



**Action on Workplace Stress:**

**Mental Injury Prevention Tools  
for Ontario Workers**

**Part 1 — Why Should We Care?**



## **Action on Workplace Stress**

### **A Worker's Guide to Addressing Workplace Causes of Mental Distress**

This guide and resource kit will provide workers a basic understanding and a place to start to learn about workplace stress and what to do about it. The guide gives definitions, common causes of mental distress, legal frameworks (focusing on Ontario), possible actions to take, and resources available. It is an introduction and action guide created by workers for workers.

These tools are not clinical diagnostic tools. They are not meant to diagnose medical or psychological conditions or to be used by a physician to these ends. These tools are designed to identify problems that may exist within the workplace and provide possible avenues to address them.

This resource kit and tools are provided with a focus on the Ontario jurisdiction – workers in other provinces or in federally regulated workplaces should refer to their own legal framework.

# Part 1 – Why Should We Care?

## Do you ever feel:

- Pressured and physically/mentally exhausted because of having too much work to do and not enough time or help to do it?
- Anxious or even ill because of a poisoned work environment or from being bullied, harassed or subjected to threats of violence?
- Uncertain because of the constant threat of layoff or because you don't know where you'll be or what hours you'll be working next week or next month?
- An emotional toll because you don't have the time or resources to care for a client/patient/customer the way you know it should be done?
- Frustration because you have no control over how your work gets done, or because of a lack of support from supervisors or management to do your job?

If you said YES to any of these questions, you will want to read further about how stressors at work (also called psychosocial hazards) affect your mental and physical health, and how we as workers can begin to address these hazards.

If you are an employer, you care because psychosocial hazards impact many areas of your business. This section describes the magnitude of the problem, discusses the effects of psychosocial hazards on workers, and provides reasons why employers should identify and prevent psychosocial hazards from negatively affecting their employees.

## The Extent of the Problem

All jobs have stressors. For example, firefighting is different than nursing, and also different from serving food in a restaurant, or being a cashier, but each job has workplace factors that cause stress among workers. For example, risk of violence is a legitimate concern and can affect all these jobs and others in differing degrees. Excessive demands and workload can affect all jobs, and solutions may differ according to the work. Workplace causes of workers' mental distress need to be addressed to prevent negative health effects on those workers within that environment.

The changing nature of work complicates the picture. Work is becoming more complex as an evolving service economy replaces the manufacturing industry of the 60's and 70's. Service and knowledge jobs are replacing the industries of the Industrial Revolution. The transition from a manufacturing-based economy to a service-based economy hasn't been easy for Canadian workers. Information, knowledge, and service workers are indeed the new working class, even if they do not always identify themselves that way. All types of workers have experienced reduced job stability and increased workload demands. Globalization (world-wide competition) is also adding to the pressures workers feel at work. In order to compete with companies across

the world, employers are reducing staffing levels, privatizing services, out-sourcing work to outside contractors, adding responsibilities, and reducing wages and benefits. It is only through spanning occupations and identifying ourselves as workers — rather than letting ourselves be divided by different classifications and categories of workers — that we can hope to make a change.

Regular full-time jobs are being replaced with part-time, casual, temporary, and contract arrangements making it hard for workers to plan their futures. It is not uncommon for people to have two part-time jobs, neither of which comes with benefits. In their book titled *Working Without Commitments*, Lewchuk, Clarke, and De Wolff's (2011) track the changes in work from the Second World War to the present and outline in detail the effects that a changing labour market has on workers.

The situation is further complicated by the way governments fund healthcare, community services, long term care, and other services the public rely on. Changing funding models and reorganization of services have resulted in even higher workloads than before, requiring workers to do more with less. People are not being replaced during vacation or other leaves. The remaining workers are left to accomplish the same objectives and outcomes but with less resources. These high-pressured and frenzied work environments produce stressors that can contribute to poor mental health, worker distress, musculoskeletal disorders, and cardiovascular events like heart attacks.

When we think of health and safety hazards from traditional work, we may consider factors such as sharp knives, machinery, chemicals, or indoor air quality. Few of us have crossed the boundary between traditional health and safety hazards and newer effects of today's frenzied work environments and industries. Workplace stressors are not new, but they are more pronounced and are reaching epidemic proportions. Exhausting workplace demands that provide no respite, increasing job insecurity that threaten workers' ability to simply survive, funding shortfalls that make work almost impossible, combined with new technology such as email and instant communication, make work a constant worry for workers, whether at work or at home.

If you are still not convinced — here are some facts:

- The World Health Organization (WHO) recognizes the mental and physical effects of work on people; it recognizes psychosocial hazards in today's workplaces that may negatively affect people's mental or physical health (World Health Organization, 2010).
- The Canadian Mental Health Association says that at least 1 in 20 employees are depressed at any given time. If left unaddressed, depression can lead to lower productivity and increased sick leave (Canadian Mental Health Association, 2012).

These facts help us understand the magnitude of workplace stressors. Facts aside, every day workers feel the effects of workplace stress.

As workers we know only too well the effect that workplace stressors have on our overall mental health. However, employers are more likely to respond if the problem is framed in terms of costs to their bottom-line.

Here are some economic facts which could help you make the business case for addressing the workplace factors that may cause or contribute to the debilitating health effects on workers:

- Mental health disorders cost Canada approximately fifty-one billion dollars per year (MHCC, 2012).
- Absenteeism (including being off because of stress or burnout) in Canada is estimated to be 17% of the wage bill (Brun & Martel, 2005).
- A 2011/2012 “Pathway to Health and Productivity” report by Towers Watson reveals that over 83% of survey participants in 87 Canadian firms reported mental/behavioural health as one of the top three disabling long-term and short-term conditions (Towers Watson p 10).

This is a worldwide epidemic:

- EUROPE: In 2000 in the European Union, mental distress affected one in three European workers (about 41 million people), was responsible for 50-60% of lost work days, and cost EU member states about 20 billion euros annually (Brun & Martel, 2005).
- UNITED STATES: From 1995-1998, work-time lost due to mental distress rose 36%. Lost workdays annually cost a whopping 550 million (Brun & Martel, 2005), for a total of approximately 150 billion dollars per year (Sutherland & Cooper, 2000).

### **Why do we need to intervene to address the work factors (psychosocial hazards) that affect mental distress?**

- **As workers:** To protect our health and safety while at work and regain our health and quality of life at work and at home
- **As employers:** To sustain the business by having healthy employees, reducing costs, increasing morale, reducing legal burdens and costs, becoming an employer of choice and attracting the best talent, setting examples as leaders in business, improving overall community, and the list goes on.

“Why should we care?” Because it’s the people — it’s us — in the workplace (both workers and employers) that are important. If the humans are broken, sick, ill, and therefore not maximizing their potential for the organization, everyone suffers — the workers, the employer, and the workplace as a whole.

### **Effects of workplace psychosocial hazards on workers:**

- Heavy personal tolls through lower job satisfaction, higher absenteeism, and debilitating medical conditions.
- Diagnosed and undiagnosed mental health conditions that affect our health and the quality of our lives.

### **How has our world of work transformed from 1991-2001 (Duxbury & Higgins, 2001)?**

- Average work week increased from 42 to 45 hours

- Job satisfaction dropped from 62% to 45%
- Commitment levels to work dropped from 66% to 50%
- The number of workers reporting high levels of job stress doubled (Brun and Martel, 2005)

People talk about “good and bad stress.” “Good stress” is thought of as the stimulation we feel from our job which helps challenge and motivate us, but that is different than other aspects of work (such as psychosocial hazards) that do not go away and that workers do not have any control over. There are three main sources of unhealthy stress:

- **Work Organization** — Work organization refers to the work process and the organizational practices in an organization. Work organization can include factors such as: how a job is done, when, where, how fast, for what pay; how demanding the work; the level of support provided for workers doing work that takes an emotional toll; how much information or resources are provided to the worker; how much recognition the worker gets from supervisors, managers, and co-workers; whether employers prevent bullying and harassment and workplace violence; level of control over decision-making; the amount of repetitive or boring work; the setting of quota systems; workloads; defining role clarity; how role conflicts are resolved; how shift work is scheduled; staffing policies; and how technology is introduced or used, and more.
- **Social and Economic Conditions** — Workers across Canada know that downsizing, restructuring, and job insecurity threaten their work arrangements and indeed their very survival, independence, and ability to support a family. Stressors sourced to social and economic conditions could be caused by layoffs, lack of job security, privatization, de-regulation, lack of job mobility, temporary or contract status, non-secure job arrangements — all factors that detrimentally affect a workers state of mind. Extensive research has shown how job insecurity and contingent work arrangements (like temporary agency work, subcontracting, and home-based work) are associated with significant adverse effects on worker safety and mental health (Bourbonnais, Brisson, Vezina, Masse, and Blanchette, 2005; Kalimo, Taris, and Schaufeli, 2003; Vahtera et al., 2004). But these adverse effects are not limited to mental effects. Social and economic uncertainty also increases the risk of injuries, disease and illnesses such as cardiac diseases and musculoskeletal disorders. Fear of losing their job makes workers come to work sick (presenteeism), creates burnout and has an adverse effect on work/life balance. Insecure workplaces carry higher risks of bullying and occupational violence. While all workers suffer, older, injured, and more committed workers suffer most. Injured workers that lose jobs get inferior new jobs, intermittent jobs, or have difficulty finding a job at all.
- **Physical environment** — Exposure to physical hazards, such as temperatures, noise, fumes, bad air quality, bad ergonomics, and personal protective equipment cause both mental and physical stress for the worker. Psychosocial hazards also interact with these physical stressors.

- **Indoor air quality is linked to workers' mental health** — Workplace stressors, particularly workload, work content, support, and influence over working conditions, have been recognized as a factor in indoor air quality (IAQ) issues. Investigations have found that workers who are stressed by these factors report more symptoms than those who are not, indicating that poor indoor air quality affects workers' reported mental health. The effect is also on the perception of the environment — namely stressed workers will report more dissatisfaction with the workplace environment than less stressed workers (Menzies & Bourbeau, 1997).
- **Musculoskeletal disorders are linked to workers' mental health** — Musculoskeletal disorders (MSDs), such as low back pain, are linked to physical, psychological, and social factors at work. Exposure to these factors can contribute to MSDs in addition to other chronic health outcomes, such as depression or burnout (Westgaard & Winkel, 2011). Demands associated with the organization of work, such as job control or job demand, as well as those related to the physical work environment, such as workstation design, must be considered when seeking to understand workers' musculoskeletal health (Kompier & van der Beek, 2000; NIOSH, 1997). A review conducted by the National Institute for Occupational Safety and Health (NIOSH) indicates that psychosocial factors (or as we refer to them — hazards), including perceptions of monotonous work, intensified workload, low job control, low job clarity, and low social support, contribute to MSDs, and that this contribution may be partly or completely separate from that of physical risk factors (NIOSH, 1997).

It is important to note that the relationship between psychosocial hazards and musculoskeletal health is not specific to job type or work environment. Workplace studies indicate that associations between psychosocial factors and musculoskeletal symptoms and disorders exist among many different worker groups, such as clerical workers, bus drivers, cashiers, and assembly line workers (NIOSH, 1997). Lab studies also show that psychosocial hazards are linked to MSD exposures among different groups; for example, mental demand during computer work is shown to be associated with increased muscle activity in the neck/shoulder region, and an unsupportive environment during manual materials handling is shown to be associated with increased loading on the back (Lundberg et al., 2002; Marras, Davis, Heaney, Maronitis, & Allread, 2000).

- **Workplace violence and Harassment**—Workplaces are evolving, generating new issues. In an economic climate where staffing resources are dwindling and the population is aging, workers today are faced with more work organization challenges using fewer resources; long-term care homes dealing with more dementia cases; workers delivering services while working alone, teachers faced with ever-growing class sizes; overwork; understaffing;

impossible workloads; overtime; witnessing a child being abused; demanding deadlines; listening to someone in distress; being on the scene of a workplace accident that leaves a colleague injured, maimed or even killed; these are only some of the challenges that our workers face today.

Workers who have low control over how they do their jobs, with no clear definition of job roles, where their skills are not being used, or with very little responsibility or opportunity to advance, are more likely to be the victims of assault (Rospenda, Richman, Ehmke, & Zlatoper, 2005).

Research tells us that incidents of harassment, sexual harassment, or bullying, can lead to development of anxiety, depression, panic attacks, sleep loss, loss of concentration and/or post-traumatic stress disorder. Research has also shown that harassment of any kind places a worker at higher risk of becoming sick, injured, or the victim of an assault. Workers can suffer from experiencing these events, especially if they happen often. Workers who have lived through experiences of workplace violence, like being sworn at, bitten, kicked or hit, are more likely to fear it happening again, and that fear leads to physical symptoms (Rospenda et al., 2005; Namie, 2003).

Bill 168 amended the *Occupational Health and Safety Act* (1990) in Ontario in December 2009. The amendments define workplace violence and harassment, and describe employer obligations to prevent workplace violence by performing risk assessments and developing measures and procedures to prevent workplace violence. Employers must also develop procedures for reporting and investigating harassment in the workplace.

The Bill came about after a few tragic incidents. The first tragedy occurred in Ottawa in 1999 when an worker who had been bullied for years ended up shooting six people, four of whom died. That worker then committed suicide. The second event involved a worker who had ended a relationship with a co-worker. This co-worker refused to admit the relationship had ended, and stalked and harassed her at work. The co-worker stabbed her to death while at work and then committed suicide.

When it came into effect, Bill 168 made some key changes to the *Occupational Health and Safety Act* (1990) and imposed some key obligations on Ontario employers, including taking precautions to protect their workers from workplace harassment and violence, even if the risk of violence comes from home (*Occupational Health and Safety Act*, 1990, Sect. 32.0.4).



The Workplace Safety and Insurance Board recognizes that acts of bullying, harassment, and violence can cause mental injuries and has allowed compensation for stress under the heading of traumatic mental stress. The worker would have been, for example, in a situation of having witnessed or been the victim in events such as a death, an armed robbery, a hostage situation, physical violence, death threats, a bomb threat, or harassment (if it included or threatened physical violence) (Workplace Safety and Insurance Act, 1997).

### **Why would employers want to prevent psychosocial hazards?**

Employers should want to identify and prevent the causes of workplace stress for three main reasons:

- **Lower Costs—the “Business Case”** — Because there is a high monetary cost to these debilitating conditions. With costs including absenteeism, presenteeism (people going to work sick who may be unproductive), job turnover, loss of experienced workers, replacing workers, continually hiring and training workers, use of extended/group health care and employee assistance plans, and short and long-term disability costs, employers would be wise to try to eliminate as many of the workplace factors that can contribute to these costs as possible (Workplace Strategies for Mental Health, 2012).
- **Emerging Legal Reasons** — Because evolving decisions in all types of law (labour relations, occupational health and safety, human rights, employment standards, employment contract, workers compensation, and tort) in regards to emerging employer liabilities and awarded mental stress damages are making this an important issue for employers to address (Shain, 2010).
- **Corporate and Moral Responsibility** — For the health of workers and to be a leading employer that attracts the best talent.

### **Where can I refer my employer for more information?**

**World Health Organization (WHO):** Work Organization and Stress: Systematic Problem Approaches for Employers, Managers, and Trade Union Representatives

[http://www.who.int/occupational\\_health/publications/pwh3rev.pdf](http://www.who.int/occupational_health/publications/pwh3rev.pdf)

**International Labour Organization (ILO):** Stress prevention at work checkpoints

[http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wcms\\_168053.pdf](http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wcms_168053.pdf)

**The Mental Health Commission of Canada:** Psychological Health & Safety: An Action Guide for Employers

[http://www.mentalhealthcommission.ca/SiteCollectionDocuments/Workforce/Workforce\\_Employers\\_Guide\\_ENG.pdf](http://www.mentalhealthcommission.ca/SiteCollectionDocuments/Workforce/Workforce_Employers_Guide_ENG.pdf)

**See part 6 of this kit for more resources.**