Improving well-being at work: How can we make our interventions work?

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Overview

What's the problem?

What's the question?

How do we answer the question?

What's the answer?

Where do we go from here?

What's the problem?

Nearly half of all workers in Western Europe can be considered distributed workers - 129.5 million workers (ICD, 2010)

Distributed working (Dix & Beale, 1996) characterised by:

– less frequent contact with colleagues and managers,

– less frequent contact to sources of organisational information,

– more than one place of work

Distributed workers include:

Police, Community Nurses, Social Workers, Local Authorities (housing, street, public spaces maintenance, inspection and regulation), Utilities, Energy and Telecoms workers, Transportation workers, Service workers, Home workers

What's the question?

Can we apply, adapt or develop suitable leadership frameworks to support occupational safety and health (OSH) for these workers?

- Distributed workers?

- Leadership frameworks for performance?

How do we answer the question? Methods

Two-step approach:

Semi-structured interviews

　42 OSH professionals: Line managers' desired leadership behaviours?

Cross-sectional survey

　19 companies, 822 employees linked to 112 leaders

How do we answer the question? Analyses

Interviews:

- Template analysis: Major leadership frameworks (Avolio et al., 2009; Gurt et al., 2011)

Survey:

- Multi-level factor analysis

- Multiple regression analyses – linking to health and safety outcomes. Leadership at team or individual level?

What's the answer? Interviews

Transformational leadership
'It is making the message more about the why rather than the compliance. If people understand why they are doing it they often will do it, if they don't understand why they are doing it they are very resistant to change.' (Janine, OSH practitioner, goods transportation)

Health specific leadership
'I would want all of my line managers to encourage and promote that their staff adopt and maintain a healthy lifestyle, that they are aware of the individual and their wellbeing. As I say we have return to work conversations following any absences. It's checking in really and having those conversations that might flag up if there is something there that needs support with.' (Randall, OSH practitioner, advisory service)

Leader-member exchange (LMX) trust
'I think if the relationship is good then potentially those flags are easily identifiable and you would hope that that good relationship would enable an open and honest conversation.' (Randall, OSH practitioner, advisory services)

Transactional leadership
'We like to make the awareness part as up front as possible and allow them to question issues and get their feedback. But essentially it's a chance for the company to establish with them what they expected to do and how they are expected to behave et cetera, when they are working away from the office environment.' (Ray, OSH practitioner, oil and gas)

Safety specific leadership
'Our managing director, we have something on at the minute called safety by action and it's challenging the managing director…. So he's having meetings with them (managers) and he'll always speak about safety to them and he'll want to know exactly what they're doing on safety. Not just talking about it, he wants to know what they're actually doing, going out and seeing what actions they've taken as well. (Tom, OSH practitioner, engineering and construction).

Tailored items - relational
'There is also the fact that the manager should be getting to know their team from a purely humanistic point of view, they get to know the character as well and not just the person.' (Tom, OSH practitioner, engineering and construction).

How do we answer the question? Survey content

Transformational leadership
7 items, Carless et al. (2000). α = .91

Transactional leadership
5 items, Podsakoff et al. (1990), α = .95

Health specific leadership
7 items, Gurt et al. (2011). α = .84, reduced scale: α = .95

Safety specific leadership
7 items, Gurt et al. (2011). α = .90

LMX trust
2 items, Graen and Uhl-bien (1995). Int.correlation = .75

Tailored items - relational
11 items, α = .91

Outcomes

Self-rated health
Single item

Safety compliance
3 items, Neal & Griffin (2006), α = .91

Job satisfaction
3 items, Cammann et al. (1979), α = .76

Safety outcomes
5 items, Huang et al. (2013), α = .63

What's the answer?
Factor analysis

Transformational leadership
7 items, Carless et al (2000). CFI = .98, RMSEA = .06

Transactional leadership
5 items, Podsakoff et al. (1990), CFI = .98, RMSEA = .07

Health specific leadership
7 items, CFI = .91, RMSEA = .14,
5 items: CFI = 1.00, RMSEA = .03

Safety specific leadership
7 items, Gurt et al. (2011). CFI = .97, RMSEA = .07

LMX trust
2 items, Graen and Uhl-bien (1995). N/A

Tailored items - relational
11 items: CFI = .89, RMSEA = .11

All scales highly correlated: r = .66 to .92.

What's the answer? Outcomes

Outcomes	Transformational	Transactional	Health leader	Safety leader	LMX
Self-rated health	-.11/.25*	-.10/.24**	-.02/.18*	-.11/.22**	-.12/.23**
Job satisfaction	-.05/.32**	.07/.25**	.07/.30**	.02/.31**	.03/.27**
Safety compliance	.08/.17**	.09/.13**	.02/.22**	.06/.23**	.04/.17**
Safety outcomes	.00/.00	.01/-.01	.00/-.01	.00/-.01	.01/-.01

Note: * < .05, ** < .01. 1st figure = Team level, 2nd figure = individual level

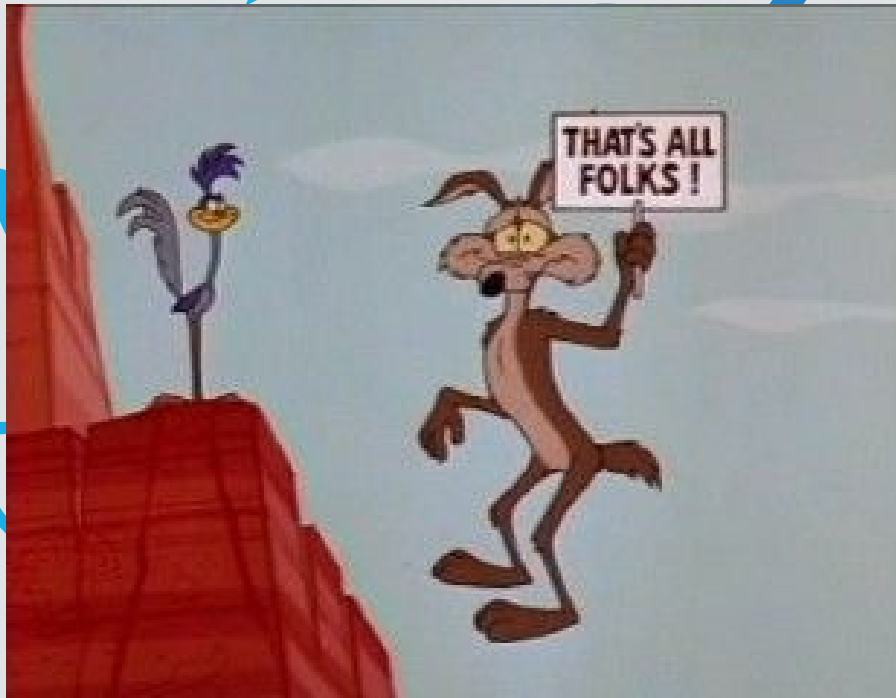# Where do we go from here?

Established leadership frameworks work!

Validity in distributed worker samples

Related to self-rated health, job satisfaction and safety compliance, but not outcomes

Work at the individual level, not team level

Unrelated to safety outcomes

  - Possible moderators: Type of job, systems in place, safety equipment

Thank you for your attention!

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