Stress in Great Britain

Owen Tudor*

The diseases caused by work-related stress are the second commonest group of occupational illness in Great Britain. Every year, half a million workers (2% of the entire workforce) suffer from a condition which they believe to have been caused by stress at work. As a result, along with musculoskeletal disorders, slips and trips, falls from height and workplace transport, stress is one of the top five priority hazards which the Health and Safety Commission is addressing. Surveys by unions show that stress is the issue of greatest concern to workplace union safety representatives, surveys by employers show that stress is the main work-related cause of sickness absence, and research by the Health and Safety Executive shows that one in five workers (five million of them) experience harmful levels of stress on a fairly regular basis, with public servants experiencing the highest levels of all.

And yet stress is one of the most contentious issues in the British health and safety field, with court cases for compensation hotly contested, experts divided over the causes, its measurement and, in the most extreme cases, a raging debate about whether "stress" is a meaningful concept at all !

By Peter Greenwood, *in Tackling Stress at Work*, UNISON/TUC, 1998

* TUC health and safety specialist and member of the Health and Safety Commission

[1] Peter Kirby, *Twenty-one years of saving lives : 1998 TUC survey of safety reps*, TUC, 1998.

[2] Peter Kirby, *Trade union trends : focus on health and safety*, TUC, 2000.

[3] Owen Tudor, *Trade union trends : focus on legal services 1999*, TUC, 1999.

[4] Julia Gallagher, *Trade union trends : focus on services for injury victims 2000*, TUC, 2000.

[5] Rachel Oliver, *Trade union trends : focus on services for injury victims 2001*, TUC, 2002.

Background - Britain under pressure

British workers work the longest hours in the European Union, with substantial numbers of men working longer than the 48 hours laid down in the Working Time Directive. At a time when working hours have been falling across Europe, they have risen in Britain, although the situation has stabilised since the implementation of the Directive in Britain. Throughout the 1980s and 1990s, in both slumps and booms, employers have reduced the numbers of workers they employ so that fewer and fewer people are doing more and more jobs. In the public sector, a concern for the rights of customers, clients and users, at a time of tax cuts, job cuts and productivity increases have left workers who deal with the public harried and harassed (and all too often assaulted).

Undoubtedly, the working world has got faster, more frenetic, more pressurised. People are encouraged to stay at work longer, and to achieve more in the time when they are at work, or face redundancy or being passed over for promotion. There is a macho culture, especially in the financial sector, which equates long hours with commitment, and, in the evocative phrase of Hollywood's "Wall Street", claims that "lunch is for wimps".

Even part-time workers, whose hours are often restricted by the need to leave work and pick up children, face time pressures, because they have to get their work done within a set period.

The facts on stress

All this has prompted employers, unions and the government, to look more closely at the question of stress at work, and the illnesses that it causes.

The TUC runs a major survey of workplace union safety representatives every two years, and asks the participants each year what the main hazards of concern are in their workplaces. In each of the surveys conducted so far (1996, 1998[1] and 2000[2]), stress topped the list. The proportion of safety reps citing stress as one of the main problems in their workplace (they can pick up to five) varies from survey to survey, with a peak in 1998 of 77% (the survey sample was smaller that year) but always at least two thirds (68% in 1996, 66% in 2000).

In the 2000 survey, stress was the major concern whatever the size of firm, and in almost all sectors of the economy (except for construction, distribution and manufacturing). It was worst in the finance sector (86%), and the public sector (education – 82%, central government – 81% and local government – 73%). The main causes of stress were identified as workloads (74% of safety reps who identified stress as a problem cited this), followed by cuts in staff (53%), change (44%) and long hours (39%) – which was a particular problem in the transport sector where the Working Time Directive has not yet come into force.

One other source of union information on stress is the annual survey of compensation cases where unions sue employers for damages on behalf of

union members suffering a work-related injury or illness. Over the last four surveys (covering the calendar years from 1997 to 2000), the number of stress cases has increased substantially, from 459 in 1997 to 783 in 1998[3], 516 in 1999[4] and then a massive increase to 6,428 in 2000[5] (out of a total number of compensation cases of just over 50,000).

These figures are backed up by the more comprehensive research produced by the Health and Safety Executive, the government body responsible for health and safety enforcement and policy. Two recent pieces of research demonstrate clearly the extent of the problem.

The Scale of Occupational Stress : the Bristol Stress and Health at Work Study[6]

This research was based on the responses of about 8,000 people in the Bristol area who replied to two postal questionnaires sent a year apart. The key findings of the 3-year project were :
- about one in five workers reported feeling either very or extremely stressed by their work. The team estimate that this equates to about 5 million workers in the UK;
- there was an association between reporting being very stressed and a range of job design factors, such as having too much work to do or not being supported by managers; and
- there was an association between reporting being very stressed and a range of health outcomes, such as poor mental health and back pain; and health-related behaviours such as drinking alcohol and smoking.

Work related factors and ill health : the Whitehall II Study[7]

This research concentrated on how the design of work affected people's mental well-being and related health outcomes.
The key findings were :

- not having much say in how the work is done is associated with poor mental health in men and a higher risk of alcohol dependence in women;
- work that involves a fast pace and the need to resolve conflicting priorities is associated with a higher risk of psychiatric disorder in both sexes; and poor physical fitness or illness in men;
- a combination of putting high effort into work and poor recognition of employees' effort by managers is associated with increased risk of alcohol dependence in men, poor mental health in both sexes; and poor physical fitness or illness in women;
- a lack of understanding and support from managers and colleagues at work was associated with a higher risk of psychiatric disorder. Good social support at work, particularly from managers for their staff, had a protective effect; and

- aspects of poor work design were also associated with employees taking more sickness absence.

Finally, employer surveys such as the annual CBI (Confederation of British Industries – the main employers' association) survey of sickness absence identify stress as the main cause of workplace sickness absence amongst white-collar workers. The TUC has worked with employers' organisations (e.g. the Engineering Employers' Federation) to develop a new approach to tackling stress at work which emphasises the links between health and safety and good management[8]. This experience will be brought into the social dialogue which the European Commission plans to initiate later in 2002.

Union demands for action

As a result of these startling figures, the TUC and its affiliated unions have all been putting a great deal of effort into the issue of stress. Every union has some members who are especially at risk, which is why the issue comes through so strongly from safety rep surveys. Unions deal both with the general issue of stress, and also with specific risk factors (stressors) which can often be separated out – such as violence, bullying and working time (see below for some recent legal developments).

In response, unions have run awareness-raising campaigns, principally to draw employers' attention to the issue, and to make sure that union members know that the causes of stress are often work-related and should be prevented by management action. The issue also helps unions to identify themselves with the problems that potential members are suffering, and thus increase recruitment.

Most unions have covered the issue in their union journal, often using the harrowing tale of a member whose life and career has been wrecked, or a compensation case where the union has successfully won damages for the affected member.

Guidance has been issued by many unions, especially for safety reps, on how to approach the issue at the workplace. Some have issued checklists aimed at identifying levels of stress (including advising safety reps to use commercially available stress audit tools), the main causes in the workplace, and the things which managers can be asked to do. Training is also available, such as courses on stress and trauma in the workplace run by the GMB union.

In particular, however, unions have pressed the Health and Safety Commission to take action by

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[6] *The Scale of Occupational Stress : the Bristol Stress and Health at Work Study*, HSE Contract Research Report 265, 2000. (http://www.hse.gov.uk/research/crr_pdf/2000/crr00265.pdf)

[7] *Work related factors and ill health : the Whitehall II Study*, HSE Contract Research Report 266, 2001.

[8] A conference on "Stress Essentials : Practical Solutions that Work" was held jointly by the National Occupational Health Forum and the UK Work Organisation Network, and supported by the TUC, CBI, EEF, HSE and European Agency for Safety and Health on 23 April 2002. A press release is on the EEF website (http://www.eef.org.uk/fed/fednews/fedpressrel/fed2001/fedpr_020507) and a report is available from swalter@eef-fed.org.uk

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More recently, employers' insurers have fought back against the rising number of stress cases, and forced several to the Court of Appeal (the stage just before the highest court in the country). The Court handed down a judgment covering four cases, upholding the award in only one case, but, more importantly, setting down a number of principles which should govern future cases[11]. These principles are open to challenge as some of them seem to ignore the part that prevention should play, and others are ambiguous. But overall, they made it clear that stress-related illnesses were no different from any other occupational illness, and that they could be prevented by management action.

Legal cases : taking the government to court

Unions have also used the courts to persuade the British government, and employers with whom they deal, to take a tougher line on working time. Two examples from this year demonstrate what unions can do.

In one, a union took the British government to the European Commission for incorrect implementation of the Working Time Directive. The Commission upheld a complaint by Amicus[12], whose General Secretary, Roger Lyons, said : "British workers work the longest hours in Europe – this decision will cut excessive working time considerably, will slash stress and will bring us closer to the level playing field on working hours already enjoyed throughout the rest of Europe." The complaint covered three areas. These are in respect of the obligation for employers to ensure that workers take breaks and holidays, the measurement of time worked voluntarily over normal working time and the exclusion of night shift overtime hours from those which count towards normal hours.

Second, the union representing pub managers, the Transport and General Workers Union, has announced that it will take legal action against a chain of pubs run by the Spirit Group, who claim that pub managers are excluded from the Working Time Regulations. The union won a similar case out of court against Bass Taverns in 2000.

The response of the regulators

The Health and Safety Commission is the body in Great Britain that is responsible for legislation on health and safety (formally, decisions are taken by Ministers, but they normally rubber stamp the decisions of the Commission). The Commission is a tripartite body with three employers, three trade unionists and

introducing legislation specifically dealing with stress (see below). And on the specific issue of bullying, the second largest trade union in Britain, formed at the beginning of 2002, Amicus, has been running a campaign for several years (initially by its mostly white-collar constituent, MSF) for a Dignity at Work Bill to outlaw bullying and provide legal remedies for those being bullied. The bill has recently been introduced in the upper chamber (the House of Lords) and has been agreed, although without active support from the government, it stands little chance of becoming law[9].

Legal cases : taking employers to court

Unions have used their legal services to raise the stakes, by actively pursuing cases where there is a reasonable chance of success, and then publicising the results[10].

The most famous case was taken by Britain's largest union, UNISON, and concerned a social work manager, John Walker. He was forced to do more and more work as resources were cut, and eventually had a nervous breakdown. His family doctor indicated to his management that if steps were not taken to address his problems, then he would have another breakdown. He returned to work, but his employers did not reduce his workload and the inevitable happened, leading to his early retirement and a six figure compensation bill for his local authority.

Although the number of cases coming before the courts has been small (this is true of all compensation cases – 90% of them are settled before they reach the courts), unions have a much higher rate of success than cases taken by lawyers for non-union members, mostly because unions are better at weeding out cases which are unlikely to succeed.

[9] A briefing on recent developments in the campaign for the Bill is on the Amicus website at : http://www.msf.org.uk/cgi-bin/news/db.cgi?db=default&uid=default&ID=200&view_records=1&ww=1

[10] Compensation can also be claimed from the state under the Industrial Injuries Scheme, but this compensates mostly for stress relating to one or more discrete events, so is more applicable to post-traumatic stress disorder.

[11] An analysis of the judgment and its implications, *Stress – the Court of Appeal decides* by Owen Tudor is available at : http://www.shpmags.com/mfwt/parse.html?page=NewsArticle&aId=1460761&magContext=shp

[12] A full briefing from the union concerned is on their website at http://www.msf.org.uk/cgi-bin/news/db.cgi?db=default&uid=default&ID=190&view_records=1&ww=1

three independents, and it operates under the Health and Safety at Work etc Act 1974, which among other things requires employers to protect the health of their workers. This very general requirement is the basis for most of the existing legal provisions on stress.

The next level down from an Act of Parliament is Regulations, many of which are used to implement European Directives. Regulations are goal-setting, in that the determine what objective employers need to reach, but are not prescriptive about what they need to do to reach the objective. The main Regulations relevant to stress are the Management of Health and Safety at Work Regulations 1992 (which, broadly speaking, implement the Framework Directive). This requires employers to conduct risk assessments, and also added to the requirements for consultation with union safety reps. Both are crucial to the prevention of stress related illnesses.

In April 1999, the Health and Safety Commission published a discussion document called *Managing Stress at Work*, which sought to encourage a debate about the extent to which stress at work should be regulated[13]. Overwhelmingly (about 98%), respondents thought that **more** needed to be done to tackle stress and about 94% of respondents agreed that stress at work is a health, safety and welfare issue (i.e., that it should be dealt with by HSC/E and local authorities under health and safety law), because it can affect health and well-being. Respondents broadly supported the concept that the ideal was to prevent stress before it occurred, through the good design of work and the adoption of good management practices. It could be monitored through a range of organisational measures.

A majority of respondents (69%) thought that an ACoP[14] of the type suggested in the Discussion Document would be worthwhile, and about 87% of those thought that the outline ACoP in the Discussion Document was along the right lines. The proportions of employers and employees in favour of an ACoP were about equal. The Health and Safety Commission concluded that :
■ work-related stress was a serious problem;
■ work-related stress was a health and safety issue; and
■ it could be tackled in part through the application of health and safety legislation.

However, to make regulatory requirements work, the Commission decided that they needed to have a firm foundation established by drawing up clear standards of management practice for controlling work-related stressors. The Commission asked HSE to produce detailed proposals for the work on these standards and therefore decided to keep the need for an ACoP under review.

The key elements of the HSC/E current approach to work-related stress are, therefore :
■ to develop clear, agreed standards of good management practice for a range of stressors;
■ to better equip HSE inspectors and Local Authority officers to be able to handle the issue in their routine work, for instance by providing information on good practice and advice on risk assessment and consultation in the light of the above work; and
■ to educate employers through a publicity campaign, with detailed guidance[15], drawing on the findings from HSE's research and adopting a particular focus on risk assessment.

Unions continue to favour the development of an ACoP, but are currently co-operating with the three elements of the HSC/E approach, helping to draw up the management standards on a range of stressors (up to 14 have been identified), disseminating the guidance for employers and employees, and backing the plans for targeted inspections on stress.

Future developments

The next major development in stress in Britain will be the European Week of Health and Safety at Work in October, when the TUC and unions will be launching a "Stress MOT" (referring to the test that older vehicles must go through by law to remain on the road) so that safety reps can identify whether their workplace has a stress problem, and what the main issues that need to be addressed are (in particular, by asking the workforce, and producing a "stress map" of the workplace). That will be backed up by new guidance for safety reps, with a checklist of action they can take.

In addition, the TUC will be pressing the case for more access to rehabilitation for people injured or made ill at work, including those affected by mental ill-health caused by stress at work.

And lastly, unions will also be pressing the case for a new concept – the sustainable workforce – which is designed to incorporate issues like the work-life balance, working time and productivity, and borrow from the environmental movement the idea that, if we use up or "burn out" our (human) resources, they will not last, with catastrophic results for the economy and society, as well as the individuals we represent. ■

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[13] *Managing stress at work*, HSE, 1999. A summary of responses is available on the HSE website at http://www.hse.gov.uk/hthdir/noframes/stressdd.htm

[14] Approved Codes of Practice (or ACoPs) are a level below Regulations in the legal hierarchy. They lay down specific measures which employers can take which would achieve the goals set out in Regulations. Employers either have to do what is set out in the ACoP, or prove that they are doing something which achieves the same ends.

[15] HSE publications on stress are listed at : http://www.hse.gov.uk/pubns/stresspk.htm (from which each publication can be accessed electronically).

A critical review of psychosocial hazard measures[1]

The HSE has recently published a book reviewing ways of measuring workplace stressors, which it calls psychosocial hazards. It uses the term to cover a broader concept of hazards – namely, what in the workplace has the potential to harm employee well-being. The review sets out to identify the methods of measurements currently available, assess their reliability and validity, and finally to consider the utility of different methods.

Five main methods for which evidence of validity and reliability was available are closely examined. Coming mainly from the Anglo-American tradition, they are the Job Diagnostic Survey[2], Job Stress Survey[3], Karasek Demands and Control[4]/Job content questionnaire[5], the Occupational Stress Indicator sources of pressure scale[6] and the Rizzo and House measures of role conflict and role ambiguity[7]. Other methods for which less information was available are reviewed in less detail.

The review's key findings are that :
■ Compared to the number of papers published on stress and measures of hazards little relevant evidence was found.
■ There is limited variety in the type of hazards that are measured.
■ A substantial amount of evidence is available for only one form of reliability, internal consistency, which was reasonably good.
■ More evidence was available for most types of validity. But there was limited evidence for predictive validity.

Broadly speaking relatively little sound evidence was found about the reliability and validity of these measures. *Although the weaknesses of the methods examined are recognized, it is acknowledged that it is not possible to simply stop assessing psychosocial hazards until the required research is complete.*

For that reason, recommendations are made for practice and research. Organizations are recommended to make an appraisal of the aim of the assessment, consider developing their own measures, more focused on their specific characteristics, and finally, develop other ways of assessing hazards in addition to self-report questionnaires, such as observations, task analysis and reports of harms. In general more proactive measures are suggested.

As to recommendations for research, more fundamental validation research is suggested for existing measures. Development of new methods, and testing of new innovative types of measures, are also recommended. The review emphasizes the need to examine the measures of harm used, which is closely linked to the assessment of hazards that can cause harms. Finally, it points out that psychosocial hazards are not measured in isolation and should be part of a wider risk management. As a result the ultimate value of the information gathered on hazards and harms can only be assessed in this broader context.

http://www.hsebooks.co.uk

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