week on a computer that is linked to their office. A closely related term is "virtual office," which describes employees who work anywhere and anytime on a computer on a permanent basis. Telecommuting is suitable for routine information-handling tasks, mobile activities, professional and knowledge-based tasks. Writers, researchers, attorneys, analysts, telemarketers, customer-services operators, reservation agents, product-support specialists, stock brokers are natural candidates for telecommuting.

Provide social activities such as company-sponsored family
picnics and dinners, summer day camps, gym facilities, pet
facilities, leave of absence, leave for new parents and leave for
school functions.

The following table presents various strategies that organisations may employ in implementing work-life initiatives:

Strategy	Programme or Policy	Example
Time-based strategies	 Flexitime Job sharing Part-time work Compressed workweek Telecommuting Leave of absence Leave for new parents Leave for school functions Closing plants or offices for special occasions 	 At Mentor Graphics, 98 per cent of employees use flexitime. IBM gives parents three years of job-guaranteed leave following childbirth. J. M. Smuckers shut downs plants in deer country for first day of hunting season.



Strategy	Programme or Policy	Example
Information-based strategies	 Intranet work-life website Relocation assistance Eldercare resources 	Ernst & young provides Intranet work-life websites that include information on how to write flexible work arrangement proposals, find a job share partner, etc.
Money-based strategies	 Vouchers for childcare Flexible benefits Adoption assistance Discounts for childcare tuition Leave with pay 	At Lucent Technologies, employees with six months of service receive 52 weeks of childbirth leave at half pay.
Direct services	 On-site childcare Emergence back-up care On-site health/beauty services Concierge services Take-out dinners 	 S. C. Johnson offers its employees subsidised concierge services for car maintenance, shopping, etc. AFLAC has two on-site childcare centres. Genentech has an on-site hair salon. Stratus Technologies provides on-site mammograms and skin-cancer testing. Every major location of Johnson & Johnson has a fitness centre.
Culture-change strategies	 Training for managers to help employees deal with work-life conflicts Tie manager pay to employee satisfaction Focus on employees' actual performance, not "face time" 	Lucent, Marriott, Merck, Pfizer, Prudential and Xerox tie manager pay to employee satisfaction.

Table 8.1 Strategies to implement work-life initiatives

Source: (Robbins, 2003)

Health and wellness programmes

Worldwide, businesses are implementing corporate health/wellness programmes to improve the quality and productivity of their employees by improving the health and well-being of employees. The majority of work site wellness programmes are employer-financed with the money saved through reductions in employee ill health as a result of the programme implementation in the longer term. According to several authors (Pelletier, 2001; Poole, Kumpfer & Pett, 2001; Shephard, 1996), the potential benefits commonly attributed to work-site wellness



programmes include an enhancement of corporate image, the selective recruitment of premium employees, a reduction of employee turnover, an increase of productivity, less absenteeism, a reduction in medical claims, and a reduced incidence of accidents and industrial injuries. Such programmes have been found to be beneficial not only for the employee but also for the employer and the business as a whole.

The design, implementation and evaluation of corporate wellness programmes can be a very rewarding vocation for occupational therapists. Other authors (Glasgow, McCaul & Fisher, 1993; Reardon, 1998) have written that targeting the workplace makes sense as one-third of the waking hours of the population are spent at work where communication is organised and peers exert both support and pressure. Work-site health promotion programmes are a primary means of preventing chronic diseases that are becoming increasingly more prevalent in today's society. Occupational therapists have the means to implement a holistic approach to corporate wellness programmes. Wellness is defined as a composite of physical, emotional, spiritual, intellectual, occupational and social health. Occupational therapists can implement programmes that focus on all of these aspects of health in the workplace.

Kasl and Serxner (1992) observe that health and wellness programmes may include health risk assessment, smoking and alcohol reduction/cessation, blood pressure control and treatment, weight control, exercise and fitness, nutrition, back problem prevention and care, and stress management. Peters (1994) notes that health and wellness programmes try to assist employees to be agents of change and educated consumers of health.

The choice to implement a workplace wellness programme lies in the hands of employers as long as they are fulfilling their occupational health and safety obligations. Wellness is an issue that cuts across the entire organisation. Litvan (1995) states that one key to successful planning lies in surveying workers to identify health risks and the types of programmes that appeal to all employees. Also, other writers (Downey, Kudar & Randolph, 1995) note that it has been well established that resources committed to prevention have a multiplier effect on the resources expended on fixing the problem.

Perception and participation

It is evident that employees need to know that their respective organisations are seriously concerned about their health. Ideally, employees need to be afforded the flexibility necessary to participate in work-site health programmes. According to Pelletier (2001), employees need to perceive that their senior management, supervisors and coworkers have positive attitudes towards health since these factors have all been associated with improved employee health status.

Wellness programmes promote health awareness. They impart knowledge of present and future consequences of behaviours and lifestyles as well as the risks they bring about. These programmes do not eliminate symptoms and diseases. Instead, they attempt to bring about changes in lifestyles



that enable employees to realise their full mental and physical potential. Do note that wellness programmes focus on prevention while employee assistance programmes focus on rehabilitation.

Health promotion is a four-step process:

- 1. Employees are educated on health risk factors.
- 2. Each employee's specific health risk factors are identified.
- 3. Employees are helped to eliminate or reduce their risks through healthier lifestyles and habits.
- 4. Employees are helped to maintain their "new" healthier lifestyles through self-monitoring and evaluation.

The most popular programmes thus far have been smoking cessation, blood pressure control, cholesterol reduction, weight control/fitness and stress management.

Pelletier (2001) also finds that including families in these programmes is important to consider as family problems such as lack of day care, marital disputes, financial difficulties, and adolescent alcohol and emotional disturbances also affect productivity at work, causing absenteeism, tardiness, inattentiveness and poor work quality.

Effectiveness

All this leads to the question whether programmed wellness efforts can indeed reduce health care costs. Certainly, health promotion programmes have been seen to eliminate or reduce health risk factors and these changes have been long-lasting. For instance, there is mounting evidence of a reduction in heart disease through increased awareness of the ill effects of smoking and the consequent change in habits. However, insufficient evidence has accumulated to show that the costs are justified.



Module Summary



Summary

The extent to which occupational health and safety has been addressed by nations is seen in the laws or regulations that provide for;

- Compensation programmes that provide for job-related injuries.
- Measures to enhance job safety and health.

Employers are required to have a "general duty" to provide a place of employment "free from recognised hazards" and comply with all prescribed standards of safety and health. Workplace accidents can arise from unsafe conditions or unsafe behaviour. Laws and regulations have affected only unsafe work conditions. No standards govern unsafe employee behaviour.

Managements need to develop and implement safety and health programmes as well as to implement and sustain the policy through a loss control programme. Employee assistance programmes (EAPs) are better in the sense that supervisors need only to concern themselves with identifying declining work performance. They do not get involved in the problems of their employees. Professionals handle treatment. Wellness or health programmes focus on prevention and not on rehabilitation. Their relative worth as EAPs has been controversial but there is hope that they hold considerable promise. With businesses demanding a wider use of cost/benefit analysis by regulatory bodies and other trends in the field of occupational health and safety, managements will focus their attention increasingly on safety and health issues.



Assignment



- 1. State briefly the occupational safety and health practices in your country. Compare them with the abovementioned programmes. Comment if any inadequacy is observed.
- Log onto the official website of NIOSH (National Institute of Occupational Safety and Health). Report on its principal roles. Comment on how organisations and employees need to play their roles.
- 3. List the health and wellness programmes in your country. Comment on the effectiveness of each programme.



Assessment



Assessment

- 1. What are the key laws governing safety, health and welfare in your country? State the main objectives of each such law, legislative act or ordinance.
- 2. Collect safety policies from a manufacturing organisation, an office and a supermarket or large retail shop. Comment on them using the knowledge you have acquired so far.



References



References

- *Cascio, W. F. (1986). Managing human resources: Productivity, quality of life, profits. New York: McGraw-Hill.
- *Cole, G. A. (1991). *Personnel management: Theory and practice* (2nd Ed.). London: DP Publications.
- Dessler, G. (2001). *Human resource management* (7th Ed.). New Delhi: Prentice-Hall.
- Downey, A. M., Kudar, R. P., & Randolph, P. (1995). The high cost of health: Will business be a partner in the solution? *CMA Magazine*, (Apr) 69, pp. 12-16.
- Glasgow, R. E., McCaul, K. D. & Fisher, K. J. (1993). Participation in worksite health promotion A critique of the literature and recommendations for future practice. *Health Education Quarterly*, 203, pp. 391-408.
- Glueck, W. F. (1982). *Personnel: A diagnostic approach*. Revised by Milkovich, 3rd Ed. Texas: Business Publications, Inc.
- Heinrich, H. W., Petersan, D. & Roos, N. (1980). *Industrial accident prevention: A safety management approach*. New York: McGraw-Hill Book Co.
- Heneman, H. G., Schwab, D. P., Fossum, J. A. & Dyer, L. D. (2000). *Personnel/Human resource management*. New Delhi: Universal Book Stall.
- Hindle, T. (1998). *Reducing stress*. DK Essential Managers Series, London: Dorling Kindersley Ltd.
- Ivancevich, J. M. (1998). *Human resource management* (7th Ed.). Boston: Irwin McGraw-Hill.
- Kasl, S. V. & Serxner, S. (1992). Health promotion at the workplace. In H. L. S. Maes & M Johnston (Eds.), *International Review of Health Psychology* (pp. 111–142). New York: John Wiley & Sons Ltd.
- Litvan, L. M. (1995). Preventative medicine wellness programs. *Nation's Business*, 833, pp. 32-35.
- Milkovich, G. T. & Boudreau, J. W. (1988). *Personnel human resource management: A diagnostic approach* (5th Ed.). Homewood, IL: Business Publications, Inc/Irwin.
- Nair, N. G. & Nair, L. (1999). Personnel management and industrial



- relations. New Delhi: S Chand & Co.
- Odiorne, G. (1971). *Personnel administration by objective*. Richard D. Homewood, IL: Irwin, Inc.
- *Orlandi, M. & Prue, D. (1988). Stress and mental health Encyclopaedia of good health. New York: Michael Friedman Publishing Group, Inc.
- Pareek, U. (1981). *ORS scale: Measuring role of stress*. Mimeo, Ahmedabad: Indian Institute of Management.
- Pelletier, K. R. (2001). A review and analysis of the clinical- and costeffectiveness studies of comprehensive health promotion and disease management programs at the worksite: 1998-2000 update. *American Journal of Health Promotion*, 162, pp. 107-116.
- Peters, S. (1994). Levi Strauss promotes employee health. *Personnel Journal*, 735, pp. 23-25.
- Pigors, P. & Myers, C. A. (1981). *Personnel administration*. Singapore: McGraw Hill Book Company.
- Poole, K., Kumpfer, K. & Pett, M. (2001). The impact of an incentive-based worksite health promotion program on modifiable health risk factors. *American Journal of Health Promotion*, 161, pp. 21-26.
- Rao, V. S. P. (2000). *Human resource management: Text & cases*. New Delhi: Excel Books.
- Reardon, J. (1998). The history and impact of worksite wellness. *Nursing Economics*, 164, pp. 117-123.
- Robbins, S. P. (2003). *Organizational behavior*. New Jersey, Prentice-Hall.
- Shephard, R. J. (1996). Financial aspects of employee fitness programmes. In A. G. J. Kerr & T. Cox (Eds.), *Workplace health: Employee fitness and exercise* (pp. 29-54). London: Taylor & Francis.
- Stone, R. J. (2008). *Human resource management* (6th Ed.). John Wiley & Sons Australia, Ltd
- * Indicates sources not directly referenced but useful as further reading.