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IS PSYCHOSOCIAL SAFETY ON YOUR COMPANY'S RADAR?



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The psychological health and safety of workers is a prevailing issue in Australian organisations. This is driven in part by stipulations under work health and safety legislation that employers are required to put reasonably practicable strategies in place to control psychosocial hazards.



However, it does tend to be an issue that eludes many employers and health and safety professionals¹ due to the complexity and multidimensionality of psychosocial safety hazards and psychological wellbeing outcomes. The escalating costs of psychosocial safety are simply becoming too big to ignore. Thus it's more important than ever to develop a clear understanding of what psychosocial safety is, the hazards and risks, and how to reasonably control these in the workplace.

INTRODUCTION

In today's complex and fast paced organisational environments, employers and employees are faced with a range of pressures. These pressures result from economic uncertainty, increased competition, change and ambiguity, the 'war for talent', emerging technologies, reduction in the availability of skilled workers, and an aging population. Hence, many employees are facing increasing workloads, longer hours, job insecurity, understaffing, bullying, violence and poor work organisation². As a consequence, employees are feeling the harmful effects of mental stress, as well as physical work strain.

The nature of today's workplace results in a range of psychosocial hazards, which need to be managed through the application of health and safety systems and practices.

Organisations that do not place enough value on the wellbeing of workers are likely to be less efficient, less effective and less productive.

This is because poor health can result in higher levels of absenteeism, presenteeism (attending work while sick), turnover, lost productivity, poor morale, inability to cope with work demands, disengagement, and low motivation⁹.

Under the Work Health and Safety Act 2011, health has been clearly defined as pertaining to

the physical and psychological health of workers. Despite such provisions and increasing attention regarding mental health at work, most organisations lack the appropriate systems to adequately identify, assess, control and monitor psychosocial hazards and risk. This paper explores this issue and outlines suggestions regarding psychosocial risk management.

WHAT IS PSYCHOSOCIAL SAFETY AND WELLBEING?

Psychosocial hazards can be defined as "those aspects of the design, organisation and management of work and its social and environmental context that can cause psychological, social or physical harm"³. Typical examples of psychosocial hazards include:

- + Unpleasant shift schedules (inflexible, unpredictable, unsocial, night work)
- + High work demands (excessive workloads, time pressures, high cognitive demands)
- + Lack of control over work (low autonomy, low opportunities for participation)
- Lack of variety/interest (short work cycles, fragmented or meaningless work, under-use of skills, monotony)
- + Lack of support (inadequate equipment or other resources, lack of personal/social support)
- + Poor interpersonal relationships (isolation, conflict and extreme examples include bullying or violence from co-workers)
- + Role conflicts/ambiguities, home/work conflicts and job insecurity and career uncertainty
- + Job insecurity (uncertainty and instability in organisational sustainability, lack of opportunities for progression)
- Home-work interface (low support at home, relationship issues, conflicting demands of work and home life)

Psychosocial hazards, such as those mentioned above, can have a number of consequences including mental ill health, increased anxiety, depression, irritability, poor concentration and disturbed sleep². This is due to alterations in the way people think, feel and behave, which can produce alterations in physiological functioning. All of these consequences can in turn affect business performance in areas such as productivity, quality, employee turnover, increased risk of accidents, and disrupt relationships at work and home. Psychosocial hazards and their association with stress has also been implicated in the development and exacerbation of a number of physical ailments such as coronary artery disease, cancers, gastrointestinal disorders, skin rashes, migraine, back pain, musculoskeletal disorders and asthma^{2,9}.

Psychosocial wellbeing is an output of exposure to psychosocial hazards. Psychosocial wellbeing as a concept needs to be better understood; it is not simply the absence of mental ill-health. The World Health Organisation defines health as "a state of complete physical, mental and social wellbeing, and not merely the absence of disease". Thus there is more to promoting health and wellbeing than simply ensuring the absence of diagnosable illness. Psychosocial wellbeing is influenced by the interaction of a range of personal and work-related factors at the individual level. Psychosocial (or psychological) wellbeing is often described as a state in which one has high levels of self-esteem, satisfaction, positive affect, autonomy, sense of

purpose and positive relationships, and low levels of negative affect, including feelings of stress, depression, anxiety, loneliness, guilt and sadness⁴. In regards to measuring psychological wellbeing, Psychologists tend to look at stress, burnout, anxiety, depression, job satisfaction and sleep as key measures.

Figure 1 below demonstrates the impact that psychosocial hazards may have on an individual's physical and mental health and wellbeing, as well as the social and organisational impacts.

Stress can have significant costs for organisations, individuals and their families. If the stress is intense or sustained for some time, it may cause ill health, psychological injury, lost time injuries, and worker's compensation claims. Psychological injury makes up a relatively small proportion of total compensation claims, however the costs for psychological injury claims are much higher than for physical injury². This is because they tend to attract higher medical, legal and other payments, and the individual is usually off work for a longer period of time.

In 2014, just over 70% of Australians responding to a stress and wellbeing survey⁵ (administered by the Australian Psychological Society) reported that stress was having an impact on their physical health. Further, one in four Australians reported experiencing moderate to severe levels of distress in the preceding year. Financial issues and family issues are among the leading causes

compensation claims.



disorders.

Figure 1. Psychosocial Hazards and Their Impacts

Job Demands

Role Overload
Role Ambiguity
Role Conflict
Cognitive Demand
Emotional Demand
Group Task Conflict
Group Relationship
Conflict



Job Resources

Job Control
Supervisor Support
Co-Worker Support
Praise & Recognition
Procedural Justice
Change Consultation

Figure 2. Job Demands and Resources.

of stress for most Australians, though individuals aged 26-35 reported issues with the workplace as a significant stressor.

Of particular importance in high risk industries, Post Traumatic Stress Disorder should also be considered as a potential outcome of exposure to serious psychosocial incidents, particularly major events that result in injury or death. This can be a serious condition with lasting impacts. Such a risk should be addressed through adequate critical incident management and support strategies¹⁰.

THE JOB DEMANDS RESOURCES MODEL

In getting a better understanding of how the stress response works to issues, stress can be understood as the state that occurs when our capacity to undertake a task is outweighed by our capabilities. The Job Demands Resources Model is a model of stress that suggests that the strain we often feel is the result of an imbalance between the demands we are placed under and the resources we have to manage those demands. This model helps us to understand a wide range of workplace conditions that result in increased demands (such as aspects of the job that require sustained effort and attention) as well as the range of resources that can be used to mitigate these demands or stimulate personal growth. In creating an environment conducive to good psychosocial wellbeing, organisations should strive to reduce demands and increase resources, as outlined in Figure 2 above.

Research undertaken by Bakker, Demerouti and others⁶ has demonstrated that the effort required to accommodate demands depletes our energy

levels, resulting in exhaustion and difficulties coping. In contrast, job resources can help to foster employee engagement and mitigate the impacts of job demands by facilitating work goals, providing opportunities for personal development and growth, and mitigating the deleterious impacts of a demanding environment.

THE BUSINESS CASE FOR PSYCHOSOCIAL SAFETY

Beyond legislative requirements, effectively protecting the health of workers makes good business sense. The World Health Organisation suggests that employers that take steps to promote and protect worker health and wellbeing are among the most successful and competitive, with lower rates of employee turnover⁷. Many organisations fail to implement sufficient strategies to address psychosocial safety and wellbeing because of the related complexities and costs. Nevertheless, important to consider are the:

- + Costs of prevention versus management as a result of incidents
- + Costs of contravention of health and safety legislation
- + Higher productivity levels resulting from high retention and performance rates

The costs of ignoring psychosocial safety and wellbeing far outweigh the costs of developing and implementing strategies to mitigate risks. It has been estimated that 25% of workers take time off work each year for stress-related reasons, and that

an average of 3.2 days per worker are lost each year through workplace stress⁸. Work pressure accounts for around half of all psychological injury claims in Australia, and workplace bullying and harassment a further quarter. More alarming is that many of these issues go unreported, with psychosocial safety issues and psychological injury unrepresented within health and safety data.

Organisations that successfully implement strategies to address psychosocial safety tend to have higher degrees of organisational effectiveness, realised through optimal job performance, high retention rates, capacity to attract talent, and the creation of an environment of innovation and continuous improvement. Effective management of psychosocial risks ultimately results in improving absenteeism, productivity and performance¹⁰.

Ultimately, there are two key points⁹ that demonstrate the case for addressing occupational stress and psychosocial wellbeing:

- 1. Research demonstrates that occupational stress is a preventable condition
- 2. By reducing or eliminating occupational stress, we can substantially improve health and wellbeing outcomes by reversing or preventing the health impacts and burden of those conditions that are related to occupational stress (e.g. physical illnesses indicated in Figure 1)

PSYCHOSOCIAL RISK MANAGEMENT IN PIPELINES AND OIL AND GAS

The importance of psychosocial safety and psychological wellbeing in Oil and Gas, and in any other sector, lies in the relationship with employee performance, safety incidents and disease-related outcomes. Psychosocial hazards can result in mental and physical ill-health due to exposure to poor working conditions and the challenges of operating in a high risk environment. Furthermore, poor psychosocial wellbeing resulting from psychosocial incidents in the workplace can lead to experiences of high degrees of stress, which can also lead to suboptimal safety performance and safety incidents¹⁰.

The high risk nature of working in this sector results in workers needing to be 'on their game' in order to stay safe, increasing the cognitive demands of the job. Research also suggests that the extent to which workers feel that they are at risk is a significant contributor to stress and anxiety, with particular concerns for major threats such as fires, explosions, adverse weather conditions and falling objects, amongst others¹¹.

Although physical safety and the management of catastrophic risks are high priorities, psychosocial hazards do present significant challenges for the sector. To date, there has been an increase in practices aimed at managing fatigue-related risks; such efforts could be leveraged to better address the gamut of psychosocial factors present that increase the risk of both physical and psychological injury. Researchers have identified a number of psychosocial hazards within Oil and Gas^{12,11}, including:

- + Time pressures
- + Work overload
- Overtime work
- Job insecurity
- Perceived risks, for example, constant awareness of the presence of fire and chemical hazards
- + Shift work, particularly day/night shift rotations
- + Working without co-workers and in isolation
- Unpredictable conditions at sea in the case of offshore installations
- + Working at remote and isolated locations
- + Confined work and living conditions
- Lack of privacy
- Separation from family and local community, including what is termed 'Intermittent Husband Syndrome'
- Organisational changes regarding production demands, market fluctuations, redundancies and downsizing
- + Noise, vibration and poor lighting

Such tendencies tend to show interesting trends in relation to psychosocial safety and psychological wellbeing. In particular, many researchers have examined the differences in psychological health outcomes between onshore and offshore workers. Offshore workers tend to display higher levels of generalised anxiety¹, with a tendency to suffer

stress, burnout, depression, low job satisfaction and sleep disorders¹².

Furthermore, because of the nature of working and living conditions at both onshore and offshore sites, workers often have poor lifestyle and health behaviour habits, such as smoking, alcohol consumption, diet, and exercise. These may further compound both physical and psychological health issues¹¹.

Much work needs to be done still to better manage psychosocial safety in Pipelines and Oil and Gas, as well as other high risk industries including Mining, Energy, Resources and Construction. Whilst there have been some shifts in recent times, particularly pertaining to fitness for work, the interventions and strategies being utilised are not comprehensive enough to reduce the likelihood of poor health outcomes.

For example, under regulatory requirements in the Coal Mining industry, a worker must not carry out operational duties or enter a mine whilst under the influence of alcohol or impairment of drugs. Yet whilst it has been demonstrated that fatigue results in very similar degrees of impairment, only selfassessment is required, which may not be reliable 13. Furthermore, the industry tends to treat physical and psychological impairment as one category, despite distinct differences between these types of injuries, and most interventions tend to relate to physical health and fitness, such as medicals and fitness for work assessments. By and large, the key strategy in place in most organisations for psychological injury is Employee Assistance Programs, which are simply not sufficient to deal with the gamut of issues associated with psychosocial safety.

Nevertheless, the psychological health of workers in the heavy industries continues to garner interest from researchers.

Research conducted by Griffith University focusing on the Mining industry found that men who take their own lives are more likely to have experienced a recent relationship breakdown than men across other industries.

Such relationships breakdowns might involve arguments with a partner, potential or actual separation, divorce and so forth. Interestingly, this

research also demonstrated that men in Mining do not suffer higher rates of mental illness or poor psychological wellbeing than other industries, as has been speculated in the past¹⁴. Thus, the high rates of suicide particularly for FIFO workers cannot be fully attributed to pre-existing and/or underlying mental health issues. This highlights the importance of attending to psychosocial factors that may result in suicidal ideation.

It's clear that psychosocial safety is of concern to the Pipelines and Oil and Gas sector. Employers should consider what can reasonably be done to address these issues.

ADDRESSING PSYCHOSOCIAL SAFETY AT YOUR WORKPLACE

In recent years, there have been substantial shifts in attitudes towards mental health in the workplace. Recent interest has been fuelled by increased media attention and political focus, such as the WA inquiry into mental health for FIFO workers. Despite this increased emphasis, there are many organisations that have not yet fully realised the implications of requirements under health and safety legislation and adapted safety management systems accordingly. The amount of money spent on physical safety still far outweighs that spent on psychosocial safety and wellbeing.

Having an Employee Assistance Program and providing suicide awareness training is not sufficient to address this issue. Developing a multi-pronged approach to psychosocial safety management is the most appropriate way in which to improve psychological wellbeing outcomes for workers8. This involves incorporation of both individual and organisational level strategies, as well as focus on both reducing exposure to hazards whilst increasing protective factors. Research has demonstrated that individual-focused interventions, such as providing workers with coping, organisational and time management skills, have a positive impact on individual level health and behavioural outcomes. But importantly, they tend not to have a favourable impact on organisational level factors, such as reducing psychosocial incidents and absenteeism. Organisational interventions, such as addressing working conditions, looking at job design and rostering, are beneficial at both the individual and organisational levels9.

The old adage that prevention is better than a cure applies very much in this case. Organisations

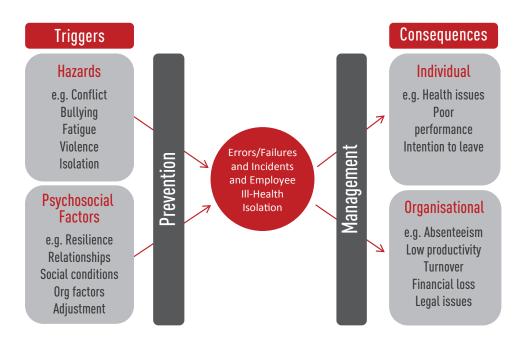


Figure 3. A Model for Considering the Prevention and Management of Psychosocial Risks¹⁰

should put systems in place to prevent psychosocial health and safety incidents, with considerations for the following three levels of intervention⁹:

- 3. Primary Interventions: these are proactive interventions focused on prevention at a systematic level, including changes to production requirements, job redesign and implementation of health and safety committees that proactively discuss psychosocial hazards and their management.
- Secondary Interventions: these are aimed at the individual's response to hazards and stressors, including stress management sessions, development of relaxation skills, conflict management and so forth.
- 5. Tertiary Interventions: these interventions involve the 'treatment' level, aiming to minimise the impacts of exposure to psychosocial hazards once an incident has occurred, and include counselling through EAP and return to work programs.

Ultimately, we cannot eliminate psychosocial hazards altogether from the workplace, without fully automating processes to the extent that people are not required. Thus considering the processes underlying poor health outcomes is important. Figure 3 demonstrates how triggers can result in health outcomes with resulting consequences, and how prevention and management fit in this process. In this regard, primary and secondary interventions can help to prevent poor health outcomes, and

tertiary interventions can help to ameliorate the potential consequences of high risk events.

Both employees and managers should be involved in primary interventions. Undertaking consultation and engagement processes with workers on the identification and management of psychosocial risks can result in improved psychosocial wellbeing outcomes, thereby reducing the incidence and costs associated with psychological injury¹⁵.

Employees and managers can reduce the risk of psychological injury and compensation claims by fostering teams with the following characteristics¹⁵:

- + High levels of morale
- + A focus on obtaining quality outcomes
- + Collaborative peer working relationships
- + Giving and receiving quality feedback
- + Supportive leadership
- Managers with high levels of behavioural integrity and capacity to role-model values and desired behaviours

Some suggested strategies:

+ Assess the level of maturity in the system to deal with psychosocial hazards – is your organisation proactive in preventing incidents or reactive through only dealing with issues once they have already occurred?

- + Develop a system to identify and control psychosocial hazards an essential step in understanding and controlling psychosocial hazards involves the development and implementation of policies, practices and plans to promote psychosocial wellbeing¹
- + Identify current psychosocial hazards and associated risk assess the work environment for psychosocial safety issues and determine the likelihood of consequences such as a psychological injury, lapse in attention due to fatigue, or turnover
- + Consult and engage with workers involve employees in discussions about how to identify and address risks and document agreed measures
- + Prioritise issues and focus effort focus effort on a small number of higher priority issues first, rather than attempt to address all identified psychosocial hazards at once
- + Regularly audit and update your policies and practices regarding psychosocial risk management—ensurethat policies and practices

- are subject to continuous improvement, that they are correctly implemented, and that employees know where to go for information and support
- + Develop a resilient workforce ensure that the workforce has the resiliency and coping ability to deal with psychological challenges and pressures as and when they arise, including isolation, ambiguity and production demands

CONCLUSION

Psychosocial safety is an important issue for the Pipelines and Oil and Gas industries. Despite perceived challenges, psychosocial hazards are manageable and effective strategies can be implemented to maintain a healthy workforce, with positive return on investment. Organisations should focus on leveraging existing health and safety management practices to develop robust, effective interventions, resulting in positive outcomes for employees, managers, and employers and stakeholders.

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