

conversation

with
Chia-Chia Chang



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Coordinator for
Partnership and New
Opportunity
Development

Centers for Disease
Control and Prevention—
National Institute Office
for Occupational Safety
and Health (NIOSH)
Total Worker Health®

From stress and safety issues to nutrition and sleep, where we work can have a big impact on our health. The National Institute for Occupational Safety and Health (NIOSH) believes that workplaces can have a positive impact on employee health by adopting the Total Worker Health® concept that focuses on an integrated approach to improving worker well-being, said Chia-Chia Chang, coordinator for partnership and new opportunity development with the Centers for Disease Control and Prevention—NIOSH Office for Total Worker Health®. Chang, who spoke about an integrated program design approach at the Health Benefits Conference & Expo in January, discussed the concept with editor Kathy Bergstrom, CEBS.

Describe the concept of Total Worker Health.

The official definition is policies, programs and practices that integrate protection from work-related safety and health hazards, with promotion of injury and illness prevention efforts to advance worker well-being. We added the word *practice* to the definition to capture the things that are not so official—what happens in real life, the actual culture and what people actually do or don't do despite what is written.

Describe some research around the negative effects of work on health.

There have been studies that have shown associations between work and many health conditions that had not previously been thought to be related to work. Obviously work can cause safety and health issues if there are exposures to chemicals or hazards. But now there is growing research linking work to many of the chronic health conditions that we are facing in the country and also globally. Studies have found that work could contribute to unintended weight fluctuations, obesity, or higher BMI or waist circumference because we've seen differences in weight for people in different occupations. We have also seen a linkage to sleep disorders, particularly for shift workers and people who work night shifts. And there is an association between work and cardiovascular disease. For example, certain occupations such as firefighters or police

officers have a greater risk for some cardiovascular disease issues. The fact that we can see differences in occupational groups implies that it's the *work or job* that is the difference. And research has found that the work you do could be detrimental to your mental health. Work also can have an impact on nutrition. One example is that shift-working men and women might be eating less fresh fruit and vegetables and getting more of their calories from saturated fat. In general, work can contribute to stress, which contributes to cardiovascular diseases, mental health issues and probably even smoking.

What about the positive impacts?

We think it is very possible that work could actually enhance your health, and work could be a recognized means of achieving well-being. Think about all the good things you get from work. A sense of purpose or meaning: You're contributing to something bigger or important. You could feel very engaged; you could feel a sense of accomplishment if you get to use your skills and your talents. Work can also provide positive social interaction. We get many of our friends from our workplace. And, of course, work gives us a salary, which could impact where we live and our health status in general. Plenty of studies show that people who have less financial resources are at greater risk for health issues. And, particularly relevant for your readers, jobs can provide fringe benefits that can help our well-being.

benefits

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What can employers do to maximize the positive and minimize the negative?

We've created a document called the *Fundamentals of Total Worker Health* that focuses on five defining elements. I'll highlight just a couple of them. One element is to promote and support worker engagement throughout program design and implementation. An easy way to do this is to have workers involved in programs and policies, and I say that because it will actually in the end make things easier if you have worker buy-in instead of having things that are top-down. Workers are the experts; they're the ones who have to deal with all of these things. Another fundamental of *Total Worker Health* is to integrate systems, which could mean many things. It could mean having health promotion literature that includes information for managers and information about safety. A specific example would be if we're talking about musculoskeletal disorders, you would want to consider redesigning work or making work healthier so people have control over *when* they do what they do. If they're having repetitive motion pain, they could take a break, but they could only do that if they have flexibility and control over their own schedule. The workplace also could provide ergonomic consultations and provide arthritis management information.

Can workplace wellness programs address these issues?

Workplace wellness programs, from our perspective, are mostly focused on changing individual behaviors such as smoking or weight management. Usually, workplace wellness programs target the individual worker to make changes themselves. There's definitely a role for that, and it certainly is important and does make a difference. *Total Worker Health* takes an integrated approach so that we're not just looking at the one person. We're looking upstream at all the environmental conditions. I don't mean only the physical workplace; I also mean the psychosocial work environment. Instead of trying to get one person to improve his or her sleep habits, if you could reduce stress at work, you could help the entire team, thus helping more people. While workplace wellness programs can be helpful, we would want to make sure that they are not discriminatory or punitive. Also important is to not focus just on short-term cost savings for health insurance. Health condi-

tions can take years potentially to manifest, so we encourage a more long-term and comprehensive approach. By applying an integrated strategy, you're not just looking at health care costs, you're looking at improvement in productivity, retention rates, workers' compensation costs, occupational injury costs, morale, company performance and overall worker well-being. If you take all of these different things into consideration, it could make a difference in how you evaluate investments in worker safety, health and well-being.

Is acceptance of the Total Worker Health concept growing?

I think there is a growing acceptance. Every place we go, people respond very enthusiastically to the concept. Workers are interested because it helps with their working conditions and well-being. Employers are interested because they want to recruit and retain qualified workers. They want the best workers, and they want the workers to stay. Employers know that by enhancing the well-being of their workers, there can be healthier, happier workers, who actually are also more engaged and productive, and that benefits the company too.

What should employers interested in implementing Total Worker Health do?

I suggest starting by bringing together people from across the organization: workers, benefits managers, health care providers, vendors and those in disability management, wellness and occupational safety . . . and do a needs assessment. Ask, "Do our workplace policies, benefits and programs, physical environment, culture and practices support the safety, health and well-being of our employees?" And employers don't have to do this alone. We have resources on our website that include tools and best practices as well as the latest research and evidence from the six research centers we fund. Right now, we're developing a model and survey to measure worker well-being, so keep an eye out for that next year. Nonprofit, academic or government organizations also can participate in our *Total Worker Health* affiliate network that encourages learning from each other. Employers also can contact our office directly for information.

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