



Sweden: Preventing Health Workers' Back Injuries

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Sweden's health sector is under severe budget constraints. As a result, staffing in nursing homes has been cut; fewer workers care for more residents. Remarkably, in recent years the number of back injuries among health care workers has not increased. On a recent trip to Stockholm, I explored the reasons for this success.

Sweden has been struggling to reduce musculoskeletal disorders among health care workers. Back disorders represent 27% of all non-fatal occupational injuries involving days away from work. From 1982 through 1992, there was a larger increase in the number of documented work-related musculoskeletal disorders among nursing home personnel than for women working in other professions. To respond to this growing problem, Swedish investigators examined the causes and designed a prevention program.

Because back injuries occurred primarily when workers transferred patients, researchers developed the Stockholm Training Concept to teach workers the proper use of mechanical lifting devices, encourage workers to take fitness training, and train health care personnel to work together with

patients. The results: a reduction in the incidence of injury to workers and patients and in the stress associated with transfers.

The Stockholm Training Concept was developed in 1982 by physiotherapists from the Public Health and Medical Service Committee of the Stockholm County Council, who recognized that proper movements and posture are critical in a safe transfer and that each patient transfer is unique. In each case, the health care worker must draw on the patient's ability to assist the transfer and follow a natural pattern of movement to make it easy for the patient to participate.

Watching the physiotherapists perform the Stockholm transfer technique, I was reminded more of a well-choreographed gymnastics team's performance than of a patient transfer in a nursing home. The physiotherapists spoke out loud preparing the patient for the transfer. Was the height of the bed appropriate for the nursing assistant? Where was the best place to stand during the transfer? How was the patient able to assist in the transfer? The well-trained nursing assistant maintained eye contact leading up to and during the transfer. On the count of three, patient and worker moved together. Gracefully and with minimum effort the patient seemed to glide into a new position in the bed.

Dr. Mats Hagberg, professor and world expert in work-related musculoskeletal disorders, and his colleague, Dr. Monica Langerstrom, also at the National Institute for Working Life, conducted a three-year evaluation

(between 1992 and 1995) of the Stockholm Training Concept. While Hagberg and Langerstrom did not find a reduction in musculoskeletal disorders, they found no increase in the prevalence of low back injuries at a time when one would have expected an increase due to the comprehensive cutbacks in funding and staffing of the health care sector. Hagberg and Langerstrom found that the education and training program on the patient transfer technique was well received by workers.

Perhaps it was the Swedish tradition of worker representatives, employers, and government researchers working together that produced the Stockholm transfer method and, in turn, progress in avoiding back injuries, a problem we in the United States find almost intractable. There is little doubt that training workers to use the strengths and capacities of patients to facilitate transfers and to use mechanical devices competently can prevent back injuries. If we were to adopt the Swedish method, employers would see reductions in lost days from work and workers' compensation payments, and employees would avoid the nagging pain that affects not only their work but also their leisure.

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