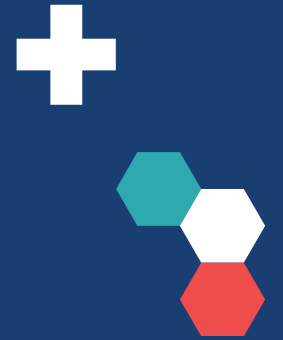


A mixed methods evaluation of cross-regional workplace health and wellbeing initiatives



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PICE advisors: PICE Group led by Niyah Campbell



World Health Organization

Health

Countries ▾

Newsroom ▾

Emergencies

Topics

Mental health at work

28 September 2022

Key facts

- Decent work is good for mental health.
- Poor working environments – including discrimination and inequality, excessive workloads, low job control and job insecurity – pose a risk to mental health.
- 15% of working-age adults were estimated to have a mental disorder in 2019.
- Globally, an estimated 12 billion working days are lost every year to depression and anxiety at a cost of US\$ 1 trillion per year in lost productivity.

The New York Times

TheUpshot

THE NEW HEALTH CARE

Workplace Wellness Programs Don't Work Well. Why Some Studies Show Otherwise.

Randomized controlled trials, despite their flaws, remain a powerful tool.

Although the Jones et al study was titled "What Do Workplace Wellness Programs Do?" a more appropriate title might have been "What Did the University of Illinois Workplace Wellness Program Do, in a Very Short Amount of Time?" – Goetzel (2020)

NIHR

National Institute for
Health and Care Research

Wider context & mechanisms

Employers

ARC Northwest
London
(Imperial)

Employees

ARC West Midlands
(Birmingham,
Warwick)

SCARU

Self Care Academic Research Unit

thrive
at work

Research questions

1. What are the mechanisms through which workplace health initiatives prevent context-relevant ill health and wellbeing outcomes? (ARC NENC)
2. How do workplace health initiatives help employers support their staff in identifying and addressing barriers and facilitators to adopting healthier behaviours, such as individual competencies and self-care behaviours? (ARC NWL)
3. What is the effectiveness of a mental contrasting intervention delivered through workplaces in motivating staff to change their health behaviour and wellbeing? (ARC WM)

Cross cutting themes

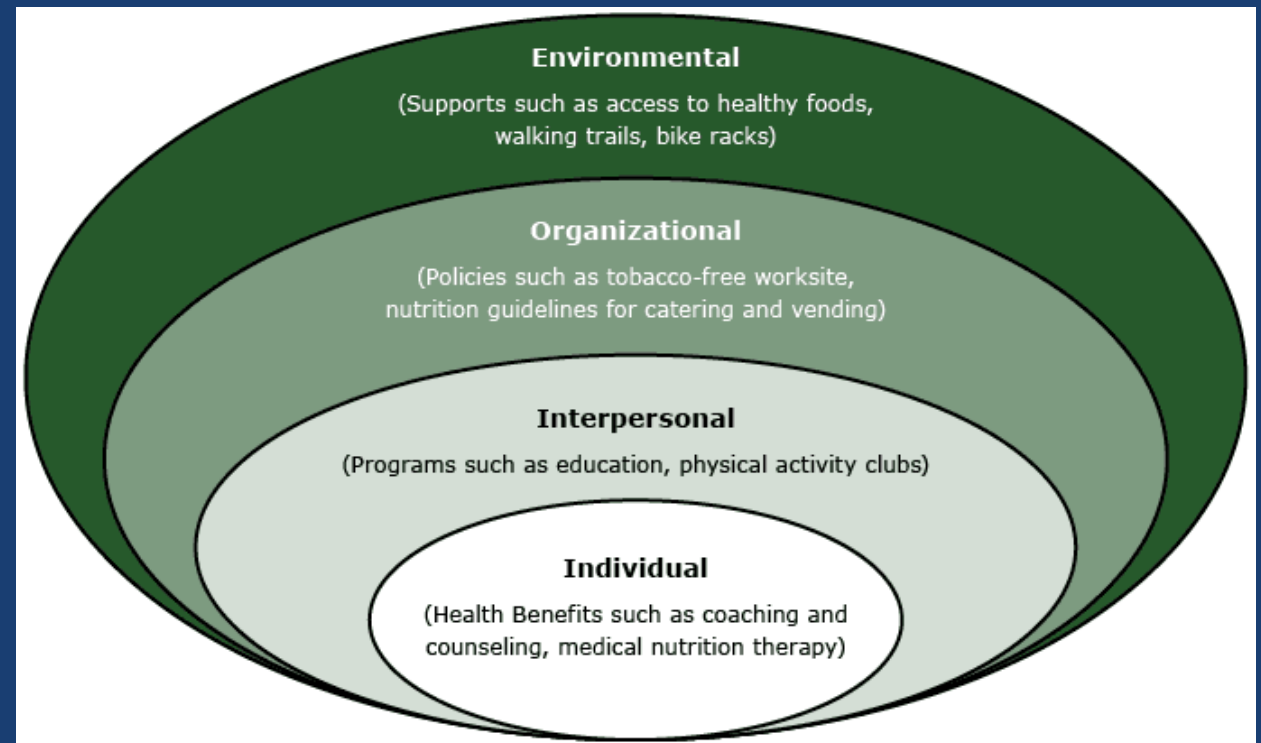
- Inequalities
- Implementation Science - Normalisation Process Theory

ARC NENC

Wider context and mechanisms



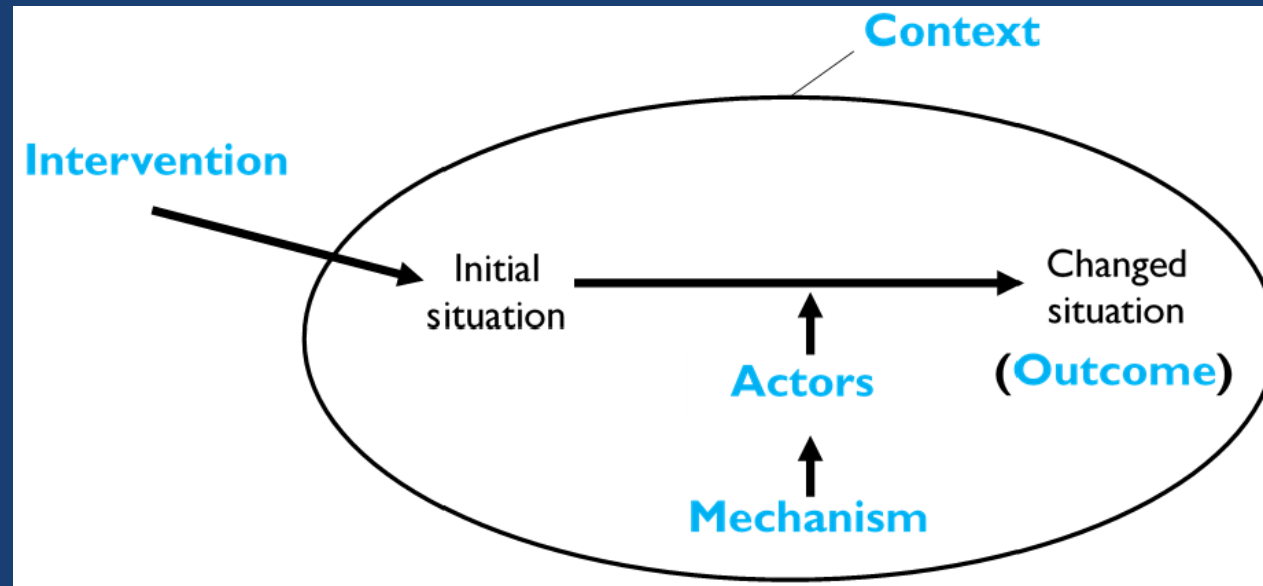
Regional workplace health initiatives



Meador et al. *Prev Chronic Dis* 2016;13:160164. DOI: <http://dx.doi.org/10.5888/pcd13.160164>external icon

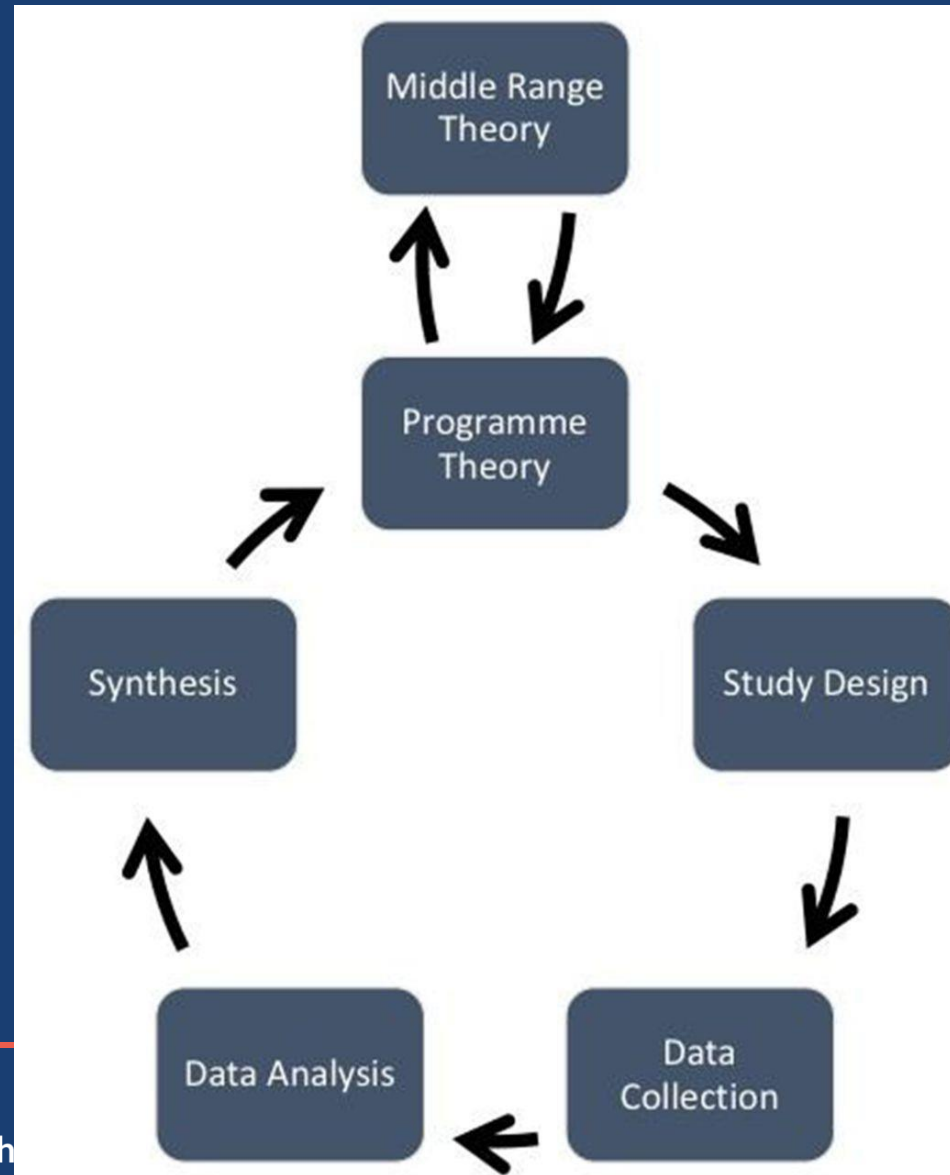
Research aims

What works for whom, and in what context?



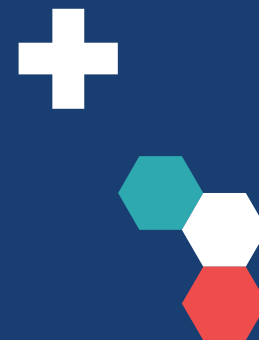
Context (C) + Mechanism (M) = Outcome (O)

Research methodology: realist-informed evaluation



ARC NWL

Employers & Organisational culture



Characterising barriers & enablers for the routine adoption of health- seeking self-care behaviours in the workplace (COMPTENCE) Study



Research aims & approach

This research complements WP1 & WP3 of the PREVENT programme

Aims

1. Characterise “best buy” recommendation for workplace health promotion
2. Investigate personal & structural barriers & enablers for the routine adoption of health-seeking self-care behaviours in the workplace

Approach

- Rapid review of extant WHP charters & initiatives in the UK
- eSurvey & interview based study from representative cross-section of UK working population

Interim findings & next steps

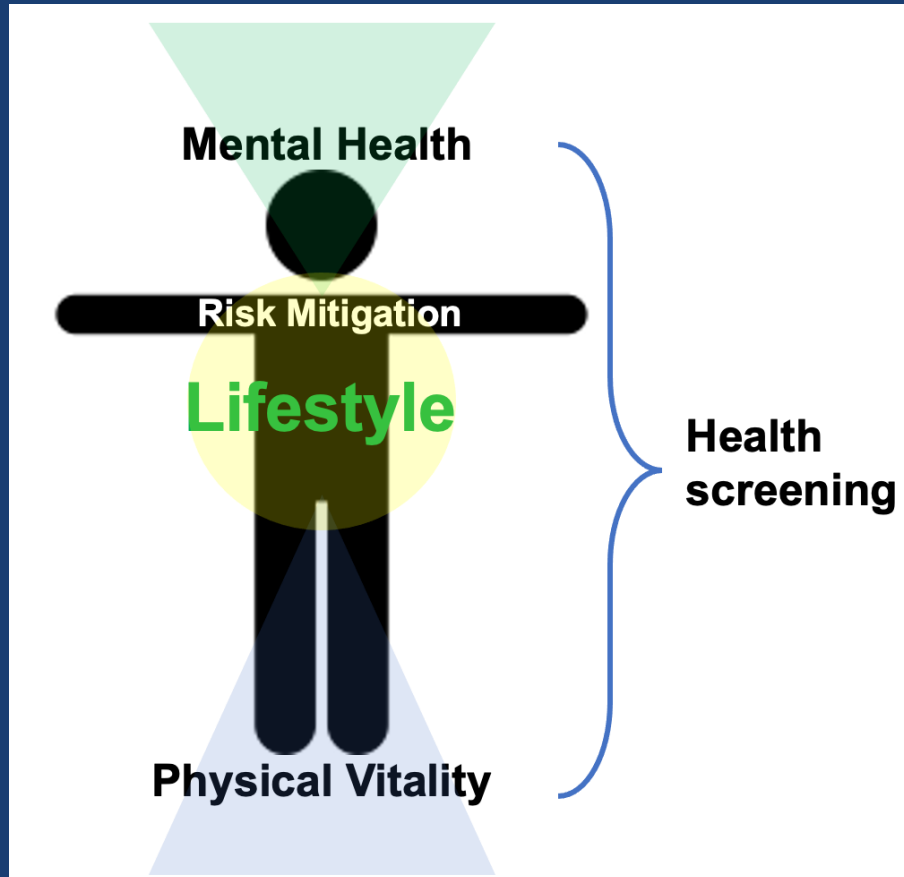
WHP “best buys”

- Identified 25 charters, initiatives & WHP programmes in UK
- Only 10 were included in the final analysis
- Clarified 54 unique recommendations to promote health & wellbeing in the workplace across 5 categories:
 1. Mental health (n=12)
 2. MSK & physical activity (n=13)
 3. Lifestyle / healthy eating (n=7)
 4. Health screening (n=12)
 5. Risk mitigation (n=10)

eSurvey & interview based (COMPETENCE) study

- Favourable opinion form Imperial REC
- Engagement with NIHR to ensure the study is adopted on CRN portfolio
- PPIE including + outreach using Imperial VOICE network to engage with wider community
- Questions related to NPT & inequalities embedded in eSurvey & interview guide
- Aiming to recruit 500 participants (eSurvey) +20 for interview

Synthesis



Triangulate with:

- WHO Best Buys (NCDs)
- 7 Pillars of self-care framework
- Self-Care Matrix

NIHR

National Institute for
Health and Care Research

ARC WM

Employees



Key progress

- WOOP (<https://woopmylife.org/>) intervention effective in systematic reviews – but our review identified no workplace trials outside healthcare
- Protocol for workplace cluster trial registered on Open Science Foundation and now ‘revise and resubmit’ at *PLOS ONE*
- Co-created mode of delivery for WOOP sessions: group sessions in digital/in person format, adapted for UK context and Thrive at Work

Key progress

We are enrolling workplaces and running the WOOP intervention data collection sessions – 4 completed, 8 booked, 20 further interested

Fieldwork observations – employees are tired and going slow is hard
setting a health or wellbeing goal is not usual to many

