

LEADERSHIP, WORK ORGANISATION AND PSYCHOSOCIAL RISKS

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***INTERNATIONAL CONFERENCE: HOW CAN WE ACHIEVE THE HEALTH AND
SATISFACTION OF WORKERS THROUGH BETTER ORGANISATION OF WORK AND
BETTER LEADERSHIP***

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CONTENT

1. **Epidemiology of psychosocial risks in the workplace:** stress, mobbing, mental and behavioural disorders, PTSD, prescribing anti-depressives and tranquillisers, suicides
2. **Certain modern concepts in management and organisation of work:** integrity, corporate responsibility, democracy / workers' participation in management / freedom of speech in the workplace; organisational justice / injustice and dissent; suppression of dissent; corporative psychopathy
3. **Trust and redefinition of management concepts** focusing on mitigation of psychosocial risks
4. **Recommendations on measures for the promotion of integrity and psychosocial health and assistance measures aimed at persons affected by behavioural and mental disorders**

PSYCHOSOCIAL RISKS

- **Negative impact on health, safety and well-being of employees and on organisation and community at large**
- **Result of interaction between management and organisation of work in organisational and social context** *(Cox and Griffiths, 2005)*



PSYCHOSOCIAL RISKS IN THE WORKPLACE, SLOVENIA, 2010

(Source: 5th EWCS; Mrčela, Ignjatović, 2012, EC, EUROBAROMETER 2014)

- 62.3% - more frequently experience work-related stress;
- 10.7% - exposed to psychological violence;
- 25.4% - limited access to work-related information;
- 26.1% - disregard for personal opinion and views;
- 42.9% - suffering from general fatigue;
- 10.1% - suffering from depression or anxiety;
- 25.8% - dissatisfied with working conditions (15.7 in the EU);
- 84% - think that working conditions have worsened in the last 5 years (57% in the EU);
- 59.2% - continue to work despite their illness (39.2% in the EU);
- 44.5% - their work adversely affects their health (25.0% in the EU);
- 25.6% - they will be able to do their current job when older than 60 years (58.7% in the EU).

DIFFERENCES IN IDENTIFYING / PERCEIVING THE RELEVANCE OF VARIOUS PSYCHOSOCIAL RISKS

Example: MANAGERS, EU:

(Source: ESENER, 2009, www.osha.europa.eu)

- Time limits / pressure
- Difficult customers, patients, pupils
- Poor communication between management and employees
- Job insecurity
- Poor cooperation amongst colleague
- Long and irregular working hours
- Conflicts between supervisors and employees
- Lack of control about how employees organise their work
- Unclear human resources policy
- Discrimination

Example: EMPLOYEES, SI:

(Source, Nolimal et al. Študije primerov preganjanja oporekanja v delovnih organizacijah, Slovenia, 2001 - 2008)

- Poor management / governance
- Inadequate organisational modifications, processes, procedures (restructuring, reorganisation, poor conflict management)
- Limited access to information and/or possibilities to have an impact on the organisation
- Unethical conduct and corruption
- Bullying and mobbing
- Poor human relations

PSYCHOSOCIAL DISORDERS / ILLNESSES

- Sleep disturbances
- Headaches
- Back pain / musculoskeletal disorders, etc.
- Stomach ache / gastric ulcer
- High blood lipid levels; blood pressure; blood sugar
- Myocardial infarction...
- Cancer, autoimmune, hormone disorders...
- Mental and behavioural disorders
- Addictions (alcohol, tobacco, medications, drugs...)
- Suicides



MENTAL AND BEHAVIOURAL DISORDERS IN THE EU AND SLOVENIA

- 27% (83 million) of adult EU citizens suffer from mental and behavioural disorders, of which only 26% seek help from professional health care services *(Wittchen, Jacobi, 2005)*
- Mental and behavioural disorders are among the most common reasons for sickness absence and early retirement *(WHO, 2008)*

PREVALENCE OF MOBBING IN THE WORKPLACE, SLOVENIA

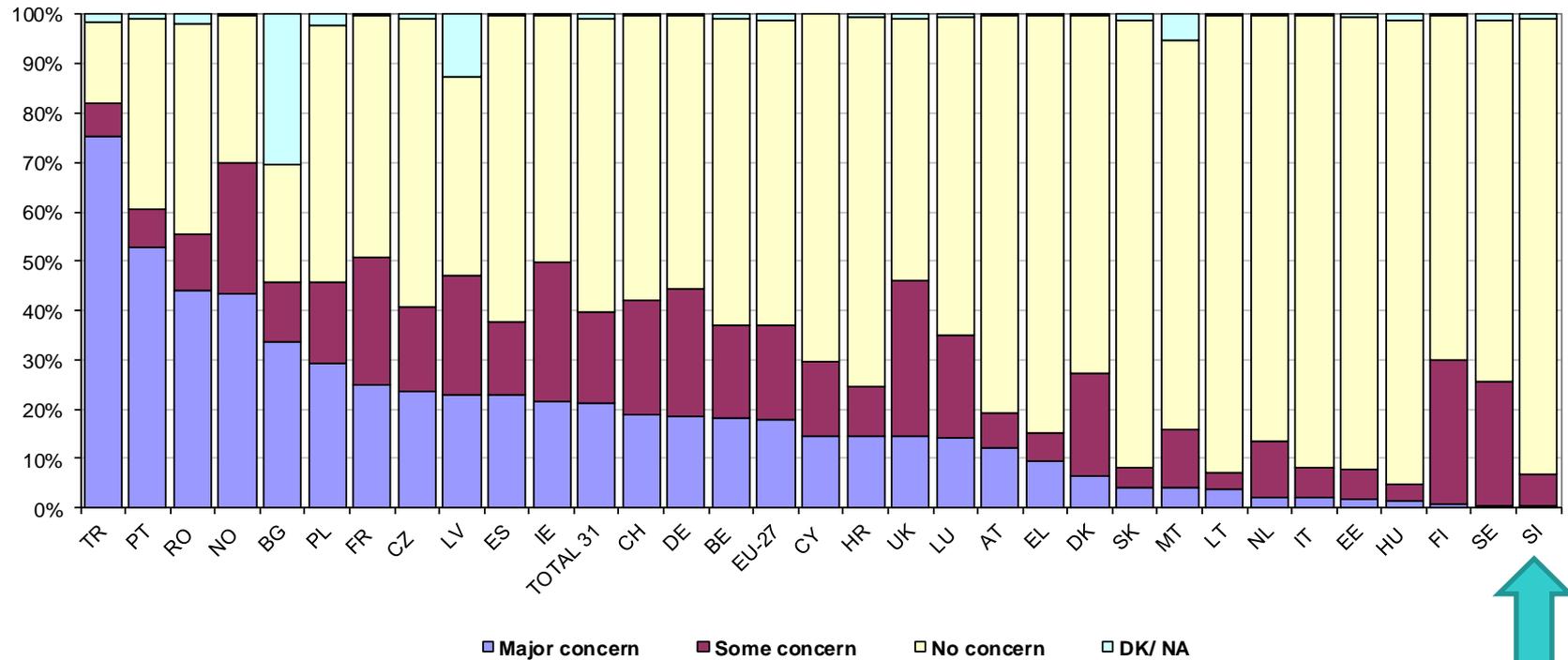
(Source: Survey by Clinical Institute of Occupational, Traffic, and Sports Medicine, 2008)

- 10.4% - in the last 6 months; 1.5% - frequently
- 19.4% - in the last 5 years
- 18.8% - witnessed mobbing
- M=37.2%. F=62.8%
- Private sector=48.1% vs public sector=49.9%

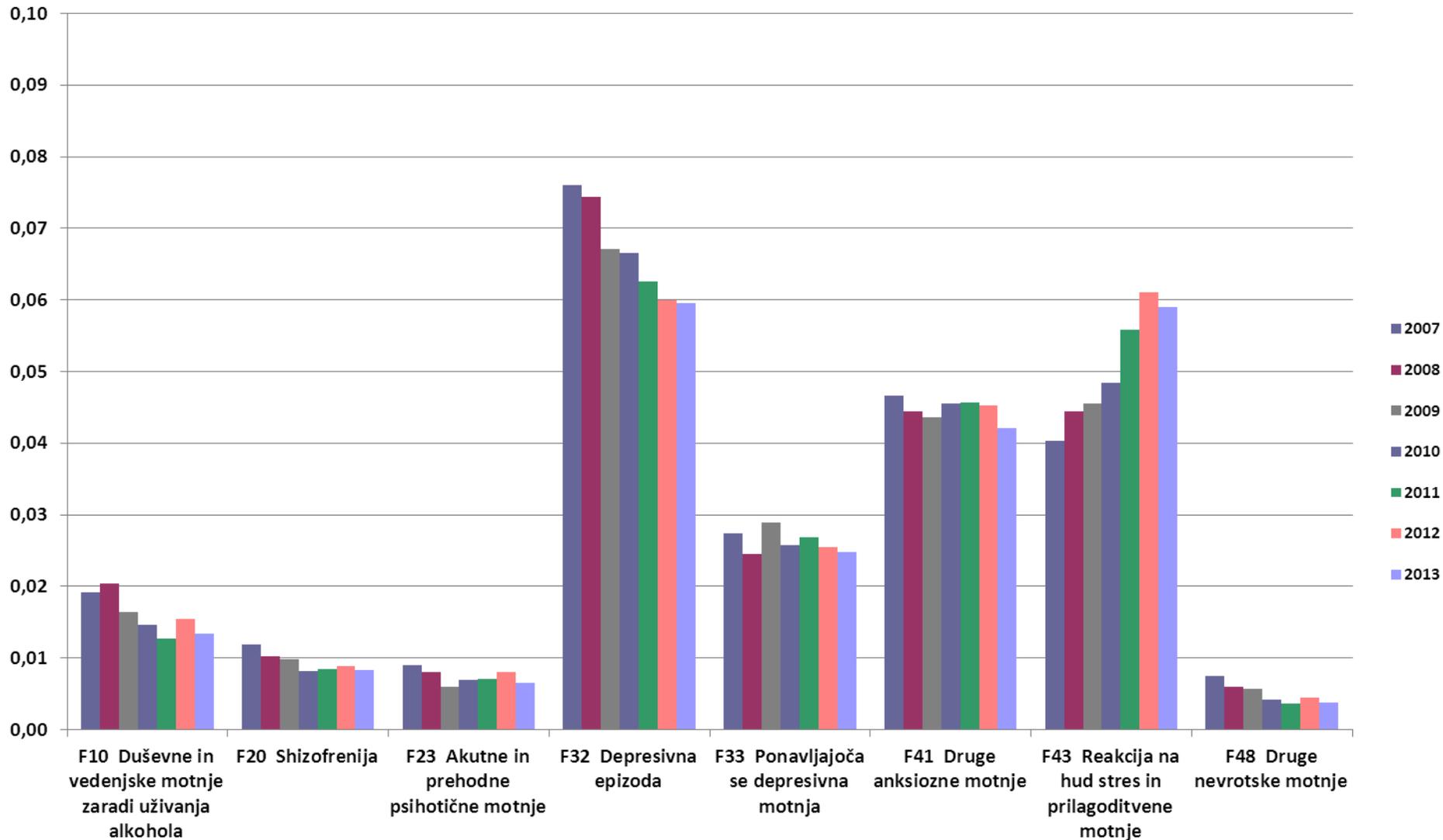


MANGEMENT CONCERNS REGARDING MOBBING AND HARRASEMENT, EU-27

(Source: ESENER, 2009. www.osha.europa.eu)



% of sick leave, mental and behavioural disorders by diagnosis, Slovenia, 2007-2013

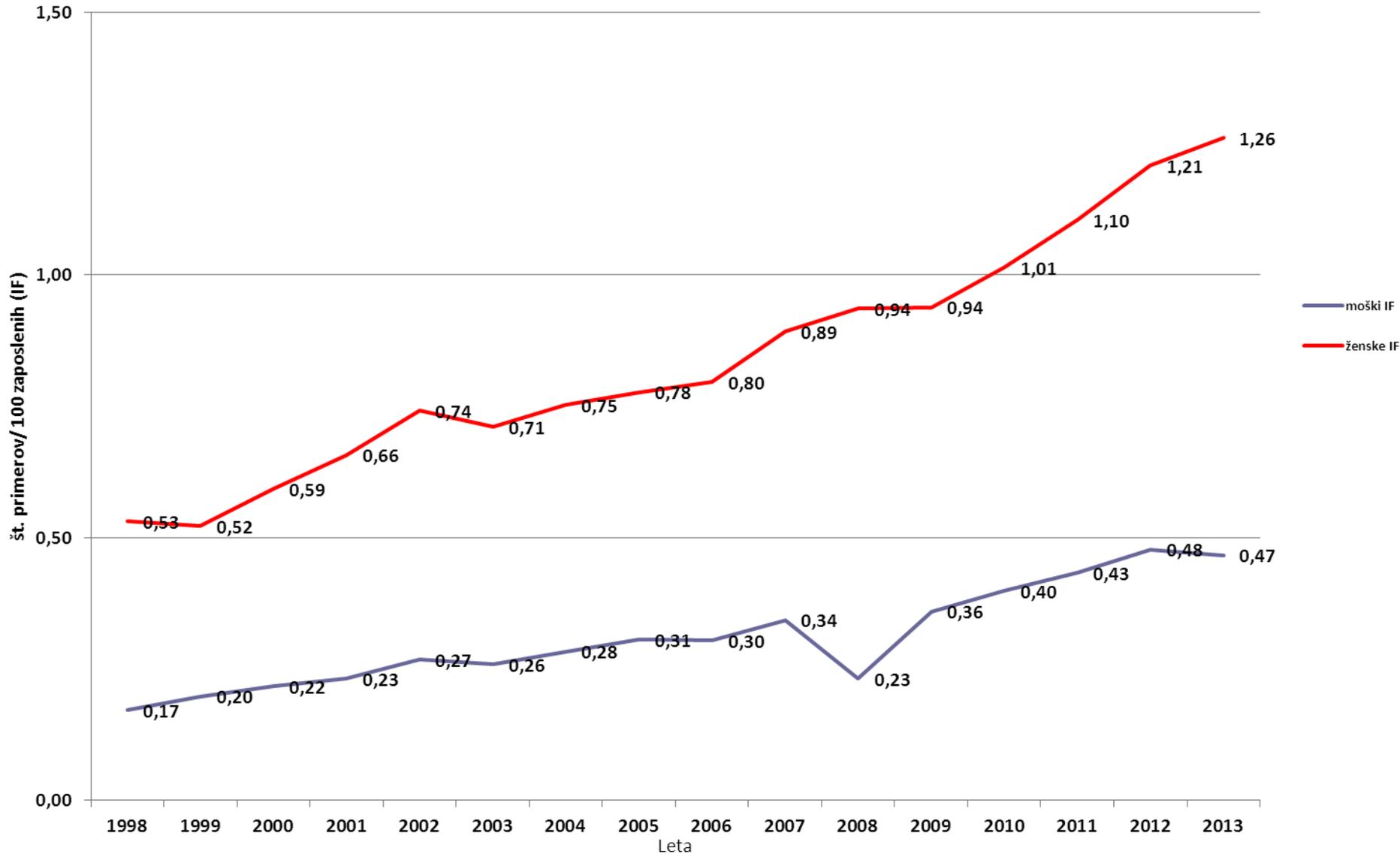


POSTTRAUMATIC STRESS DISORDER (PTSD)

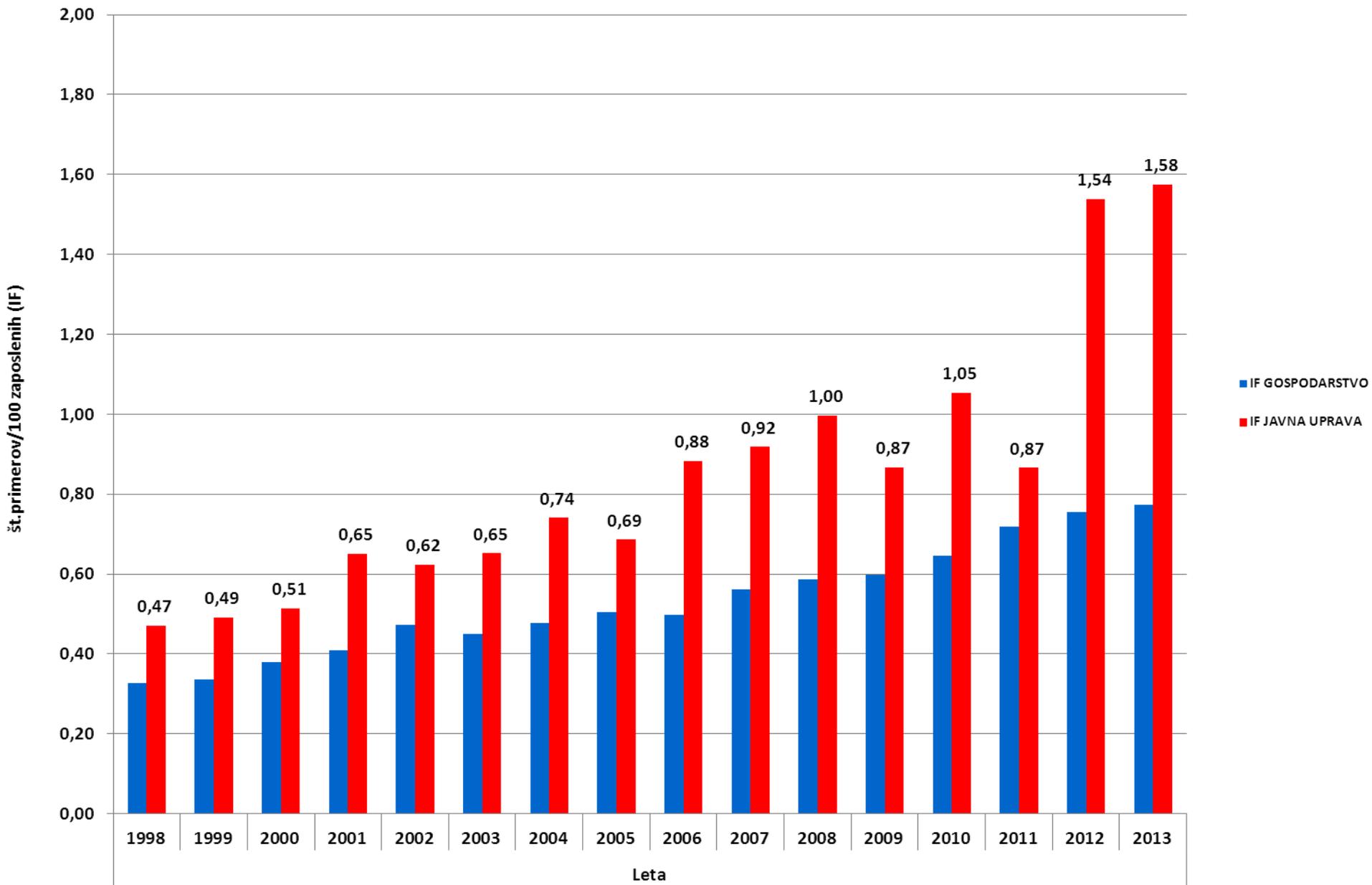
Intensive anxiety response to severe stress events; frequently a delayed or prolonged response to ill-treatment; long-term, distressing re-experiencing of traumatic events.



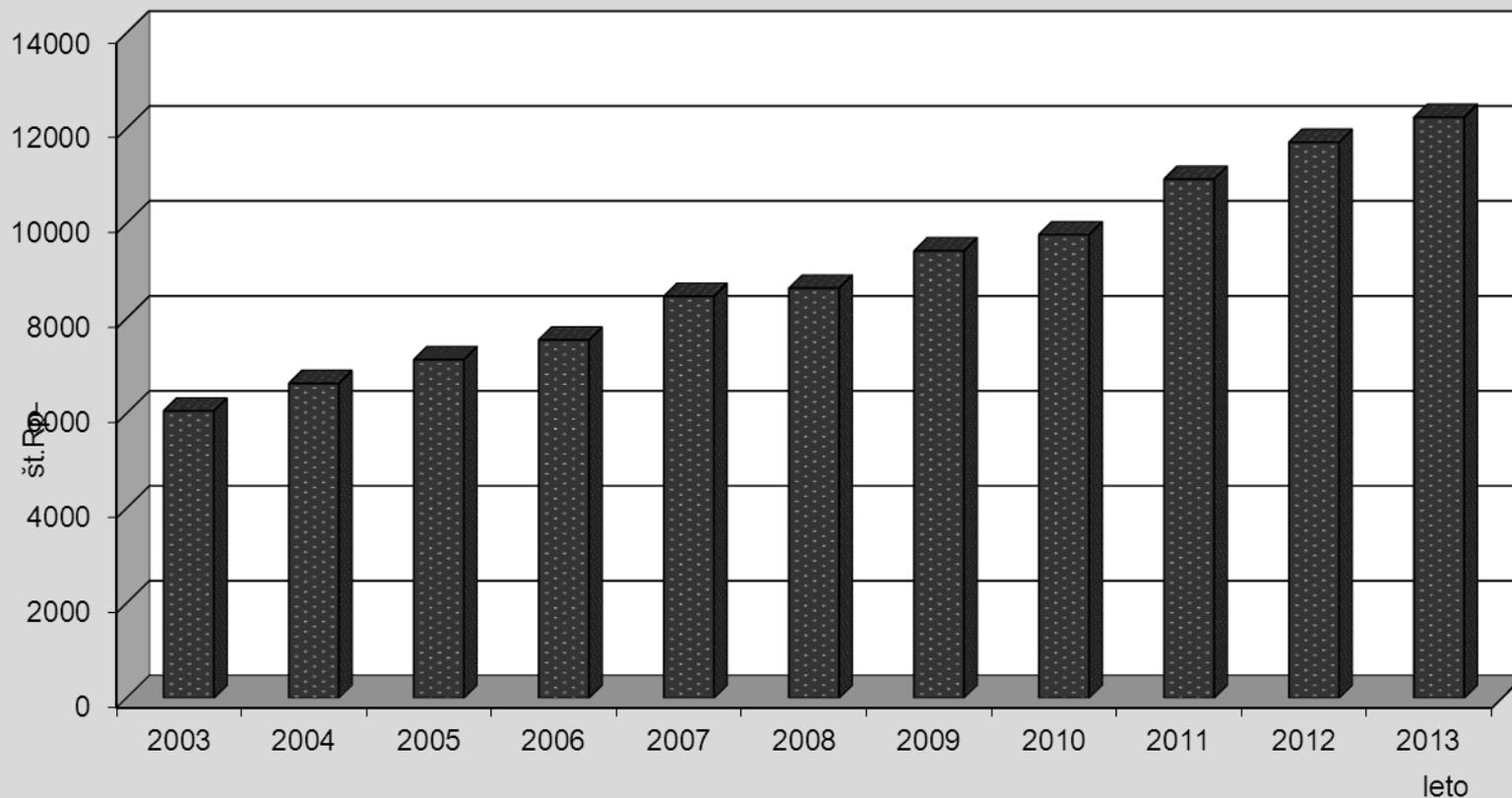
Sick leave frequency as a result of severe stress and adjustment disorder by gender, Slovenia, 1998-2013



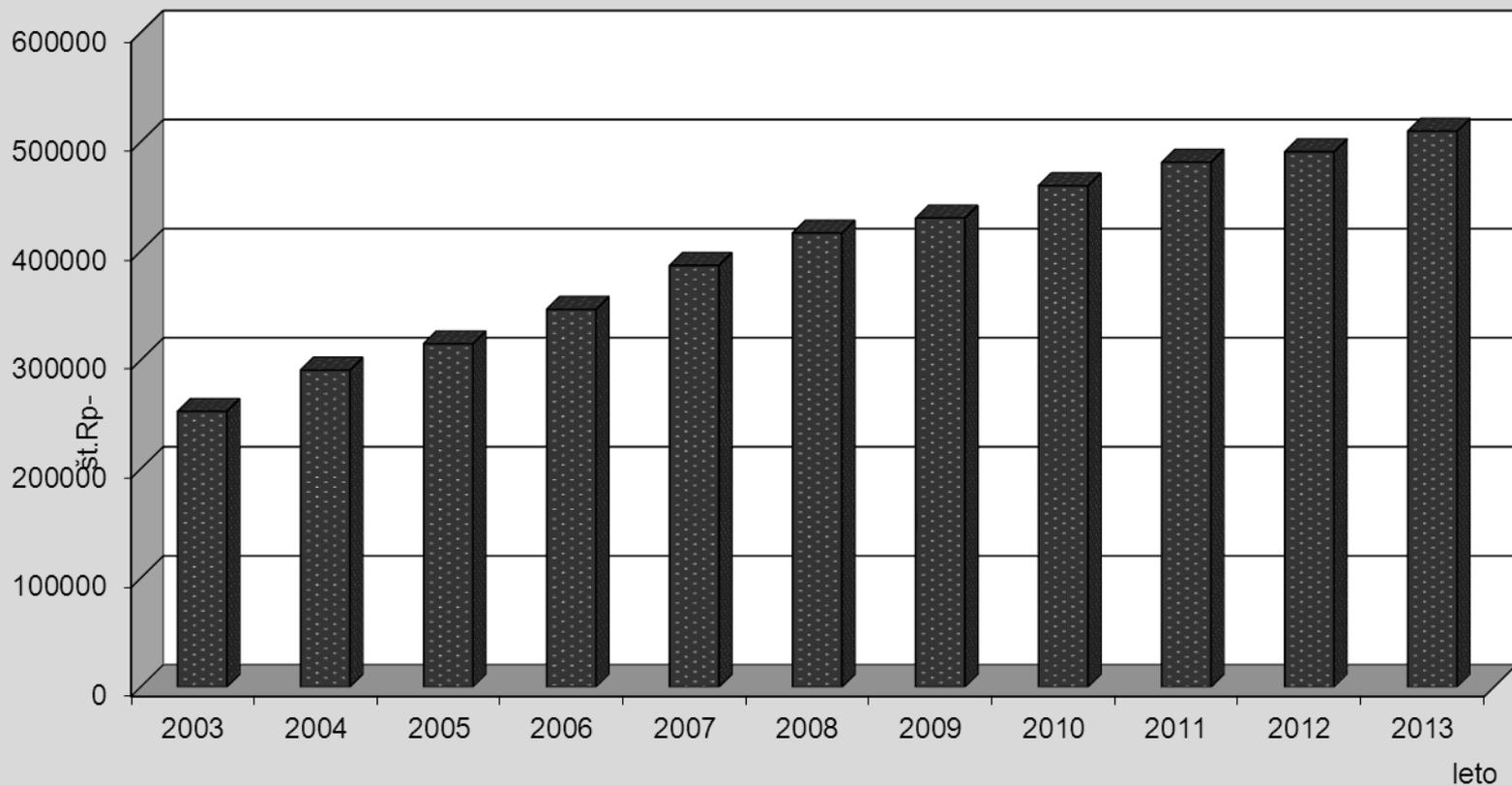
Comparison of sick leave frequency as a result of severe stress in economic sector and public administration, Slovenia, 1998-2013



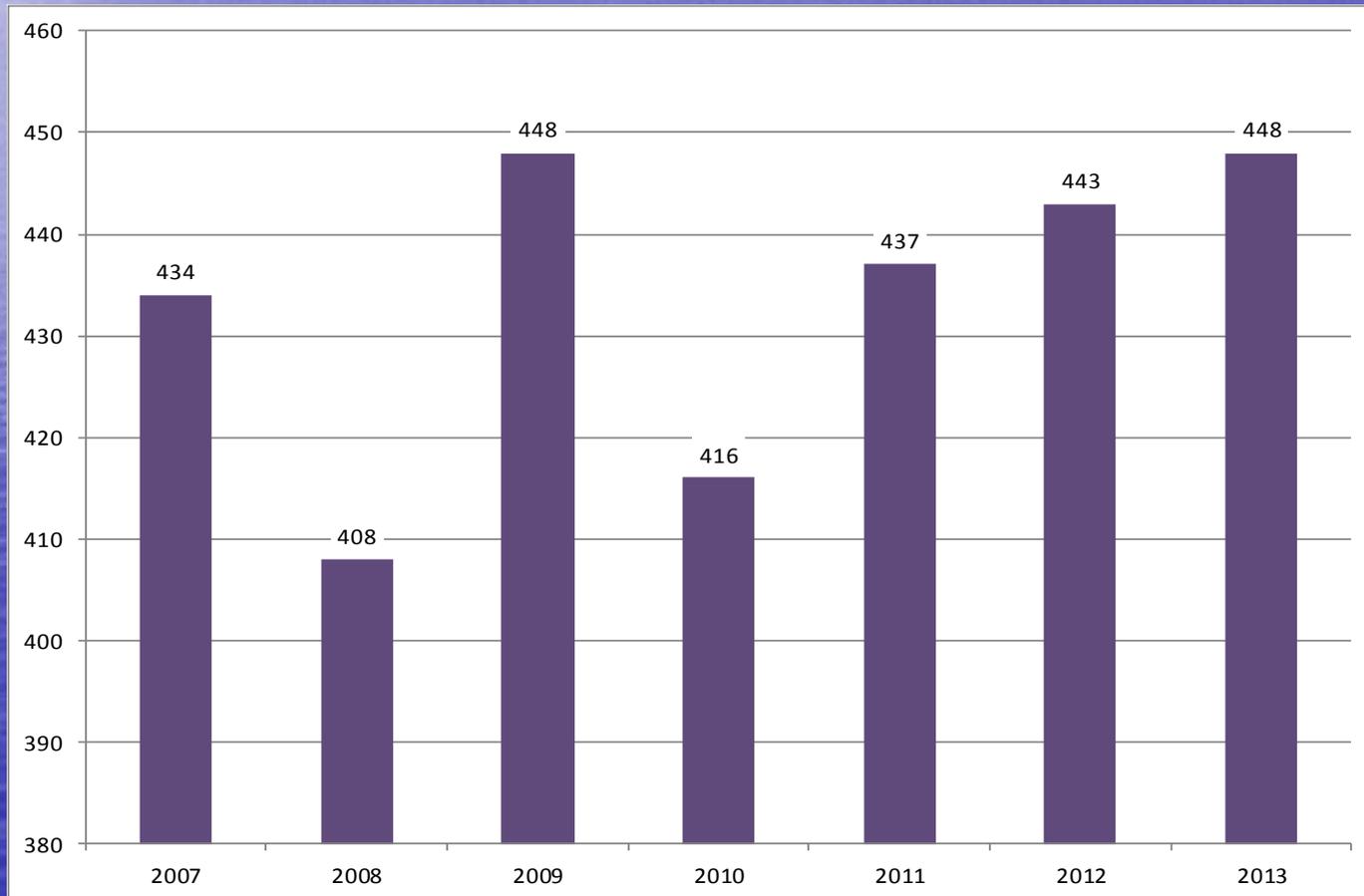
CONSUMPTION OF TRANQUILISERS, Slovenia 2003 - 2013



CONSUMPTION OF ANTIDEPRESSIVES, Slovenia 2003 - 2013



NUMBER OF SUICIDE CASES IN SLOVENIA, 2007 - 2013



CERTAIN MODERN CONCEPTS IN MANAGEMENT AND ORGANISATION OF WORK:

**Improved integrity, health, safety and satisfaction
through better management and organisation of
work**

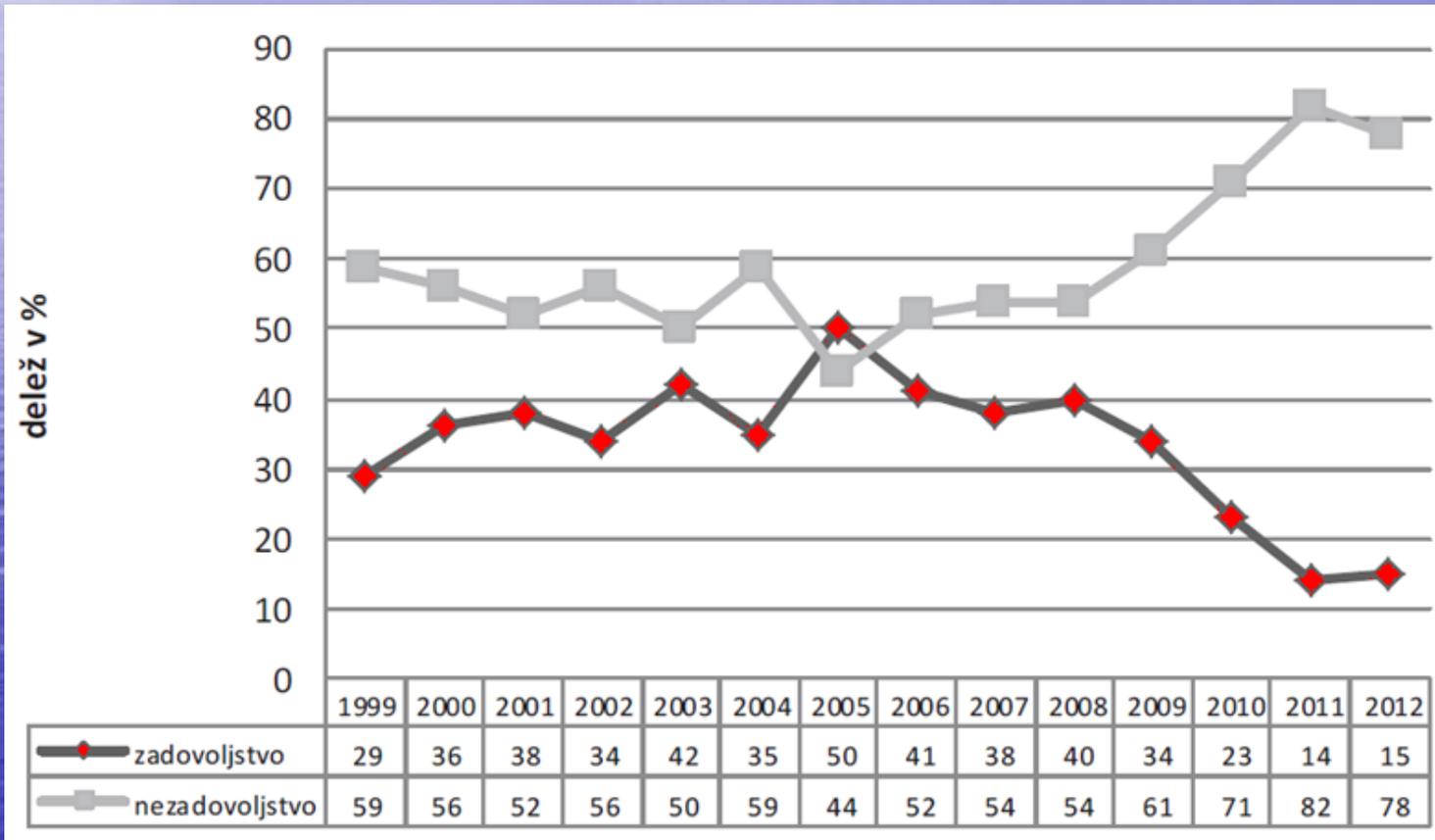
Psychosocial risks are closely related to socio-economic conditions, and poor management and organisation of work (WHO, 2008);

INTEGRITY AND CORRUPTION, SLOVENIA, 1999 - 2013

- Based on the corruption perceptions index, Slovenia ranks among most underperforming countries (*Source: www.transparency.org/country*)
- General decline of trust in institutions of state governed by the rule of law, and holders of public office and their credibility
- **All surveys reveal negative trends concerning management quality, presence of corruption and its negative implications for work-related environment and living environment in general.** (*Source: [Commission for the Prevention of Corruption, 2013, Transparency International Slovenia 2014](#)*)



(DIS)SATISFACTION WITH DEMOCRACY, SLOVENIA, 1999 - 2012



ORGANISATIONAL JUSTICE / INJUSTICE (2)

(Nolimal et al. Študije primerov preganjanja oporekanja v delovnih organizacijah, Slovenija, 2001 - 2008)

- **Distributive** (remuneration)
- **Procedural** (processes or possibilities for freedom of speech, participation, co-decision...)
- **Informational** (timeliness, transparency, credibility, comprehensiveness of information, communication...);
- **Interpersonal** ("possible ill-treatment of employees by their supervisors..."; mobbing, harassment)

EXAMPLE OF POOR MENTAL HEALTH AMONG SPANISH EMPLOYEES IN RELATION TO THE CONTRACT TYPE *(Source: Artazcon et al., 2005; WHO, 2008)*



ORGANISATIONAL DISSENT (3)

- to dissent, object, oppose, disagree... with the organisational practice, procedures and policy / decision-making in the workplace (*Kassing, 1998*)
- **Tool for an improved management of organisation** (*Hegstrom, 1995*)
- Prerequisite for an efficient organisation of work and for a successful working organisation (*Kassing, 1998, Brief & Motowidlow, 1986*)



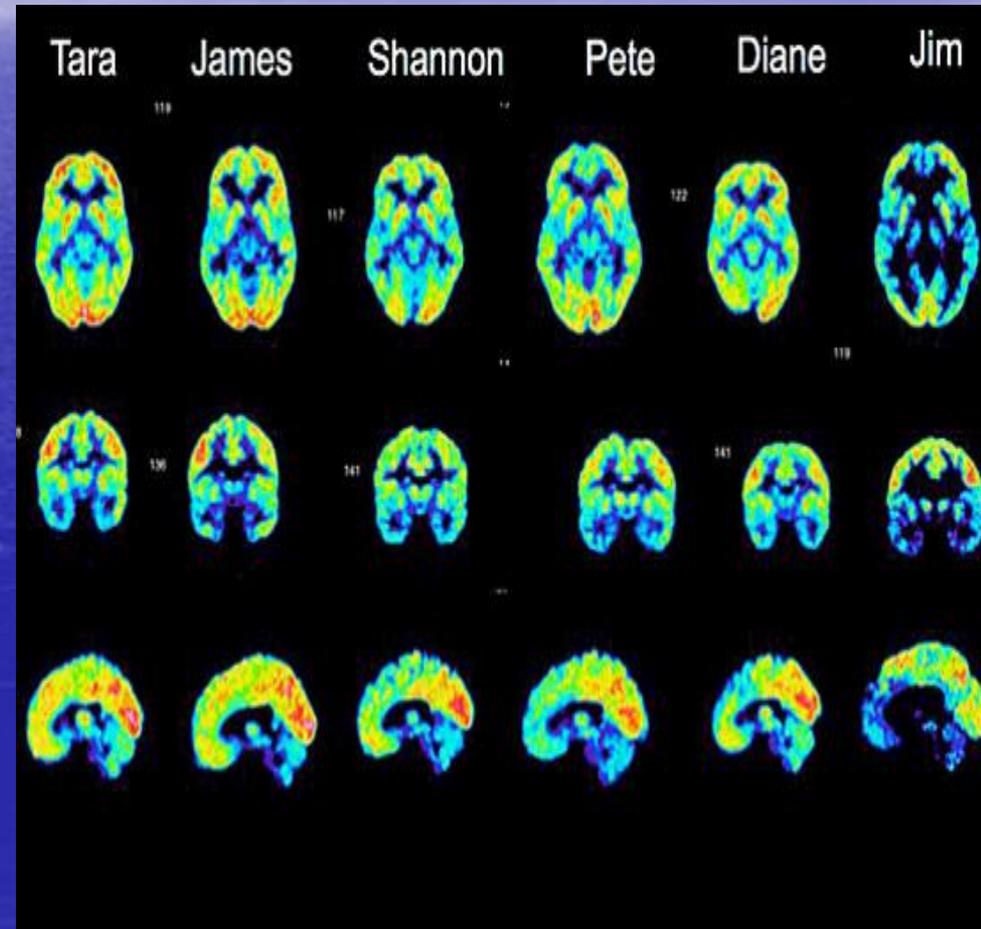
SUPPRESSION OF DISSENT (4)

- "when an individual or group which is more powerful than another harms, persecutes, censors or otherwise oppresses a dissident or a person disclosing information in the public interest rather than engage in a debate...";
(Martin 1999)
- Dissidents, persons disclosing information in the public interest, persons exposing corruption, "whistle-blowers"; "moral rebels", "trouble-makers", "contentious persons", "grouchers" ...
- *(www.whistleblower.org; Nolimal 2009; Martin 2013)*



CORPORATE PSYCHOPATY (5)

- 3-4% of **managerial** employees with permanent pattern of disregarding and breaching the rights of others and having characteristics as stated in the **PCL-R rating scale** (*Hare, Neumann, 2006, Baibak, P; Hare, 2007*)
- Present a threat to safety, health and business operation, as they are focused only on their own interests
- Present a threat to integrity / social responsibility, as they lack any sense of guilt and remorse for violence and damage inflicted (*Boddy, 2005*)



PSYCHOPATHY IN THE WORKPLACE

(Source: Hare, **PCL-R**, 2007)

PERSONAL OR EMOTIONAL TRAITS:

- Superficial, glib, manipulative, cunning, charming
- Egocentric, arrogant, grandiose sense of self-worth
- Lack of remorse, regret or guilt
- Emotionally shallow
- Lack of empathy

ANTISOCIAL TRAITS / WORK / LIFESTYLE:

- Parasitic lifestyle
- Pathological lying, deception, manipulative
- Antisocial and unethical behaviour
- Promiscuous sexual behaviour/harassment
- Extreme need for stimulation;
- Poor behavioural controls
- Irresponsibility...

The background of the slide features a serene landscape with a clear blue sky filled with wispy white clouds. Below the horizon, a vast blue ocean stretches across the frame, with a bright sun on the left side creating a shimmering reflection on the water's surface. The overall color palette is dominated by various shades of blue, from deep cerulean to light sky blue.

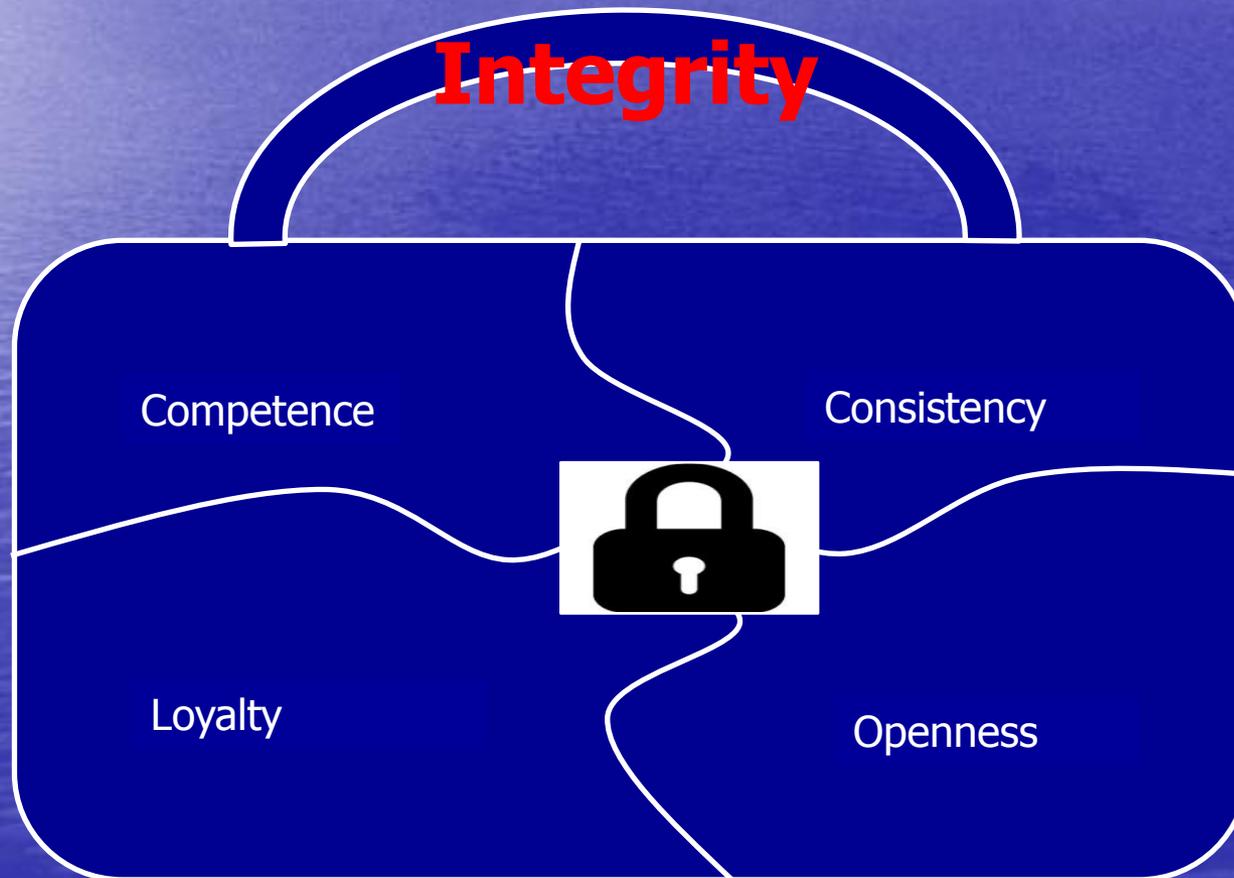
INTEGRITY AND TRUST

INTEGRITY

AS A PART OF PSYCHOSOCIAL HEALTH

- Expected action and responsibility of individuals and organisations in prevention and elimination of the risk that any authority, office, power or another competence for decision-making is used contrary to the law, legally permissible objectives or codes of ethics (*Source: Integrity and Prevention of Corruption Act - ZIntPK, 2011*)
- Opportunity for an integrated management of absenteeism, discrimination, mobbing and corruption by using the **Integrity Plan** (*Source: www.kpk-rs.si/download/t_datoteke/2330*)

EMPLOYEE **TRUST** IN MANAGEMENT IS A KEY TO AN IMPROVED PSYCHOSOCIAL HEALTH IN THE WORKPLACE

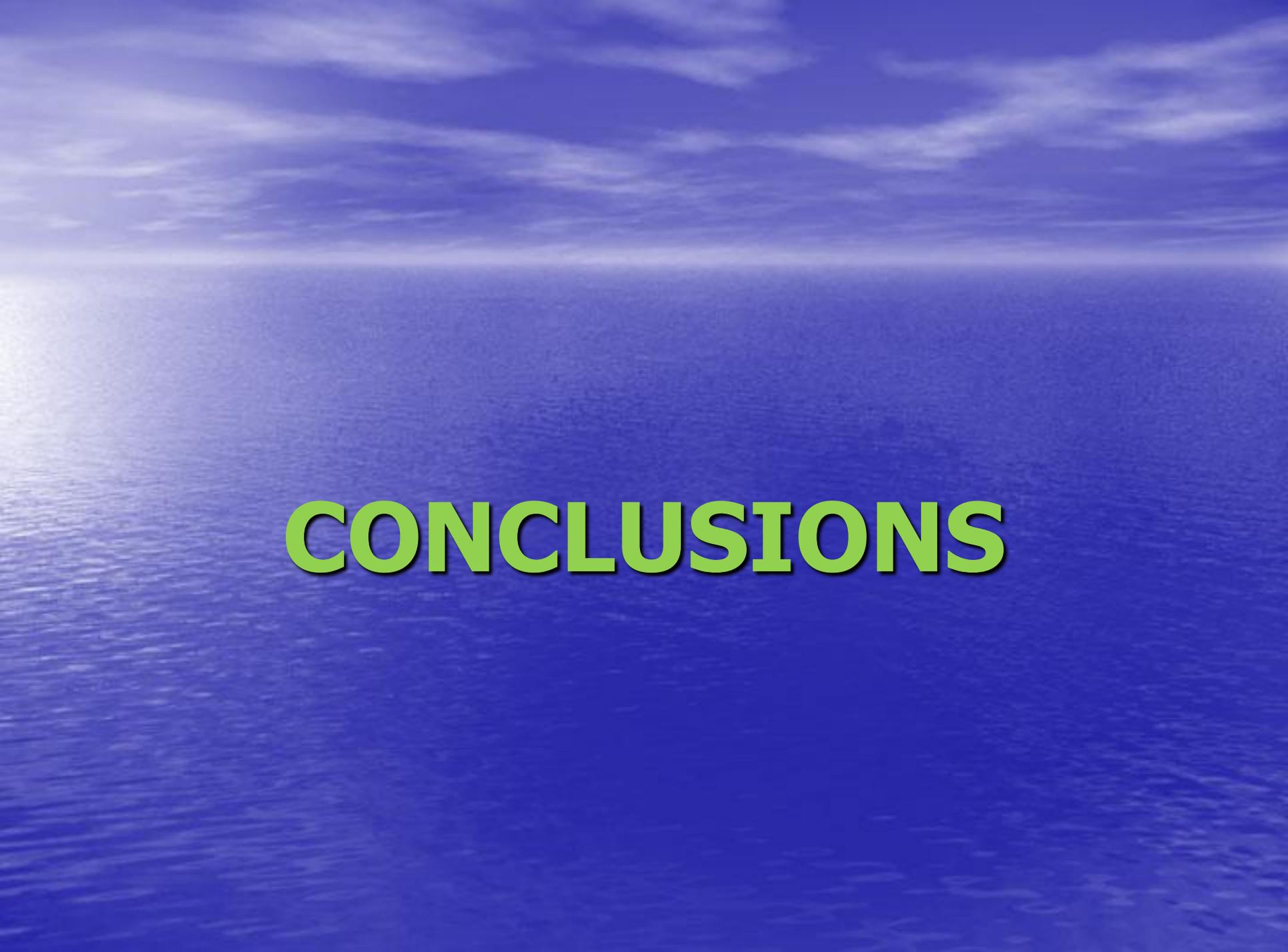


MANAGEMENT CONCEPT REDEFINED: WHY EMPLOYEES NEED MANAGERS?



PARTICIPATORY MANAGEMENT AS A PART OF PSYCHOSOCIAL HEALT PROMOTION:



A background image showing a vast blue ocean under a blue sky with light, wispy clouds. The sun is visible on the left side, creating a bright reflection on the water's surface.

CONCLUSIONS

OPPORTUNITIES:

**BRINGING TOGETHER INTEGRITY, SOCIAL
RESPONSIBILITY AND PROMOTION OF PSYCHOSOCIAL
HEALTH
IN THE WORKPLACE**



RECOMMENDATIONS ON MEASURES FOR THE PROMOTION OF PSYCHOSOCIAL HEALTH AND ASSISTANCE MEASURES AIMED AT PERSONS AFFECTED BY BEHAVIOURAL AND MENTAL DISORDERS:

- Development of a vision on integrity, democracy and psychosocial health in the workplace (**Government of the Republic of Slovenia**);
- ECONOMIC RESTRUCTURING PROGRAMMES SHOULD TAKE INTO ACCOUNT IMPACTS ON PEOPLE AND ON THEIR PSYCHOSOCIAL HEALTH; "WEEDING OUT BAD APPLES AND MANAGERIAL PERSONNEL" (**employers, managers**)
- Establishment of an interministerial cooperation and provision of resources (**Ministries**)
- Adoption of national strategy and programme on the promotion of psychosocial health in the workplace (**researchers, decision-makers, practitioners, employees**)
- Awareness-raising and education of all actors, especially of management personnel in organisations (**professionals**)
- Promotion of maintaining concern by employers and managers for vulnerable and affected individuals in the framework of business excellence / integrity/ corporate responsibility (**employers, managers, employees**).

CONCLUSION

- Support for the participatory management / enhanced role of employees in the management / decision-making processes within organisations (WORKER PARTICIPATION IN MANAGEMENT ACT, 1993)
- Promotion of integrity and psychosocial health (common efforts by employers, managers, employees / workers, trade unions and the Government in order to improve health, integrity and well-being in the workplace, mandatory inclusion into social dialogue)
- Measuring and understanding problems, and impact assessment of measures taken

Thank you for your attention!

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