

# **Workplace Health Promotion: Engagement by OSH Professionals**

BOSH 2019

Kuching, Sarawak

# SCOPE

- ❖ Data on NCD
- ❖ Overview of Workplace Health Promotion
  - Definition
  - Impacts
  - Legislation
- ❖ Elements of Program Implementation
- ❖ Total Wellness & Health Promotion, NIOSH

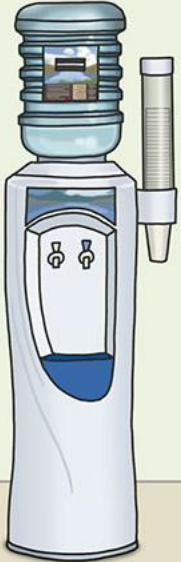
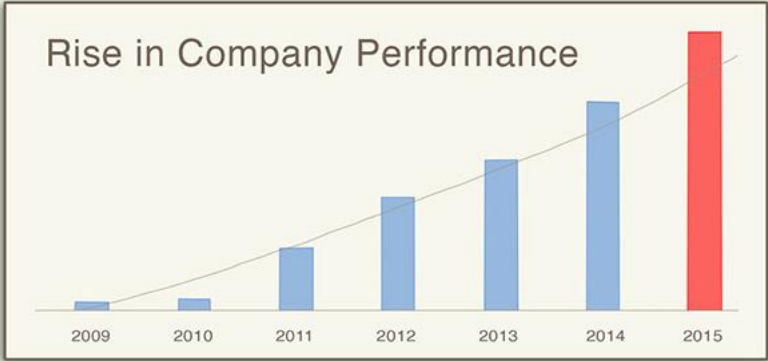


***“The wealth of business  
depends on  
the health of workers.”***

- Dr Maria Neira, WHO

**Workplace Health Promotion**





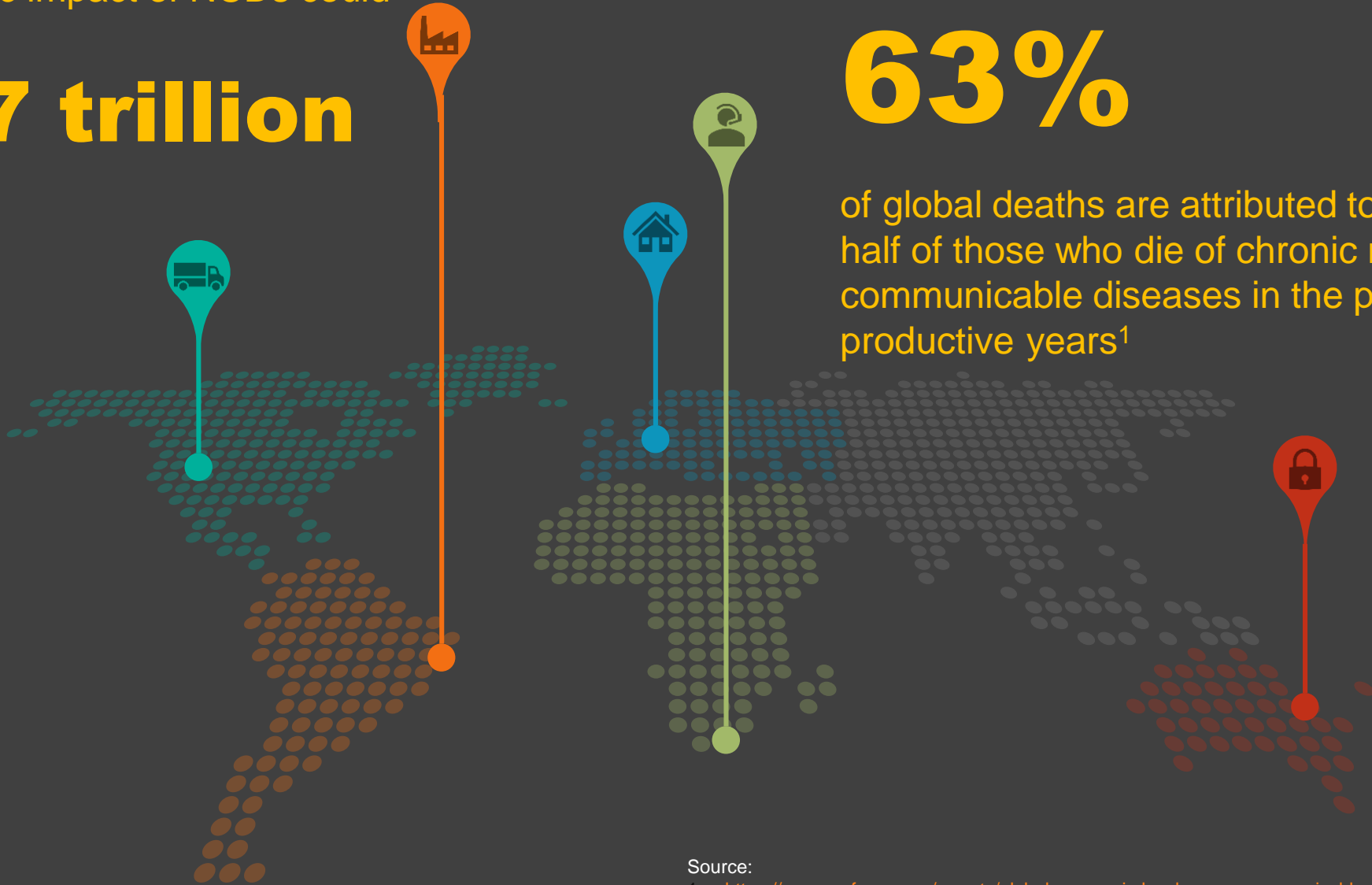
Global economic impact of NCDs could reach

**US\$47 trillion**

by 2030<sup>2</sup>

**63%**

of global deaths are attributed to NCDs with half of those who die of chronic non-communicable diseases in the prime of their productive years<sup>1</sup>

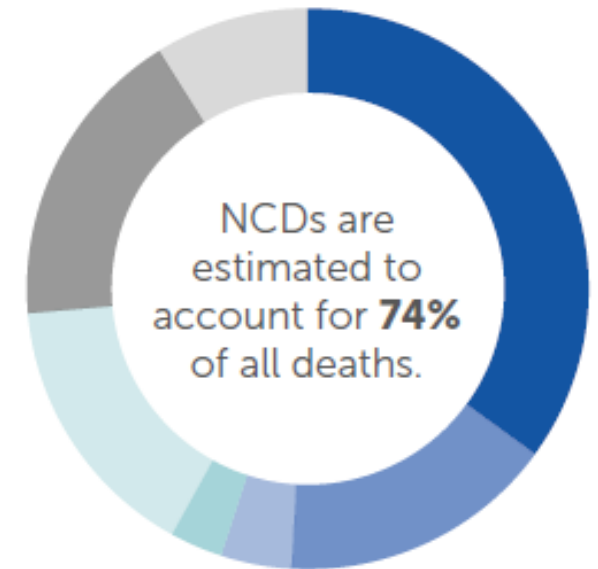
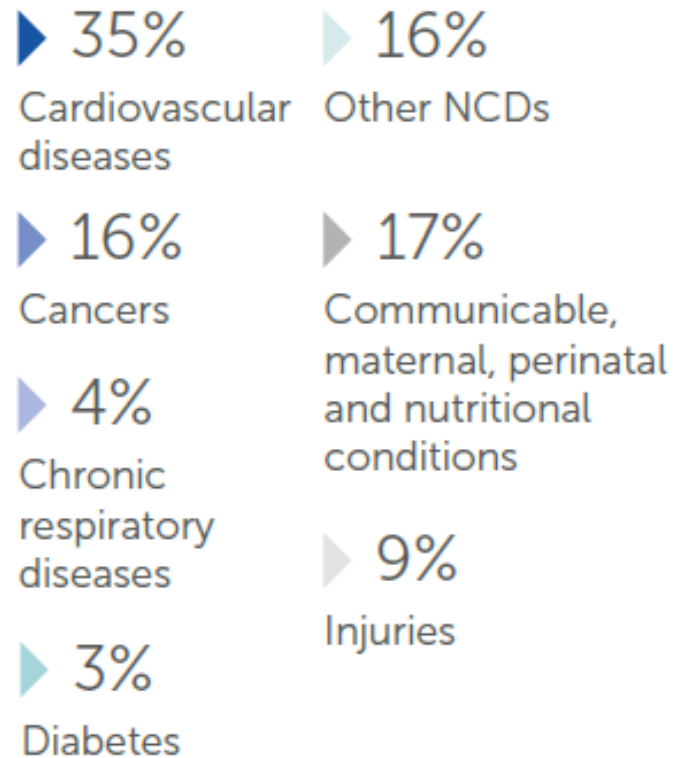


Source:

1. [https://www.weforum.org/reports/global-economic-burden-non-communicable-diseases\\_](https://www.weforum.org/reports/global-economic-burden-non-communicable-diseases_), accessed on 24 January 2018
2. [https://www.reuters.com/article/us-disease-chronic-costs/chronic-disease-to-cost-47-trillion-by-2030-wef-idUSTRE78H2IY20110918\\_](https://www.reuters.com/article/us-disease-chronic-costs/chronic-disease-to-cost-47-trillion-by-2030-wef-idUSTRE78H2IY20110918_), accessed on 24 January 2018

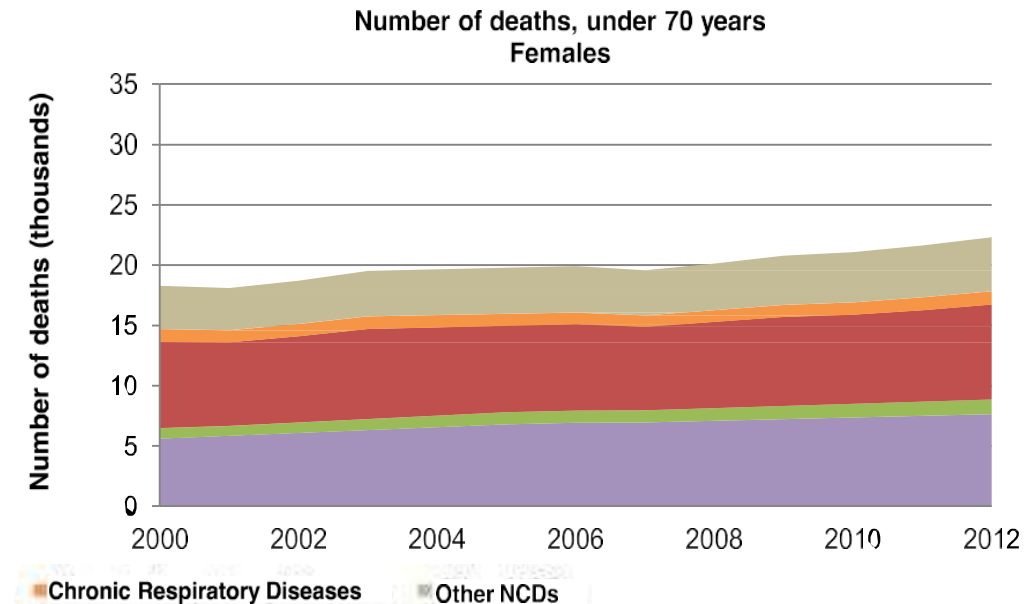
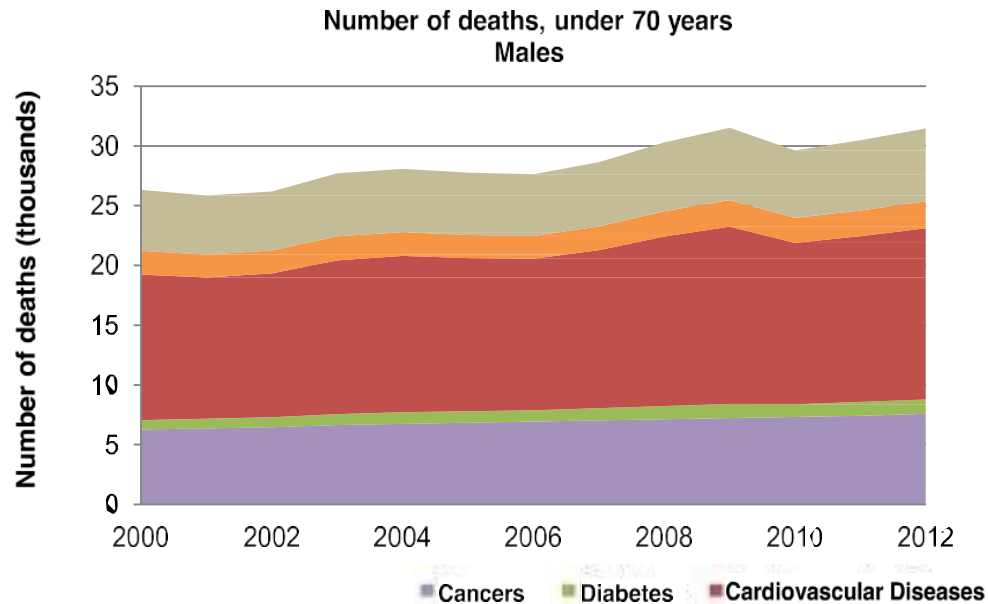
## Burden of NCD in Malaysia (2016)

### PROPORTIONAL MORTALITY\*

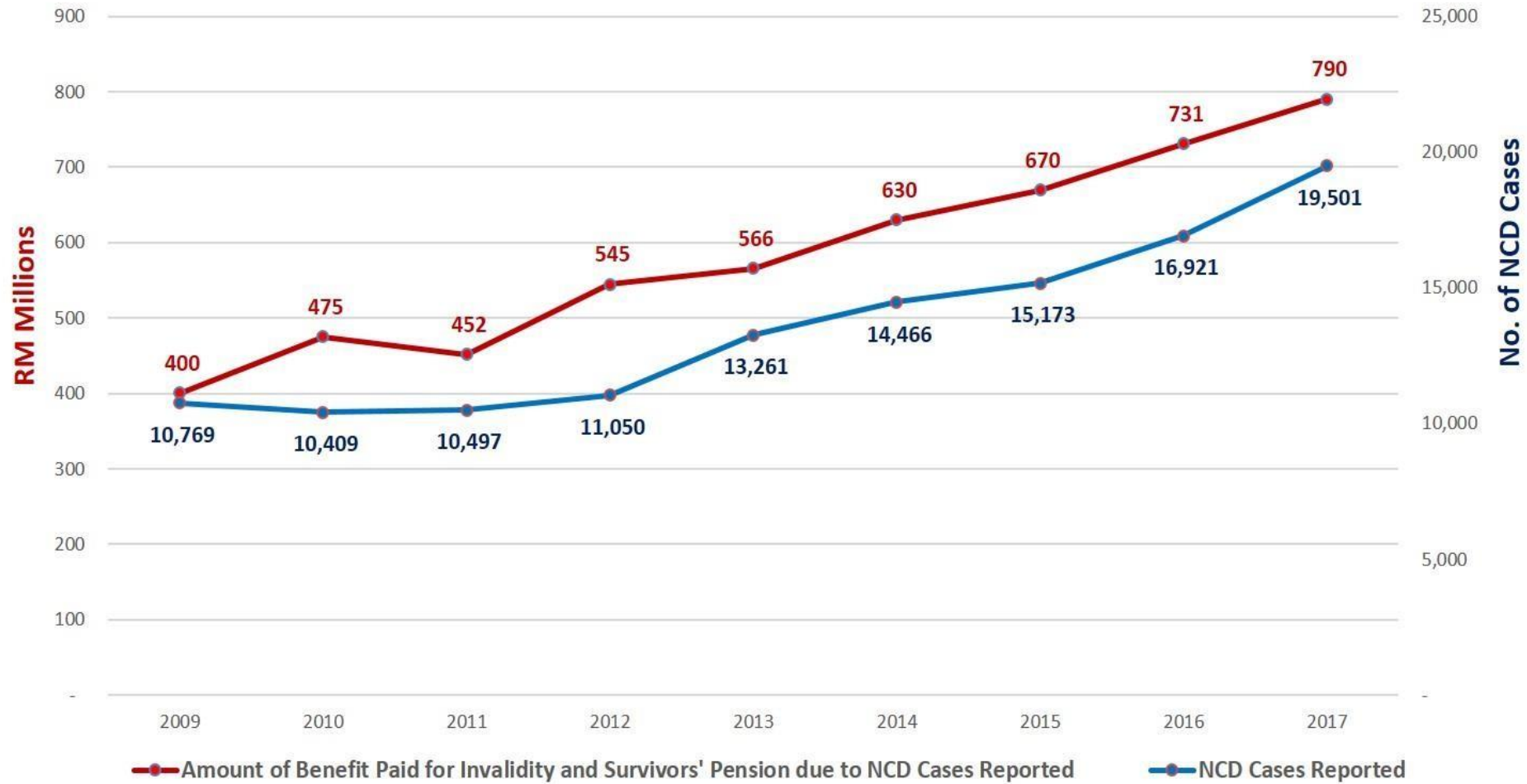


# Premature mortality due to NCDs, Malaysia

The probability of dying between ages 30 and 70 years from the 4 main NCDs is 20%



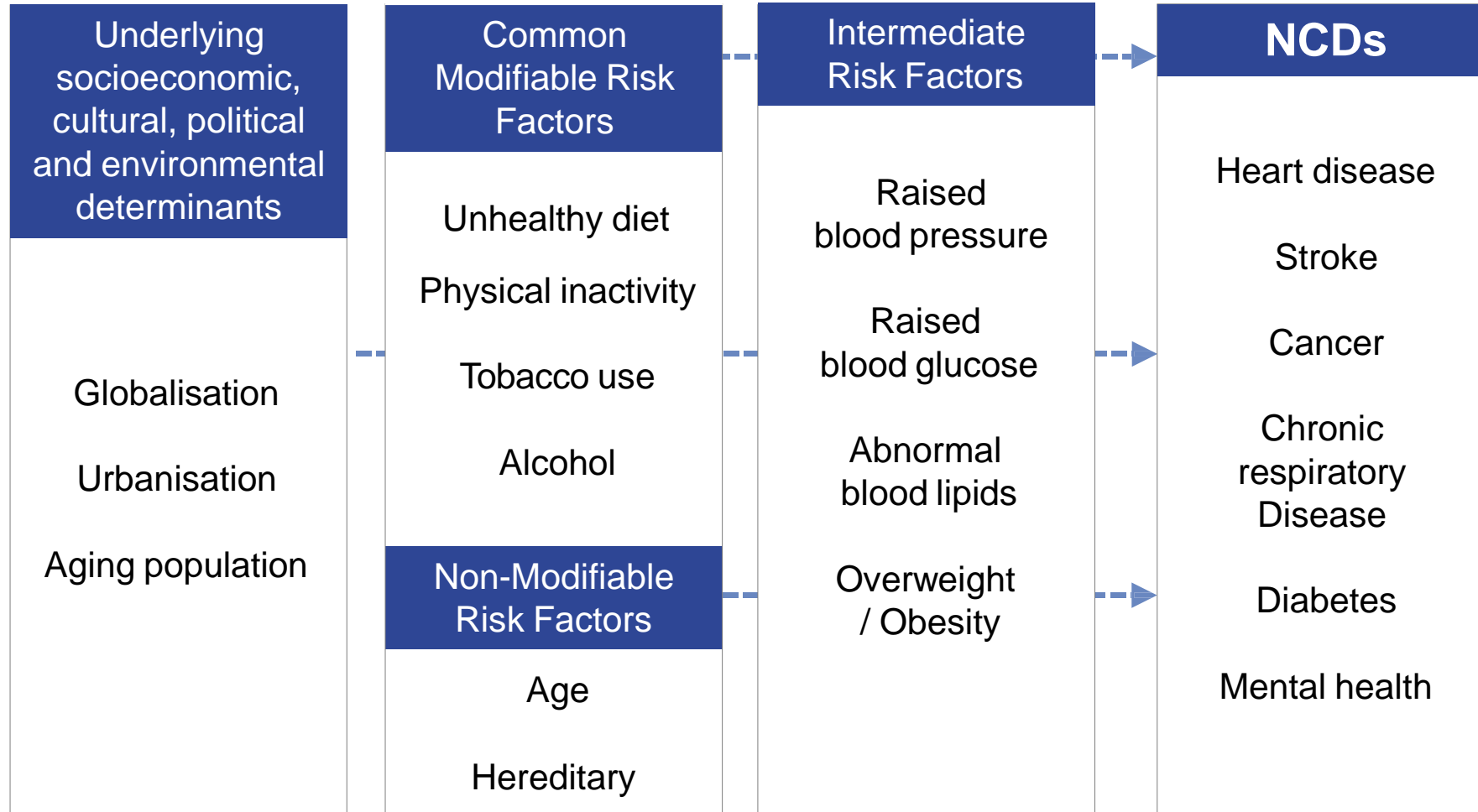
## Non-Communicable Disease: Reported Cases and Compensation



Source: Social Security Organization



# NCD: Who are the suspects?



# Non-Communicable Diseases

## 4 Diseases, 4 Modifiable Shared Risk Factors

		Modifiable causative risk factors			
		Tobacco use	Unhealthy diets	Physical inactivity	Harmful use of alcohol
Noncommunicable diseases	Heart disease and stroke	✓	✓	✓	✓
	Diabetes	✓	✓	✓	✓
	Cancer	✓	✓	✓	✓
	Chronic lung disease	✓			



World Health  
Organization

2025 GOAL  
PREMATURE  
MORTALITY  
**25%**  
REDUCTION



# Global NCD Targets

Targets for  
Malaysia

20% → 15%



GLOBAL 2025 TARGET  
TOBACCO  
USE  
**30%**  
REDUCTION

23% → 15%



GLOBAL 2025 TARGET  
HARMFUL  
USE OF  
ALCOHOL  
**10%**  
REDUCTION

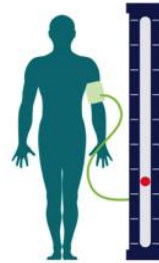
\* Heavy episodic  
drinking

HED\* <1.2%



GLOBAL 2025 TARGET  
PHYSICAL  
INACTIVITY  
**10%**  
REDUCTION

35.2% → 30.0%



GLOBAL 2025 TARGET  
RAISED BLOOD  
PRESSURE  
**25%**  
REDUCTION

32.2% → 24.0%



GLOBAL 2025 TARGET  
SALT/SODIUM  
INTAKE  
**30%**  
REDUCTION

8.7 → 6.0gm



GLOBAL 2025 TARGET  
DIABETES/  
OBESITY  
**0%**  
INCREASE


<15.0%



GLOBAL 2025 TARGET  
**80%**  
AVAILABILITY  
OF ESSENTIAL  
MEDICINES  
AND BASIC  
TECHNOLOGIES  
TO TREAT CVD  
AND OTHER NCDs



2025 TARGET  
**50%**  
OF ELIGIBLE  
PEOPLE RECEIVING  
DRUG THERAPY  
AND COUNSELLING  
TO PREVENT  
HEART ATTACK  
AND STROKE

An illustration of three stylized people in business attire. A man with glasses and a blue suit is at the top, with his arms around two people below him. On the left is a woman with dark hair, and on the right is a woman with orange hair. They are all wearing grey suits and orange ties. The background has soft pink and blue washes.

**“A healthy workplace is one which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety and wellbeing of all workers and the sustainability of the workplace”**

**World Health Organization (WHO)**





# Workplace is the best place?



- Employees spend most of their waking hours (50%) at the workplace, or more.

- Employees can utilize the support system readily available from their colleagues.

- Employees gain encouragement and motivation from the management of their organizations

- Employers gain from a healthy workforce – productivity, morale, reduced cost etc.

# Why Employer's Involvement?



- Obtain the optimal state of health to perform their duties.

- Ensure the wellbeing of their employees is taken care of.

- Be able to live a healthy lifestyle, remain active and energetic especially in performing their jobs.

- Enable a positive image and morale of the organization

- Reducing cost of employment, including medical and sick leave costs

# NCD – Impact on Cost

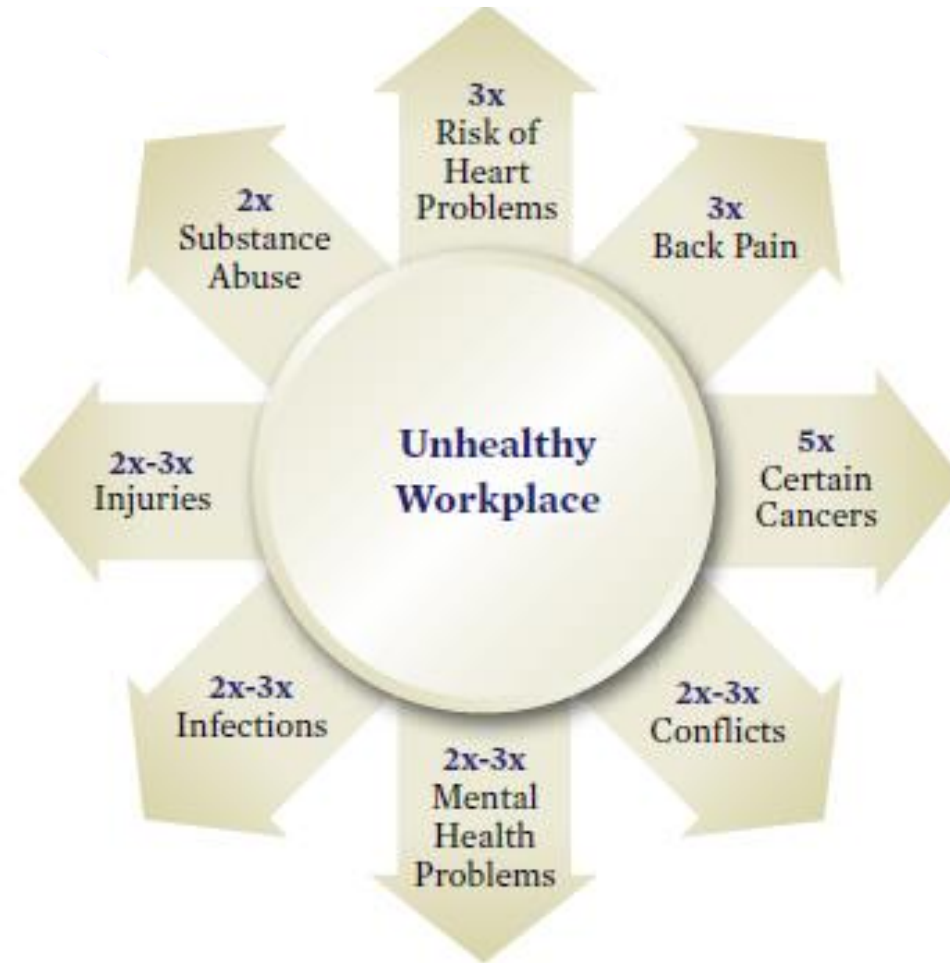
**Table ES1 Estimates of lost GDP from NCD deaths, absenteeism and presenteeism, six APEC economies, to 2030**

	2010	2015	2020	2025	2030
	(\$billion)				
Australia	51.9	59.3	67.0	75.4	84.7
China	209.5	270.6	336.1	410.2	485.7
Malaysia	11.5	16.3	22.5	30.4	40.3
Peru	7.3	9.6	12.5	15.9	20.0
Philippines	10.6	14.4	19.0	24.7	31.6
USA	779.9	872.2	963.0	1051.5	1142.6
	(share of GDP – %)				
Australia	4.5	4.7	4.8	4.8	4.9
China	3.5	3.8	4.0	4.2	4.3
Malaysia	4.6	4.7	4.9	5.0	6.1
Peru	4.9	5.1	5.2	5.3	5.4
Philippines	5.3	5.5	5.6	5.7	5.8
USA	5.2	5.4	5.5	5.5	5.5

Source: VISES estimates.



# The Effect of Unhealthy Workplace



*Modified: J. Burton. The Business Case for a Healthy Workplace. IAPA*

# The Benefit of Workplace Health Promotion

## ORGANIZATION/ EMPLOYER

01

Boosting the morale  
of employees

02

Increase  
productivity

03

Reduce absenteeism  
& presenteeism

04

Reduce medical/  
insurance cost

Improving health

01

Boosting the morale  
and confidence

02

Improving the personal  
and family wellbeing

03

04

## EMPLOYEE

# Workplace Health Promotion and Occupational Safety and Health Act 1994

Guidelines on Occupational Health Services 2005, DOSH

Health program in the workplace lie with the employer who create the risk and the employee who work with the risk.

It is recognized that employers are responsible for the provision of Occupational Health Services in their respective workplaces.

# Occupational Health Services

1

Pre  
employment  
/ Pre-  
placement

2

Medical  
Removal

3

Investigation  
on OP & OD

4

Health  
Promotion

5

Return to  
Work

6

Record  
Keeping





## Elements of Program Implementation

Source: Workplace Health Promotion – SOCSO2017



**01**

## **ORGANISATIONAL COMMITMENT**

- Establish Workplace Health Promotion Committee
- Responsibilities of Employers and Employees

**02**

## **Employees' Participation**

- As members of WHP Committee, facilitators, or participants

**03**

## **Needs Assessment**

- Planning should be based on the situation and information from the workplace

**04**

## **Evaluation and Assessment**



**05**

## **Creating a Healthy Environment**

- Commitment to improve the health care at the workplace

**06**

## **Promotion and Publicity**

- Consistent promotion and publicity of the program

**07**

## **Health Screening**

- Should be conducted at least once a year & the results to be analysed

**08**

## **Evaluation and Assessment**

- Using indicators as the benchmark.
- Improvement to the program and activities that have been done.



# Intervention Activities and Implementation





## Health Screening

Crucial for early detection of diseases and NCD risk factors



## Healthy Diet

Should include the provision of Healthy Cafeteria, healthy menu, calorie labelling and so on.



## Active Lifestyle

Encourage and facilitate employees to perform physical activities.



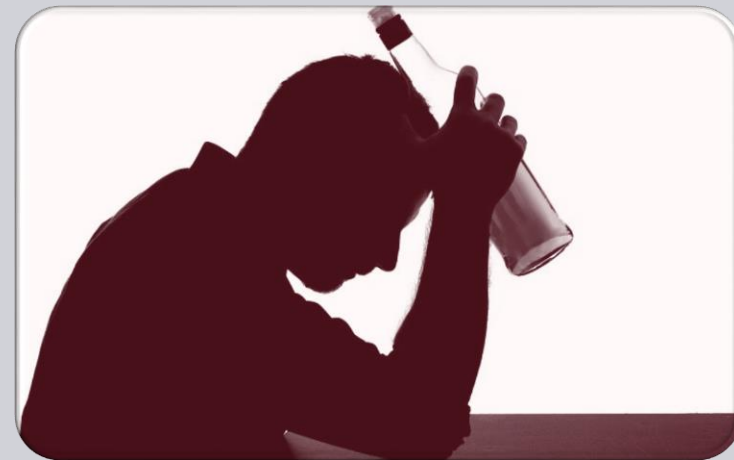
### Ideal Weight Management

Identify those who are obese and facilitate weight management programs



### Tobacco Use

Ensuring the workplace are designated as smoke-free area.  
Set for smoking cessation program



### Alcohol Use

Alcohol policy implementation and awareness program



## Drug Abuse

Drug policy  
implementation  
and awareness  
program



## Mental Health

Crucial to eliminate  
the stigma and  
mental health  
management at  
workplace



## Incentive and Penalty

Reward and  
aggressive  
approach where  
applicable





# Total Wellness & Health Promotion (NIOSH)

# Health Examination

Lifestyle  
surveys

+

Medical history

+

Medical  
examination

+

Fitness  
assessment



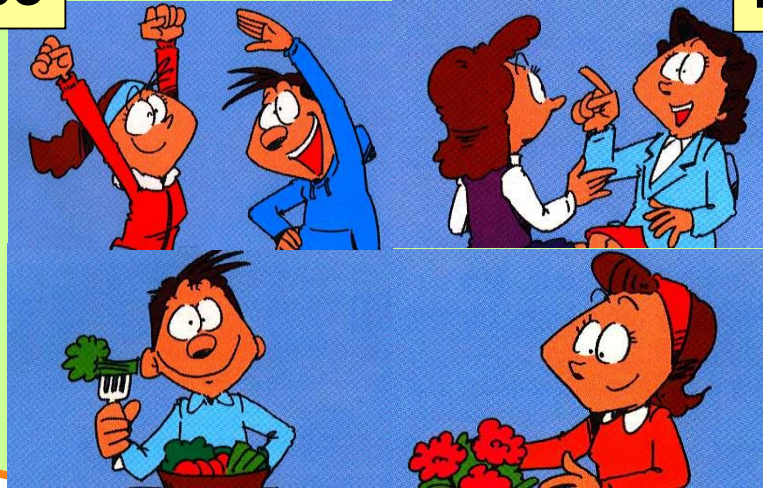
## Health Guidance

Exercise Guidance

Health Guidance

Nutritional  
Guidance

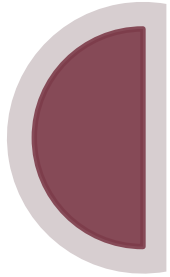
Mental Health  
Advice



## Practical activities



# MEDICAL PROFILE ASSESSMENT



Weight & Height

Body Mass Index

Waist circumference

Blood Pressure

Body Fat Composition analysis

Fasting Lipid Profile & Blood  
Glucose

Liver & Kidney Function Test

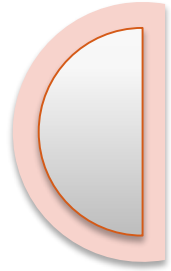
Urine Test

Personal Medical Consultation

Health talk and motivation



# FITNESS PROGRAMME



Exercise motivation talk

Cardiorespiratory fitness assessment

- Cardiovascular endurance test
- $\text{VO}_2\text{max}$  (maximum oxygen consumption)

Occupational fitness assessment

- Body core muscular endurance assessment
- Body core muscular strength assessment
- Range of Motion assessment

Practical

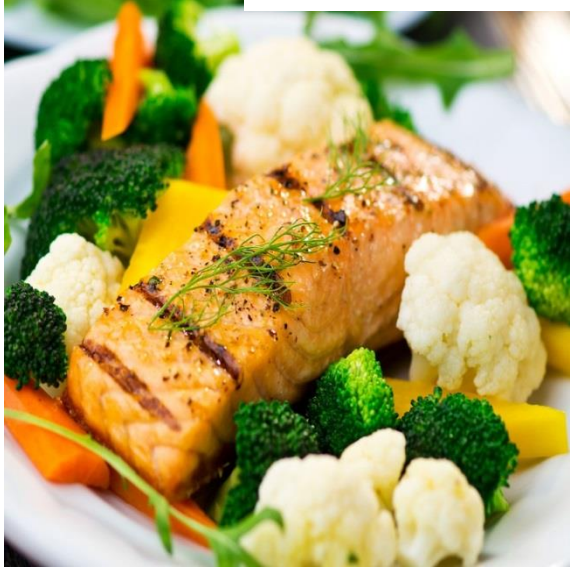
- Home and office exercise
- Strength exercise
- Body core exercise
- Aerobic exercise

**POLAR**<sup>®</sup>  
*LISTEN TO YOUR BODY*





#QuarterQuarterHalf



Diet  
motivational  
talk

## WEIGHT MANAGEMENT PROGRAMME (DIET)

Diet assessment

Diet therapy

Individual diet  
consultation





## STRESS MANAGEMENT PROGRAMME

Stress motivational talk

Stress assessment

- Occupational stressor assessment
- Coping mechanism – mental response, fatigue evaluation, depression, physical response
- Life stress evaluation

Stress intervention techniques

- Breathing exercise
- Visualization method
- Simple relaxation method
- Progressive muscular relaxation technique (Jacobsonian method)









# References

- Guidelines on Workplace Health Promotion, SOCCSO
- SOCCSO Annual Reports
- Healthy Workplace: A Model for Action, WHO
- Country profile for NCD, WHO
- Total Wellness and Health Promotion Program, NIOSH Malaysia
- Guidelines on Occupational Health Services 2005, DOSH