



Workplace Interventions and Approaches to Reduce Work-Life Stress

2012 Total Worker Health Symposium:
Safe, Healthy and Cost-Effective Solutions

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Outline of Topics Covered

- Socio-demographic changes in the workforce
- Occupational Health Psychology
- Work-Life Stress as an Occupational Hazard
- Work-Life Stress and Primary Prevention: Interventions and Approaches to Reduce Work-Life Stress
 - FSSB Grocery intervention study
 - WFHN intervention with health care and telecommunications workers
 - SHIP Construction worker intervention study

Socio-demographic Changes



More Women in the Workforce

More Dual-Earner Couples

More Older Workers

More Diversity in the Workforce

Socio-demographic Changes

- In a 2008 nationally representative study, it was found that 42% of employed Americans have provided elder care in the past 5 years ¹
- By 2030, it is projected that 20 percent of Americans will be 65 or older, which means that there will be more Americans over 65 than there are children under 18 (Bronfenbrenner et al., 1996)
- Between 9% and 13% of US households are made up of dual earner, sandwiched generation couples ²

➤ 1 Families and Work Institute, 2008

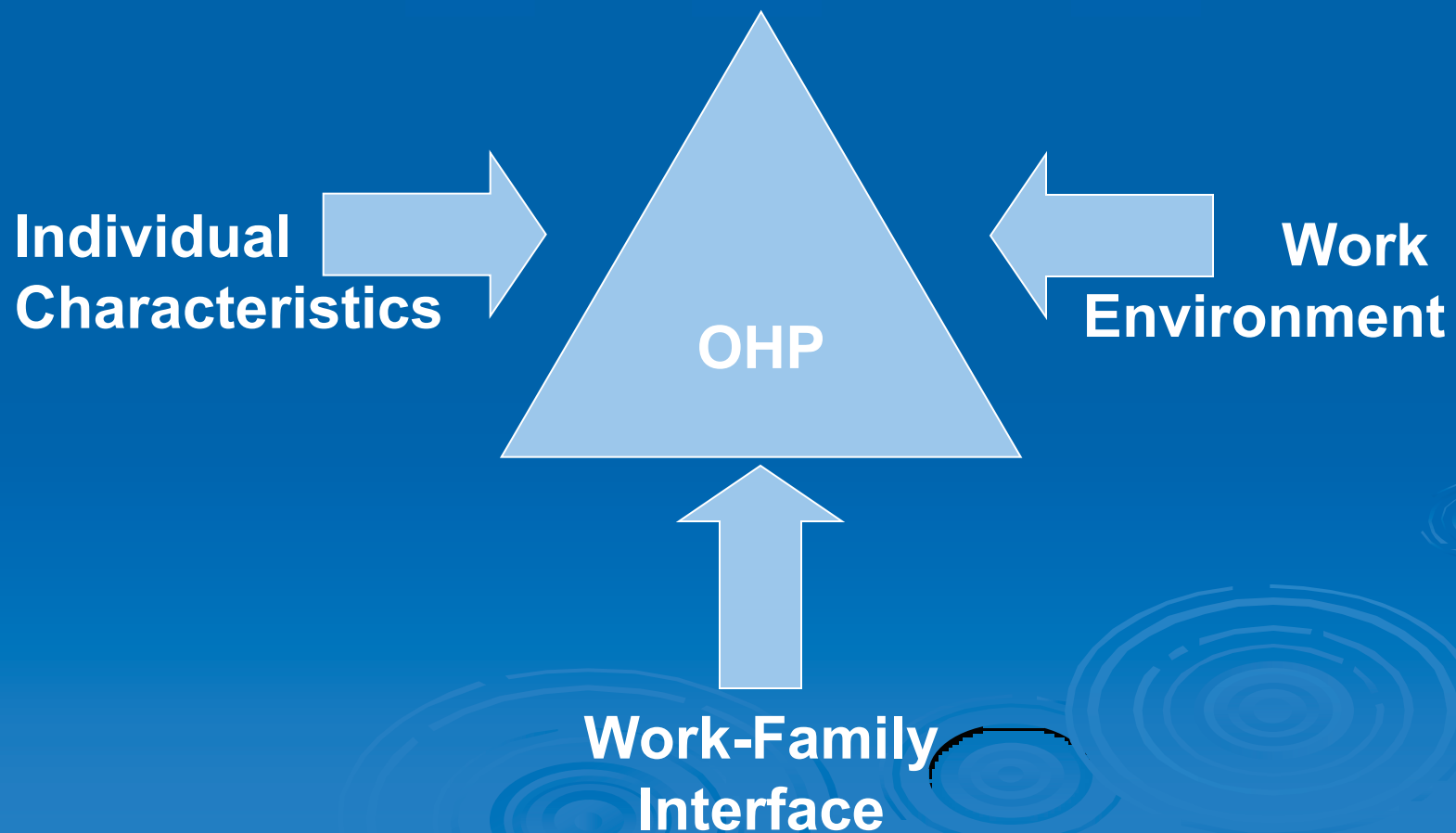
➤ 2 Neal & Hammer (2007)

What is Occupational Health Psychology (OHP)?

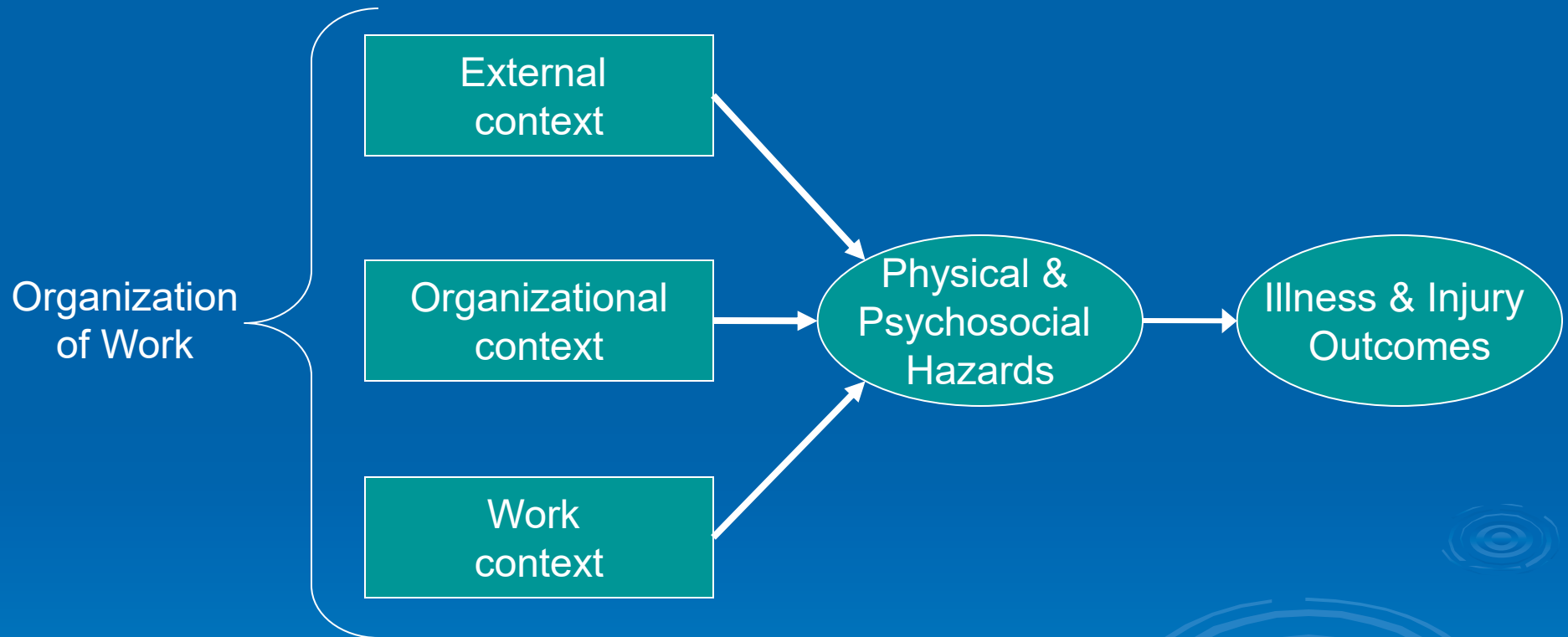
The application of psychology to improving the quality of work life and to protecting and promoting the safety, health and well-being of workers.

- Sauter, Hurrell, Fox, Tetrick, & Barling, 1999

OHP Focuses on the Individual and the work environment and the work-family interface



The Organization of Work & OHP



...revolutionary changes in the organization of work have far outpaced our understanding of their implications for work life quality and safety and health on the job (Sauter et al., 2002, p. 1)

Work-Life Stress as an Occupational Hazard

➤ Work-Related Causes

- Hours worked (+)
- Job Stress (+)
- Work Family Culture (-)
- Work Supports (-)
- Family Supportive Supervisory Behaviors (-)



Work-Life Stress as an Occupational Hazard

➤ Work-Related Outcomes

- Absenteeism (+)
- turnover intentions (+)
- substance abuse (+)
- family, marital, job, and life satisfaction (-)
- organizational commitment (-)
- performance (-)
- Health and well-being (-)
- Safety (-)

Work-Life Stress as an Occupational Hazard

Work-Life Stress and Health

- weighted mean correlation between work-to-family conflict and somatic/physical symptoms of .29. Allen et al. 2000
- Family responsibilities and blood pressure Brisson et al., 1999
- work-life stress and depressive symptoms Hammer et al., 2005
- work-family conflict and sleep-related outcomes Sekine, Chandola, Martikainen, Marmot, & Kagamimori, 2006
- work-life stress and musculoskeletal disorders Hämmig et al., 2011; Kim et al. 2012
- work-life supportive supervisors had employees who reported more sleep and lower CVD risk factor scores Berkman et al., 2010

Work-Life Stress as an Occupational Hazard

Work-Life Stress and Safety

- Family-to-Work Conflict related to safety outcomes among nurses Cullen & Hammer, 2007
- Family-to-Work Conflict related to safety outcomes in the NIOSH Quality of Work Life module of the GSS Smith & DeJoy, 2012

Work-Life Stress and Safety

- F-W Conflict significantly related to WCF (Lapierre, Hammer, Truxillo, & Murphy, in press, JVB)
- WCF significantly related to safety outcomes (Wallace & Vodanovich, 2003, JOHP)



Work-Life Stress as an Occupational Hazard

The work-family interface is important in understanding ways of improving safety and health and reducing stress on the job



Work-Life Stress and Primary Prevention

- Increasing control over when and where work is done helps to alleviate such stress (e.g., Kelly & Moen, 2007)
- Providing supervisor support for work and family can improve work-family outcomes for those high in work-family conflict (Hammer et al., 2007; 2009; 2011; Kossek et al., 2011)

Evaluation of a Work-Life Supervisor Support Training Intervention to Affect Worker Stress and Health: Family Supportive Supervisor Behaviors (FSSB)

- Dr. Leslie B. Hammer, Portland State University
- Dr. Ellen E. Kossek, Michigan State University
- Dr. Kent Anger, Oregon Health and Science University
- Dr. Todd Bodner, Portland State University
- Dr. Kristi Zimmerman, Portland State University

- Funded by a grant from National Institute for Occupational Safety and Health (Grant # U010H008788)
- Journal of Applied Psychology (2011)

Overall Project Goals

1. To identify critical family-supportive supervisor behaviors –to develop a measure of family supportive supervisory behaviors (FSSB) and to provide manager's with management tools
2. Develop and evaluate a training and self-monitoring intervention for supervisors to increase their family supportive supervisor behaviors
3. To examine the effects of training supervisors in family-supportive behaviors on worker **health, safety, family, and work-related** outcomes

Family Supportive Supervisory Behaviors (FSSB)

Construct Development: 4 facets

➤ Emotional Support for family

- Increase face to face contact; ask how employees are doing
- Communicate genuine concern about work/life challenges
- **Sample: My supervisor takes the time to learn about employees' personal needs.**

➤ Instrumental Support with scheduling conflicts

- Encourage employees to share schedule needs and constraints with supervisors and to learn new skills/jobs to increase their ability to fill different positions
- **Sample: I can rely on my supervisor to help me with scheduling conflicts if needed.**

Family Supportive Supervisory Behaviors (FSSB)

Construct Development: 4 facets

➤ **Work-Family Role Modeling**

- Show how you are taking care of your own work/life challenges
- **Sample: My supervisor is a good role model for work and non-work balance.**

➤ **Creative Work-Family Management**

- Communicate and be knowledgeable about work/life programs (e.g., EAP)
- Think about department as a whole and relationships with other departments
- **Sample: My supervisor is able to find ways to work with employees to meet both the needs of employees and the business.**

Work-Family Training Intervention Research Design

- Randomized selection of stores
 - 6 intervention sites and 6 control sites
- Intervention – 40 supervisors trained on supervisory supportive behaviors (FSSB facets)
 - Training (computer-based (cTRAIN) and face-to-face)
 - Supervisor self- monitoring
- Post-training data collection—evaluation



Findings

Workers supervised by family-supportive managers are more likely to experience:

- Higher job satisfaction
- Lower intentions to turnover
- Higher reports of physical health

* Hammer, L. B., Kossek, E. E., Anger, W. K., Bodner, T., & Zimmerman, K. (2011). Clarifying work-family intervention processes: The roles of work-family conflict and family supportive supervisor behaviors. *Journal of Applied Psychology*, 96, 134-150.

Work, Family, and Health Network (WFHN) Intervention Study

- 5-year multisite, randomized field experiment to increased control over work schedule, increased supervisor support, and supervisor self-monitoring
- Outcomes: work, safety, and health outcomes for workers and their families

Funded by a cooperative agreement through the National Institutes of Health and the Centers for Disease Control and Prevention: Eunice Kennedy Shriver National Institute of Child Health and Human Development (Grant # U01HD051217, U01HD051218, U01HD051256, U01HD051276), National Institute on Aging (Grant # U01AG027669), Office of Behavioral and Science Sciences Research, and National Institute for Occupational Safety and Health (Grant # U01OH008788, U01HD059773). Additional support from the William T. Grant Foundation, Alfred P. Sloan Foundation, and the Administration for Children and Families.

Work-Family Intervention Overview

- Professional facilitators
- Training for supervisors on FSSB followed by behavioral tracking
 - Importance of supervisor support for family/personal life
 - Identify supportive behaviors (performance support, personal support)
 - 2 tracking periods (iPods that beeped 2x day for 1 week)
- Participatory workshops (4-5 over 2 month period)
 - Focused on changing the culture by working with teams to identify new work practices and processes to increase schedule control while meeting business needs

WFHN Intervention Effects

- Significant effects on increasing schedule control, increasing supervisor support and decreasing work-family conflict in IT environment
- Significant effects on increasing work-family positive spillover in nursing homes
- Additional sleep, CV risk, family, and work outcomes currently being examined

Team-Based Work-Life and Safety Intervention for Construction Workers



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ORhwc/Portland State University

Objective & Study Aims

- Test the effectiveness of an integrated intervention that includes supervisor training and team effectiveness training designed to increase work-life support and support for improving safety among a sample consisting primarily of construction workers with the City of Portland Water Bureau and Bureau of Transportation.

- **Intended Outcomes:**
 - Beneficial effects on health behaviors: Exercise, Sleep, Alcohol, Smoking, and Caffeine
 - Less Absenteeism
 - Reduced Injuries and Near Misses
 - Improved Morale
 - Enhanced Employee Health
 - Personalized Employee Health Assessments
 - Enhanced Team Effectiveness
 - Improved Performance Measures
 - Workload, Efficiency and Effectiveness

Breakdown of Components

- Baseline, 6, and 12 month
 - Health, wellness and workplace survey measures
- cTRAIN—FSSB and Safety
 - With Supervisors
- Behavior Tracking (HabiTrak)
 - Track supervisor behaviors after cTRAIN for 2 weeks
- Team Effectiveness Process (TEP)
 - Trained facilitators and then TT Model
 - Focus on getting rid of inefficient work to free up time to focus on work-life and safety
 - 4-hr session with team process follow up

Work-Life Stress and Primary Prevention: Interventions and Approaches to Reduce Work-Life Stress

- Limited evidence-based intervention research on work-life stress reduction
- What is available is mostly focused on health protection and thus, there is a need for more integration with health promotion
- Difficulties of conducting intervention research in organizations
- Need for effectiveness studies of TWH work-life interventions—next steps are to work with colleagues in the ORhwc

Summary

Work and family are two of the most important areas in adult lives, and the more that is known about the difficulties integrating these two roles, the more progress can be made towards reducing the negative outcomes on safety and health of workers

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WFHN web page: <http://www.kpchr.org/workfamilyhealthnetwork/Public/default.aspx>

OHP Departmental web page: <http://www.ohp.psy.pdx.edu/>

WFHN Project web page www.wfsupport.psy.pdx.edu

ORhwc Project web page: <http://www.ohsu.edu/xd/research/centers-institutes/croet>