



WEEKLY EPIDEMIOLOGICAL REPORT

A publication of the Epidemiology Unit
Ministry of Health

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Management of Work Stress (Part I)

This is the first in a series of two articles on Management of Work stress. This article describes causes, effects, risk assessment of work stress. The next article will describe Stress risk management and prevention of work stress.

Work stress is recognized worldwide as a major challenge to employees' health and effective functioning of their organizations. Employees who are stressed are also more likely to be unhealthy, poorly motivated, less productive and less safe at work. Their organizations are less likely to be successful in a competitive environment.

Work stress

Work-related stress is the response people may have when presented with work demands and pressures that are not matched to their knowledge and abilities, challenging their ability to cope.

There is often confusion between pressure/challenge and stress and sometimes it is used to excuse bad management practices. Pressure at the workplace is unavoidable due to the demands of the present day work environment. Pressure may be perceived as acceptable and may even keep employees alert, motivated, able to work and learn, depending on the available resources and personal characteristics. However, when that pressure becomes excessive or otherwise unmanageable, it leads to stress. Stress results from a mismatch between the demands and pressures on the person, on one hand and their knowledge and abilities on the other. This includes not only situations where the pressures of work exceed the employees' ability to cope but also where the employees' knowledge and abilities are not sufficiently utilized and that is a problem for them.

Causes of work stress

Poor work organization (the way jobs and work systems are designed and the manner in which work is managed) can cause work stress. Excessive and otherwise unmanageable demands and pressures can be caused by poor work design, poor management and unsatisfactory working conditions. Similarly, these things can result in employ-

ees not receiving sufficient support from others or not having enough control over their work and its pressures.

The more the demands and pressures of work are matched to the knowledge and abilities of employees, the less likely they are to experience work stress.

The more support employees receive from others at work or in relation to work, the less likely they are to experience work stress. The more control employees have over their work and the way they do it and the more they participate in decisions that concern their jobs, the less likely they are to experience work stress.

Most of the causes of work stress concern the way work is designed and the way in which organizations are managed. Because these aspects of work have the potential for causing harm, they are called 'stress-related hazards'.

Stress-related Hazards

Work Content

Job Content

- Monotonous, under-stimulating, meaningless tasks
- Lack of variety
- Unpleasant tasks
- Aversive tasks

Workload and Work pace

- Having too much or too little to do
- Working under time pressure

Working Hours

- Strict and inflexible working schedules
- Long and unsocial hours
- Unpredictable working hours
- Badly designed shift systems

Participation and Control

- Lack of participation in decision making
- Lack of control (for example, over work methods, work pace, working hours and the work environment).

• Work Context

Career Development, Status and Pay

- Job insecurity

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- Lack of promotion prospects
- Under-promotion or over-promotion
- Work of 'low social value'
- Piece rate payments schemes
- Unclear or unfair performance evaluation systems
- Being over-skilled or under-skilled for the job

Role in the Organization

- Unclear role
- Conflicting roles within the same job
- Continuously dealing with other people and their problems

Interpersonal Relationships

- Inadequate, inconsiderate or unsupportive supervision
- Poor relationships with co-workers
- Bullying, harassment and violence
- Isolated or solitary work
- No agreed procedures for dealing with problems or complaints

Organizational Culture

- Poor communication
- Poor leadership
- Lack of clarity about organizational objectives and structure

Home-Work Interface

- Conflicting demands of work and home
- Lack of support for domestic problems at work
- Lack of support for work problems at home

The effects of work stress

The effects of work stress on employees

Stress affects different people in different ways. The experience of work stress can cause unusual and dysfunctional behaviour at work and contribute to poor physical and mental health. In extreme cases, long-term stress or traumatic events at work may lead to psychological problems and give rise to psychiatric disorders resulting in absence from work and preventing the worker from being able to work again.

When under stress, people find it difficult to maintain a healthy balance between work and non-work life. At the same time, they may engage in unhealthy activities, such as smoking drinking and drug abusing. Stress may also affect the immune system, impairing people's ability to fight infections.

The effects of work stress on organizations

If key staff member or a large number of workers are affected, work stress may challenge the effective functioning and performance of the organization. Unhealthy organizations do not get the best from their workers and this may affect not only their performance in the increasingly competitive environment but eventually even their survival.

When affected by work stress, people may

- Become increasingly distressed and irritable
- Become unable to relax or concentrate
- Have difficulty in thinking logically and making decisions
- Enjoy their work less and feel less committed to it
- Feel tired, depressed and anxious
- Have difficulty in sleeping
- Experience serious physical problems, such as:
 - heart disease, disorders of the digestive system, increases in blood pressure, headaches, musculo-skeletal disorders (such as low back pain and upper limb disorders)

Risk assessment

Assessing risks at work

Employers should have a policy for the management of health of employees that makes reference to work stress. They should

enable that policy to be implemented by putting the appropriate arrangements in place. Such arrangements should address the issues of risk assessment, timely action and rehabilitation. Organizational level strategies for managing existing work stress focuses on combating the risks at source.

Work stress can be effectively managed by applying a risk management approach as is successfully done with other major health and safety problems. A risk management approach assesses the possible risks in the work environment that may cause particular existing hazards to cause harm to employees (A hazard is an event or situation that has the potential for causing harm). Harm refers to physical or psychological deterioration of health. The causes of stress are hazards related to the design and management of work and working conditions and such hazards can be managed and their effects controlled in the same way as other hazards.

Assessing the risks of work-related stress involves answering the following basic questions:

- Is there a problem? Could work stress be affecting employees' health?
- How can the stress problem be solved?
- Is the whole system being monitored?

The aim of these questions is to identify work practices or circumstances that may cause significant imbalances of demand and resources. In the case of stress, it is the associations of these imbalances with signs of stress in individual employees and work groups that indicate their significance. Once identified and assessed, steps may be taken to reduce work stress at the group level.

It is not generally advisable to ask employees leading question such as 'are you stressed?' Rather, it is best to explore the existing risks to employees' health and then decide on the best approach for the work group concerned.

Approaches to exploring existing risks:

- Employees should be asked directly about their work problems and whether they feel that their health is adversely affected by their work
- Employees should be asked to describe the three 'best' and the three 'worst' aspects of their job, and to say whether they thought any of those aspects of work place them under too much pressure
- Employees could be asked a set of more detailed questions regarding work stress. Questions that are tailor-made to specific working contexts are likely to be more useful in designing further actions than any 'off-the-shelf package
- Sickness, absence, staff turnover, performance levels, accidents and mistakes should be regularly monitored and checked for excesses, changes and patterns
- All these sources of information can alert responsible persons to potential problems where there is an identified imbalance of pressures and resources. They can alert responsible persons to 'at risk' work and work groups where an imbalance is associated with signs of stress.

The person who is expert in the job is usually the person doing it. Very often superiors may have quite different views from employees about what causes problems. Always ask employees for their views.

Source available from

http://www.who.int/occupational_health/publications/stress/en/index.html

Compiled by Dr. Madhava Gunasekera of the Epidemiology Unit

Table 1: Vaccine-preventable Diseases & AFP

21st – 27th January 2012 (04th Week)

Disease	No. of Cases by Province									Number of cases during current week in 2012	Number of cases during same week in 2011	Total number of cases to date in 2012	Total number of cases to date in 2011	Difference between the number of cases to date in 2012 & 2011
	W	C	S	N	E	NW	NC	U	Sab					
Acute Flaccid Paralysis	00	01	00	00	01	00	00	00	00	02	00	08	01	+ 700.0 %
Diphtheria	00	00	00	00	00	00	00	00	00	-	-	-	-	-
Measles	00	00	00	00	00	00	00	00	01	01	01	01	03	- 66.7 %
Tetanus	00	00	01	00	00	00	00	00	00	01	00	01	02	- 50.0 %
Whooping Cough	01	00	01	00	00	00	00	00	00	02	01	05	03	+ 66.7 %
Tuberculosis	110	06	02	02	15	00	06	01	15	157	294	726	534	+ 69.7%

Table 2: Newly Introduced Notifiable Disease

21st – 27th January 2012 (04th Week)

Disease	No. of Cases by Province									Number of cases during current week in 2012	Number of cases during same week in 2011	Total number of cases to date in 2012	Total number of cases to date in 2011	Difference between the number of cases to date in 2012 & 2011
	W	C	S	N	E	NW	NC	U	Sab					
Chickenpox	08	04	14	01	09	05	02	02	12	57	65	205	224	- 08.5 %
Meningitis	03 CB=1 GM=1	00	01 GL=1	00	00	02 KR=1 PU=1	00	00	00	06	27	41	58	- 29.3 %
Mumps	15	04	01	01	14	08	06	01	07	57	36	240	117	+ 105.1 %
Leishmaniasis	00	01 ML=1	02 MT=2	00	00	04 KN=3 PU=1	20 AP=10 PO=10	00	00	27	03	44	25	+ 76.0 %

Key to Table 1 & 2

Provinces: W: Western, C: Central, S: Southern, N: North, E: East, NC: North Central, NW: North Western, U: Uva, Sab: Sabaragamuwa.
DPDHS Divisions: CB: Colombo, GM: Gampaha, KL: Kalutara, KD: Kandy, ML: Matale, NE: Nuwara Eliya, GL: Galle, HB: Hambantota, MT: Matara, JF: Jaffna, KN: Killinochchi, MN: Mannar, VA: Vavuniya, MU: Mullaitivu, BT: Batticaloa, AM: Ampara, TR: Trincomalee, KM: Kalmunai, KR: Kurunegala, PU: Puttalam, AP: Anuradhapura, PO: Polonnaruwa, BD: Badulla, MO: Moneragala, RP: Ratnapura, KG: Kegalle.

Data Sources:

Weekly Return of Communicable Diseases: Diphtheria, Measles, Tetanus, Whooping Cough, Chickenpox, Meningitis, Mumps.

Special Surveillance: Acute Flaccid Paralysis.

Leishmaniasis is notifiable only after the General Circular No: 02/102/2008 issued on 23 September 2008. .

Dengue Prevention and Control Health Messages

Check the roof gutters regularly for water collection where dengue mosquitoes could breed.

Table 4: Selected notifiable diseases reported by Medical Officers of Health
21st-27th January 2012 (04th Week)

DPDHS Division	Dengue Fever / DHF*		Dysentery		Encephalitis		Enteric Fever		Food Poisoning		Leptospirosis		Typhus Fever		Viral Hepatitis		Human Rabies		Returns Received
	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	A	B	%
Colombo	232	730	2	8	0	0	6	19	3	3	1	5	0	0	2	2	0	0	77
Gampaha	124	560	3	10	0	0	1	4	0	0	1	9	0	1	6	21	0	0	67
Kalutara	33	130	1	10	0	0	0	5	0	0	1	9	0	0	1	4	0	0	85
Kandy	41	165	1	10	0	0	0	2	4	4	3	9	1	8	0	1	0	0	87
Matale	9	28	2	12	0	1	1	3	1	1	2	6	0	1	0	1	0	0	92
Nuwara	5	18	2	7	0	0	2	2	0	0	0	3	1	5	1	2	0	0	77
Galle	17	73	2	9	0	0	2	4	0	1	4	9	0	0	0	0	0	0	84
Hambantota	13	41	0	4	0	0	0	0	0	1	3	8	3	10	0	1	4	4	92
Matara	52	140	0	6	0	0	0	4	0	0	3	10	2	8	3	13	0	0	100
Jaffna	32	66	5	19	0	1	15	52	0	5	0	2	29	92	0	1	0	0	100
Kilinochchi	0	8	0	3	0	0	1	3	0	0	0	0	3	10	0	0	0	2	75
Mannar	5	32	0	3	0	1	2	4	0	0	1	3	1	3	0	0	0	0	80
Vavuniya	10	17	1	1	6	10	2	3	0	2	4	7	0	0	1	1	0	0	100
Mullaitivu	0	2	0	2	0	1	0	1	0	0	0	2	1	1	0	0	0	0	100
Batticaloa	62	159	1	10	0	0	0	4	0	1	0	2	0	0	2	2	0	0	71
Ampara	3	7	4	8	0	0	0	0	0	0	1	5	0	0	0	0	0	0	71
Trincomalee	7	22	3	16	1	1	1	3	0	0	2	3	0	0	0	0	0	0	75
Kurunegala	27	100	0	9	2	3	1	6	4	4	5	12	2	9	5	9	0	0	83
Puttalam	28	77	0	11	0	0	0	1	0	0	2	4	1	2	0	0	0	0	75
Anuradhapu	6	28	3	8	0	0	0	1	0	1	2	17	2	3	2	4	0	0	79
Polonnaruw	10	17	3	4	0	0	0	0	0	0	2	6	1	1	0	1	1	1	86
Badulla	6	28	1	5	1	1	2	5	0	0	0	0	2	3	3	5	0	0	88
Monaragala	5	14	0	5	0	1	1	4	0	0	0	10	1	2	0	2	0	1	91
Ratnapura	12	53	5	16	0	3	0	1	0	2	5	18	0	0	4	4	0	0	39
Kegalle	34	103	1	2	0	0	1	4	0	5	2	6	0	1	21	42	0	0	91
Kalmune	6	21	0	14	0	0	0	1	0	0	0	0	0	0	0	0	0	1	62
SRI LANKA	779	2639	40	212	10	23	38	136	12	30	44	165	50	160	51	116	05	09	81

Source: Weekly Returns of Communicable Diseases WRCD).

*Dengue Fever / DHF refers to Dengue Fever / Dengue Haemorrhagic Fever.

**Timely refers to returns received on or before 20th January, 2012 Total number of reporting units 329. Number of reporting units data provided for the current week: 266

A = Cases reported during the current week. B = Cumulative cases for the year.

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