

PREVENTION OR THERAPY?

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ABSTRACT

Due to the increasing number of people suffering from working handicaps, an occupational survey has been carried out by the Swedish Labour Market Department and the automobile company in order to evaluate: how various labour market policy media can facilitate employment of those suffering from handicaps and to find out a way in which certain personnel policy media could contribute to this.

The survey was carried out at two Volvo units, the AB Volvo Torslanda Works in Gothenburg and the AB Volvo Skövde Works in Skövde during the period May 1976 - May 1977. The final report was prepared by the Swedish Labour Market Department and makes up the basis for the attitude of the Swedish Government towards changes and/or amendments to the existing respective legislation.

The part of the survey carried out in Gothenburg covered three important aspects: incidence of cases of medical and/or socio-medical handicaps, workplace analysis and research activities.

In order to determine and analyse the occurrence of obstacles hampering work in the automobile industry a project has been launched entitled "How to employ people suffering from medical and/or socio-medical handicaps. Experiments and evaluation".

In view of the increasing number of persons suffering from working handicaps in employment (medical and/or socio-medical handicaps), an occupational survey has been carried out involving the Swedish Labour Market Department and the automobile company Volvo in order to evaluate how various labour market policy media could facilitate employment of these persons and find out a way in which certain personnel policy media could contribute to this.

The survey was carried out at two Volvo units - the AB Volvo Torslanda Works in Gothenburg (VTV) and the AB Volvo Skövde Works in Skövde (VSV) - during the period May 1976 - May 1977 and included an independent consultant company (INDEVO) which was responsible for the evaluation of the project and the preparation of the final report¹.

This final report and similar projects promoted by the central and local authorities, provided the basis for a report by the Swedish Labour Market

Department² which led to a changed attitude of the Swedish Government and to amendments to the existing respective legislation. This paper presents a brief summary of the final report and the very extensive internal survey material. Three important aspects of the project were determining: the incidence of cases of medical and/or socio-medical handicaps, workplace analysis, and experimental activities. The conditions at the two factories covered by the survey were highly different. At the Volvo Skövde Works, since the early 1960s, extensive adaptation work had been done (including a survey of persons suffering from medical and/or socio-medical handicaps and workplace analysis. At the Torslanda Works, however, work started practically from zero. This explains such features as differences in choice of method and ambition level in connection with the survey.

The expression "people suffering from medical and/or socio-medical handicaps" in connection with the project refers to employed persons suffering from considerable long-term obstacles to work in the form of physical and/or mental and/or socio-medical handicap, which can be compensated for, completely or partly, through measures taken at their workplaces.

DETERMINING THE INCIDENCE OF CASES OF MEDICAL AND/OR SOCIO-MEDICAL HANDICAPS

About two-thirds of the workers suffering from medical and/or socio-medical handicaps suffer mainly from physical problems. Back-ache and cardiac/vascular complaints are the most usual. Mental problems account for 25–30%, while social troubles (primarily alcoholism) make up 6% of the problems of these handicapped persons. Among the employees, social problems occur less frequently; otherwise the pattern is roughly the same (Table 1).

TABLE 1
Number and percentage of workers and employees suffering from medical and/or socio-medical handicaps in Volvo Skövde Plant.

	Workers		Employees	
	Number suffering from such handicaps	Proportion of all workers (%)	Number suffering from such handicaps	Proportion of all employees (%)
Moderate cases	570	18.3	128	18.0
Serious cases	217	6.9	28	3.8
Total	787	25.2	156	21.4

With advancing age, physical problems generally increase very rapidly and mental troubles much more slowly, while social problems occur in an equal measure among young and older persons. Mental and social problems appear to predominate among the young, and physical problems among older persons.

The number of cases of handicaps among workers is higher among women than among men of the same age group. On the average, persons with physical problems evaluate their health and job contentment more highly than do those with other problems, particularly social problems. Job contentment is the poorest in the lowest age groups and the best in the highest. Most of interviewed employees suffering from handicaps stated that they have better health and job contentment than have workers suffering from handicaps. At the Skövde Works most of those suffering from handicaps currently had a well-organized working situation through the appraisal of supervisors and could carry out their work without difficulties. They appeared to suffer from major long-term problems primarily of a medical nature, this implying very small margins with respect to changes. Table 2 illustrates the state of affairs.

TABLE 2
Percentage of employees and their appraisal of the work.

	Workers		Employees	
	Moderate (N = 570)	Difficult (N = 217)	Moderate (N = 128)	Difficult (N = 28)
Work carried out without difficulties	60.0	14.7	67.9	14.2
Work carried out with minor difficulties	18.7	10.5	5.4	14.2
Work carried out with difficulties due to difficult workplace	19.8	60.3	24.2	57.1
Cannot carry out the respective work satisfactorily	1.4	14.2	2.3	14.2

An appraisal of the Company's Health Care Department as regards adaptation to work from the health point of view among persons suffering from such handicaps shows adaptation to be generally better among employees than among workers. It was also found to be better among older people than among the young, and better among men than among women.

Workplace analysis

At the Volvo Torslanda Works, a workplace analysis was initiated in order to establish work demands as an exceptionally important factor in all adaptation work. The task was carried out by a group of production technicians, industrial safety engineers and trade union representatives, and a company doctor. A total of 1 370 workplaces were covered by the analysis. Those who chose the method were very conscious of its limitations. However, it was regarded to be satisfactory considering the available resources and time.

Workplace analysis has already shown to be applicable in practice. The analysis provided the basis for developing a new analysis method intended specially for workplaces which put a strain on the back. It became obvious that individual analysis should also be used in connection with selection and employment. Production technicians were given the individual analysis for short-term appraisal of measures. The results were submitted to the Pre-planning and Design Departments and the Product Development Section which are also to be continually provided with information about ergonomic demands in order to initiate discussions regarding long-term remedy measures in the form of product modifications. For people suffering from deteriorated physical working capacity 164 workplaces with a low degree of physical loading have been reserved.

Experimental activities

The following three groups were covered: technical measures, organizational measures and attitude-influencing measures.

The evaluation of work in the project was found to require considerable time and resources. Experimental activities, particularly in the technical section, thus played a less important part in the project.

Economic evaluation of the technical experiments at both the Skövde Works and the Torslanda Works has shown all the experiments to be financially profitable. The resources invested during the project in solving the situation of people suffering from such handicaps by introducing organizational changes were increased to a considerable extent compared with the preceding years. At the Skövde Works, eight adaptation groups were established, one for each result unit. Responsibility for the operative running of the project was placed on a working group under the supervision of the head of the company's Health Care Department. The controlling group for the projects was the Central Adaptation Group. At the Torslanda Works, a controlling group was appointed for project leadership. The operative responsibility was placed on a new, local adaptation group. A special analysis group and an inventory group were appointed to carry out the recording and surveys.

In the case of both projects, organizations of the employed were represented in all groups. The same applies to the Regional Employment Board. The company's Health Care Department was actively involved with doctors, nurses, welfare officers and industrial safety engineers.

Experience gained from work in the adaptation groups has shown that it is essential to decentralize adaptation activities, that individual cases should be treated in the presence of the line manager to ensure authority for implementation, and that the adaptation group must deal with problems that cannot be solved in the line organization.

Normal adaptation and regrouping work must not cease. The influence of the respective members must be based on interest, will and competence, rather than authority. Sufficient personnel resources are an essential requirement. It is necessary to ensure a certain period for the training and information of members

before the work can be carried out satisfactorily. It is also essential to ensure a considerable engagement of a representative of the Regional Employment Board.

Early in the project the importance was realized of noting changes in attitudes of people around those suffering from these handicaps, such changes being important for the success of the project. The possibility of employing persons suffering from handicaps will finally depend on the attitudes of managers at all levels and of fellow-workmen and colleagues as regards both taking initiative and accepting persons who differ from the general pattern. In order to achieve the greatest possible effect, selective attitude-influencing methods were chosen: with respect to persons directly involved in the project (e.g. two joint information meetings, Skövde Works – Torslanda Works); with respect to key groups outside the project (e.g. two days' training of persons regarded to be responsible for passing on opinions at the Torslanda Works and the Skövde Works) and widest dissemination of information through internal publications.

As part of experimental activities it was decided to produce and distribute a TV film. The objective of this was to increase understanding for persons suffering from medical and/or socio-medical handicaps, since "it could happen to us all", and help the adaptation group to solve the respective problems. The film was produced jointly with the Swedish Labour Market Board and the Employment Survey.

Other target groups included the members of the adaptation group, supervisory groups, personnel representatives (responsible for employing people; personnel from the company's Health Care Department), courses for foremen and supervisors as well as production technicians and trade union stewards.

The film is accompanied by supplementary material designed to initiate follow-up discussions and debates.

COMMENTS

Our investigations showed that both among workers and among employees there is large proportion of people suffering from medical and/or socio-medical handicaps – about 25%. Surveys of other companies showed similar figures. The project greatly helped to increase our knowledge about these problems.

More attention should be paid in future to certain factors handicapping people at work such as cardiac/vascular diseases, diseases of the motor nerves, mental and social problems and also alcoholism. We know that the proportion of "serious" cases varies between individual companies, this depending to a certain extent on whether the problem has been paid enough attention in time. We also know that today, under optimum conditions, (probably most) persons suffering from these handicaps function well in their work, though they have very small margins regarding both quality and quantity with respect to changes in demands made on their work. Dr C.A. Heijbel, Head of the Medical Section of the Health Care Department of the Skövde Works, most aptly defined these conditions saying: "All persons suffering from medical and/or socio-medical handicaps are

not problem cases; all cases do not relate to persons suffering from medical and/or socio-medical handicaps”.

We know that poor working environments – in the widest meaning of the expression – can be a major reason why people suffer from medical and/or socio-medical handicaps, but despite increasing knowledge in this sphere, we still have a long way to go until we reach an adequate solution to the problem.

REFERENCES

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