Understanding Work Related Stressors

INTRODUCTION

The Work Health and Safety Profession has recognised the need for a more holistic approach to worker safety.

There is now more of a focus on workers emotional and mental wellbeing, in addition to the physical protection for workers across Australian businesses and industry.

However, psychological safety is an emerging field and changes to include this in legislation has only happened in recent times. Safe Work Australia, has for example, only released the national guidance material on *Work Related Psychological Health and Safety* in January 2019.

This guide states that "*Psychological hazards or factors are anything in the design or management of work that increases the risk of work-related stress. A stress response is physical, mental and emotional reactions that occur when a worker perceives the demands of their work exceed their ability or resources to cope*." (Safe Work Australia, 2019)

Australian Workers Compensation statistics show that 92% of serious mental health condition claims are attributed to work related mental stress.

So, the questions that arise are: **what are the common work-related stressors?** and **how do these differ from industry to industry?**

OBJECTIVE

The purpose of this document is to review the literature on work related stressors across Health, Community Services, Transport and Logistics, Mining, Fly in - Fly out (FIFO) Industries, Retail, Construction and the Public Service to see if these industries experienced the same or similar work-related stressors, and determine what stressors, if any are prevalent across multiple industries.

METHODOLOGY

To conduct my research a systematic review was undertaken. From the literature sourced, 23 peer reviewed articles have been selected which meet the criteria established to answer the research question.

The criteria for this review included;

Criteria 1 – Document title to refer to and include Work Related Stress

This criterion ensures that stress within a workplace context was at the centre of the study objectives thus supporting the topic being researched.

Criteria 2 - A varied demographic of industry and occupations

This criterion was included to capture the diversity of industry, with those outlined in or closely aligned to those mentioned in the above objective.

Criteria 3 – Titles that included work related psychological harm or psychosocial risk in addition to stressors

As the focus of this study is to highlight the psychological aspects of stress, it was expected that any work-related mental harm, burn out and related psychological health outcomes in literature would point to the work-related stressor that caused such harm, therefore being relevant to the research questions.

In addition to the peer reviewed journals, guidance materials, statistical data, codes of practice and other reputable guidance materials designed by the Australian Safety Regulators (Safe Work Australia, Work Health and Safety Queensland and WorkCover Queensland) and Australian Government Websites were also used to support the findings in this literature and are referenced accordingly throughout the paper.

Research Overview

Many work-related stressors were referenced across the literature; the level of control over work, the level of social supports in the workplace, the emotional demands of the job, traumatic events, role ambiguity, role conflict, meaningfulness of work, workloads, long working hours, and the quality of their relationships with supervisors were common themes in the literature reviewed.

Workers the world over are under greater pressure than ever before to meet the demands of modern working life, (Forastieri, 2016) understanding those pressures and the stress they cause, will help industry better support their workforce and achieve greater business outcomes.

There were 6 key work-related stressors within the literature that were a common theme across the industries within the studies reviewed; these are outlined in the key findings section of this document.

Elements such as role ambiguity, role conflict, meaningfulness of work, social support constructs and quality of their relationships with supervisors were not assessed as part of this review. This decision was made based on the dominance of the 6 key concepts of the literature and the lack of information to support an evidenced based review of those other elements in the timeframe for this assessment.

KEY FINDINGS

High Job Demands - Workload

One article reviewed in this research stated that the main causes of work-related stress reported to General Practitioners (GPs) were workload demands. (Anne Donaldson, 2016)

According to the Cambridge University Dictionary; "***Workload is the amount of work to be done, especially by a particular person or machine in a period of time".*** In almost every industry sector reviewed, high workload was a common source of work-related stress.

In health and Community Services, even though the physical demands seem to be decreasing, emotional, psychological, and cognitive demands on workers are increasing. In this industry the physical, social, and organisational aspects of the job that require sustained physical and psychological effort erodes workers energy and foster staff burnout. (Maureen F Dollard, 2007)

Pharmacists also felt that they were being asked to do more work, and often found they had to deal with conflicting work priorities. The research study concludes that workload is placing greater pressure on those in the industry and is a considerably high source of stress. (Victoria M Lea, 2012)

Interestingly, members of clergy also experience stress resulting from high workload demands. As an occupational group, clergy serve a number of roles within their community (for example, teacher, counsellor, pastoral carers etc.) congregant demands on the clergy job roles can be particularly high, and demanding, leading to stress and high incidents of burnout. (Rae Jean Proeschold - Bell, 2016)

In the retail sector job demands were also high, with the sector showing such stressors as supervision of junior staff, frequent changes of store managers, and requirement to implement the practices of "upselling" as having exasperated workload demands. These were seen to impose additional burdens on workers time and energy, creating stress. (Michelle R Tuckey, 2017)

The wide range of red tape, multiple accountabilities and higher-level politics also make for high job demands and increased stress on those working in the public services sector. (Bangcheng Liu, 2015)

Role overload issues were also presented in literature from the transport and logistics industry, with workers also reporting excessive workload demands, which are having a number of negative stress related consequences for workers. (Michelle K Tucker, 2018)

Although acknowledged that the most obvious stressors on the construction site are physical, a large number of respondents in the construction and laborer sector studies, stated, that job task demands are in the top 12 stressors of the industry. (Linda M Goldenhar, 2003)

Even those who are self-employed are affected and indicate that onerous workloads were a major source of stress. (Irvin Sam Schonfeld, 2015)

Workload demands on workers stress levels is a key factor across industry; in one study it was found that in the prevention of chronic non-communicable diseases, evidence-based research has incited health policy makers to look for influences not only in individual behaviours and lifestyles, but also at working conditions, in particular job demands. (Forastieri, 2016)

Job demands was one of the most consistent stressors across the literature reviewed and its contribution to work related stress and worker health cannot be ignored.

Work Hours

A large number of studies have found that poor mental health and depression are associated with long working hours. (Forastieri, 2016)

One study that looks at the risks of fly in – fly out and drive in – drive out work, describes the extended days, long work patterns and rosters. It described long hours as being a well-recognised industry contributor to physical and psychological fatigue within this industry. (Grow, 2013)

Notably, working extended hours increased stress and cortisol changes in FIFO workers. With some FIFO/DIDO workers often working extended hours (10 – 12-hour shifts), then expected to travel to/from sites in their own time adding to their working day. (Rebecca R Langdon, 2016)

Those working in the health and community services sectors also cite working hours being a contributor to poor mental health outcomes and work-related stress. The cost containment focus in this industry has seen dramatic change to organisational and health care delivery models resulting in reduction of staffing numbers and the need for longer working hours for those who are employed. (Maureen F Dollard, 2007)

Health workers often working long or double shifts, night shifts and public holidays reported additional levels of emotional exhaustion and stress over work – home balance. (K Mctiernan, 2015)

There are mixed issues with working hours presenting stressors for those in the retail industry. One study states that the introduction of Sunday and 24-hour trading has contributed to long working hours (working between 70 – 90 hours per week), particularly for those in managerial roles who feel it necessary to work overtime, often as a way to prove themselves for promotion. (Broadbridge, 2002)

By comparison, another study states that there has been an increase in job strain for those workers employed by larger retail organisations who have reduced staff numbers. The restructuring of working hours has seen the typical full-time staff being replaced with casual staff, who work irregular and/or short or split shifts (e.g. 5 hours or less). This has resulted in these workers feeling they need to work harder and faster creating a stressful situation. (Carolyn M Boyd, 2014)

Surprisingly, those in the construction industry have also reported the primary trigger for stress as being the work hours required due to the scheduling of works. Meeting construction deadlines and the numerous perspectives from within the industry on how long a task should take, was cited as adding to their pressure to work long hours. (K Mctiernan, 2015)

In the transport and logistics industry, role overload was described by employees as having limited or insufficient time to complete job tasks. Stress came from workers unable to meet their responsibilities due to difficult deadlines and insufficient time to complete job tasks. (Michelle K Tucker, 2018)

It is known that workers clocking at least 11 hours a day have a higher risk of depression than people working a standard seven- or eight-hour day. (Salvanera-Raymundo, 2015) Clearly work hours either long, short durations, shift work or a combination all can have an impact on workers levels of stress.

Occupational Violence

In March 2016, a $1.35 million advertising campaign was launched in Queensland to stop attacks on paramedics and frontline health workers. (ABC, 2016)

The adverts on television highlighted the dangers and impacts of occupational violence in the health and community care services sector. More recently we have seen advertisements about new penalties for those who physically assault ambulance workers.

Feeling safe, stable, and secure is at the core of an individual's health and wellbeing. (Australian Government, 2019) It is not surprising then that occupational violence was another common stressor in the literature reviewed.

For those working in the psychiatric care industry, recorded violent incidents, potential suicides and a lack of adequate cover in a potentially dangerous environment was the most frequently referenced stressor and a high indication of burnout among their staff. (K Mctiernan, 2015)

A broader study into the health and community services sector identifies taxing emotional demands arising from client interactions particularly with regards to harassment and violence, as one of the most important factors influencing psychological ill-health and sickness absence in the industry. (Maureen F Dollard, 2007)

In the retail industry, customer demands, ranging from mildly unreasonable to extreme expressions of anger and hostility are also impacting the stress and wellbeing of those working in the sector. (Michelle R Tuckey, 2017)

Literature searches for information on occupational violence in the transport and logistics industry returned little result. However, a small number of papers were found; with the majority of these focused on those who drove occupationally, such as in buses and taxi cabs.

An American study found that Taxicab drivers die at work from homicide at a rate greater than workers in any other occupation, including people employed in law enforcement and as security guards. Taxicab drivers also face a substantially higher risk for nonfatal assault than workers in most other occupations. (Gilbert, 2011)

The psychological consequences of violence against bus drivers was described as devastating, with drivers reporting they were experiencing a wide range of violence at work, leading to high instances of post-traumatic stress within the industry. (Biru Zhou, 2017)

Refreshingly, in the literature reviewed, occupational violence was one of the rarest types of work conflicts and sources of stress for those in the construction industry. (Brockman, 2013)

Occupational violence is a stressor that can impact any workplace; the literature is clear that it has a negative impact on workers mental health and wellbeing. The number of reported incidents for workplace violence is constantly increasing due to the rise in drug and alcohol abuse, mental health, and dementia. (Australia, 2019)

Interpersonal Conflict

A good definition of interpersonal conflict was given in a research article on interpersonal conflict among health care workers, it defined interpersonal conflict as *"a dynamic process that occurs between interdependent individuals, groups, or both, as they experience negative emotional reactions to perceived disagreements and interference with the attainment of their goals."* (Jih-Shuin Jerng, 2017)

Interpersonal conflict in Australian Health and Community Services sectors, particularly bullying and harassing behaviours has been recorded as a source of psychological ill-health and sickness absence for workers in the industry. (Maureen F Dollard, 2007)

Clergy, similarly, to those in community services often provide one -on-one interactions with those needing mentalhealth support and counselling and are also experiencing a number of stressors which are mainly interpersonal.
Clergy can be under high expectations from congregants and church leaders/members which can also pose difficulties and conflict. (Rae Jean Proeschold - Bell, 2016)

In the retail industry, competition for sales between co-workers employed in smaller stores was cited as a major threat to relational harmony and a source of distress across the sector. (Michelle R Tuckey, 2017)

For those employed in the public service, it has been found that the external political environment can intensify perceptions of politics inside the organisation leading to stress and tensions. (Bangcheng Liu, 2015)

Despite more positive results in the literature with regards to occupational violence, interpersonal conflict is one of the top occupational job stressors for those in the construction industry. Those experiencing interpersonal conflict also show a strong link to psychological and physical health reductions. (Brockman, 2013)

In construction, a lack of communication, unwelcome horseplay and banter, differences in ways of performing work and the close proximity of working trades were all cited as triggers for interpersonal conflicts. (Brockman, 2013)

There was little evidence to support work related interpersonal conflict as being a stressor within the transport and FIFO industries.

Work Related Trauma

Although work related trauma differs somewhat from work related stressors, the psychological implications cannot be ignored. Many workers are exposed to traumatic events in the course and nature of their work. Some examples from the literature reviewed as part of this paper follow.

High levels of distress in human service workers after acute event exposures (such as contact with child victims of violence) leads to higher instances of post-traumatic stress and burnout among workers in this field. (Maureen F Dollard, 2007)

Similarly, to those in human services, those in nursing who show an empathetic engagement with their client's traumatic experiences also found this had greater effects on their own mental health and wellbeing. (K Mctiernan, 2015)

Drivers in public transportation are at risk of experiencing potential traumatic events such as accidents involving persons, collisions, or suicides. Drivers have a risk of exposure to severely injured individuals, mutilated bodies, or cries from injured persons and as a result of these traumatic exposures report a higher risk of post-traumatic stress. (Annika Clarner, 2014)

It is reasonably safe to assume those in emergency and first response professions would also face the same or similar stressors in their workplaces and be at risk of post-traumatic stress.

Studies have found that FIFO workers are likely to be at greater risk of suicide (Australian Institute of Health and Safety, 2019) The high levels of depression, anxiety and emotional distress among FIFO workers cannot be understated, although the reasons for this have not been explored in this review, this has the potential to traumatise others who worked with them and can be flagged as a work related stressor.

This is something also seen in the construction industry, research reveals that around 190 Australians working in the construction industry die by suicide each year. This has sparked programs such as the Mates in Construction program to support workers and attempt to mitigate the risks. (Men's Health Information and Resource Centre, 2019)

Those experiencing trauma and vicarious trauma through their work are at significant risk of harm to their own mental health and wellbeing.

Technology

In 1985 a journal article was published; it detailed the International Labor Organisation examining the impact of technology on workers and that the experts agreed that technology can both increase or decrease work-related stress depending on how it is used. (Linsenmayer, 1985)

Advances in technology has affected the workplace and the effects of this was seen in the literature reviewed. The emergence of the internet, digitalisation of communications, online payment systems (eftpos) and electronic shopping, robotics and automation have led to many changes.

As a positive, the study into pharmacist's job satisfaction and stress, the progression in technology has now changed the way pharmacists dispense. Despite the number of prescriptions increasing there is less medications needing to be assembled and compounded thanks to technology. (Victoria M Lea, 2012)

However, in other areas of health and community services technology can be seen to have intensified job stress, particularly where workers under pressure with job demands are faced with the additional stress of having to learn new systems. (Maureen F Dollard, 2007)

Within the retail sector, the stress can be related to the downsizing of the workforce as increased internet competition has decreased the face to face demand. (Michelle K Tucker, 2018)

Reliance on technology in instances where it does not work as intended can also create a source of stress for workers, healthcare workers in Ethiopia for example noted that not having phone signal was one of many infrastructures that caused stress. (Medhin Selamu, 2017)

Another source of stress that comes with technology, is the blurred lines between work and home, with innovations in technology seeing greater numbers of workers continuing to work at home outside working hours.

Work Life Balance

In the 21st century we are seeing more and more encroachment of work into our personal and family lives, the work – home boundaries are blurred, and stress is bubbling over from one domain to the other. (Broadbridge, 2002)

There is a constant adjustment and readjustment process for FIFO and DIDO workers when they come and go for work both for the employee and their family which in itself is difficult and stressful. This process creates emotional strain before they leave on their next roster with feelings of sadness, anxiety and tension. (Grow, 2013)

Not being able to spend time at home with loved ones and feelings of helplessness to assist and contribute whilst away heightened feelings of loneliness and depression. (Amanda May Torkington, 2011)

For those in retail it is the irregular and unpredictable work schedules and last-minute requests to work additional shifts that generated a source of stress and disrupted family life creating a sense of deprivation among workers. (Michelle R Tuckey, 2017)

Drivers in transport and logistics commonly reported loneliness and depression, chronic sleeping problems and chronic fatigue, linked with work related stressors such as long hours and separation from family. (Michelle K Tucker, 2018)

Healthcare workers also deal with competing family responsibilities and the feedback in the literature was that the profession was very demanding and emotionally draining. (Medhin Selamu, 2017)

Interestingly, the literature showed that those working in community nursing were less stressed by work/home conflicts. This may be due to these workers having more control over the work hours. (K Mctiernan, 2015)

There was not much feedback from the construction literature relating to work life balance, although not unlike any work situation home/life issues can affect a person's work life and vice versa with one construction industry study participant stating, *"You don't know what people are bringing home"*. (Brockman, 2013)

This last point escalates the importance of work life balance in my opinion.

COST OF WORK-RELATED STRESS

In addition to the fact that work health and safety laws now require a business to manage the psychological risks that work-related stress causes (Safe Work Australia, 2019) it also makes good business sense.

Research clearly indicates that the relationship between work related stress and both physical and mental health disorders is consistent. (Forastieri, 2016)

7,200 Australians were compensated for work-related mental health conditions between 2014-2015, costing approximately $543 million in workers' compensation for work-related mental health conditions. (Safe Work Australia, 2019)

The health and community services sector have the highest number of psychological distress claims, accounting for 20% of claims nationally. (Maureen F Dollard, 2007) Across the Australian Public Service psychological injury represents 14% of all claims, but it signifies 44% of all time lost and 42% of all costs. (Parker, 2015)

Following a traumatic event 69-81% of the drivers in the transport industry were absent from work on sick leave of anywhere between 3-19 days. In addition to the cost of absenteeism in this industry there is also the cost on ongoing treatments for those suffering from post-traumatic stress.

Lost time for work related interpersonal conflict in the construction industry was estimated in one study; it showed the minimum hours lost was 161.25 hours. It also indicated the average cost of managing conflict from incident to resolution was between $10,948 and $367,000 dependent on the nature of the conflict. (Brockman, 2013)

There was little information on associated costs for stress related injury, such as administrative, legal, or otherdirect or indirect costs in the literature reviewed.

What is outlined here in this section are some of the economic costs to business, it does not show the personal cost to the individuals effected, their families, friends, and their communities. It would be interesting to do furtherresearch into the cost of work-related stress.

CONCLUSION

The average Australian adult spends 90,000 hours in work, back-to-back this would be 11,000 days of work in the average person's career. (Parker, 2015) With the time spent at work, work related stressors as evidenced across the literature reviewed, has substantial adverse influence on the mental health of the workforce.

From this literature review, it can confidently be declared that work related stress is not unique to any one industry, nor was there much variation in the nature of the stressors presented.

The need to effectively manage and support workers with work related stress and reduce the costs to both employer and employee is clear.

Nonetheless, how best to support workers remains unclear as each individual has a differing threshold and perceptions of stress. A small amount of stress, such as meeting a challenge or deadline can actually be helpful and motivating, but too much stress, or prolonged stress will ultimately affect our physical and mental health. (Lifeline , 2016)

Individuals who perceived that stress affects their health *and* reported a large amount of stress had an increased risk of premature death. (Abiola Keller, 2012)

More research into how effective the current workplace supports, and risk controls are, is needed. I believe that research into the current types and design of employee assistance programs would be the first place to begin.

Understanding what workplace supports are best from industry to industry, the differing nature of stressors, and how workplace programs can better accommodate individual needs (given the varying responses to stress) will be instrumental in curbing work-related harm as a result of work-related stressors.
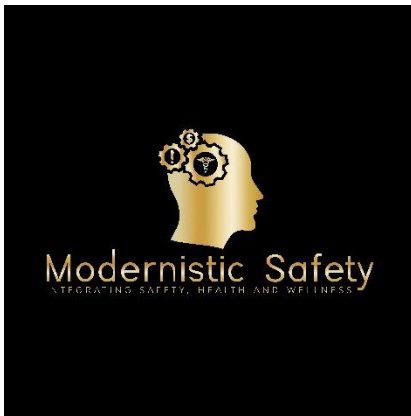
About the Author

Emma is a multi-talented professional with 20 years' experience in occupational safety roles, she is passionate about helping businesses through the integration of safety, health, human factors, and wellness management practices to achieve safer, happier, and more productive workplaces.

Emma is driven to turn innovative ideas into realities, working with businesses to build on their current processes and discover strategies for improvement and growth.

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For more about Modernistic Safety visit https://www.modernisticsafety.com/

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