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Policy Brief on Age Management: Ergonomic aspects and health interventions for older workers

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Policy Document 5

Age Management 2

Ergonomic aspects and health interventions for older workers



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1 Description of the Problem

Globally, the population is ageing, which has serious consequences for businesses. The prosperity of companies is crucially dependent on the ability to effectively manage their employees, including older workers. Best practice in age management is defined as those measures that combat age barriers and/or promote age diversity. These measures may entail specific initiatives aimed at particular dimensions of age management; they may also include more general employment or human resources policies that help to create an environment in which individual employees can achieve their potential without being disadvantaged by their age (Walker, 1999).

Promoting early retirement is generally not encouraged. Companies now have to encourage longer working lives. Much needs to be done to ensure that work remains a positive experience for workers throughout their career trajectories, and it does not damage their health. It has been found by studies that health is significantly related to retirement timing (both planned and unplanned) (Goyer, 2013, Adams et al., 2014), influences work performance (Merrill et al., 2012; Ilmarinen, 2009), and health-related organisational policies can positively influence employee retention (Towers, 2005). The major contemporary challenges to health at work are those associated with the way work, and work organisations are designed and managed. This is especially true for older workers. A comprehensive and effective approach towards age management can be very beneficial for them. How should companies implement age management? Some possible ways are set out in this policy brief below, which focuses on best practices in age management regarding ergonomic aspects and health interventions for older workers at an organisational level. The intention is to discuss the current situation and to illustrate some organisational techniques in selected countries. This policy brief can serve as an inspiration for, among others, companies and policymakers. Recommendations for successful practice are included. In total, this policy brief covers 8 COST¹ member countries (the Czech Republic, Finland, Germany, the Netherlands, Slovenia, Spain, Sweden and the United Kingdom) to give a glimpse of the current situation of best practice in age management and show how companies in various states deal with ergonomic aspects, health interventions and the ageing of their labour force.

The widespread adoption of good practice in age management will help organisations to:

- Adjust to the inevitable ageing of their workforces; enhance the competitiveness and productivity of their ageing workforces.
- Improve the employability of ageing women and men.
- Assist in prolonging working life; and ensure more equal opportunities for workers of different ages (Naegelé and Walker, 2006).

‘Much needs to be done to ensure that work remains a positive experience for workers throughout their career trajectories.’

¹ ISCH COST Action IS1409 - Gender and health impacts of policies extending working life in western countries. The goal of this Action is to advance scientific knowledge about the gendered impacts of extended working life on the health and economic well-being of older workers in Europe and to support informed gender-sensitive future policy, explicitly considering the differential needs of women and men.

2 Current situation

A healthy and productive workforce is critical for economic success and societal development. Health promotion in the workplace is defined as preventing, minimizing and eliminating health hazards, and maintaining and promoting work ability. Worker health and wellness is maintaining a balance of the physical, mental and social ingredients, as well as health habits associated with good physical condition, energy, and vitality (Naumanem, 2006).

The literature on health problems suggests that loss of employment in a factory brings many negative impacts such as high blood pressure, increased depression, anxiety (Cobb and Kasl, 1977, Ostry and Spiegel, 2004), and deteriorated mental health with increased stress (Hamilton et al., 1990). Even a stable job with reasonable pay may affect the population's health through the nature of employment and the quality of the working environment. Poor working conditions may put workers at risk of accident, respiratory disorders, exposure to toxins and infections (Loewenson, 2001). Ergonomics is the science of fitting the task to the worker. It offers the potential of compensating for the decrease in an individual's functional capacities that may occur with age through appropriate job design. Without proper ergonomic job design, older workers could easily find themselves at a disadvantage due to compromised productivity and health (Garg, 2007).

Continuity theory, according to which individuals attempt to preserve stability over their lifetimes (von Bonsdorff et al., 2009), accounts for the role of health status in decisions about late employment, retirement timing and withdrawal from the labour market. Deteriorating health status may be the reason for a withdrawal from the labour market. In other words, bad health status may prevent an individual from continuing to carry out a job.

3 Promising practices

Older workers' experience in a company is valuable; it can not be acquired quickly, and theoretical knowledge alone is not sufficient. Organisations should be ready to accommodate the needs of their ageing employees, by switching work to less physically and psychologically demanding jobs and considering ergonomic needs. Examples of promising practice that address ergonomic aspects and health interventions for older workers on an organisational level are the following:

- **Ergonomic aspects:** In this regard, companies such as Rowenta Werke (Germany) have an advantage in that it designs and builds its own production facilities and can, therefore, take into account ergonomic aspects in the planning phase. Furthermore, new workstations can be simulated, tried out and rated beforehand by the employees at test workstations. The occupational safety specialist and the company medical officer have the right to reject specific ergonomic aspects throughout the planning and construction phases (Eurofound, 2006b).
- **Ergonomic design:** The company Revoz d.d. (Slovenia) manufactures cars and it is a member of the Renault International Group. Its health and safety policies include the ergonomic design of the workplace. Even though this is not a direct policy addressing age, it helps ageing employees on a daily basis. Employees are also encouraged to make suggestions on ergonomics. Along with the ergonomics of the workplace, better education and training is implemented and occupational mobility provided (Eurofound, 2005; Žnidaršič and Dimovski, 2009).

- **Ergonomic services:** Rapid Granulator AB (Sweden) has introduced keep-fit programmes and has links with a local occupational health group. It also offers ergonomic services, where a physiotherapist inspects each workstation and makes recommendations for design improvements. Such initiatives aim to make employees feel well taken care of and to give them more control in the workplace. The success of such measures is evident in the company's relatively low rate of sickness absence (3.9%) and its higher levels of productivity, as employees become more motivated and committed to their work (Eurofound, 2009b).
- **Annual health check:** The company Pikolin (Spain) has its own medical team, consisting of two doctors specialising in occupational medicine assisted by two medical technicians, and its own risk prevention office. An annual health check is obligatory for the entire workforce. Employees in positions with a higher risk factor, such as those working directly with chemical products or on loading bays, are monitored more frequently. Based on this assessment, the company attempts to improve ergonomics by adjusting the workplace to the physical condition of employees and also encourages the redeployment of workers to new jobs, in order to eliminate particular work risks to the employee's health (Eurofound, 2006a).
- **Workplace:** A project introduced by the company Lohmann and Rauscher (Czech Republic) involves better healthcare possibilities for employees and places emphasis on creating a high quality, healthy and stress minimising workplace. In this regard, the company is exploring various ways of decreasing the incidence of illnesses and periods of sick leave. Employees are required to undergo a medical examination on taking up (possibly also on exiting) a job in order to identify any emerging illnesses connected with work which might have a permanent impact. Apart from the list of jobs, the consultancy also categorised workplaces in which various indicators are monitored – such as the quality of lighting, levels of dust or noise. The study proposed necessary measures to improve working conditions. Moreover, as a result of the contract with the consultancy company, medical professionals check every six months whether the measures have been adhered to (Eurofound, 2007).
- **Job design:** Hazenberg Bouw BV (the Netherlands) developed a job design addressed to match the physical capabilities of older workers: for example, older workers were assigned tasks such as foreman responsibilities, tutoring of younger workers, and slower-paced tasks. The foreman and tutoring jobs were less physically demanding, and they also facilitated the transfer of work experience (Eurofound, 2009a).
- **Physical work environment:** Work in the oil and gas industry is physically demanding making it challenging to retain older workers. The Oil company (United Kingdom) offers workplace health assessments that aim to resolve common problems such as back pain. A doctor is also available on site to review employees' existing health problems and to intervene when serious health problems arise. As a preventive measure, the company offers annual medical examinations for employees aged 50 years and over (Naeyegele and Walker, 2006).
- **Psychological environment:** In the company Berner Oy (Finland) within the senior programme, a career plan is drawn with workers aged 55, together with their respective supervisor. The career plan contains an assessment of to what extent their duties, working hours and working conditions need to change. The programme aims to enable employees to last longer at work while taking on productive and stimulating work. Age management at Berner applies to people of all ages. With the aid of leadership, Berner promotes greater cooperation and interaction between people of different ages. One tool of age management is senior management, whose purpose is to allow supervisors to take a favourable view of people ageing, ensure that tacit knowledge is passed on, and show respect for the experience, skills, competence, and commitment of older people (Barslund et al., 2015).

4 Policy recommendations

The question of population ageing is a very complex issue dependent on many factors (health, gender, business sector, etc.), and for which there is no clear single key to success. The solution lies at different levels of society (e.g., the public and private sector or institutional and individual level). It is, therefore, appropriate to look for and discover new schemes that can contribute to the analysis and solution finding. In this brief, we have put together different approaches, the so-called good practices, which have been applied in selected European countries. We aimed to show successful practices that have been applied in different conditions and which reveal different applied methods of solving the issue of age management regarding ergonomic aspects and health interventions for older workers on an organisational level. We find them inspirational in dealing with specific situations, whether for a company, local government or policymakers. Integrating these identified practices or adapting them to reflect the specific environment of individual companies would lead to:

- Adapting the organisation of work to the health and age of workers;
- Integrating ergonomic changes to improve work posture;
- Enhancing workers' individual interest in maintaining their physical capacity;
- Improvement in both the physical and mental work capacity of workers of all ages;
- Reducing leave due to sickness and improving work satisfaction of older employees;
- Increasing investment in ergonomic resources at all sites;
- Integrating productivity criteria by ergonomists and HR managers, together with safety requirements;
- Improving the continuity and quality of social dialogue, mainly through the committees on health and safety at work.

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References

- Adams, P. F., Kirzinger, W. R. and Martinez, M. E. 2014. QuickStats: Percentage of adults aged 18–69 years with a limitation in their ability to work because of health problems, by age group — National Health Interview Survey, United States, 2012. *Morbidity and Mortality Weekly Report*, **63**, 23, 519. Available at: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6323a6.htm?s_cid=mm6323a6_e.
- Barslund, M., Bauknecht, J., Cebulla, A., Gasior, K., Kadarik, I., Khyrova, V., Krumina, M. et al. 2015. Extending Working Lives Best Practice Cases: Work Package 3 - Task 2. MoPAct project.
- Cobb, S. and Kasl, S. 1977. Termination: The consequences of job loss. Cincinnati, OH: Department of Health, Education and Welfare (NIOSH).
- Eurofound, 2005. Revoz, Slovenia: Ergonomics and job design. Luxembourg: Publications Office of the European Union, 2005. Available at: <https://www.eurofound.europa.eu/observatories/eurwork/case-studies/ageing-workforce/revoz-slovenia-ergonomics-and-job-design>.
- Eurofound, 2006a. Pikolin, Spain: Health and well-being. Luxembourg: Publications Office of the European Union, 2006. Available at: <https://www.eurofound.europa.eu/observatories/eurwork/case-studies/ageing-workforce/pikolin-spain-health-and-well-being>.
- Eurofound, 2006b. Rowenta Werke, Germany: Comprehensive approach. Luxembourg: Publications Office of the European Union, 2006. Available at: <https://www.eurofound.europa.eu/observatories/eurwork/case-studies/ageing-workforce/rowenta-werke-germany-comprehensive-approach>.
- Eurofound, 2007. Lohmann and Rauscher, Czech Republic: Health and well-being, ergonomics. Luxembourg: Publications Office of the European Union, 2007. Available at: <https://www.eurofound.europa.eu/observatories/eurwork/case-studies/ageing-workforce/lohmann-and-rauscher-czech-republic-health-and-well-being-ergonomics>.
- Eurofound, 2009a. Hazenberg Bouw BV, The Netherlands: Case study on a comprehensive approach. Luxembourg: Publications Office of the European Union, 2009. Available at: <https://www.eurofound.europa.eu/observatories/eurwork/case-studies/ageing-workforce/case-study-on-a-comprehensive-approach-hazenberg-bouw-bv-the-netherlands>.
- Eurofound, 2009b. Rapid Granulator AB, Sweden: Health and well-being, ergonomics. Luxembourg: Publications Office of the European Union, 2009. Available at: <https://www.eurofound.europa.eu/observatories/eurwork/case-studies/ageing-workforce/rapid-granulator-ab-sweden-health-and-well-being-ergonomics>.
- Garg, Arun. "Ergonomics and the older worker: An overview." *Experimental Aging Research* 17.3 (1991): 143-155.
- Goyer, A. 2013. *The MetLife Report on The Oldest Boomers: Healthy, Retiring Rapidly and Collecting Social Security*. New York: Mature Market Institute, 2013. Available at: http://www.seasonsofadultfaith.com/uploads/5/1/6/4/5164069/oldest_boomers__metlife_research_.pdf.
- Hamilton, V., Broman, C., Hoffman, W. and Renner, D. 1990. Hard times and vulnerable people: Initial effects of plant closing on autoworkers' mental health. *Journal of Health and Social Behavior*, **31**, 2, 123–40.
- Ilmarinen, J. 2009. Work ability—a comprehensive concept for occupational health research and prevention. *Scandinavian Journal of Work, Environment & Health*, **35**, 1, 1–5.
- Loewenson, R. 2001. Globalization and occupational health: A perspective from southern Africa. *Bulletin of the World Health Organization*, **79**, 9, 863–8.
- Merrill, R. M., Aldana, S. G., Pope, J. E., Anderson, D. R., Coberley, C. R. and Whitmer, R. W. 2012. Hero Research Study Subcommittee. Presenteeism according to healthy behaviors, physical health, and work environment. *Population Health Management*, **15**, 5, 293–301. doi:10.1089/pop.2012.0003.
- Naegele, G. and Walker, A. 2006. A guide to good practice in age management. Luxembourg: European Foundation for the Improvement of Living and Working Conditions. Office for Official Publications of the European Communities, 2006. ISBN 9289709340.
- Naumanen, P. 2006. Opinions of ageing workers on relative importance of health promotion. *Int J Nurs Pract*, **12**, 6, 352–358.
- Ostry, A.S. and Spiegel, J.M. 2004. Labor markets and employment insecurity: Impacts of globalization on service and healthcare-sector workforces. *International Journal of Occupational and Environmental Health*, **10**, 4, 368–74.
- Towers P. 2005. *The business case for workers age 50+: Planning for tomorrow's talent needs in today's competitive environment*. Washington, DC: AARP. Retrieved from http://assets.aarp.org/rgcenter/econ/workers_fifty_plus.pdf.
- Von Bonsdorff, M. E., Shultz, K. S., Leskinen, E. and Tansky, J. 2009. The choice between retirement and bridge employment: A continuity theory and life course perspective. *The International Journal of Aging and Human Development*, **69**, 79–100.
- Walker, A. 1999. Managing an ageing workforce: A guide to good practice. Dublin, European Foundation for the Improvement of Living and Working Conditions, 1999.
- Žnidaršič J, Dimovski V. Active ageing on the company level: the theory vs. the day-to-day practice in Slovenia. *Economic and Business Review*. 2009;11(2):137-58.

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