

# Well-being and work: A perspective from eight European countries on common areas of understanding, national drivers for progress, and research needs

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## Abstract

PEROSH, The Partnership for European Research in Occupational Safety and Health, hosted a recent workshop on 'Well-being and Work' in order to bring together players interested in the well-being arena from the member institutes, with the primary purpose of information sharing, and to highlight common needs for well-being research. This was achieved using small group discussions, group feedback and larger group discussions.

With regard to the understanding of well-being, various themes emerged including acceptance that well-being is not defined as only the lack of mental ill health, but incorporates social and physical functioning. Well-being has to be a positive, sustainable concept of optimal functioning, proactively promoted at work within a pragmatic approach that focuses on what is required, and what can actually be changed. Well-being must be meaningfully recognized on individual, group and organizational levels, with the emphasis on positive consequences for work ability and creativity. At the heart of the well-being debate is the paradox that 'good work is good for you, but work can also harm your health'.

Suggested drivers for research in this area more comprehensively included societal costs, governmental policy, legislative positions, altruism, and moral arguments within civilized societies. The scientific needs to better establish the evidence base for effective well-being interventions, including the challenges posed by changing worker demographics and rapid changes in work organizational structures and technologies, were also considered important.

The future research ideas discussed fell into the following categories: (i) defining the rationale for improving well-being, (ii) developing evidence-based approaches that facilitate improved well-being and the prevention of negative influences, (iii) developing communications systems to improve the ongoing debate on these issues, (iv) using case studies to facilitate engagement with stakeholders on the benefits of the well-being concept, and (v) filling the evidence gaps and how to share these research findings.

**Keywords:** Well-being, Work, European, PEROSH

## Introduction

Ramazzini described the importance of workers' health many centuries ago, particularly in the context of protecting their well-being, given that he felt workers were the key organizational asset. Whilst occupational health providers today are constantly aware of this philosophy, there has recently been a renewed national as well as international interest in the work and well-being approach. The reasons for this are many, and include 'doing the right thing for workers', strong medical arguments supporting good work as being good for you, and overwhelming financial cases for keeping workers fit, working, and less reliant on government assistance. Being workless is also associated with poor health outcomes.

For example, within Britain over the last few years, the profile of work and well-being has been significantly raised by Dame Carol Black's review of the health of the working-age population (Black 2008), and the positive Government response to this work (Anon 2008). This review stresses that for most people, work is an important determinant of "self-worth, family esteem, identity and standing within the community, besides, of course, material progress and a means of social participation and fulfilment", whilst also recognizing that work itself can have a major influence on individual well-being. Consequently, this review aimed to identify factors that "stand in the way of good health and to elicit interventions, including changes in attitudes, behaviours and practices, as well as services, that can help overcome them". The outputs from this review were multiple, and laid out an approach to tackle various aspects of work and well-being ranging from developing a model for measuring and reporting on the benefits of employer investment in health and well-being, to promoting the understanding of the positive relationship between health and work among employers, health care professionals, and the general public.

Consequently, we have now reached an important point; whilst the scientific, medical, moral and financial arguments clearly demonstrate a need to improve the focus on work and well-being, there remains a need to develop the evidence required to do this, and to design simple and practical interventions at work that improve worker well-being in a sustainable, long-term way. This requirement must be deemed urgent, as the evidence base supports current significant worker ill health and worklessness among the working-age population related to traditional health problems, in addition to lack of well-being. The former is typified, for example, by the significant burden that workplace exposure places on workers with asthma (American Thoracic Society 2003) (harmful inhaled exposures are estimated to cause 15% of the overall burden). The latter is, for example, typified by a recent review of the health and well-being of workers in the UK health care sector, which concluded that there are currently significant concerns for worker well-being (NHS 2009).

PEROSH (PEROSH 2010) was established in 2003 in order to strengthen European research in occupational safety and health. The partnership comprises thirteen Occupational Safety and Health Institutes from twelve EU Member States. The aim within PEROSH is to co-operate, and to co-ordinate

research to develop healthier, longer and more productive work lives, as well as to provide Member State support for policy development and enforcement.

In order to take forward the well-being agenda within PEROSH, it was deemed necessary to first benchmark common areas of understanding relating to well-being and work, to better understand the main national drivers for improving well-being and work, and to identify and develop common research needs. The latter is central to the PEROSH members' intent to pool resources and share knowledge across the institutions. This paper describes the outputs from a PEROSH workshop hosted to deliberate these and other issues relating to Well-being at work.

## **Aims**

The aim of the workshop was to bring together players interested in the well-being arena from within the PEROSH institutes; with the primary purpose of information sharing. Each institute represented has an interest in the aspects of well-being and work. It was assumed that these 'spheres of activity' would partly overlap between institutes representing common areas of interest, while some areas of activity would be unique to a particular institute or that would reflect different national drivers and government initiatives.

Given this assumption, three main areas of discussion and output were identified for the workshop a priori. These were: (i) broad discussion around understanding within different countries of well-being and work, (ii) discussion concerning the predominant drivers for well-being and work research within each country, and similarities and differences between each institution informed by an overview of recent well-being and work at each institute, and (iii) debate on research needs in this area.

## **Methods**

Delegates were invited from each of the other PEROSH institutes, and were provided with the stated aims. They came from nine PEROSH institutes: BAuA, Germany; cop, Poland; AOH, Finland; HSL, UK; IFA, Germany; INRS, France; NRCWE, Denmark; Prevent, Belgium; and TNO, the Netherlands. In advance of the workshop, delegates provided a summary of: firstly the national understanding of the range of areas and issues covered by well-being and work, the activities that managing well-being and work covers at a national level, national drivers to improving well-being and work, and the national initiatives currently underway; and secondly from the perspective of the institute, recent and current work, and key areas of interest to take forward. The workshop lasted one day, and used the following format.

### **Institute presentation**

Following a general overview of well-being at work, each institution gave a brief overview of their own well-being research activity.

### **Small group work**

Contributors were assigned to one of two small groups for the first main ex-

ercise. Small group discussions were facilitated to discuss each of the main a priori themes as listed (i), (ii) and (iii) above. The discussions were summarized using a facilitator and wall chart to capture main points.

### **Large group discussion and theme grouping**

Following the small breakout sessions, each small group fed back to a plenary session the content of the discussions concerning each of the a priori themes. Following this feedback, all workshop participants assessed the emergent issues and brigaded these into natural groupings in an attempt to define the way forward for research in this area.

### **Summary**

Following the large group discussion, a final plenary session defined key themes for the way forward for the PEROSH well-being initiative.

## **Results**

### **(i) Understanding of well-being**

With regard to the understanding of well-being and work, various themes emerged including acceptance that well-being is not only the lack of mental ill health, but also incorporates social and physical functioning. There was a clear consensus that well-being at work was required to be a positive, sustainable concept of optimal functioning, proactively promoted at work within a pragmatic evidence-based approach that focuses on what is required, and what can actually, practically, be changed at work. It was considered important to distinguish this from negative views that solely focus on harm prevention. In addition, well-being must be meaningfully recognized on individual, group and organizational levels, with the emphasis on positive consequences for 'work ability' and 'creativity'. Other related terms were used and discussed, including 'job ability' and workers being able to 'flourish' at work. Again, well-being was felt to represent much more than a narrow definition of the 'lack of mental ill health', as both social and physical functioning are also central to its definition. There was significant discussion around the bio-psycho-social model (Santrock 2007) and how this applies to the well-being concept. The distinction between antecedents and consequences when operationalizing well-being was also debated.

Interestingly, there was a firm view that the lack of a concrete definition for well-being at work was useful at this stage, as well-being must not only be seen as a positive concept, but also one that can change over time in order to allow it the greatest chance of becoming a sustainable workplace phenomenon, almost irrespective of any significant political or legislative changes.

It was felt that only pragmatic approaches to developing and improving worker well-being were likely to work. That is, whilst building on key knowledge and advances generated within the academic community, it is essential that workplace-oriented, translational research-based solutions are developed to achieve the required results. Indeed, there was acceptance of the general principle that research and subsequent workplace intervention design would require early involvement of workers and employers' representa-

tives, in order to ensure that any recommendations are easily translatable and applicable to the workplace, particularly within small and medium-sized enterprises (SMEs).

Achieving organizational culture change was considered a very important aspect of the well-being solution, with a particular focus on interventions targeting management and leadership roles. Whilst these issues were seen as essential to turn workplaces around and improve well-being, it was conceded that a significant process and resources would be needed to deal with these problems appropriately. In difficult financial times, making the business case for well-being was felt to be even more challenging, and would consequently need a strong evidence base to assist making this case. Further relating to the understanding of well-being, a potential paradox emerged. Typical occupational health and medicine definitions stress the effect of work on health and the effects of health on work. The former implies in part a negative connotation, namely that work can be 'bad' for you, as typified by a baker who develops occupational asthma or a foundry worker who develops hand-arm vibration syndrome. The well-being paradigm states the opposite by implying that work is good for you. Thus the central paradox can be formulated as 'good work is good for you, but work can also harm your health'. This paradox could, in principle, be a barrier to effective implementation of successful well-being initiatives at work, although the PEROSH contributors felt it was important to stress that it is 'good work that is good for you', rather than work associated with exposure to hazards with unacceptable associated risks.

Certain differences across countries emerged even at the most fundamental level of understanding. For example, in Britain, well-being and work is currently seen as a new concept, perhaps encapsulating certain longer-standing aspirations such as reducing occupational ill health, but also focusing on the need to support working-age health, and for occupational health to become concerned with helping people who have not yet found work, or have become workless, to enter or return to work. Another view was that achieving optimal worker well-being would be achieved by merely extending the remit of current occupational health provision, being seen as an ultimate 'aspiration' of this service. Yet another view saw improving well-being at work as largely a consequence of removing bullying and harassment from the workplace. These differing views raised the issue as to whether well-being initiatives and interventions should be separate or complementary to current occupational health provision.

#### **(ii) Predominant drivers of well-being research**

Suggested drivers of well-being and work research fell into four main categories: (a) the societal costs associated with not attending to well-being at the workplace, (b) the requirements for the development of governmental policy and legislative positions, (c) altruism and moral arguments within civilized societies, that this is the 'right thing to do', and (d) scientific needs to better establish the evidence base for effective well-being interventions, including the challenges posed by changing worker demographics and the rapid changes in work organizational structures and technologies.

(a) With regard to societal costs, improving well-being at work was deemed essential. It was considered important to include both direct and indirect costs in any detailed cost benefit of any well-being initiative. This was seen as a complex area, and not within the remit of the PEROSH group to comment in more detail about member states. Nevertheless, it was clear that the current levels of state benefit paid to those not in work, or not able to work, were considered a major central governmental driver in developing ways of reducing these costs by facilitating return to work for a proportion of those currently not able to do so. For example, Britain has recently redesigned its 'sick note' to become a 'fit note' specifically altering the emphasis from inability to work at all, to fitness for certain work. The background to this initiative in Britain relates in part to the very high costs of current sickness and incapacity benefits.

(b) It was widely agreed that national Government policy needs were important drivers for improving understanding of well-being at work, and also the need to align governmental requirements with the public health agenda and requirements.

(c) Altruism and moral arguments for improving well-being at work were widely discussed as important overall drivers for improving well-being. It was felt that initiatives such as the British 'fit note' revision would be acting in the best interests of the worker/patient in the longer term, given that prolonged absence from work is associated not only with a very low likelihood of return to gainful employment, but also with high levels of physical and mental ill health (Waddell, Burton and Aylward 2007). Protection of worker autonomy was raised as an additional benefit of improving well-being at work.

(d) Finally, the PEROSH workshop delegates identified a need to develop new tools to both assess and develop well-being, given the fact that the relevant scientific well-being evidence base is lacking in many areas. Specific issues raised as part of the scientific case for well-being research included not only evidence gaps, but developing an ability to intervene to improve well-being, given that the demography of the workforce is changing dramatically with a significant increase in more elderly workers in some countries, and lower overall fitness levels amongst workers, overlaid with changing workplaces, organizations and technologies.

Scientific drivers were not just discussed in the context of research projects and programmes, but also at an institutional level. Indeed, the new well-being paradigm was cited as being important as promoting innovation within occupational health and safety institutes in their own right - particularly in the context of the ongoing need for institutes to identify and take forward new opportunities and directions in which applied research has the potential to have a significant impact on developing healthier, longer and more productive work lives.

### **(iii) Research ideas**

Suggested ideas for research fell into the following categories: (i) defining the rationale for improving well-being, (ii) developing approaches that facilitate improved well-being and the prevention of negative influences, (iii) de-

veloping communications systems to improve the ongoing debate of these issues, (iv) the use of case studies to facilitate engagement with stakeholders on the benefits of the well-being concept, and (v) filling the evidence gaps and ways in which to share these research findings.

Table 1 gives a more detailed summary of the suggested ideas for well-being research.

**Table 1. Detailed breakdown of proposed research ideas.**

<b>Research theme</b>	<b>Research idea/project</b>
Approaches and activities	
	Developing a multidisciplinary approach to well-being and work
	Developing a well-being approach that facilitates prevention of negative influences, and promotes staying at work and return to work
	Developing risk management standards to align more closely with the well-being paradigm
	Identifying which influences are modifiable in a workplace to improve worker well-being and the key issues concerning how best to effect change
	Formulation of interventions to promote mental health and lifestyle issues at work, within a well-being framework with a clear business outcome
	Developing interventions for targeting leadership styles and skills at senior and middle management level
Forum and communications	
	Developing a consensus view using a Delphi or similar process relating to various aspects of well-being within PEROSH, including views on definition, interventions, and intended positive consequences of interventions and evaluations.
	Open communication of PEROSH developments through well-being discussions to share information and good practice collections
	Hosting a two-yearly well-being and work conference hosted by PEROSH institutes
	Developing information on public health issues addressed by well-being
Case studies	
	Establishing previous work in this area, and how best to create case studies from existing work and evidence bases

	Developing case studies that demonstrate the benefits of a well-being approach, that include 'scientific' justification for how interventions have been thought to work and an associated business case, in a wide range of industrial sectors
	Developing case studies to help place well-being issues on the political, public interest and human resource agenda
Evidence / knowledge base	
	Developing well-being assessment tools that appropriately capture components of well-being that can be improved following intervention
	Developing agreed set of scientific drivers of well-being research, with associated quality assurance
Rationale	
	Defining why PEROSH needs to develop its own well-being knowledge and evidence base
	Deciding if a new knowledge base is needed, rather than adopting existing knowledge bases

In general terms, discussion was held in relation to how PEROSH could best be involved in developing the knowledge base, and whether this should be an internal PEROSH-based initiative, or also involve external bodies.

In terms of developing approaches that facilitate improved well-being and the prevention of negative influences, it was seen as important not only to adapt the current risk management approaches to align with the well-being paradigm, but also to identify and then focus on influences in the workplace that are both practicable and relatively easily changed.

PEROSH members felt that, when developing communications systems to improve the ongoing debate of these issues, it is important to make the outcomes of information on good practice and research findings openly available.

Similarly, the development of 'case histories' was seen as an ideal way of promoting informed engagement with stakeholders on the well-being approach. This would entail collecting examples of workplace interventions that had worked, with comments on how these had worked 'scientifically', or, for example, with associated business cases. Case histories were also considered important to place well-being on the political, public health and human resource agenda.

## Discussion and the way forward

This first PEROSH well-being workshop proved to be a highly enthused meeting, demonstrating a level of commonality between institutes, but also important areas of difference. It was agreed that the way forward would include the following steps and processes:

(i) A document summarizing this workshop to be produced and submitted for consideration of publication in a peer-reviewed journal.

(ii) A summary of this work to be presented at the forthcoming first international Better Work and Well-being conference, hosted by the Finnish Institute of Occupational Health.

(iii) PEROSH to undertake a Delphi exercise internally, designed to gain consensus over a range of Well-being and work themes, and to publish its findings.

PEROSH has defined a clear way forward for its well-being activity, some of which will be relevant to a set of external stakeholders and the wider well-being community. It is anticipated that the Delphi exercise will gain consensus of key issues, or at least move understanding of key well-being issues towards a consensus.

Only when this has been achieved will it be possible for PEROSH to define the best way forward to identify well-being at work, measure it appropriately, and intervene to produce a sustainable improvement in this key workplace attribute. For instance, one suggestion from the workshop was that PEROSH might produce a standard case study template that could be used internally and adapted externally to capture important information that would be helpful in engaging with a range of external organizations on the 'well-being case'. The value of proceeding with this and other possible suggested ways forward will be reviewed following the completion of the Delphi exercise.

The PEROSH initiatives must be seen as complementary to the many other aspects of well-being currently being considered and developed globally. If worker well-being is to be improved in a sustainable fashion, it is essential that the current and future challenges faced by workers, employers, legislators and governments are tackled in a manner that is robust, works through engagement and, perhaps most importantly, is evidence-based.

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