



**Finnish Institute of  
Occupational Health**

# **Mental Health Promotion at Work**

**Kari Lindström, Professor  
Finnish Institute of Occupational Health**

# WHO European Ministerial Conference on Mental Health, Helsinki, 12-15 Feb 2005

## Work-related issues

### 1. Promote mental well-being for all

Create healthy workplaces by promoting elements such as

- exercise
- changes in work patterns
- sensible work hours
- healthy management styles

### 2. Tackle stigma and discrimination

- develop and implement national, sectoral and enterprise policies to eliminate stigma and discrimination in employment practices associated with mental health problems
- establish vocational training for people suffering from mental health problems and support the adaptation of workplaces and working practices to their special needs, with the aim of securing their entry into competitive employment

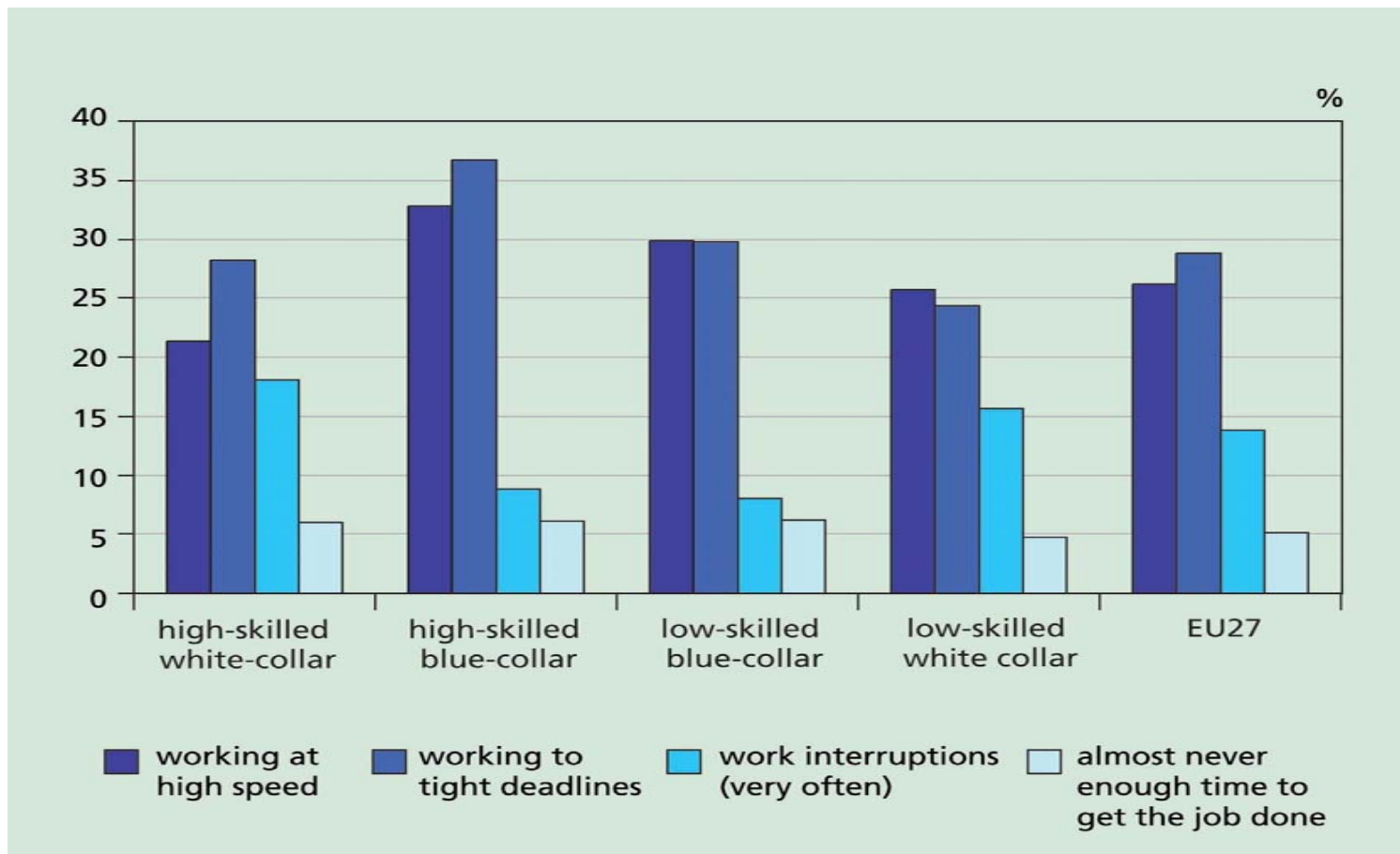
# WHO Report "Mental Health and Work (2000)

## Three issues

- Recognition and awareness of mental health as a legitimate concern of organizations (e.g. disability and absenteeism costs)
- Effective implementation of workplace policies and anti-discrimination provisions
- Understanding the need for early interventions

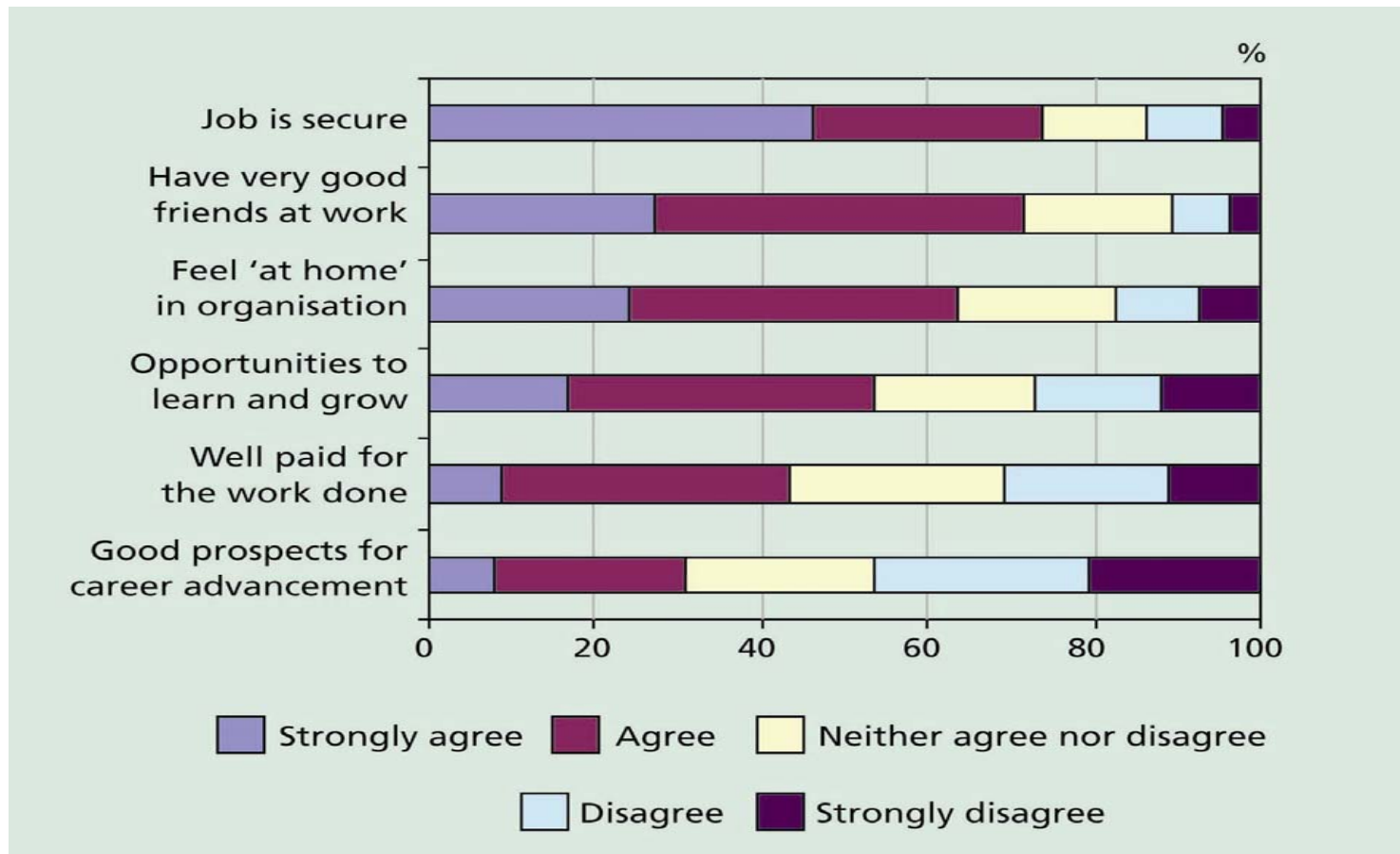
# EU 25 / Fourth European Working Survey

## Work intensity

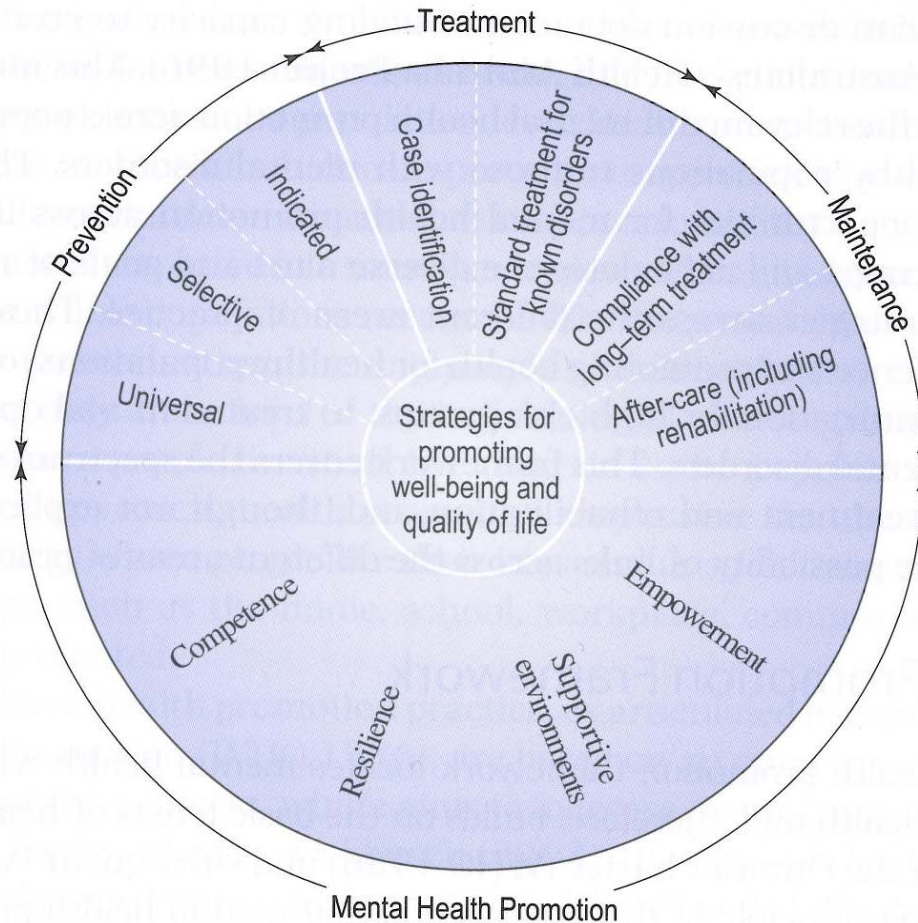


# EU 25 / Fourth European Working Survey

## Opinions about positive job elements



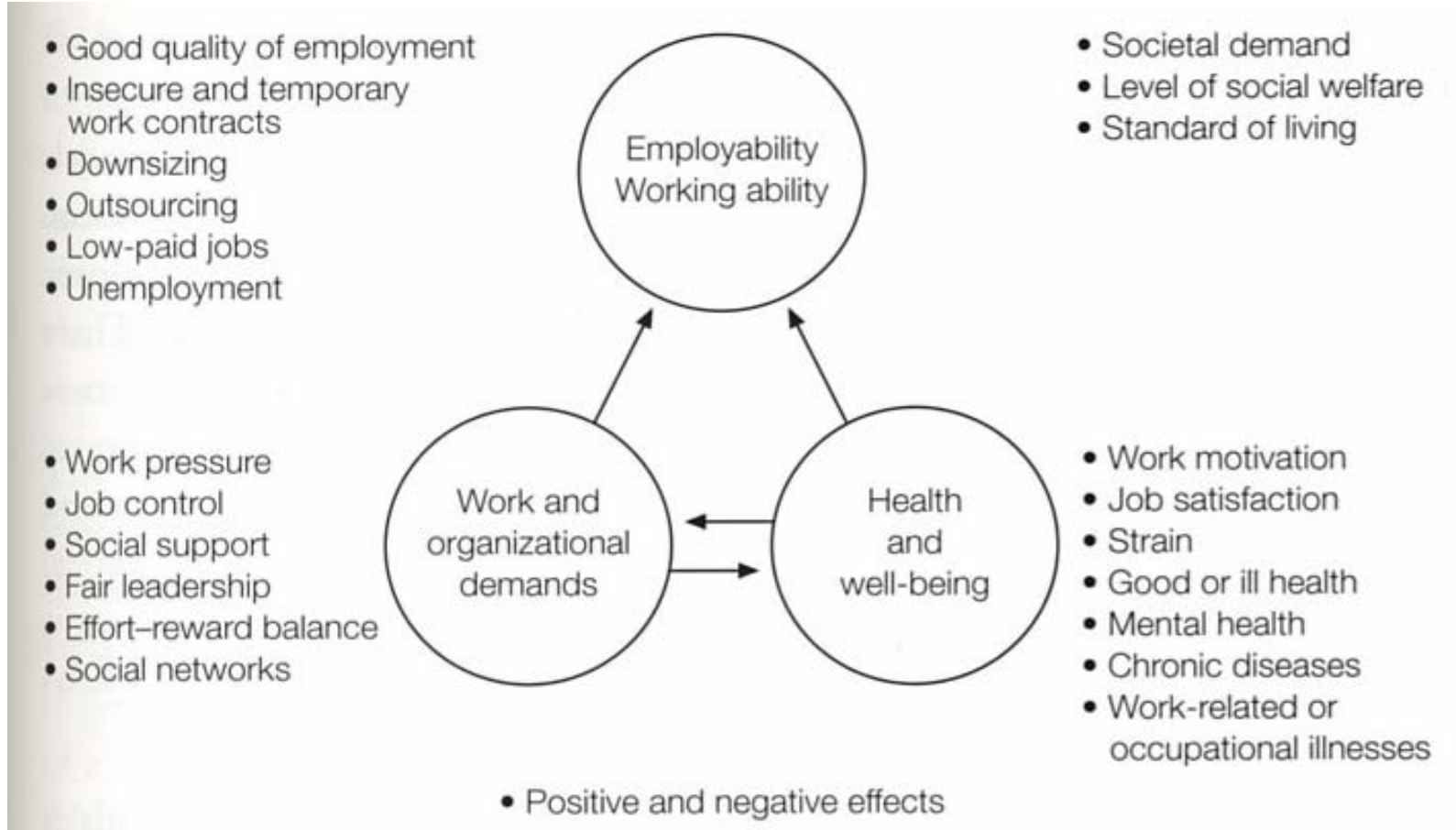
# Modified Mental Health Intervention Spectrum (Barry 2001)



# How to Implement Mental Health Promotion in the Workplace

- Creating healthy workplaces
- Managing work stress
  - individual-focused approaches
  - group-level approaches
  - organizational approaches
- Evaluating interventions and programs

# The Relationship Between Work Health and Employability



(Hämäläinen & Lindström 2006)

# Psychosocial Work Characteristics and Mental Health

## Longitudinal studies

- high level of psychological demands
- low level of decision latitude
- low level of social support at work
- effort-reward imbalance
- workplace bullying  
→depression

## Cross-sectional studies

- low procedural and relational justice

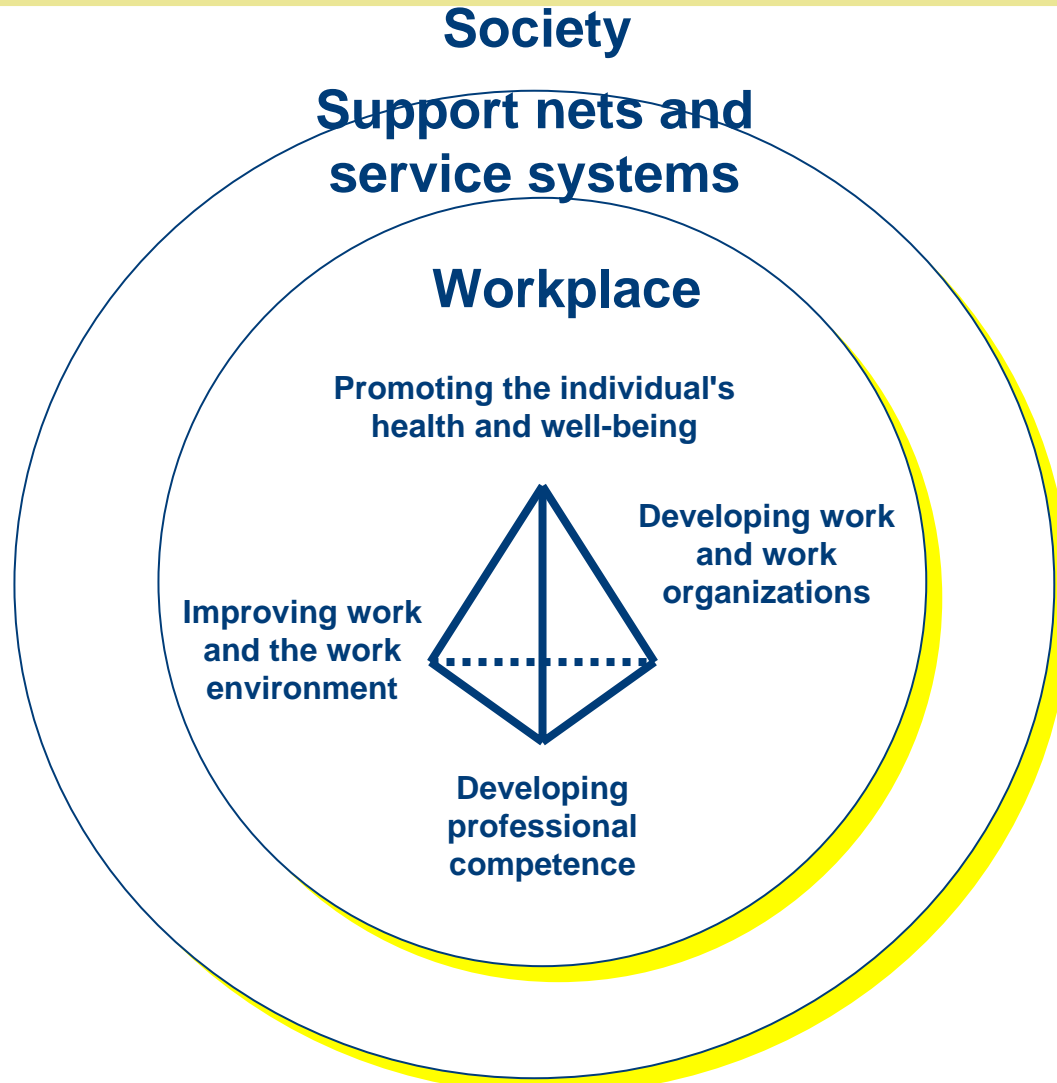
- The Whitehall II study in England
- The GAZEL study in France
- The "Work and Health in Finnish Hospital Personnel" study

# Psychosocial Approach to Mental Health: Interventions

1. Individual and group-oriented interventions
  1. stress management and coping training
  2. cognitive behavioral approaches
  3. debriefing
  4. health education and lifestyle changes
  5. career and skills development
- Improving work and work organizations
  - employee assistant programs
  - promoting healthy and productive work organizations
  - improving environmental and ergonomic conditions
  - strategies for job design
  - organizational change management

Kivimäki & Lindström 2006

# Targets and Levels of Development of the Finnish MWA



Case:

# Multilevel Organizational Intervention in an Elderly Care Organization

## Objective:

- To evaluate the effects and impacts of an individual and organization-focused intervention program
  - Psychosocial factors at work
  - Employees' well-being

## Design:

- The two-year intervention was based on the Finnish Work Ability Maintenance model combined with participatory organizational interventions and tailored local projects implemented at ward level
- The conference method with democratic dialogue was applied

## Results:

- High participation rate in the whole organization and at nursing home level correlated positively with experienced improvement in the following aspects
  - higher job discretion
  - greater satisfaction with work organization and collaboration
  - improved professional competence

Case:

# Multilevel Organizational Intervention in an Elderly Care Organization

## Evaluation from four perspectives:

- **Actual situation**

- 61-73% of employees reported that the intervention was useful for their individual physical and mental functional capacity
- 38-64% reported that the quality of their service delivery had improved

- **Effectiveness**

- social relations and work climate, as well as job content and collaboration had improved according to 31-63% of the respondents

- **Learning perspective**

- improved individual professional competence, and promotion of common values and visions of the work unit

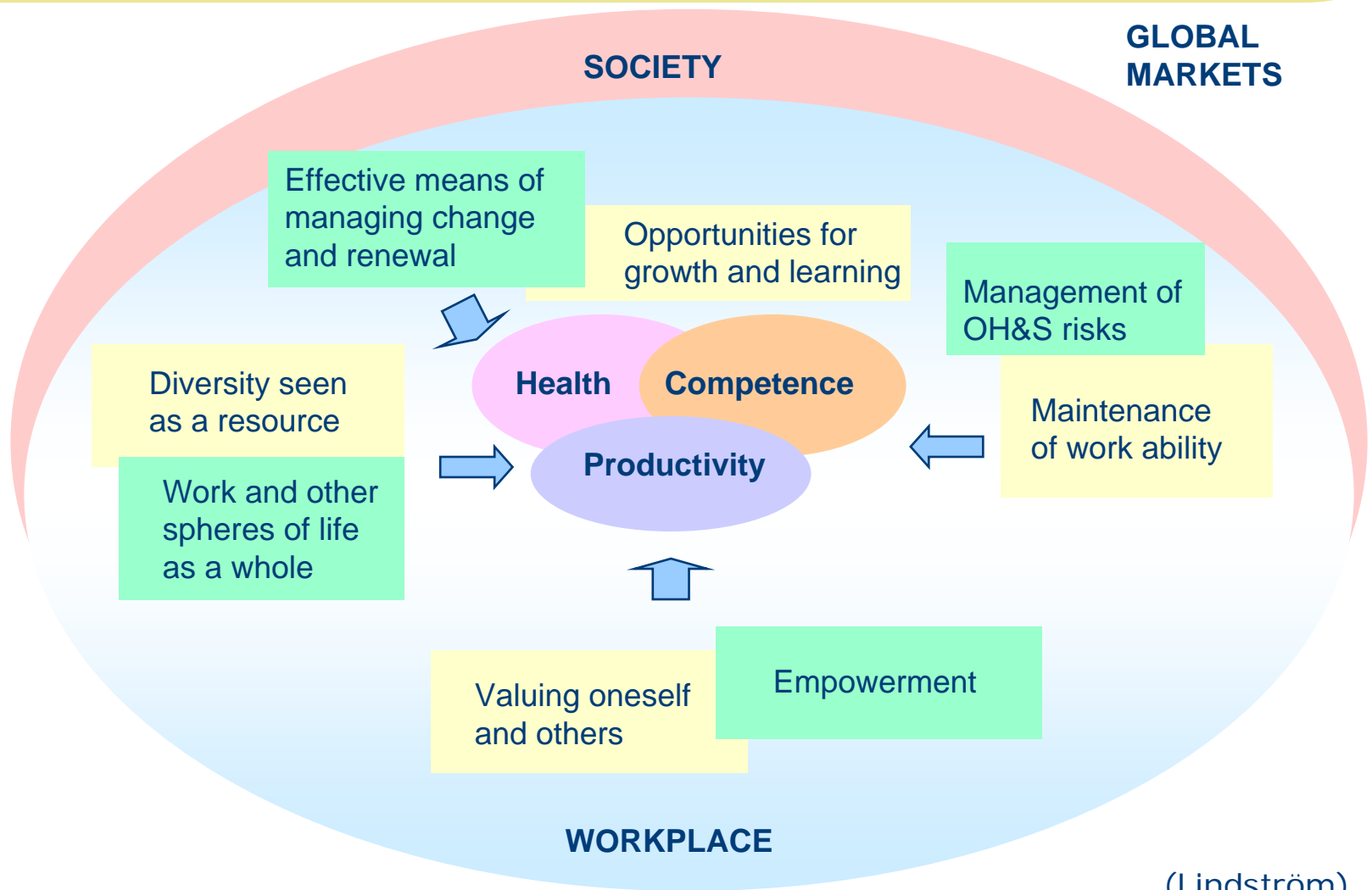
- **Future perspective**

- 38-67% of the respondents viewed that the intervention program had been useful in this respect

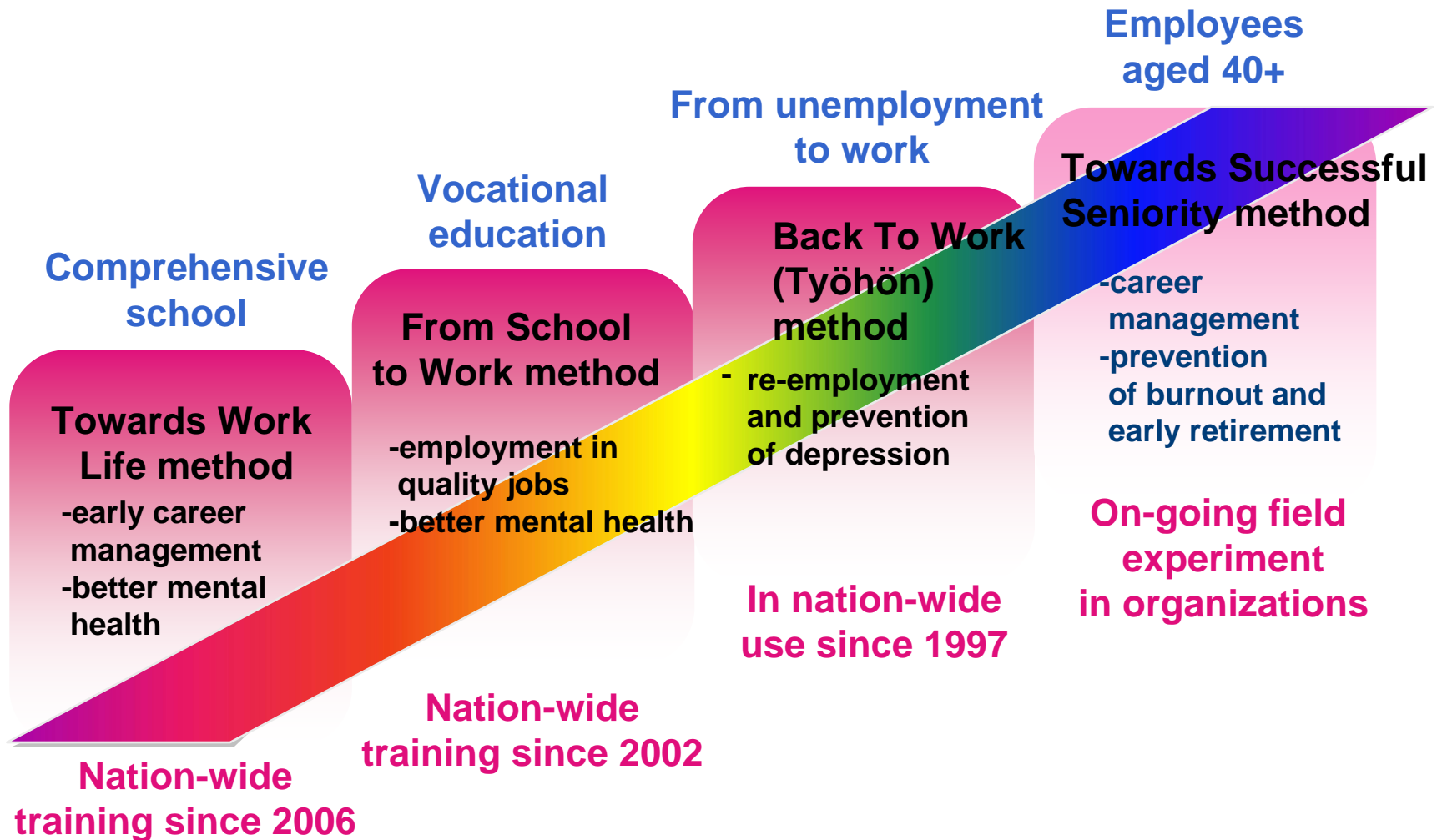
- **Conclusion:**

- the interorganizational, interprofessional and multilevel training and development were perceived as more effective and more helpful in terms of learning than training arranged on the level of a single ward or a small group.

# Healthy Work Organization

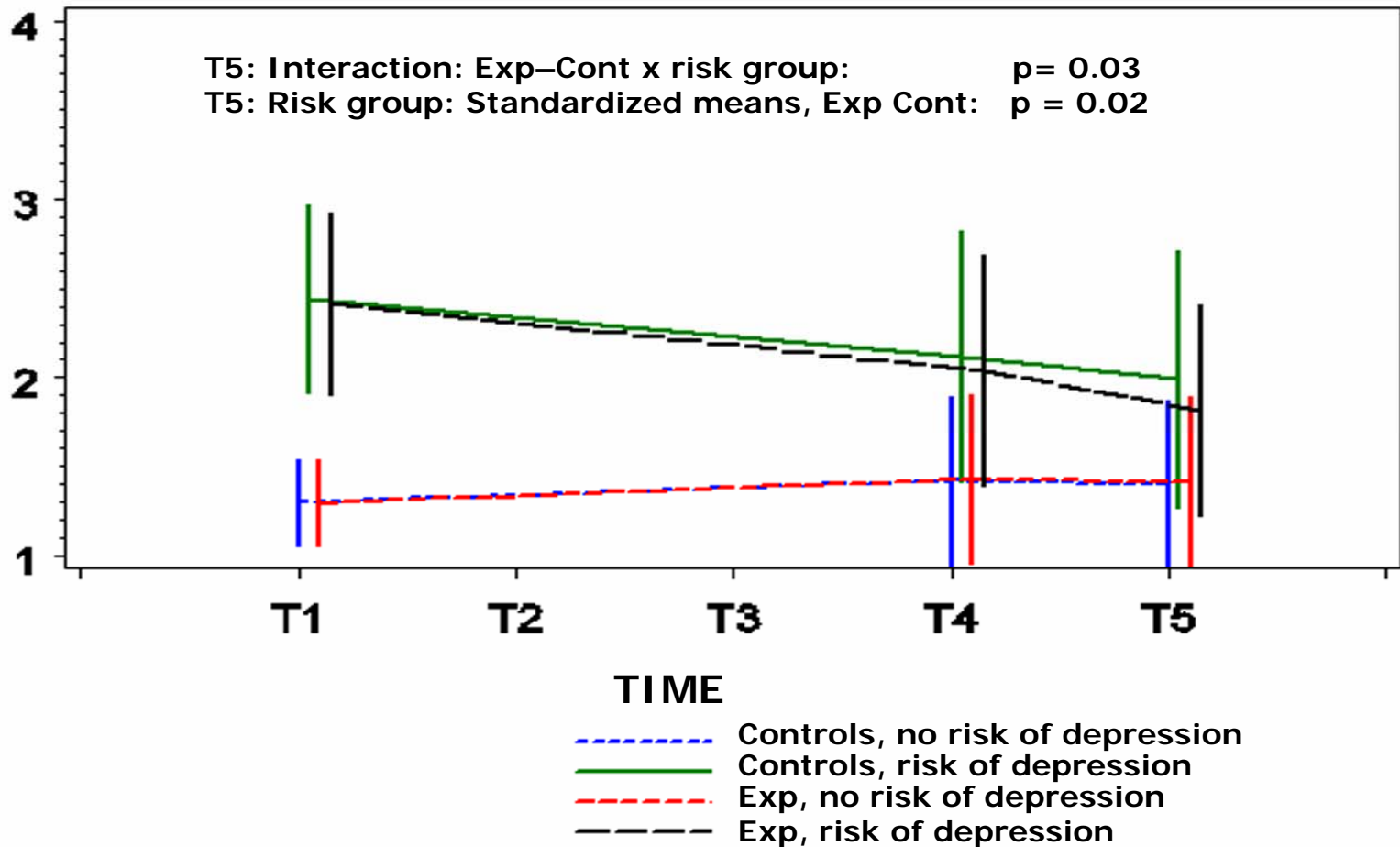


# Promoting Career Management and Mental Health with Preventive Group Interventions



# Symptoms of Depression

-follow-up from comprehensive school to secondary studies



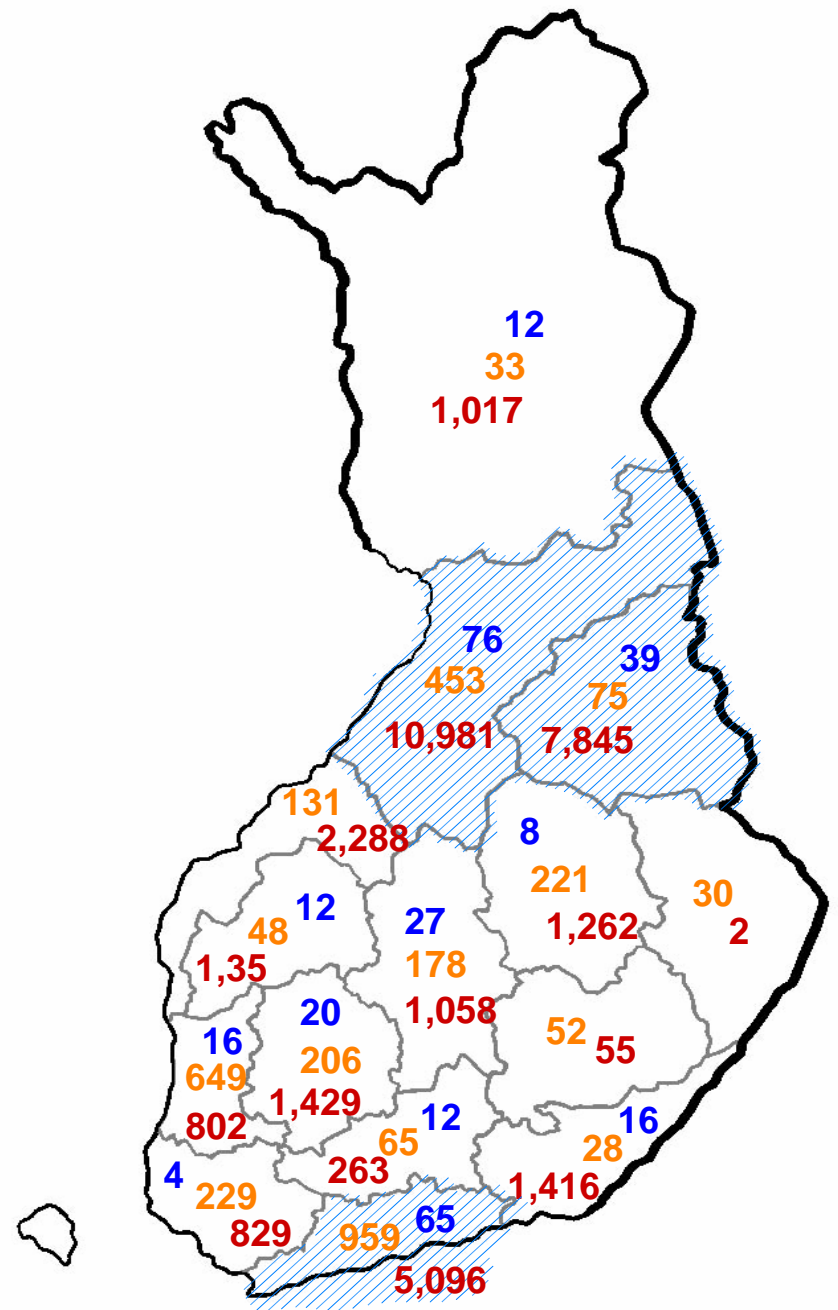
# Activities of Back to Work Group in Finland in 2004

**Qualified trainers 305**  
(year 2000)

**Methods folders 3,395**

**Workbooks 35,578**

 **Trainer networks**



# Concluding Remarks

1. The balance between the demands and rewards of the job and between work and life should be maintained to prevent adverse effects on mental health
2. Workplace health promotion activities are of central importance in enabling people to continue at work, in guaranteeing the quality of work contracts and preventing the adverse effects of various negative factors at work (e.g. psychosocial factors)
3. Preventing the exclusion of workers, or promoting re-entry to work life by social, re-education and employment programs and integrated services is important, and these services must be made easily available to the working-age population

# Concluding Remarks

4. In enhancing the inclusion of people in work life, their resources should be continuously developed and working conditions improved to strengthen the health and competencies of individuals
5. Good collaboration and horizontal partnership is required, especially between social, health, education and employment policy-makers, national agents and social partners