

# Human Relations in Occupational Health

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Human relations are common, everyday experiences in our professional and personal lives. In fact, they are so familiar that all of us have pretty definite ideas about their importance and how they should be handled. I shall make no attempt to offer you new facts or findings based on recent studies, but we may be able to do some joint thinking as to the place of human relations in occupational health, for such problems frequently bring people to the medical department. I hope, too, we may obtain a clearer perspective of the ways in which we may approach these problems in our own professional activities.

It is probable that definitions of "occupational health" and "human relations" are unnecessary. However, I offer the following definitions in order that you may be certain of my meaning as I use these terms.

A good occupational health program is one carried out primarily for the benefit of the workers. It has as its objectives:

1. The assessment of a worker's physical and psychological assets, as well as his liabilities, to facilitate proper selection and placement.
2. The prevention of occupational and non-occupational illnesses.
3. The provision of treatment, the type and extent of which depends on the policy of the organization.
4. The fostering of a personal, physical,

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mental, and social ability to work and enjoy life beyond the mere absence of disease or infirmity.

## Manner vs. Matter

Human relations have to do with the nature of interpersonal contacts between individuals and groups of individuals—how people get along with each other.

That the manner in which these contacts are made has a bearing on the result has been too little appreciated. Yet, this bearing, in many cases, is as great as, if not greater than, the apparent topic or purpose of the exchange. We find this to be true, for example, in the experience of the person who habitually orders others to do his bidding, acts as though he has the weight of the world on his shoulders, fails to consider the personal needs of his subordinates, and neglects to acknowledge work well done. As a rule, such a person does not earn the confidence and cooperation of his fellow workers as much as another who makes the same requests, but pleasantly and considerately. The topic or purpose of the exchange may be identical, but the difference in manner and method of contact results in a different response. The second individual intuitively knows or has learned some of the principles of human relations and applies his knowledge, while the first either does not know or fails to practice what he does know.

## Effect on Health

The recognition that human relations can, and do, exert a marked effect on health should

be a fundamental concept of every health program. It has an important bearing on the success with which plans are executed for the selection and placement of workers, the prevention of illness and absenteeism, the provision of medical care, and the fostering of health.

To assess properly the health effects of human relations in industry, let us first look at the sickness absenteeism problem. Figures based on limited studies in this country and in England indicate that about 30 percent of all sickness absenteeism is due to emotional disorders. Although we may not know exactly to what extent problems of interpersonal relations are causatively related to the emotional disturbances of a given individual, many studies indicate that they are often major factors. That these emotional disturbances, in turn, affect physical health and efficiency has been amply shown by developments in the field of psychosomatic medicine.

Much of the absence occasioned by emotional problems probably is due to poor human relations in and outside the work place. Other sickness absenteeism is also caused in part by poor human relations. The relatively high absence rates in groups suffering from poor supervision is striking (1). Many of the illnesses among industrial workers can be prevented or alleviated by good in-plant health services, but the problems of human relations cannot be cleared up by the dispensing of medicine, or by exhaust ventilation. Good human relations can be achieved only when everyone in the plant understands their importance and is sincerely motivated to improve relations with one another.

Our concern, then, is to try to improve the way in which we in occupational health departments deal with people, and the way they deal with us and with each other. This activity cannot be a unilateral effort on the part of the medical staff, for it also requires the combined skills of the personnel department, counselors, management, and labor. Only through such a team approach can each individual be helped to achieve more fully his own potential so that he may have a better opportunity to advance himself and to make greater contributions both as a worker and a citizen.

Implicit in the question of interpersonal relations is the need for proper understanding of attitudes and behavior and recognition of the fact that behavior just doesn't happen—there is a reason for the way people behave. Individuals simply do not divorce themselves from their personal, family, and community concerns and attitudes when they enter into the work place. Likewise, at the end of the business day, they do not automatically "shed" their job problems. Consequently, the health of workers is intimately related to the things that go on not only in the plant or business, but also in the home, the community, and the Nation.

### **Basic Human Needs**

To approach the problem of human relations in occupational health, one must first recognize some of the basic human needs which most people bring with them to their jobs. They want to know what is going on in the plant and why things are done as they are. They want to know what their jobs are, what is expected of them, and where they stand in the organization. They hope to be treated in a considerate, predictable manner.

As they find their places in the plant, they expect a certain amount of recognition of their status in relation to experience, skill, and seniority. While speaking of recognition, one must not forget that most workers usually want some recognition of their job status from their families as well as from their fellow workers. Failure to get it may increase their demand for recognition at the plant.

Job satisfaction is very important to most workers. Some obtain it from the fabrication of products of fine craftsmanship. Others derive their major work satisfaction from the creation of new ideas, tools, processes, or procedures. Still others are unable to produce fine craftsmanship or new ideas, and the necessity to do so would threaten their job satisfaction and security. Such workers often are most satisfied with a relatively simple, repetitive type of operation. Particularly important in job satisfaction are the degree to which the job approaches the worker's own aspirations and the opportunity afforded to achieve them.

Pay, though important, is often assumed to

play a greater role than it actually does. In several studies, various types of job satisfaction have been rated as more important by the majority of workers. In general, it may be said that pay often assumes greater importance as the degree of job satisfaction declines.

Another important human need is that for security, which includes not only some means of providing for the later years of life, but also confidence in the continuity of work and opportunity for advancement.

These needs may vary in intensity from one individual to another, but the fact remains that they are present in some degree in most individuals. Many other human characteristics have a bearing on the ways in which these basic needs can be satisfied. For example, some people seem to thrive on responsibility, whether or not they handle it well, while others are more comfortable with minimal responsibility—more secure if they don't have to take chances. Some like repetitive tasks, while others become bored with such work and require more variety. Some are satisfied only if they can work out broad programs or do work requiring only gross manipulations. Still others prefer working out minute details or finishing materials to fine tolerances after the broad structure has been laid out. Not a few like to follow through an entire operation requiring both gross and meticulous work. Most people are content only when working closely with, or in the presence of, other individuals, while some prefer fairly long periods of relative isolation.

What happens when these basic human needs are not adequately satisfied or when an individual is placed in a job for which he is quite unsuited? Since man is remarkably resilient and adaptable, most people go ahead and do a creditable job although at a cost to themselves and their associates. But not a few find that they become indifferent to the job, preoccupied with other affairs, anxious and tense, or actively disgruntled and complaining. Some may become more accident-prone. Others may translate their difficulties into physical symptoms, presenting a remarkable variety of psychosomatic problems.

Such individuals appear with increasing frequency in the physician's office, in the complaint department, and on the sick-absence list. Since

these problems lead to increased sick absences and need for medical care, the occupational health department cannot fail to be interested, not only in the symptomatic treatment of patients with complaints, but also in the removal of those etiologic factors that may be present in the plant. The plant medical department has a stake in the reduction of sickness absenteeism to the bare minimum.

### **Job Placement**

There are many different human physical and mental characteristics and abilities. Various jobs demand different levels of physical stamina and agility, different personality characteristics, and levels of ability and skill. The amazing thing is that, knowing this, we have been quite lackadaisical about trying to fit the man to the job. It has not been long since job matching was limited to "You look strong, you're hired." Now, of course, many places have analyzed their jobs so that the physical requirements of a given position are known and the applicant is checked to see if he can meet them. But it is indeed the exception to find a plant where the psychological requirements of the positions have been analyzed. Some little attention has been given to executive and supervisory positions, but very little to the bulk of jobs available. Actually, so far as psychological requirements are concerned, we are not even up to the point where we say, "You look strong, you're hired." Rather, we are still at the level where, if we were honest, we would say, "I think I know what I want, but I'm not sure, and I don't know much about you—you're hired."

Perhaps human characteristics are so common to the experience of us all that we either give them little formal thought or believe we understand them well enough to make consistently good judgments about them. Many individuals do a remarkably good job of assessing quickly the characteristics and needs of others, but most of us apparently do not, particularly when confronted with long lines of prospective employees and a minimum of time. The point is that most managements would not allow a judgment to be made after cursory observation of a piece of machinery—say a conveyor—that is to be purchased. Even though

any conveyor might serve the purpose, care is taken to examine all types—belt, chain, screw, and others—to determine which would be most efficient in a given operation. Yet, in the case of labor, which constitutes a major cost in most industries, we fail to analyze the psychological requirements of the job and assess the psychological characteristics of a man before putting him on the job. What is required is a little systematic thought about the basic needs of people and how these needs may be satisfied in the work situation.

Once having made the best possible judgment as to job placement, however, it is not enough to stop at that point. A certain amount of follow-up is necessary, not only to evaluate and improve selection and placement techniques, but also to detect any errors in placement at

the earliest possible moment so that a more suitable position may be found. All these steps require that the people in the health and personnel departments, as well as those in management, have an intimate knowledge of the plant and working conditions, know as many of the workers as possible, and have a genuine interest in people.

In short, the practice of good human relations can be boiled down to the simple phrase—it is important not only what you do, but how you do it. Those who are concerned with the how as well as the what of interpersonal relations usually practice good human relations.

#### REFERENCE

- (1) Hazard, W. G.: Putting absence records to use. *Am. J. Pub. Health* 41: 1087-1095 (1951).

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## Insect and Rodent Control Field Training Courses

Field training courses in insect and rodent control will be conducted by the Public Health Service Communicable Disease Center in Atlanta, Ga., July 14-25, and August 11-22, 1952. The first of the series was held in June. These 2-week programs are planned as refresher training for persons who have had experience in insect and rodent control or who are responsible for such activities. They are available to personnel of State and local health departments, the Public Health Service, and public health departments of foreign countries. Those who are preparing for public health assignments overseas will also find these programs of value. Persons from other organizations concerned with insect and rodent control will be accepted if facilities permit.

More comprehensive training courses are scheduled for September 22-October 3 (insect control) and October 6-24, 1952 (rodent control).

Application should be made by letter to: Officer in Charge, Communicable Disease Center, Public Health Service, 50 Seventh Street NE., Atlanta 5, Ga., Attention: Chief, Training Branch.