

## Introduction

Psychological hazards in the human services sector are not well understood. Many healthy workplace programs have been implemented in the sector but little is known about their effectiveness.

The Healthy Workplaces for Helping Professions (HWHP) aims to increase the health and capacity of non-profit agencies in the human services sector in Alberta through multi-level interventions:

- Staff level: Be a Wellness Leader workshops, SMART Mentoring, Re-designed staff meetings
- Leadership level: Wellness Pathway Program
- Participating agencies: Central Alberta Women's Shelters (CAWES), Heritage Family Services (Heritage), and Ronald McDonald House (RMH).

## Methods

### Design

The surveys were conducted at two levels:

- Agency level (Study 1): to directly measure effectiveness of our program at three partner agencies.
- Provincial level (Study 2): to examine staff wellness in the human services sector in the year 2015 and 2017; to determine if there are any changes in the health outcomes; and if any of those changes can be attributed to wellness programs in the workplace.

Both studies were conducted before and after the interventions. In the post-surveys, participants were asked to report on their awareness or their involvement in the interventions. This helps measure actual exposure to the interventions and allows a valid evaluation of intervention effectiveness.

### Participants

Number of responses	Study 1 (Agency level)			Study 2 (Provincial level)
	CAWES	Heritages	RMH	
Pre-survey responses	35	25	22	593
Post-survey responses	12	36	21	253

### Measures

Data were gathered by self-report, measuring:

- Three health outcomes: overall workplace health, job satisfaction, and unhealthy stress on the job.
- Contributing factors to health outcomes
- Experience of common stressors
- Demographics

## Results: Agency level (Study 1)

- Employees involved in our interventions (intervened group) experienced a significant improvement in workplace health. They were also more satisfied with their jobs and less stressed, compared to the ones who were not involved in the program.
- Results from each participating agency also show improvements in three health outcomes.

Table 1: Changes in employees' health outcomes at three partner agencies (% by group)

Health outcomes	Pre-intervention	Post-intervention	
	N=82	Intervened group N=39	Non-intervened group N=41
% Healthy (extremely or highly healthy)*	50.0%	74.4%	48.8%
% High satisfaction (extremely or highly satisfied)	57.3%	69.2%	62.2%
% Low stress (little or no unhealthy stress)	39.0%	41.0%	39.0%

\* The differences are statistically significant at the .05 level

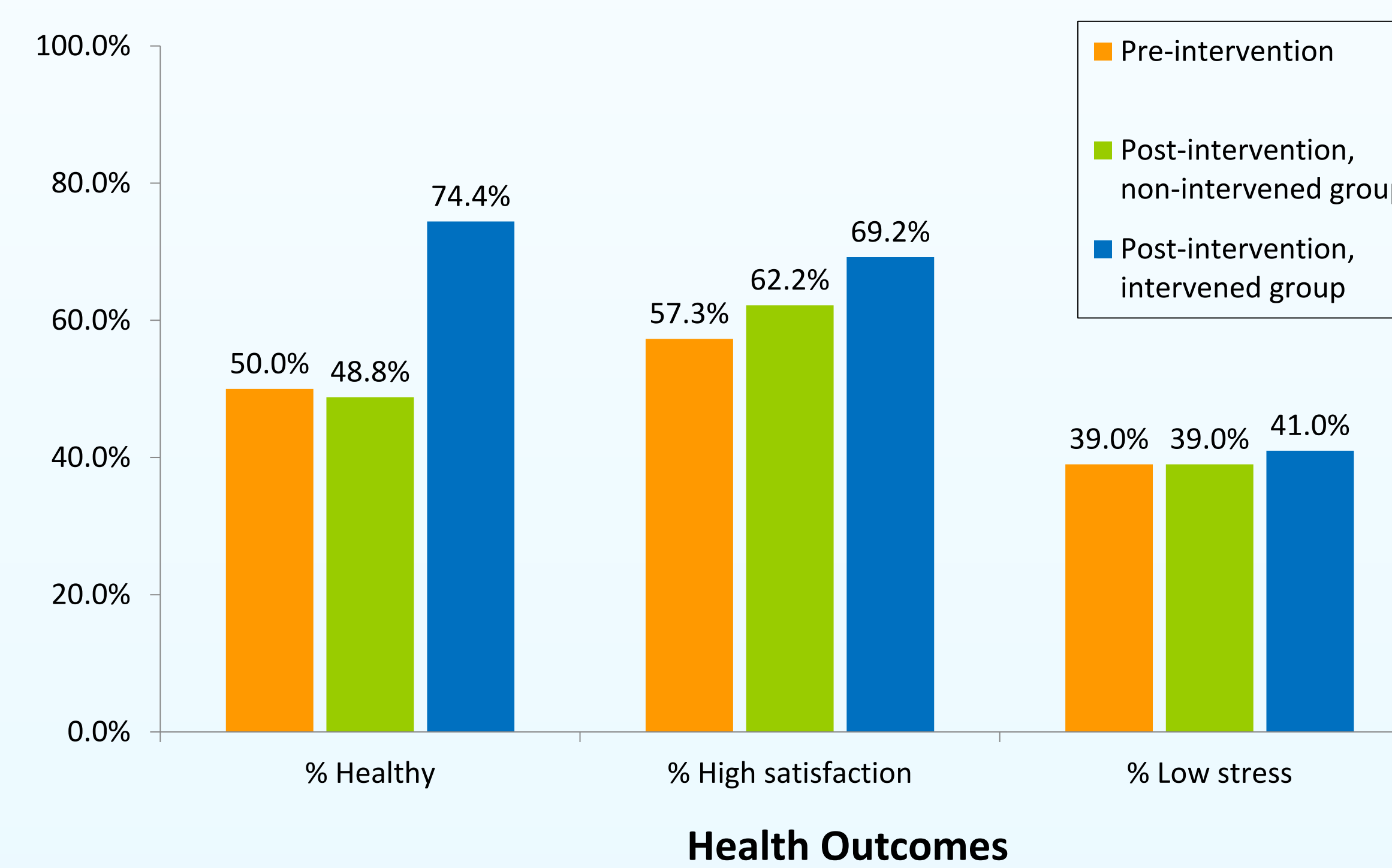


Figure 1: Changes in health outcomes at three partner agencies before and after the interventions

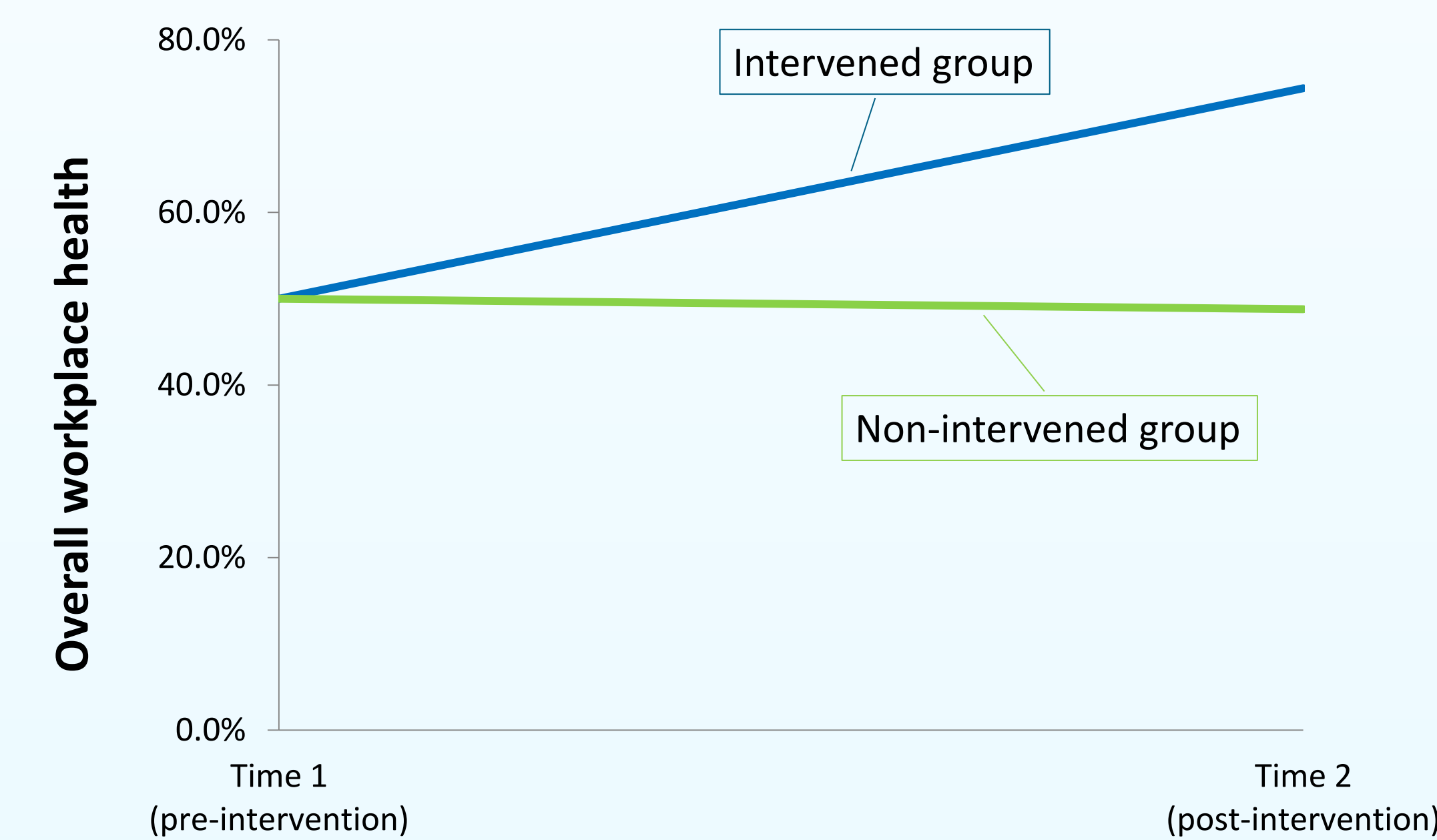


Figure 2: Changes in employees' overall workplace health at three partner agencies over time

## Results: Provincial level (Study 2)

Table 2: Health outcomes of human service employees in Alberta, 2015 and 2017

Health outcomes	Pre-intervention N=593	Post-intervention N=253
	2015	2017
% Healthy (extremely or highly healthy)*	64.6%	52.2%
% High satisfaction (extremely or highly satisfied)	73.5%	67.6%
% Low stress (little or no unhealthy stress)	38.6%	33.6%

\* The differences are statistically significant at the .05 level

- In general, two thirds of surveyed employees said that they typically feel unhealthy stress during their workday, even though satisfied with their job.
- There was a worsening of overall well-being of human service workers over the period 2015-2017. Respondents (all) in the post-survey scored significantly lower on workplace health, and lower on job satisfaction, and workplace stress.

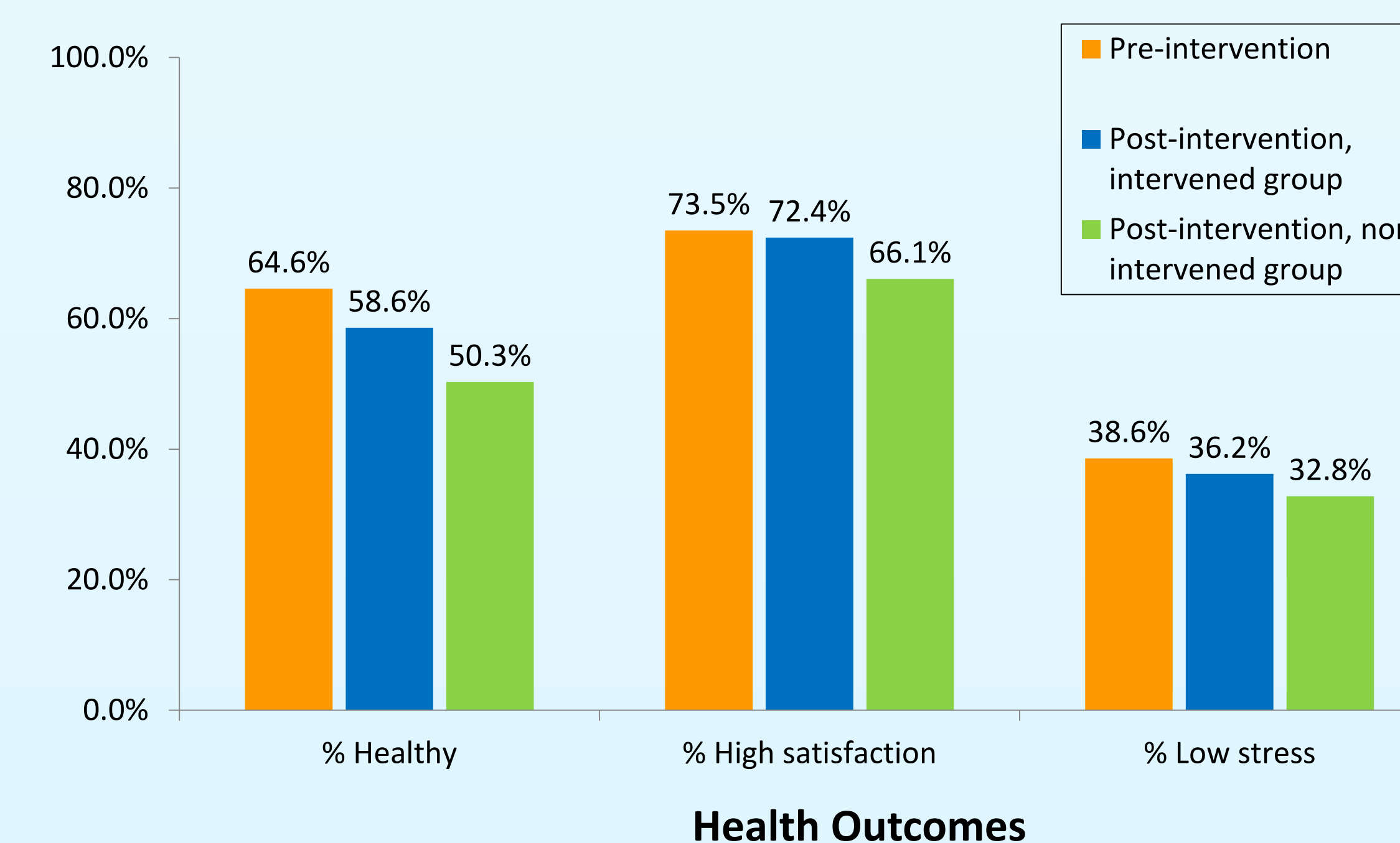


Figure 3: Health outcomes of human service employees in Alberta, 2015 and 2017, intervened and non-intervened group

- Employees who participated in wellness programs in their workplace reported more positive health outcomes than the ones who did not. Their health outcomes remained relatively stable over the course of two years.

## Organizational factors that significantly contribute to workplace health:

- Opportunities and support for self-care
- Open communication about workplace health issues
- Reflective and relevant job supervision
- Job control
- Flexible work arrangements

## Individual factors that significantly contribute to workplace health:

- Communicating ideas, including wellness ideas
- Physical and mental exercise
- Seeking support from co-workers and supervisors
- Seeking social support
- Regularly updating knowledge, including knowledge on stress and hazards

## Conclusion

- Overall well-being of employees in the human services sector decreases over the study period: job satisfaction is considerably lower, workplace constraints are higher, and perceived health is significantly lower than reported in the first-year survey.
- Alberta's agencies and employees have been involved in various workplace health and wellness programs. These programs are indeed successfully overcoming challenges and maintaining their health.
- Our Wellness Pathway Program and Be a Wellness Leader Program show improvements in health outcomes in all three participating agencies, suggesting that they contain necessary ingredients for success.
- Workplace wellness solutions should focus on providing more support for self-care, increased communication about health issues, more reflective supervision, a workplace culture that recognizes and supports employees' wellness efforts, better communication about the job and job expectations, and more recognition and appreciation of hard work.

## Acknowledgement

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## Thank you to our partners

