

# The Perils of Integrating Wellness and Safety and Health and the Possibility of a Worker-Oriented Alternative

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## Abstract

In response to the article by Michael B. Lax, MD entitled “The perils of integrating wellness and safety and health and the possibility of a worker-oriented alternative,” the National Institute for Occupational Safety and Health (NIOSH) provides updated information on the current focus and priorities and addresses concerns raised regarding the Total Worker Health<sup>®</sup> initiative. Many of the concerns and criticisms in the report echo those NIOSH publicly shares on a regular basis. The theory and practice of Total Worker Health (TWH) continues to evolve in response to valuable stakeholder input like that provided by Dr. Lax. In 2015, NIOSH updated the TWH concept to emphasize the main focus of TWH is the primacy of traditional health protection which prioritizes employer responsibilities for the organization of work over individual worker health behaviors. NIOSH acknowledges the past lack of “fit” between theory and practice in some publications of TWH-funded grantees as Dr. Lax points out. NIOSH is hopeful that the solicitation of new research, which is now underway, will clarify the work-centered priorities for TWH-funded research. Based on input from Dr. Lax and other stakeholders, NIOSH looks forward to contributing more effectively to protecting and promoting worker safety and health in the new twenty-first century world of work.

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Dear Editor

We recently read the article by Michael B. Lax, M.D., entitled “The perils of integrating wellness and safety and health and the possibility of a worker-oriented alternative.”<sup>1</sup> We very much appreciate the detailed review of Total Worker Health® which is a programmatic initiative that has its roots in work begun in 2003 and was reframed then launched in 2011 by the National Institute for Occupational Safety and Health (NIOSH).<sup>2</sup>

Since its inception, the theory and practice of Total Worker Health (TWH) continues to evolve in response to valuable stakeholder input like that provided by Dr. Lax. In 2015, NIOSH updated the TWH concept to emphasize the main focus of TWH is the primacy of traditional health protection which prioritizes employer responsibilities for the organization of work over individual worker health behaviors. TWH integrates the study of risk factors that are known to be work-related with those that have less clear associations with work, how these factors interact leading to worker injury or illness, and what interventions can mitigate those risks and advance worker well-being. The refocusing of TWH occurred at the time Dr. Lax was preparing his review.

NIOSH shares many of the concerns raised by Dr. Lax about the practice of individually-focused workplace health promotion programs. These traditional health promotion, or employee wellness programs, lack recognition of and connection with the nature and conditions of the work itself. For many wellness programs, the workplace is merely a platform to conduct health appraisals and disease management counseling. In contrast, TWH places healthy work design at the center of its approach to overall worker well-being. By including the role of work as a factor in ensuring work force health, TWH provides a broader focus than wellness provides, as outlined in regulations arising from the Patient Protection and Affordable Care Act of 2010.<sup>3</sup> If NIOSH does “jettison” TWH and vacates the field to wellness programs, the opportunity to enhance worker well-being through an understanding of the role of work on worker health would be lost.

We agree with Dr. Lax that a work-centered focus has not always been the case in early TWH studies and TWH-inspired workplace interventions. NIOSH acknowledges the past lack of “fit” between theory and practice in some publications of TWH-funded grantees. The solicitation of new research, which is now underway, clarifies the work-centered priorities for TWH-funded research.<sup>4</sup> Novel focus areas within TWH now include the health effects of low wages, shift work, fatigue from work intensification, precarious or contingent work, and workforce aging. Today, TWH has a sharper focus on new work

organization issues, new nonstandard employment arrangements, and new efforts to enhance worker participation in safety and health decision making, and the role that these changes can play in the onset or exacerbation of acute and chronic health conditions.

Dr. Lax notes that employer interest in traditional wellness arises from a desire to save healthcare insurance costs. Our experience indicates that healthcare cost savings is often not the sole motivation to adopt TWH policies, practices, and programs. Often, even in spite of the costs associated with implementing a TWH program, employers tell us they accrue competitive advantages related to recruitment, retention, employee satisfaction, community engagement and reputation, and sustainable work force culture by emphasizing a TWH focus.

We appreciate mention in the article of the strengths of the TWH approach—“broadens the scope of occupational health to explore the relations between work and health,” and “[T]his opens fundamental aspects of work to examination and potentially as targets of change that will carry significant benefits for workers.”<sup>1</sup> NIOSH is realizing these strengths by integrating our traditional focus on factors exclusive to work with attention to health conditions, the cause of which work may be a contributor, and by seeking to enlarge the contribution that NIOSH can make to ensure worker safety, health, and well-being. As with many other initiatives that NIOSH introduces to align with emerging worker safety and health challenges, TWH is an evolving field of study and, as such, greatly benefits from critical review. Based on input from Dr. Lax and other stakeholders, we are working to sharpen and align TWH’s theory with practice so NIOSH can contribute more effectively to protecting and promoting worker safety and health in the new twenty-first century world of work.

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## References

1. Lax MB. The perils of integrating wellness and safety and health and the possibility of a worker-oriented alternative. *New Solut* 2016; 26: 11–39.

2. National Institute for Occupational Safety and Health (NIOSH). Total worker health, <http://www.cdc.gov/niosh/twh/totalhealth.html> (2015, accessed 14 April 2016).
3. U.S. National Archives and Records Administration. *Incentives for nondiscriminatory wellness programs in group health plans*, 78 Fed. Reg. 33,158, 33192, <https://federalregister.gov/a/2013-12916> (2013, accessed 14 April 2016).
4. National Institutes for Health (NIH). NIOSH Centers of Excellence for Total Worker Health<sup>®</sup> (U19), <http://grants.nih.gov/grants/guide/pa-files/PAR-15-361.html> (2015, accessed 14 April 2016).