Scand. j. work environ. & health 5 (1979): suppl. 2, 18—20

Need for job-related health counseling in small workplaces

by ANIKA VAARANEN, R.N.,[1], TERTTU KOLIVUORI, R.N.,[2] KITTA ROSSI, R.N.,[3] MATTI TOLONEN, M.D.,[2] and JUHANI HASSI, M.D.[2]

VAARANEN, A., KOLIVUORI, T., ROSSI, K., TOLONEN, M. and HASSI, J. Need for job-related health counseling in small workplaces. *Scand. j. work environ. & health* 5 (1979): suppl. 2, 18—20. Health counseling aimed at maintaining health and safety on the job is required in most small workplaces. From a labor protection point of view, the most important advice deals with environmental hazards such as protection against physical and chemical factors, ergonomic problems, and safety risks. Information provided by the employers was considered insufficient in three-fourths of the 163 firms surveyed in this study. The staff providing local occupational health services could perform two broad types of counseling. First, they could educate management as to its responsibilities for the health and safety of employees; health personnel can instruct management during their workplace visits. Second, during health examinations and other personal contacts, the worker can be advised about ways to improve or maintain his health. Moreover, such occasions also provide an opportunity for more extensive health counseling about personal, social, emotional, and other problems although, in municipal health centers, these subjects belong within the scope of public health rather than occupational health.

Key words: health counseling, occupational health nursing, small enterprises.

This study was primarily concerned with health counseling related to on-the-job hazards to health and safety. Such counseling includes oral personal instructions, safety guidance, warnings, and signs in the place of work.

The Labor Safety Act stipulates the following to be the responsibility of the employer: The employer must provide such information and instructions as are necessary to insure, in so far as is reasonably practicable, the safety and health of the employees at work. Warnings and safety notices should be displayed whenever needed. The workers are then responsible for following the given instructions.

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0355-3140/79/060018-3

THE WALK-THROUGH SURVEY

The occupational health nurses visited the 163 firms surveyed in this study (1) and determined the given and needed health counseling by means of questionnaires,

Table 1. Items evaluated in the health counseling survey.

Item	Score
Availability of safety notices	0—5
Provision of instruction concerning job-related personal hygiene	0—5
Provision of instruction in the use of safety equipment	0—5
Provision of information about known safety hazards	0—5
Provision of information about work posture, lifting, and other ergonomic factors	0—5
Provision of information about used agents, air contaminants, and other factors hazardous to health	0—10
Existence of a person appointed to be responsible for health counseling at the workplace	0 or 5
Communication or general discussion among personnel about smoking, alcohol abuse, nutrition, diet or general physical fitness	0—5

Table 2. Interpretation of the total score given to a workplace with respect to its health counseling needs.

Total score	Health counseling
0—10	Satisfactory
11—27	Needed
28—50	Needed to prevent occupational disease or accidents

Table 3. Distribution of the rating given with respect to health counseling needs.

Score	Firms		
	N	%	% [a]
0—10	35	22	23
11—27	50	31	32
28—50	78	47	45
Total	163	100	100

[a] Percentage calculated from the observations made for the different branches of economic activity and taking into consideration the proportion of workplaces surveyed.

interviews, and observations. They evaluated the need for health counseling by rating the eight items listed in table 1. Table 2 presents the interpretation of the total score.

RESULTS

Appropriate health counseling (score 0—10) had been given in 22 % of the workplaces surveyed, whereas defects were noted in 31 % (score 11—27). In these firms counseling on personal protection and work posture was insufficient. Obvious faults (score 28—50) were detected in 38 % of the places of work. In this last group instructions for the use of harmful substances or with respect to hazardous factors or obvious safety risks were not given. Table 3 shows the distribution of the rating.

The greatest need was detected in industrial and service establishments, for example, in service stations (solvents, grinding and spray painting) and laundries (dry-cleaning chemicals).

The survey of health counseling in 163 workplaces took 62 h, i.e., an average of 24 min per workplace.

DISCUSSION

A need to instruct personnel about job-related risks was observed in most of the workplaces surveyed. The greatest need concerned counseling on protection from

chemicals (detergents, paints, solvents, etc.) and noise, instruction about good work posture, accident prevention, and, especially, personal hygiene guidance for persons handling food.

The vague knowledge about occupational hygiene, ergonomics, and risks to health and safety was regarded as the main reason for the observed defects. The employer's health counseling obligations, stipulated by law, were commonly unknown to them. Even in this context the temporary nature of production in small firms was often regarded as one reason for a poorly planned work environment and the consequent lack of health counseling.

Job-related health counseling is the responsibility of the employer, but professional help is often required before the existence of occupational health risks can be clarified within a workplace. Expert consultation is also needed to help develop measures for the prevention of diseases and to aid the planning of health and safety counseling.

The law on occupational health services assumes that health professionals will be used to provide sufficient information and instruction to employees about health hazards. Occupational health personnel in the health center could examine the work conditions in their survey, make suggestions for health counseling, and inform the employer about safety notices and the employer's obligations in general. The employer would also be advised to appoint a person to be responsible for instructing new and temporary employees.

Information pertinent to job-related health counseling could also be distributed through business associations, employers' federations, and the mass media.

In addition to job-related health counseling, general health counseling can be given by occupational health personnel in the context of health examinations and visits to work sites. Such counseling is not the responsibility of the employer, but it may be sensible to combine it with occupational health services.

Labor inspectors should pay more attention to the employer's counseling obligation and to the display of safety notices and instructions to safety personnel. Safety personnel must be aware of risk factors, protective measures, and proper work habits in order to foster safety and health in a place of work.

The areas of health counseling apparent in this survey presuppose a command of the methods needed (pedagogy, psychology) and knowledge about occupational medicine, hygiene, and ergonomics. These subjects should be taken into account in postgraduate training of occupational health personnel. Even then, expertise from the Institute of Occupational Health may still be needed.

Successful health counseling is a long-term activity because the development of the necessary motivation and attitudes and the needed education require a long period of time. One-time counseling will not generally change attitudes.

The Social Insurance Institute compensates employers for part of the expenses incurred from health counseling activities.

REFERENCES

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