

Occupational Health Psychologist



Incorporating the Newsletter of the Academy

A publication of the European Academy of Occupational Health Psychology

Europe's leading body for individuals and institutions with an active involvement in research, professional practice and education in occupational health psychology

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Editorial

Welcome to the Summer 2005 issue of the *Occupational Health Psychologist*, which, we hope, represents another milestone in the development of the Academy's newsletter. In this issue, we are delighted to present two articles that relate to OHP research and international collaborations. The first of these articles has been provided by the "SPARC" research team at the University of Aarhus, Denmark, who discuss their participative research philosophy, and outline three projects that investigate organisational participation. The second article is by Evelyn Kortum (World Health Organisation), who discusses the background to WHO's global network of collaborating centres in occupational health.

In addition to these interesting and informative articles, Jonathan Houdmont brings you the latest news from the Academy, including some exciting developments regarding the venue for the 2006 conference. Jonathan also provides details of some local Academy events, along with a report from the official launch of the *Annual Review of Occupational Health Psychology*, a new publication that stems from last year's conference in Oporto.

We also introduce two new regular sections in this issue: OHP Research Reviews, and OHP in the Media. The Research Reviews section provides brief summaries of recent research articles that may be of interest to our readers, while the OHP in the Media section is designed to illustrate some of the

OHP-related issues that have received recent media attention. We have so far been restricted to reviewing the UK press for articles, but we very much hope to encourage you, our readers, to send us translations of relevant articles that have been reported by your national news media.

The inclusion of these two new sections reflects the contributions from Alex Birch, and Victoria Friedman, two new editorial assistants who have recently joined the *OHPist* team. Many thanks to Alex and Vicki for their help in putting this issue together.

We have already received some interesting articles for our forthcoming issues, including: a review of the work being carried out at TNO (The Netherlands), a series of reports from a group of OHPs embedded within the UK National Health Service, and a report on the development of OHP in Japan. We are very keen to encourage more of the Academy's members to submit articles to the *OHPist*, so that we can provide our readers with an overview of OHP-related work being conducted in different countries across Europe and beyond. As you will see from the general guidelines on the last page of this issue, we will accept many different types of articles, including short research reports, overviews of the work being carried by an institution, practical case studies etc. Please do not hesitate to contact me if you have any questions regarding submission (email address below).

All that remains is for me to thank the SPARC team (Hans Jeppe Jeppesen, Thomas Joensson, and Thomas Rasmussen) and Evelyn Kortum, for taking the time out to communicate their work to their fellow occupational health psychologists.

Best wishes

Paul Flaxman

On behalf of the Editorial team

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Disclaimer

The views expressed herein are those of the authors and do not necessarily represent those of any other person or organisation. The *Occupational Health Psychologist* does not in any way endorse the views expressed.



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Academy Publications

The Occupational Health Psychologist

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Back copies can be download at www.ea-ohp.org

Work & Stress

The Journal of the EA-OHP. Published quarterly in association with Taylor & Francis
ISSN 0267-8373

Conference Proceedings

ISSN 1473-0200
The proceedings series of the EA-OHP annual conference catalogue consists of Nottingham (2000), Barcelona (2001), Vienna (2002), Berlin (2003) and Oporto (2004). Copies may be ordered from Jonathan Houdmont jonathan.houdmont@nottingham.ac.uk

Europe's leading body for individuals and institutions with an active involvement in the research, professional practice and education in occupational health psychology



Members of the Academy's Executive Committee take questions from delegates at the 2004 conference in Oporto. From left to right: Jonathan Houdmont, Tom Cox, Phil Dewe, and Frank Bond

Academy News

Regional Events

The Academy's 2004 Annual General Meeting, held during the Oporto conference, resolved to henceforth adopt a biennial conference model. It was agreed that a full conference of the Academy will be held on alternate years and in the intermediate year a number of local events will take place. These regional events are organised at a local level by Members working in collaboration with, and under the auspices of, the Academy.

Three local events have thus far been arranged for 2005 in collaboration with Taylor & Francis, publisher of the Academy's journal *Work & Stress*. The first is a one-day workshop concerning the challenges faced by an ageing workforce that takes place on November 30th 2005 in London, England. Booking details will be made available on the Academy website www.ea-ohp.org shortly. Also towards the end of 2005 there will be a two-day workshop on risk assessment for work-related stress. This event will take place on 18-19th October 2005 at the Thistle Lancaster Gate hotel, London and repeated on 6-7 December 2005. Booking details can be found at www.tandfevents.com/riskstress.

Events of this type are important for bringing the message and benefits of occupational health psychology to new markets. If the Academy is to fully represent the discipline of OHP across Europe it is important that regional events take place in the year between full conferences across its constituency. Members are encouraged to discuss their ideas with Jonathan Houdmont jonathan.houdmont@nottingham.ac.uk for local events on regionally pertinent themes.

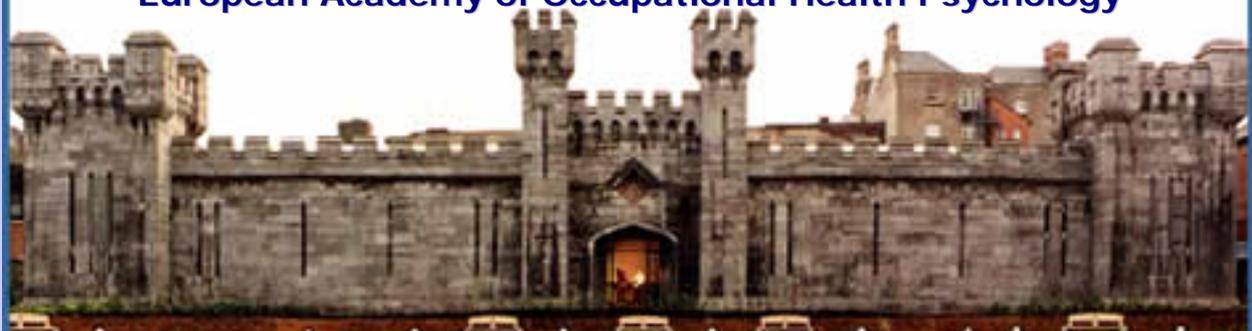
Book Launch

May 2005 saw the launch of an important new publication, *Occupational Health Psychology: Key Papers of the European Academy of Occupational Health Psychology* (ISBN: 972-9048-15-0). The book contains sixty journal-style articles pertaining to presentations made at the Academy's 2004 conference held in the Portuguese city of Oporto. Gratitude is extended to the Instituto Superior da Maia (ISMAI) for its generous support in the development of a high quality publication that offers an extensive overview of current research themes in occupational health psychology in Europe and beyond. The launch event, held at ISMAI, involved presentations from the editors and a keynote speech from Teresa McIntyre before the obligatory port wine reception. Delegates to the Oporto 2004 conference will receive a complimentary copy of the book. Further copies of this book, and others, will shortly be available from the Academy's online store that is currently under construction at www.ea-ohp.org.



19th May 2005: launch event for *Occupational Health Psychology: Key Papers of the European Academy of Occupational Health Psychology*

7th conference of the European Academy of Occupational Health Psychology



Dublin Castle, Ireland, 8-10 November 2006

See back page for details

Research in Organizational Participation and Cooperation



Hans Jeppe Jeppesen, Thomas Joensson, and Thomas Rasmussen

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SPARC

The Department of Psychology, University of Aarhus, Denmark, is host to the "Studies in Organizational Participation and Cooperation" (SPARC) research unit. We want to thank the editors of the *OHPist* for providing us with the opportunity to inform our European colleagues about some of the ongoing research activities that are being conducted at SPARC. We also regard this as an opportunity to develop contacts, discussions, and cooperation with other groups and individuals interested in the importance of organisational participation for human processes and development, as well as for innovation and democracy in work organizations.

We are devoted to research in participation at both a theoretical and an empirical level. We deal with participation both as a research objective and a research strategy. Our research is designed to bring together conceptual and applied perspectives to further our understanding of organizational participation and cooperation.

SPARC is predicated on an understanding of organizations as social structures in which individuals and groups necessarily interact. Thus, participation is fundamental to our understanding, analysis, and intervention with decision-making processes in organizations, at individual, team, collective and organizational levels.

Overall, organisational participation can be considered, because it accentuates employee involvement in decision-making processes in work organizations, and is a concept that addresses fundamental social rights which, in the workplace, are expressed as the possibilities available for employees to exert influence at work. Employee involvement in decision-making processes in organizations encompasses a wide range of concerns that stretch from job performance, conditions for its performance, and employment issues, to the function and innovation of work organizations. This further highlights the span of organizational participation, as a process that includes the processes of democracy, and social rights, as well as those of employees' cognitive, emotional, and behavioural functioning, and the conditions within which they operate. This understanding of organisational participation mediates and unites democratic and anthropological approaches.

Employee social rights are also emphasized in EU legislation as a basis for developing labour market regulations, such as the directives about improvements in the safety and health of workers at work, and on the organization of working time (Council Directive 89/391, Directive 2003/88/EC (latest)). The importance of organizational participation in transforming regulations at local level has been even more significant with the development of framework regulations. Here, an increasing amount of the activities concerning the design of working conditions and the management of health and safety are handed over to management and employees to address cooperatively. In this shift from standard towards framework regulations, the interaction between the function of actual organizational participation and its organizational context will be even more decisive for the reality of regulations at the organizational level.

This implies that our understanding of the role of participation is increasingly important to the field of occupational health psychology for various reasons, including: evaluating the effects of work organizations for employees; controlling the design and operation regulations in organizations; monitoring the work environment; and continuously carrying out prevention activities. Participation can assume various forms, can vary in intensity, and can expand into different areas (from job performance to organizational development strategies), depending on the national regulations and the particular organizational context; this implies that participation as an organizational process may manifest in various ways in the different areas. Employee experiences of the function, and importance, of participation in one area will be transformed to other areas, implying that the comprehension of the role and influence of participation in one area needs to be complemented by the organizational context. In this way, the display of organizational participation is not a separate but an interdependent process.

The various reasons for the introduction, application, and extension, of participatory processes in organizations may have their origin in legislation, agreements, or managerial initiatives. In continuation of this, differences in the features of organizational participation can thus be found at an international level between countries, at a national level between organizations, and at the organizational level between different areas depending on constitutional factors. Furthermore, variations in participatory dimensions may also be dependent on organizational contextual factors such as branch systems, technological development, managerial and employee attitudes to participation, and traditions for cooperation. The proximal or distal character of a given area in relation to the daily work operations may be of importance for when considering employee involvement and influence. The actual features of participation in a given organizational setting can thus be regarded as expressing different stages in the participatory democracy of work organizations.

Considerable variations can also be found in the literature in the approaches to the demarcation of organizational participation, the conception of its role and function, and in the applied approach for studying participatory processes. Thus, we believe that it would be appropriate to first describe SPARC's approach to organizational participation in more detail, before we discuss some of our empirical research activities, and their importance in a scientific and applied context.

The approach to participation in SPARC

Organizational participation deals with employee involvement in organizational decision-making processes. In general, participation can be understood as activities directed towards a purpose and, in organizational terms, can be viewed as connected to purposeful acts or goal-directed behaviour. The nature of participation will depend on which purpose participation is supposed to serve (Wilpert, 2002). As was mentioned above, the form and intensity of participation may vary considerably, and its concrete design will be determined by the purpose, and by the organizational and national context of the participatory system.

One dominant approach to participation perceives it as a method that can contribute to the improvement of employee performance and thereby serves an organizational purpose. In contrast to this, another approach (primarily located in Continental Europe) emphasizes that participation has a more fundamental anthropological function. The possibilities for people to act in their social domains are here conceived as prerequisites for human development and growth. According to this approach, participation cannot simply be understood as an instrumental, and context free, method.

In continuation of this second conceptualisation, Wilpert (2002) argues that participation is "the totality of forms, i.e. direct (personal) or indirect (through representatives or institutions), and of intensities, i.e. ranging from minimal to comprehensive, by which individuals, or groups and collectives, secure their interests through self-determined choices among possible actions". This definition emphasizes that participation must have a design that makes it possible to secure interests, and that deals with both individuals' and collectives' goal-directed actions, as well as recognizing different strengths in the attempts to secure interests (Wilpert, 1998). It also implies that the purposes of participation are not mutually exclusive, and that employees and employers may have shared or contrasting interests. In SPARC, we find that the determination of the demarcations between different organizational interests, and an understanding of their fluctuation between organizational areas, and over time, are decisive for the development of co-operation and abilities for handling tensions within organizations. Furthermore, the accentuation of interests implies that participation is not identical with autonomy, which denotes the employees' possibilities for decision-making inside certain frames, but do not necessarily include the understanding of interests.

The clarification of securing interests as a foundation for participation means that participation is linked to organizational democratic processes. According to the SPARC approach, organizational participation and democracy mean that the employees have the possibility to act in accordance with their interests comprehended in a broad sense (e.g., values, financial, attitudinal etc.), at a level where the employees can influence the organizational decision making processes. The democratic dimension also implies that employees' methods of securing their interests must consider both the rights of other participants to act according to the same principles, and the function of the organization. This approach also recognizes that the different goals linked to participation are not mutually exclusive, but may appear in different proportions and may be fulfilled simultaneously, depending on the organizational context and the actual politics of participation. A participatory democracy differs from social democracy as it expands in consideration to the frames of the function of the organization.

Furthermore, the democratic approach to participation is normative, which implies that: a) employees' possibilities to act in accordance with a democratic handling of interests provide optimal conditions for the development of consciousness, motivation, the self, and social activity; b) an organizational participative democracy is important for the development of more democratic societies through participation in the social democratic processes (following the assumptions about

transferring activities from one domain to another); and, c) a participative democracy is decisive for the quality of innovative processes in work organizations. This does not indicate that participation per se will cause a democratisation of work organizations, but that participation in principle has the potential for involving democratic processes via the employees' active participation in organizational decision-making. This approach to participation can thus be understood as offering possibilities for the employees to consider their goals, values, and wishes through their activities, and where the activities are framed by, and themselves frame, consciousness, motivation, the self, and social functioning.

As an interactive process, participation will expand in organizational fields of tension between cooperation and conflict, autonomy and limitations, dependency and independency. Irrespective of how multidimensional the purposes of the organization might be, the organization will impose restrictions on the possibilities to satisfy individual interests, and the tension between organizational purposes and individual interests will continue (Pusic, 1998). Furthermore, the ambivalence between control autonomy, and participation, and the purposes of the organization can be identified through applied organizational methods. Stabilization is reached through norms, rules, certifications and standardizations, which may deprive employees of their choices, but at the same time, these choices form part of the possibilities for organizational innovation (ibid). Participative practice has both individual prerequisites (e.g., in the shape of motivation, experience, and competence), and organizational prerequisites, offering conditions for the development of employee competence, and utilization of external adviser assistance etc.

The development of the theoretical foundation of participation may have many interfaces, and may incorporate theories of power, anthropological theories, theories on democracy, theories in social psychology, industrial relations, as well as theories about organizations and organizational psychology.

Participatory democracy constitutes the overall objectives for the activities in SPARC. Besides having a conceptual purpose, the research activities described below are also aimed at the establishment of a scientific basis for managing organizational processes and structures from a participatory approach. This embraces the development of analyses, the determination of the function of organizations, diagnostic tools to identify participatory democracies, and the improvement of participatory intervention and innovation strategies.

Empirical research activities in SPARC

By research activities in SPARC we denote activities that are carried out within the framework of SPARC, or activities where members from SPARC have participated in their accomplishment. In this discussion of the empirical research we have emphasized the description of activities more than the persons and institutions involved. The actual description of our empirical work will of course vary depending on the amount of research that has been carried out and the current status of the discussed projects.

Our main participation research falls into three areas: working time (e.g., shift scheduling); social identity (e.g., linking participation to social identity at work); and team-organization (e.g., team autonomy). Although we will describe these three areas separately, we typically apply multiple-case-study designs in our research projects, and this was generally the case for the research discussed below.

We find that this type of research design provides a number of important benefits, by:

- allowing us to utilise both qualitative and quantitative information, which in turn helps us to: identify the dynamics of the participatory processes; analyse the results in varying contexts; and analyse frequencies, associations, variations, and common features across organisations.
- increasing the possibilities for generalisation, and for applying triangulation in the verification of results.
- increasing the potential for offering a more extensive and detailed feedback to the participating employees and organisations.
- providing opportunities for initiating longitudinal follow up studies in relation to particular relevant problems; and, at the same time, increasing the opportunities for assessing causal relations.

Working time research

Our research concerning working time issues and participation has been conducted over a long period of time, even before the formal establishment of the SPARC research unit. This research has included: a focus on the role of participatory bodies for the organisation of working time and shift schedules in hospitals; a cross national study about the importance of employee participation in considering health and safety issues related to the design of shift systems in the chemical sector; and, participatory intervention studies in the field of working time, aimed at examining the value of a participatory intervention model.

The hospital study encompassed all seven hospitals and all 114 wards with 24 hours service in one region of Denmark.

In one part of the study, we examined how the Danish system of regulations, which is based on collective agreements and legislation and its associated participatory structures, operates at hospital level in relation to shift work and health and safety issues. It was found that the roles of cooperation committees and Health and Safety Committees were confused, and tended to result in mutual neutralisation. It was concluded that the Danish regulatory system offers opportunities to utilise and develop participatory strategies; but, if this system is to become influential in health and safety dimensions of shiftwork, it will be necessary to clarify the responsibilities of (and relations between) the two different committees. At present, the potential of each committee is not being realised, and the construction of the system does not facilitate the initiation of prevention activities (Jeppesen, Boeggild & Larsen, 1997).

In another part of this study, our analyses showed that the existing framework for handling health and safety issues increased the probability of working time arrangements being handled through a system of self-administration. This often leads to subordinates' health and safety issues, and demands for flexibility, being treated accidentally and unsystematically. Furthermore, the risk of individual employees having to handle their own health and safety problems increases. It was concluded that managing health and safety within a legislative framework that also leaves room for flexibility, requires new concepts for health and safety policies at the organisational level. In order to consider the health and safety factors in working time arrangements, special attention must be given to the clarification of responsibilities, operational levels, and cooperation between the local parties involved (Jeppesen & Boeggild, 1998).

A multi-annual and cross national research project about the significance of employee participation for designing shift schedules and considering health and safety issues will conclude with a research report which is expected to be published around July/August (Jeppesen, Kleiven, Boeggild & Gill, 2005). Some results from the study have already been presented at international conferences such as The International Symposium on Night and Shift Work (ICOH) in Tokyo (2001) and Sao Paulo (2003), the EA-OHP conference in Barcelona (2001), and also at the EAWOP conference in Lisbon (2003). The study was conducted in companies from the chemical sector in Denmark, France, Germany, Italy, The Netherlands, Norway and Sweden, which all belong to the same multinational company (Norsk Hydro, Norway). In short, some of the results of this research show that systematic prevention activities, such as monitoring and ongoing discussions about improvement of strategies to protect employee health in relation to shift work, do not take place. Activities concerning the design and alteration of working schedules were found to mostly stem from individual attitudes, local culture and traditions, and "accidental information" from, for example, neighbour companies. However, the study also provides examples showing that systematic information on health risks had influenced the elaboration of shift arrangements. Both managerial and employee representatives in companies with a longer tradition of cooperation and participatory processes were more likely to give attention to health issues in shift work organisation, as well as to prevention initiatives aimed at reducing exposure to risk by altering the shift schedules.

An intervention study which evaluated the introduction of ergonomic principles in the design of shift systems, using a participatory approach, was conducted at six different wards within the same hospital. The researchers collaborated with the participating wards to determine the principles for operationalising the applied participatory intervention method (PARIM). Established project groups in each ward (consisting of management and employee representatives) initiated a course of activities, gathered their colleagues' attitudes and ideas, and, on this basis, drew up proposals for new principles for designing the shift schedules. The project demonstrated that, by applying a participatory approach, it was possible to introduce changes to the applied principles for designing shift schedules. As an intervention method, PARIM clarifies important factors for the progress of the intervention (Jeppesen & Boeggild, 2000). The ergonomic changes were reflected in a reduction in the level of risk factors for coronary heart diseases and in increased satisfaction (Boeggild & Jeppesen, 2001). Further analyses are in progress regarding the dynamics of the participatory processes in this type of participatory research design. This project is described in more detail by Jeppesen & Boeggild (2000). As we have argued elsewhere (e.g., Jeppesen, 2003), we believe that the organisation of shift work contains special issues, which increase the importance of applying participatory strategies.

Team-organization research

The themes of this research project called "METEOR" are Power and Recognition in connection to Team-organization (*In German: Macht und Erkenntnis by Team-organisierung*). The project began in 2002, and it employs a longitudinal multiple-case-study design with six diverse participating organizations (a treatment centre, a manufacturing organization, an organization developing software for cell-phones, an organization doing labour-market education, an administration department at an industrial organization, and a division of the Danish Postal Service). The project's data-sources are

questionnaires, interviews, and documentary material; data have been collected continuously at the participating organizations during a period of 18 months. A Ph.D. project is part of the METEOR Project, and results from the project already have been presented at international conferences (Rasmussen & Jeppesen 2004a; 2004b, Jeppesen & Rasmussen 2004a, 2004b), and further results will be published from Autumn 2005 onwards.

In the METEOR Project, team-organization is regarded as a participatory practice in organizations as it gives employees possibilities to exert some influence over their work (team-autonomy). The intensity and areas of team-autonomy, as well as other constituting factors of team-organization, can vary (e.g., interdependence, team-duration, number of members) leading to different types of teams (e.g. production-teams, matrix-teams, project-teams, and multidisciplinary-teams). Team-organizations can be used in many different types of organizations and thus can have quite different tasks and purposes attached. These features have given rise to the overall research question about whether team-organization contains participatory democratic potential, and under which conditions.

As mentioned above, SPARC views participation as a comprehensive organizational (and societal) phenomenon, which encompasses employees' possibilities to exert influence in organizations at different levels, in accordance with their interests. As such, team-organization most often offers employees possibilities for participation at more proximal and tangible levels (e.g., in connection to the planning and completion of tasks, placement of the team-members' working time, regarding training of the teams' members, and recruitment of new team-members). Even though participation in team-organization is most often at close and tangible levels, the intensity of the team-autonomy in different versions of team-organization varies considerably (Rasmussen, 2003). It is precisely this variation that is the rationale for this project's type of design and the included organizations. We view team-organization as one embedded participatory practice, among others, which in total make up the organization as a participatory system. Earlier research that has focused on team-autonomy has generally found positive effects of higher team-autonomy in terms of employee attitudes (De Dreu & West, 2001; Hechanova-Alampay & Beehr, 2001; Gard, Lindstrom, & Dallner, 2003). However, the sizes of the effects vary considerably, and the organizational context is most often not explicitly studied in connection to the effects of team-autonomy. In accordance with our foundation in participation, we examine the effects and processes of team-organization and their organizational contexts simultaneously, with a specific goal in mind: to answer how team-organization as a participatory practice interacts with the organization as a participatory system as a whole. This has led us to pursue the following research questions:

- What significance does the implementation process have for the effects of team-organization?
- What is the relation between team-autonomy and the effects of team-organization?
- How does team-organization interact with the remaining organizational participatory practices?
- Does team-organization interact with employee commitment and the psychological contract?

In our first general question we examine whether organizational participation spills over from work to non-work settings, thus playing a role in the development of societal democracy (though several projects are needed to fully examine this issue). In our second research question, we examine the significance of participation during the implementation of team-organization, thereby looking into whether participation during the implementation of organizational change affects the functioning of both. In our third and fourth questions, we look at the relation between team-autonomy and the effects of team-organization, and how team-organization interacts with its participatory context. This examines whether participation in the form of team-organization facilitates participation at other levels in the organization and vice versa. In our last question, we examine the interaction between organizational participation and relations in organizations, from the assumption that power (participation) and relations are mutually connected. In the METEOR Project, SPARC's participative approach is thus shaping an ongoing research project from design to the generation of research questions.

Social identity research

This PhD project broadly examines the role of participation in relation to fundamental anthropological issues. More specifically, the project focuses on how participation can facilitate employees' development and growth through increased possibilities to act in the social environment, which is assumed to be important in constituting the individual's consciousness about the self and other, as well as attitudes and activities connected to this consciousness. The theoretical approach used is the Social Identity Approach, initiated by research primarily conducted in the 70's and 80's by Henri Tajfel and John C. Turner. The approach made its entry into work and organizational psychology with an article by Ashforth & Mael (1989), and has recently also been used in the area of occupational health psychology (Haslam et al., 2004).

Social identity is, in essence, the self-consciousness about the salient group that one belongs to: "Social Identity is defined as that part of the individuals' self-concept which derives from their knowledge of their membership of a social group (or

groups), together with the value and emotional significance of that membership" (Tajfel, 1982). Applied in an organizational setting, teams, departments, professions, and the entire organization are all potential sources of social identity.

The significance of social identity is that this mental framework gives the individual a perspective on the self and others. Thus, social identity affects both attitudes and overt behaviour regarding the social domain (ibid.). For example, attitudes and behaviour towards cooperation and conflict within an organization are thought to be dependent upon whether the other is attributed as belonging to one's own group or to a competing group (e.g., Brewer, 1996; Hewstone & Greenland, 2000; Tyler, 2001). The value and emotional connotation to one's awareness of membership of a particular group is dependent upon the power and status that one group has vis-à-vis another comparable group. A positive social identity is distinct from compared groups, and perceived to have a better position on a status dimension (Sachdev & Bourhis, 1991; Tajfel & Turner, 1979). As participation is characterised as the power and influence that diverse stakeholders in the organisation have to pursue their interests (individual and collective; e.g., professions, teams, wards), it is, in general, theoretically related to social identity at work, and through this to conflict and cooperation within organisations. It is this connection between participation and social identity at work that forms the basis of this project.

From this, the following hypotheses have been formulated as the basis for this SPARC project:

- A high level of influence in one's occupational group is associated with a high level of occupational identity.
- A high level of influence in the organization is associated with a high level of organizational identity.
- A high level of identification with both one's occupational group, and one's organization, is related to constructive attitudes towards inter-professional cooperation.

Furthermore, the following themes are explored:

- The content and evaluation of individuals' occupational social identity.
- Experience of, and attitudes towards, participation processes and arrangements.
- The relation between context, status dimensions, and power resources used in participative practices.
- Inter-professional attitudes, cooperation, and conflict management.

The project is being carried out in a Danish hospital department where occupational groups and wards are sub-units of analysis. Interview-, questionnaire-, and document/archival-data are being collected. 32 interviews have been conducted with informants chosen to provide a variation of tenure, age, and position. Approximately 150 nurses, 35 physicians, and 40 medical secretaries completed the questionnaire, resulting in a response rate of 68%. Furthermore, organizational charts, minutes from meetings where decisions are made, turnover, and absence statistics, as well as human resource policies and agreements are being used as data-sources. Data analysis is currently ongoing and results will be presented in articles to be published from Autumn 2005 onwards.

Perspectives

We attach great importance in cooperating with other research units and individual researchers concerning the development of our scientific understanding of participation at both a theoretical and empirical level. This includes the development of scales and interview guidelines for classifying participatory democracies, as a basis for identifying areas of tension and cooperation within an organization. We also aim to cooperate with practitioners concerning the application of a participatory approach as the foundation for introducing changes in organizations and working with innovation. Indeed, cooperation with different industrial and public organizations, as well as parties in the labour market, is a natural part of our research activities. Here we particularly appreciate that such cooperation can offer a mutual output of research for furthering the scientific process, and can help organizations gain some insight regarding in their own functioning, tensions, and potential for innovation.

Finally, our future research perspective will focus on the development of theoretical frameworks for understanding participatory democracy, and its significance for the development of human personality, self, attitudes, and behaviours. We will also be focusing on the interactions between participatory democracy and social democracy. We are currently working on the publication of an anthology that stems from the SPARC participatory approach, entitled "The Dynamics of Organizational Participation", which also includes contributions from other researchers. The anthology will be published by Aarhus University Press in the Autumn of 2005.

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European Ways to Combat Psychosocial Risks Related to Work Organisation: Towards Organisational Interventions?

Peter R.A. Oeij & Evelyne Morvan (Eds)

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The PEROSH (Partnership for European Research in Occupational Safety and Health) pillar group on 'psychosocial factors and work organisation' held its second workshop at the EA-OHP Oporto conference in November 2004. The papers have been compiled into a report published by TNO Work and Employment, in association with PEROSH.

The purpose of the report is to learn from each (participating) country which activities are being undertaken in the field of 'work organisation and psychosocial factors of stress'. The focus is on organisational interventions and measures and their effects in reducing work-related stress. Preceding the workshop the members were invited to write a statement-paper on the situation of their home country. This report contains the separate papers that were delivered to the workshop.

The report can be downloaded in full at www.ea-ohp.org

The Network of WHO Collaborating Centres in Occupational Health: an example of effective international collaboration

Evelyn Kortum
Occupational Health Programme, World Health Organization (WHO), HQ

Introduction

WHO works with numerous non-governmental and voluntary organizations with a focus on health promotion and health care provision. It was recognized early in its existence that WHO needs to utilize expertise in centres of excellence worldwide to adequately address the health needs of the Member States. At its establishment in 1948, WHO counted less than 60 Member States. Today there are 192 Member States. The idea of using national institutions for international purposes dates back to the days of the League of Nations, when national laboratories were first designated as reference centres for the standardization of biological products. And as soon as WHO was established, it appointed its first reference Centre, the World Influenza Centre in London for worldwide epidemiological surveillance.

The first World Health Assembly of WHO Member States was held in the year of the creation of the Organization, and in 1949, the Second World Health Assembly laid down its policy on collaboration, which has constantly been followed since then. It states that WHO should not consider "the establishment, under its own auspices, of international research institutions" and that "research in the field of health is best advanced by assisting, coordinating and making use of the activities of existing institutions" (1). Hence the idea of Collaborating Centres was born.

WHO Collaborating Centres

A WHO Collaborating Centre is a national institution designated by the WHO Director-General to form part of an international collaborative network carrying out activities in support of WHO's mandate for international health work and its programme priorities. The activities may take place at the country, inter-country, regional and/or global

level. Collaborating Centres also include departments within ministries, universities or national research institutes.

Institutions in developing countries are particularly sought when they can play a strategic role in strengthening geographical coverage. An entire institution with recognized scientific standing, or a department or laboratory within an institution may apply to become a Collaborating Centre after completing a two-year period of joint activities. After initial acceptance by WHO, review and re-designation occur every four years thereafter if collaboration has been satisfactory. The Collaborating Centre may use the title, logo and official letterhead of "WHO Collaborating Centre" in matters related to its work on behalf of WHO.

WHO Collaborating Centres work together with WHO to meet two major needs. They contribute to implementing WHO's programme priorities in close coordination with the technical unit at headquarters and in the six Regional offices, and they strengthen institutional capacity in countries and regions. Hence, the key functions of Collaborating Centres include:

- collection, provision and dissemination of information
- participation in collaborative research
- education and training, including research training
- advice on scientific, technical and policy issues.

Exchange of experience and collaboration among centres is facilitated by meetings held at country and regional levels and on specific topics. Physical meetings, which have traditionally been the basis for such exchanges, continue to be an important part of this process, although projects nowadays also advance through virtual contacts, such as e-mail or discussion groups in specifically provided website spaces.

WHO CCs in Occupational Health

Since the Occupational Health Programme at WHO headquarters has always been small in size, substantial support through its Collaborating Centres has been invaluable. At present, the Programme counts about 70 Collaborating Centres, which are spread, although still unevenly, across the continents. Efforts to obtain a more even geographical distribution are undertaken by the Programme and supported by the Network. At the same time the six WHO Regional Offices have been collaborating on occupational health issues throughout. Additional support is provided by the three non-governmental organizations (NGOs) in formal relations with the Occupational Health Programme: the International Commission on Occupational Health (ICOH), the International Occupational Hygiene Association (IOHA), and the International Ergonomics Association (IEA).

The Global Network of CCs in Occupational Health was established in June 1990 at a meeting in Helsinki at the Finnish Institute of Occupational Health with the purpose to enhance coordination and collaboration between the centres. The first meeting of the Network was held in Moscow in September 1992, with meetings held approximately every two years thereafter: in Beijing in 1994, Bogota in 1997, Helsinki in 1999, Chiangmai in November 2001, and in Iguassu Falls in February 2003.

The second Network meeting in Beijing led to the development of a key policy document, the *WHO Global Strategy on Occupational Health for All* (2). It was approved by the World Health Assembly in 1996, thus setting the future direction for, and fuelling and motivating the activities of, the WHO Occupational Health Programme. Its eight major priorities for workers' health are listed below:

- strengthening of international and national policies for health at work
- promotion of a healthy work environment, healthy work practices, and health at work
- strengthening of occupational health services

- establishment of appropriate support services for occupational health
- development of occupational health standards based on scientific risk assessment
- development of human resources
- establishment of registration and data systems and information support
- strengthening of research.

At the Network meeting in Chiangmai, Thailand, in November 2001, the 2002-2005 Work Plan was established. At the end of the meeting, 15 Task Forces saw the light of day. The four-year Work Plan contains an impressive range of project commitments in 15 priority areas of the Occupational Health and Safety. The Work Plan contributed to an even more effective collaboration as it provides a framework for collaborative efforts between centres. Products are useful at global, international and/or national level, and a large number of projects are being developed to benefit the developing world, as well as countries in transition. At the same time, industrialised countries benefit from new insights and approaches. Products range from documents and brochures to training courses for occupational health personnel and/or students, from translation of occupational health materials to the establishment of questionnaires and guidelines, as well as the direct support to projects and activities, particularly in developing countries. The 15 Task Forces of the Work Plan comprise the following areas:

1. guidance in occupational health
2. intensive partnership in Africa
3. child labour/adolescent workers
4. elimination of silicosis
5. health care workers
6. health promotion activity
7. psychosocial issues at work
8. promotion of OS&H in small enterprises and in the informal sector
9. prevention of musculo-skeletal disorders
10. preventive technology

11. training programmes and modules
12. internet resources and networks
13. national profiles and indicators
14. economic evaluation of interventions
15. global burden of disease

Within the work of the Network, there is an abundance of successful examples of collaboration between centres. A selection of success stories can be found in the Special Issues 2004 of the Global Occupational Health Network Newsletter (www.who.int/occupational_health/publications/newsletter/en/).

Increasingly, collaboration takes off between industrialized and developing countries. Centres with minimal resources are encouraged to partner with larger centres that have more resources at hand. Collaboration between industrialized and/or developing countries, and countries in transition within the Network may need some further stimulation.

Some lessons learnt so far and the added value of the Network

Global benefits of international collaboration pertain to better access to information by workers, governments, employers and other relevant parties, as well as to the increasing contributions to capacity building and strengthening of occupational health in countries worldwide. Scientists work jointly on certain issues and enjoy the benefits of utilizing collective experiences.

In addition, at the last Network meeting in February 2003, participants commented that they felt it to be beneficial and important to be part of a team consisting of experts from various parts of the world who have long experience and good knowledge in occupational health and safety issues. This allows members to see the world through the eyes of others who operate in different occupational settings and have gathered different experiences.

The Network makes it possible to utilize the work that has been done and to adapt it to different situations and occupational settings.

Clearly, plenty of enthusiasm and perseverance are vital ingredients for achieving project objectives and aims while collaborating at international level. I am happy to be able to say that I have observed these ingredients to be present in the last Network meeting and in the ongoing contacts I have with the individuals of the Collaborating Centres. Two facts give weight to their presence. One is that the Network has a record of long-standing Collaborating Centres, which have over the years actively supported its work and furthered the purpose of its existence. Some of these are the Finnish Institute of Occupational Health (FIOH), the International Centre for Pesticide Safety (ICPS) in Italy, the Institute of Occupational Health Sciences (IOHS) in Switzerland, the National Institute for Working Life in Sweden (NIWL), and the National Institute for Occupational Safety & Health (NIOSH) in the USA. And since 1994, also the Institute of Work, Health and Organisations is part of the Network and now particularly active in Task Force 7, Psychosocial issues at work, of which Stavroula Leka is the Co-Chair together with myself. The other fact is that the Network is constantly growing and attracting new centres of excellence.

Our website: www.who.int/occupational_health

References

1. World Health Assembly Resolutions: WHA2.19 and WHA2.32, 1949
2. World Health Assembly Resolution, 1996

Research Reviews

In this section we review and summarise a number of recent OHP research articles. Please contact the Editor (Email: P.Flaxman@gold.ac.uk) if you come across a research article that you think should be summarised in this section, or if you would like to see a review of one of your own recently published research studies.

DOES THE WORK ENVIRONMENT CAUSE BULLYING?

Researchers generally agree that the relationship between the victim and the bully is characterized by a real or a perceived imbalance in power or strength. Workplace bullying is a major stress factor in as much as it is accompanied by negative consequences for victims' and witnesses' health and well-being.

The basis for this research is the tenet that past studies have supported the work environment hypothesis (various psychosocial factors in the work environment create conditions that lead to bullying). However, these studies have used weak research designs, focusing only on the bullied employees' perception of the work environment, thus neglecting an objective view of all employees.

Agervold and Mikkelsen conducted research with 186 blue-collar employees from a Danish Manufacturing company. They completed 'The Psychosocial Work Environment and Stress Questionnaire'. Exposure to bullying was measured on the basis of a checklist of negative acts and also by means of a subjective viewpoint.

In summary, the authors conclude that:

- Bullied employees report a higher level of stress-related symptoms than their non-bullied colleagues.
- Bullied employees generally assessed the psychosocial work environment more negatively than non-bullied employees.
- Management style may indirectly or directly have contributed to a higher level of bullying.

The bottom line in this article is that although the results do not yield support for the assumption that a poor work environment is the primary aetiological factor of bullying, the work environment hypothesis should not be entirely discarded. Evidence suggests that management's inefficiency with respect to solving matters of conflict is related to the incidence of bullying.

Agervold, M. and Mikkelsen, E.G. (2004). Relationships between bullying, psychosocial work environment and individual stress reactions. *Work & Stress*, 18(4), 336-351.

PERSONAL DEVELOPMENT OR JOB STRAIN?

Inconsistent findings linking hypertension, acute myocardial infarction, coronary heart disease and other diseases to the exposure to job strain have been found. Various confounding effects have led to this study using an objective, person-independent method of classifying jobs causing high strain, low strain, and jobs conducive to personal development. Effects of these job characteristics on psychophysiological outcomes were tested in 241 employees by using 24-hr ambulatory assessment of blood pressure, heart rate and mood. The analysis of psychophysiological changes must be investigated not only while working but also after work, yet this has rarely been examined.

Rau found that:

- The examination of unwinding after workload has finished provides the opportunity to evaluate effects of both well-designed (personal development) and poorly designed (high job strain) jobs by using physiological parameters.
- Exposure to job strain and jobs conducive to personal development has been independently assessed by external observers; thus the results support a demand for changes in designing workplaces towards healthy jobs.
- Negative psychological and physical health outcomes of the exposure to high job strain were possible, even if exposure to job strain was not experienced.
- Self-reports indicated that employees working in jobs conducive to personal development perceived the highest job demands and decision latitude.

In short, objectively measured exposure to high and low job strain as well as to jobs conducive of personal development is related to differences in cardiovascular outcomes. Objectively assessed exposure to high-strain jobs was associated with high blood pressure and a more disturbed relaxation ability. Allostasis refers to the chronic overactivity of the stress-related physiological systems. Explaining the results using the allostasis model indicates that the ability to adjust the cardiovascular system to resting and active states of the body characterises a healthy reaction. Therefore, jobs conducive to personal development might be interpreted as healthy work.

Rau, R. (2004). Job Strain or Healthy Work: A Question of Task Design. *Journal of Occupational Health Psychology, 9*(4), 322-338.

IS SUPERVISOR BEHAVIOUR IMPORTANT TO EMPLOYEE WELL-BEING?

This is the question posed by Gibreath & Benson in an exploratory study. To safeguard employee health, it is crucial that we know how to reduce both physical and psychosocial hazards. Previous research indicates that supervisor's behaviour is perceived by many employees to have a significant influence on their mental and physical health. This study examines to what degree it affects employee psychological well-being. By using a broader range of other recognized predictors of well-being, the authors provided a stronger test of the question under consideration.

Initial data was collected from multiple sites within a state agency in New Mexico. A variety of positions completed a questionnaire providing a sample of 145 people. This data was used to create a measure of supervisor behaviour. A second round of data was collected by questionnaires in Indiana from two organizations (healthcare and retail) and also university students who carried out paid employment at least 32 hours a week. This provided a sample size of 167 individuals. This data was used to test the hypothesis.

The results of their analyses suggested several contributions:

- Supervisor behaviour, as perceived by employees, was able to make a statistically significant contribution to the prediction of psychological well-being beyond that of other independent variables.

- This study used a more general measure of psychological health and is therefore a more stringent test than previous studies which have focused exclusively on work-based items
- Employees working for a supervisor who was perceived to frequently engage in positive behaviours and rarely in negative behaviours reported having better psychological health.
- This study led to the creation of a comprehensive measure of supervisor behaviours related to employee psychological well-being.

In brief, there is ample justification for those concerned with psychosocial working conditions to consider supervisor behaviour related as a potentially influential variable. Ultimately, employees, supervisors and employers could benefit from thoroughly implemented efforts to improve supervisory behaviour.

Gilbreath, B. and Benson, P.G. (2004). The contribution of supervisor behaviour to employee psychological well-being. *Work and Stress, 18*(3), 255-266.

PART-TIME WORKING AND WORK-FAMILY BALANCE

van Rijswijk, Bekker, Rutte, and Croon investigated the effect of part-time work on work-family interference and well-being among 160 part-time and 29 full-time employed mothers (with a partner). The sample of women worked in the service sector in new-concept part-time jobs, which are permanent, provide career opportunities, and their pay is proportionally comparably to similar full-time jobs – characteristics greatly different to old-concept part-time jobs.

Using a survey design, measures of work-family interference, work and home demands, well-being, and control variables were collected. Following previous research, working part-time as a strategy for reducing work-family interference, and neuroticism were controlled for.

The authors found working part-time to be associated with lower levels of work-to-family interference. Perhaps due to part-time work increasing employees' control over the work situation, thus reducing interference with their family life. Part-time work did not influence the level of family-to-work interference, suggesting that both part- and full-time employees cannot stop certain aspects of their home situation interfering with their working lives. Findings support the hypothesis that work-to-family interference mediates the relationship between part-time work and well-being.

Results also indicate that part-time work can enhance the work-family balance not only for those strategically choosing part-time work as a means to reduce work-family imbalance, or those high in neuroticism, but also for other employees.

van Rijswijk, K., Bekker, M.H.J., Rutte, C.G., and Croon, M.A. (2004). The Relationships among part-time work, work-family interference, and well-being. *Journal of Occupational Health Psychology, 9*(4), 286-295.

OHP in the Media

In this section we have summarised OHP-related articles that have appeared in mainstream newspapers in the UK. If you come across relevant articles in your national media, why not send them (in English) to the *OHPist?* (email: P.Flaxman@gold.ac.uk).

Britons happy to slog away at 60-hour week

The Sunday Times, April 10th, 2005

David Smith discusses the report *Still at Work?* by Marc Cowling and Natalie Turner of the Work Foundation. The report reveals that 896,000 men and 492,000 women regularly work more than 60 hours per week. This is said to be increasingly driven by a culture of 'presenteeism': they are expected to be at work. Pressure arises not only from the boss, but also colleagues. Only Ireland among EU countries has a greater proportion of people working longer hours, with Portugal coming third. The report examines a variety of reasons for these longer hours including – especially in men – to avoid stress at home. Links: <http://www.theworkfoundation.com/>

The Key to Dealing with Abuse

The Times, T2 Supplement, April 19th, 2005

"Risk Assessments. Bosses must not preside over a breeding ground for bullies. "Managers need to ensure they carry out proper risk assessments," says Anne Mitchell, a Unison spokeswoman. "Everything from the design of the building to the systems in place can contribute to problems, so they need to be included." (Article by John Plummer).

Stress in now most likely reason for time off work

The Independent, April 8th, 2005

Mental-health problems have taken over physical ailments as the chief cause of long-term sickness in Britain. Incapacity and other benefits for sickness absence costs £13bn a year. A report in the *British Medical Journal* by Max Henderson and colleagues states that claims for back pain have fallen by 42 per cent since 1994-95, but there has been a doubling in the numbers of people claiming for stress caused or made worse by work. This is despite no apparent increase in mental and behavioural disorders, except alcohol dependence, in their prevalence, which the authors suggest is attributable to the readiness of workers to now attribute their sickness to stress and claim incapacity benefit.

New Yorkers to be offered a mental health check

The Times, April 14th, 2005

James Bone reports from New York that the city's health department are set to measure the mental health of its residents with a questionnaire. The programme is starting with a dozen medical practices, but is intended to be extended to city-run hospitals. Current figures estimate that 400,000 people, 5 per cent, of New York's population suffer from depression. Wide-spread mental health evaluation has caused a backlash with suggestions it will lead to 'over-diagnosis' and people being prescribed medication they do not need.

How enterprise capital of Spain found siestas are good for business

The Independent of Sunday, April 3rd, 2005

Businesses in Spain have struggled to match their idiosyncratic hours with the rest of Europe, but the siesta refuses to lie down, Elizabeth Nash reports. Now employers in Catalonia, Spain's most entrepreneurial region and out of step with the rest of the nation in that respect, have accepted the siesta as part of the working day. Research worldwide reveals that professional productivity improves among those who nap after lunch. Francisco Loscos, professor at Barcelona's Esade business school, said: "Companies want their people to be as motivated as possible; so, many invest in everything to promote the happiness and relaxation of their workers, and that includes the siesta."

Spaniards sleep about an hour less every day than the average European, which is dangerous. They also have high rates of accidents on the road, at home and at work.

Unveiling the misery of 'hidden disability'

The Guardian, April 16th, 2005

Sandra Howard reports on undiagnosed dyslexia a cause behind rocketing absenteeism in the public sector. It is reported civil servants take an average of two weeks off sick per year, at a cost of £368m to the UK taxpayer. Elaine Ferguson, specialist of dyslexia in the workplace states that 80% of clients report stress and depression and the catalyst for seeking help. Dyslexia in the workplace can show itself in areas such as poor report writing, a struggle taking notes, and general difficulties with reading, spelling, and filing. Gary Fitzgibbon of Fitzgibbon Associates warns that employers must act in a responsible way towards those with dyslexia otherwise they risk falling foul of the Disability Discrimination Act 1995, revised in October 2004, to say that employers must make 'reasonable adjustment' in the workplace to allow disabled employees, including those with dyslexia, to do their job.

Links: www.spark-space.com / www.fitzgibbonassociates.co.uk

OHP World

2005

22-26 August

Petrozavodsk, Russia
Nordic Institute for Advanced Training in Occupational Health (NIVA). Occupational Health Risk Assessment and Management

23-26 August

Okayama, Japan
International Commission of Occupational Health (ICOH)
The Second ICOH International Congress on Psychosocial Factors at Work
<http://eisei.med.okayama-u.ac.jp/WOPS2005/>
Email: esc@md.okayama-u.ac.jp

25-27 August

Helsinki, Finland
European Association of Schools of Public Health (EASOM)
5th EASOM summer school: Multidisciplinary and its consequences for training in occupational health

31 August – 1 September

Galway, Ireland
Annual Conference of the European Health Psychology Society (EHPS)
<http://www.ehps2005.com>

4-9 September

Beijing, China
International Commission of Occupational Health (ICOH)
Indoor Air 2005 – The 10th International Conference

12- 14 September

London, UK
Eurohse2005: Creating a winning OSH culture
<http://www.eurohse2005.com>

11-14 September

Bergen, Norway
International Commission of Occupational Health (ICOH)
18th International Symposium on Epidemiology in Occupational Health
Web-site: www.uib.no/isf/arbeid/epicoh2005/
Email: sales@travel-planners.no

13-16 September

Boston MA, USA
Harvard School of Public Health
Ergonomics and Human Factors: Applications in Occupational Safety and Health

15-17 September

Monterey CA, USA
Western Occupational and Environmental Medicine Association (WOEMA)
Western Occupational Health Conference

17-19 September

Kumamoto, Japan
6th International Symposium on Occupational and Environmental Allergy and Immune Diseases
Web-site: www.dpemku.jp/ISOEAID05.html
E-mail: dpemk3@dpemku.jp

18-22 September

Hoofddorp, The Netherlands
International Commission of Occupational Health (ICOH)
17th International Symposium on Shiftwork and Working Time
<http://www.shiftwork2005.atos.nl/>

18-23 September

Orlando, Florida, USA
17th World Congress on Safety and Health at Work
www.safety2005.org
E-mail: customerservice@nsc.org

26-30 September

Orlando FL, USA
Human Factors and Ergonomics Society 49th Annual Meeting
<http://www.hfes.org>

26-29 September

Gyeongju, Korea
The 9th International Symposium on Neurobehavioral Methods and Effects in Occupational and Environmental Health
<http://home.kosha.net/-neurotox>
E-mail: neurotox@kosha.net

3-6 October

Misssissippi MA, USA
National Institute for Occupational Safety and Health (NIOSH)
2nd International Symposium on Nanotechnology and Occupational Health

5-7 October

Atlanta, USA
1st International Conference on Environmental Exposure and Health 2005
<http://www.ce.gatech.edu/research/MESL/EEH2005>
Email: adarcy-burt@wessex.ac.uk

18-20 October

Madang, Papua New Guinea
1st Pacific Conference on Sustainable Development for Small Island Developing Nations
Annual Conference of the Papua New Guinea Occupational Health and Safety Association (SEFTI)
<http://www.usq.edu.au/seftiicohconf/registrati.on.htm>
Email: eddington@usq.edu.au

20-21 October

Paris, France
2nd European Conference on Standardization, Testing & Certification in the Field of Occupational Health & Safety
<http://www.euroshnet.org>
E-mail: euroshnet@inrs.fr

24-27 October

Dusseldorf, Germany
A+A 2005 Safety is no accident.
International Trade Fair with Congress and Special Events
http://www5.aplusaonline.de/cipp/md_aplusa/custom/pub/content.ticket.quest/lang

2-5 November

Wellington, New Zealand
 18th Asian Conference on Occupational Health
 Australian and New Zealand Society of Occupational
 Medicine (ANZOM) & Asian Association of Occupational
 Health (AAOH)
www.conferencealerts.com/newzealand.htm
www.fmskhk.com/hksoem/18acoh.pdf
 E-mail: acoh2005_AT_clear.net.nz

27-30 November

New Delhi, India
 WWH2005: The 4th International Congress on Women
 Work and Health
<http://www.ilo.org/public/english/protection/safework/cis/oshworld/events.htm>
 E-mail: wwh@societyforworkinglife.org

January – November 2005
 University of Manchester, UK
 Programme of events to celebrate the 60th
 anniversary of the foundation of the Chair in
 Occupational Medicine and the Centre for Occupational
 and Environmental Health
<http://www.coeh.man.ac.uk/news/jubilee/>

1-3 December

Utsonomiya, Japan
 International Commission of Occupational Health
 (ICOH)
 13th International Congress on Occupational Health
 Services
<http://www.dokkyomed.ac.jp/dep-m/pub/ohs2005.html>
 E-mail: ohs2005@dokkyomed.ac.jp

2006**1-3 March**

Nice, France
 9th International Symposium: Design process and
 human factors integration: Optimising company
 performances
 International Section for Research on Prevention of
 Occupational Risks of the International Social Security
 Association (ISSA)
<http://research.prevention.issa.int/activities/upcoming.htm>
 E-mail: IssaDHF2006@inrs.fr

2-4 March

Miami, USA
 American Psychological Association (APA) & National
 Institute for Occupational Safety and Health (NIOSH)
 6th Interdisciplinary Conference on Work, Stress and
 Health
<http://www.apa.org/pi/work/callforpapers.html>

4-6 April

Hatfield Hertfordshire, UK
 The Ergonomics Society Annual Conference 2006
<http://www.ergonomics.org.uk/events/AC2006call.htm>

5-11 May

Los Angeles CA, USA
 AOHC 2006: American Occupational Health Conference
www.acoem.org/education/conference.asp?EVEN_ID=287

11-16 June

Milano, Italy
 28th ICOH, International Congress on Occupational
 Health

<http://www.icoh2006.it>

E-mail: icoh2006@fieramilanocongressi.it

June 11-21

Italy
 International Commission of Occupational Health
 (ICOH) & Department of Occupational Health of Milan
 & Italian Society of Occupational Health
[28th ICOH Congress: Renewing a Century of Commitment to Healthy, Safe and Productive Working Life](http://www.icoh2006.it/)
<http://www.icoh2006.it/>

16-21 July

Athens, Greece
 International Association of Applied Psychology (IAAP)
[The 26th International Congress of Applied Psychology](http://www.erasmus.gr/)
<http://www.erasmus.gr/>

22-24 August

Boston MA, USA
 International Commission of Occupational Health
 (ICOH)
[PREMUS 2007: Sixth International Scientific Conference on Prevention of Workrelated Musculoskeletal Disorders](http://www.erasmus.gr/)

17-18 October

Dublin, Ireland
 The National Safety and Health at Work Exhibition
<http://www.keyevents.ie>
 E-mail info@events.ie

8-10 November

Dublin, Ireland
 7th Conference of the European Academy of
 Occupational Health Psychology
www.ea-ohp.org

2007**3-7 June**

Bologna, Italy
 International Commission on Occupational Health
 (ICOH)
 11th International Conference on Hand-Arm Vibration
www.humanvibration.com/Conferences/conference_main.htm
 Email: segreteria@imamoter.cnr.it

Occupational Health Psychologist

A publication of the European Academy of
Occupational Health Psychology

SUBMISSION GUIDELINES

Please find below general guidelines for submitting articles for future issues of the *Occupational Health Psychologist*. We hope that our willingness to publish many different types of articles will encourage all of our members to contribute. We welcome articles from students, new researchers, practitioners, and from long standing members of the Academy. Three issues per year will be published: winter (Jan/Feb), spring/summer (June/July), and autumn (Oct/Nov).

OHP Research / Practice

We welcome short reports of research findings, practice issues, case studies, brief literature reviews, and theoretical articles. You could, for example, use the *OHPist* to gain exposure for your work whilst preparing for publication, or for work that may not otherwise be published within the OHP domain. Articles for this section can be up to 1500 words.

OHP Briefings

We also welcome overviews of your OHP-related activities, or those of your research group, consultancy, or organisation. We believe that this type of article will provide a useful insight into the sort of work that is being undertaken in different parts of Europe. This section could also be used to communicate policy developments that have implications for OHP research, practice, and education in your country. This type of article should generally be about 2000 words, although we will accept longer articles if more than one member of a group wishes to contribute (as with the SPARC article in this issue).

Other articles

We welcome open letters to your fellow occupational health psychologists regarding any OHP-related topics, and summaries (in English) of OHP issues that have been reported by your national news media.

**Please email your articles to
Paul Flaxman at P.Flaxman@gold.ac.uk**

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7th conference of the European Academy of Occupational Health Psychology



Dublin Castle, Ireland, 8-10 November 2006



supported by



Theme

The Academy conference series that began in 1999 in Sweden as a small gathering of individuals with an active interest in the emerging field of occupational health psychology has, year on year, grown in size and scope, while the field itself has likewise evolved at a rapid rate. Dublin 2006 is predicted to be the largest and widest ranging Academy conference to date, attracting scientific contributions addressing all areas of occupational health psychology. The previous Academy conference, Porto 2004, attracted delegates from 30 countries; Dublin 2006 promises to expand on that number, creating a truly international conference that offers a global perspective on research, practice and education in occupational health psychology.

Location and venue

The Irish Health & Safety Authority is generously hosting the Academy's 7th conference in Dublin and has donated the spectacular Dublin Castle conference venue for the three-day event. The modern, purpose-built, International Conference Centre was constructed behind the façade of the north-east corner of the Upper Castle Yard for Ireland's Presidency of the European Union in 1990. Built to service meetings of world leaders, the conference centre boasts state of the art IT and audio/visual facilities and has been furnished to 'create a calm and tranquil atmosphere during working sessions'.

Dublin Castle is situated in the very heart of Dublin city within easy walking distance of a range of hotels to suit every budget. Once in Dublin there is no need for public transport; all primary attractions are located within a contained geographical area. A full and exciting social programme is being put together. The conference committee is currently in negotiations with a number of famous Irish brands, with a view to creating a memorable social, as well as intellectual, meeting.

Call for papers & delegate registration

The call for papers and registration information will be announced later in 2005 at www.ea-ohp.org. Papers, posters, symposia and workshops from all areas of occupational health psychology will be welcomed. Details of special airline and hotel discounts unique to Academy conference delegates and their travelling companions will be announced shortly. Contact the conference team at dublin2006@ea-ohp.org.

Conference organising committee: call for participation

Individuals are asked to consider whether they could contribute to the creation of a successful conference by joining the conference organising committee. There is a range of tasks to be undertaken to suit all possible time commitments and areas of expertise or enthusiasm. In taking on any particular task, you will not be without support; the conference committee contains a wealth of experience in conference organising and operates as a friendly and supportive team. Please contact Jonathan Houdmont jonathan.houdmont@nottingham.ac.uk to discuss how you could contribute.



European Academy of Occupational Health Psychology