

Stress – Strain – Coping

Working conditions in NRW from the point of view of employees of Turkish origin

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From 1994 on surveys of workers in employment are conducted in North Rhine-Westphalia at five-year intervals which focus on working conditions, their impact on health as well as individual and in-company coping strategies. These representative surveys are used to collect up-to-date information on the workers' subjective assessment of working conditions, to highlight changes or shifts in their assessment and to derive action, prevention and intervention projects specific to the target groups.

Employees with a migration background are one possible target group for such projects. With about 250,000 persons those of Turkish origin form the most significant group of employed workers with migration background in North Rhine-Westphalia. In order to obtain specific information on the assessments of working conditions for this group of employees, the Institute for Work Design of North Rhine-Westphalia (LIA.NRW)¹ asked the Centre for Turkish Studies and Integration (ZfTI, Essen) to conduct a bilingual telephone survey. To ensure comparability with survey data already obtained, the questionnaire used repeatedly by LIA.NRW was largely taken over and supplemented by a number of questions specific to the particular target group. These relate among other things to vocational qualifications and specific stressors, e.g. caused by discrimination and hindrance from observing religious precepts at the workplace.

Furthermore it was intended to examine whether the coping strategies applied and the assessments of the occupational safety and health (OSH) measures taken at the workplace differ from those for other groups of employees and whether group-specific strategies of in-company health management to promote or maintain employability are necessary or desirable.

In November 2010, 1,002 employed workers of Turkish origin from North Rhine-Westphalia were questioned. Of Turkish origin meant anyone who had Turkish nationality or was born in Turkey and immigrated after 1949, or anyone who had one parent who was an immigrant or had Turkish nationality.

In the following key results of the survey are described and compared with the study "Gesunde Arbeit NRW 2009²" [Healthy Work NRW 2009]. 2,000 employees from North Rhine-Westphalia participated in this study, in which the item "ethnicity" was not recorded.

¹ Former NRW Institute of Health and Work (LIGA.NRW)

² Gesunde Arbeit NRW 2009 Belastung – Auswirkung – Gestaltung – Bewältigung. LIGA.Praxis 3Landesinstitut für Gesundheit und Arbeit Nordrhein-Westfalen, Düsseldorf 2010; an English summary of the results is available on the Internet (see: http://www.lia.nrw.de/_media/pdf/liga-praxis/Healthy_Work_NRW_2009.pdf)

Language skills

Although 87 % of the interviewees estimated that their knowledge of the German language was "very good" or "quite good", 78 % opted to have the survey conducted in Turkish. This result testifies to the interviewees' close identification with their mother tongue.

Structural data

A comparison of the structural data for interviewees of Turkish origin and participants in the 2009 survey revealed that

- the proportion of female employees of Turkish origin is relatively small at 35 % (NRW 2009: 46 % women),
- the proportion of older (50 +) employees of Turkish origin is relatively small at 12 % (NRW 2009: 26 %),
- the proportion of employees of Turkish origin who completed a vocational education is relatively small at 61 % (NRW 2009: 93 %) and
- the proportion of employees of Turkish origin in an unskilled job is relatively high at 59 % (NRW 2009: 12 %); it should be noticed that 37 % of this group of persons indicate that the work they perform is "somewhat" or "substantially" below their vocational qualifications.

Stress at the workplace

One focus of the survey was the collection of the subjectively perceived stressors at work. Depending on their intensity and the employees' individual qualifications for performance on the job stress may have an impact on health, e.g. impairment of well-being, complaints/symptoms and ill-health. In order to record the stress the interviewees were asked to rate 29 factors on a four-stage scale from "no load" at all to "strong load".

Figure 1 shows the results of the survey of workers of Turkish origin.

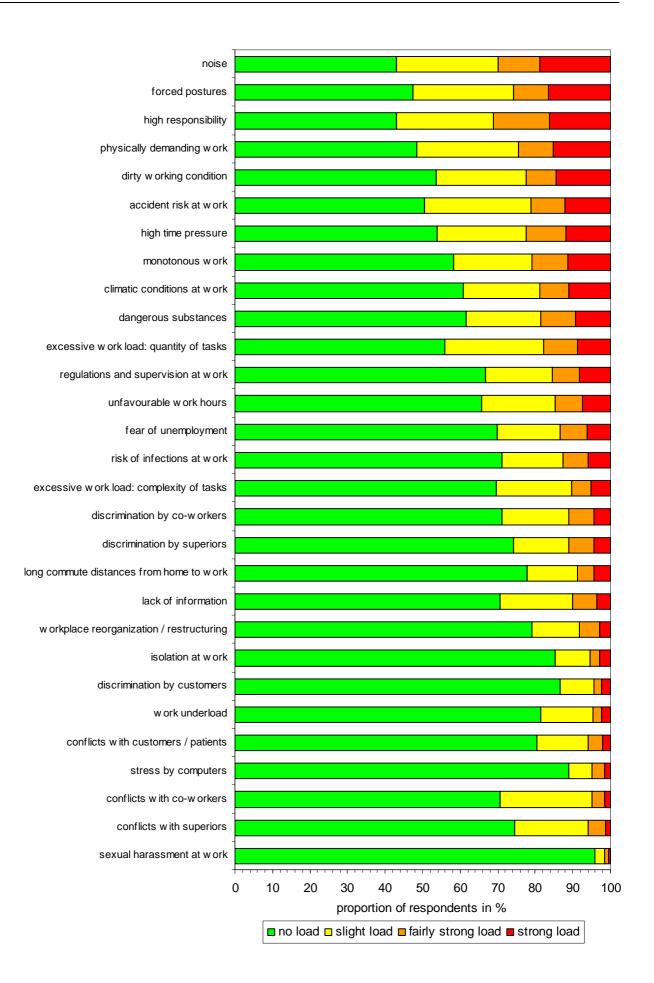


Figure 1: Subjective assessment of work-related stress by all interviewees of Turkish origin

For the interviewed workers of Turkish origin physical stress is significant due to the type of work they perform. Under the "Top Ten" of the stressors which are felt to be a "fairly strong load" or "strong load" there are seven physical stress factors, and on the other hand there are only three factors which can be classified as mental stress. In the survey three group-specific factors related to stress were also addressed:

- discrimination by co-workers,
- discrimination by superiors,
- discrimination by customers/patients.

18 % said they suffer "slightly" from discrimination; for 11 % discrimination is a "fairly strong load" or "strong load", 15 % felt that superiors discriminated them "slightly", 11 % perceived discrimination as a "fairly strong load" or "strong load". The judgements concerning discrimination by customers are less serious: 9 % of respondents are "slightly" affected and 5 % say it is a "fairly strong load" or "strong load".

According to the answers given one group of employees of Turkish origin is particularly affected by discrimination at the workplace: the group which gives charge hand, foreman ("Meister") or technician as occupational position. 25 % of this group feel themselves to be subject to a "fairly strong load" or "strong load" of stress from discrimination practised by colleagues, and 19 % indicate that they perceive discrimination practised by superiors as a "fairly strong load" or "strong load".

One objective of this survey was to establish whether the assessments of employees of Turkish origin differ systematically from those of the overall workforce in North Rhine-Westphalia. A direct comparison of the assessments by the 1,002 employees of Turkish origin with those of the 2,000 people questioned in 2009 does not appear to make sense since these two groups differ substantially in a number of respects, e.g. vocational training and occupational position. Differences in the answers given by interviewees in the two studies cannot be attributed to their ethnic affiliation, but to other, workplace-related aspects. It was therefore decided to compare the answers given by the 586 employees of Turkish origin working in unskilled jobs with those given by the employees in unskilled jobs in the survey "Healthy Work NRW 2009" (229 interviewees).

Figure 2 shows the results of this comparison with respect to the ten stress factors most important to workers of Turkish origin. In each case proportion of respondents is given who perceive the factor as a "fairly strong load" or "strong load".

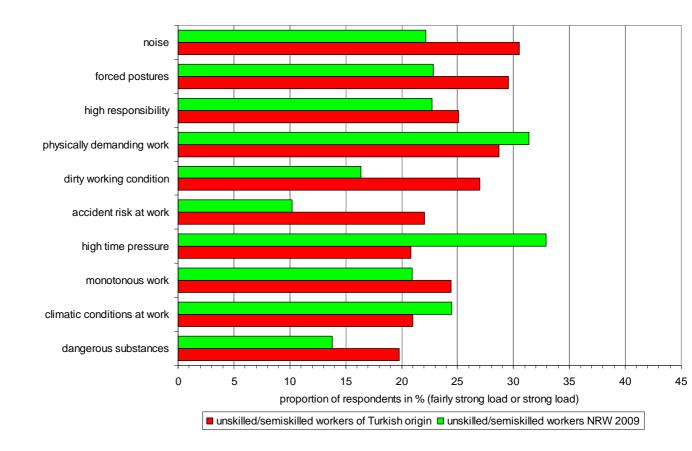


Figure 2: Subjective assessment of work-related stress by workers of Turkish origin 2010 / Healthy Work NRW 2009

The results show that, according to their own perception, workers of Turkish origin are affected to a substantially greater degree by physical stress than all workers who work in unskilled and semiskilled jobs. Noise, forced postures, dirty work, accident risks, monotonous work and dangerous substances play a comparatively significant role for workers of Turkish origin. High responsibility is also experienced by workers of Turkish origin as causing greater stress than by the workers in the reference group.

Some new items addressed specific stress aspects which are connected with the cultural background and religious precepts of the population surveyed.

Those questioned were asked to rate the degree of their own religiosity on a four-stage scale from "not at all religious" to "very religious". 62 % of those questioned described themselves as "very religious" or "tend to be religious". This subgroup of workers was asked whether they felt to be hindered from observing religious precepts.

Table 1 shows the corresponding assessments of respondents in percent.

	no hindered	somewhat hindered	moderately hindered	severely hin- dered
Observance of clothing precepts	93	5	< 1	2
Observance of prayer times	81	10	3	6
Observance of fasting precepts	91	6	< 1	2
Observance of nutritional precepts	93	5	1	< 1
Unintentional contact with the opposite sex	95	3	1	< 1

Table 1: Assessment of hindrance from observing religious precepts

As Table 1 shows, only a small proportion of respondents felt they were hindered from observing religious precepts. Only observance of prayer times are felt to be hindered by a relatively large number of the respondents (19 %).

Consequences of stress – impact on health

Inappropriate load at the workplace may lead to strain-related consequences and have an impact on health. Whether and in what form the individual stress has an effect was recorded in that a complaints/symptoms list was specified. The interviewees were asked to say what complaints/symptoms they themselves experienced. Only those complaints/symptoms were recorded which the interviewees experienced themselves and which were attributable to the work.

Figure 3 shows the percentages of the interviewees who said their health was affected by a work-related factor.

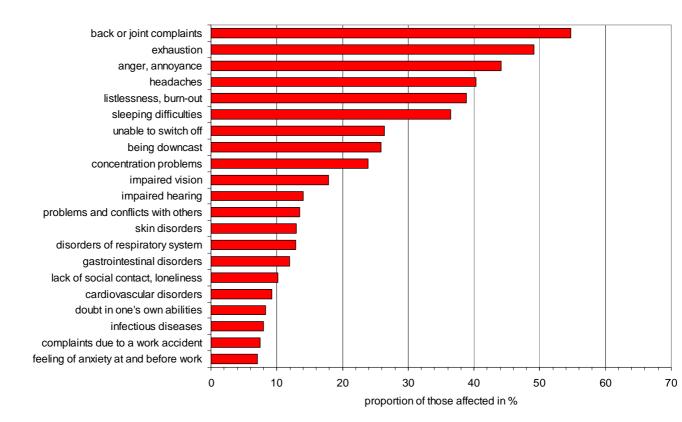


Figure 3: Health impact of work – complaints/symptoms reported by all respondents of Turkish origin

Back and joint complaints are most frequently reported. More than half of the respondents (55 %) indicate that they suffer from such complaints. Among the ten most frequently indicated complaint patterns it is striking that six of these work-related effects are attributable to consequential mental strain. For instance 44 % of those respondents indicate that work makes them angry or annoys them, 39 % feel listless and burnt out, 36 % suffer from sleeping disturbances, 26 % cannot switch off or are downcast and 24 % indicate that they suffer from concentration problems.

The results of this study are also to be compared with those of the survey "Healthy Work NRW 2009" with respect to work-related effects. Figure 4 shows the corresponding proportions of those affected with respect to the ten consequential complaints/symptoms most frequently indicated.

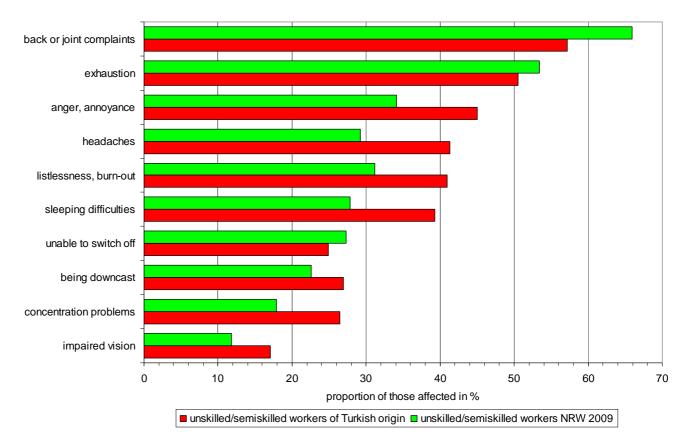


Figure 4: Assessment of work-related strain – complaints/symptoms reported by workers of Turkish origin 2010 / Healthy Work NRW 2009

The strain profiles for the two subgroups of respondents differ significantly. Workers of Turkish origin tend to experience adverse effects at work more frequently than the reference group. They report to be affected comparatively strongly by anger and annoyance, headaches, listlessness and sleeping difficulties. They also indicate a greater feeling of being downcast, concentration problems and impaired vision as work-related effects. On the other hand, workers of Turkish origin are affected somewhat less than the reference group by back or joint complaints, exhaustion and not being able to switch off.

Situational and behavioural prevention measures of work design

Health prevention and promotion at the workplace aims at minimising the adverse effects as described above by measures of work design. In principle two approaches can be considered here: on the one hand inappropriate load at the workplace can be avoided by preventive measures of work design to improve the working conditions, e.g. reducing noise or reorganizing shift schedules, and on the other hand an attempt can be made to change behaviours and improve the individual coping strategies of employees by introducing measures of capacity building, e.g. coaching, stress management training or company sport.

Behavioural prevention: individual strategies for reducing the stress impact

Employees are not helpless in the face of the stress induced by working life and its impact on health. They attempt in many varied activities to recuperate in their leisure time, to cope with work-related problems and to maintain and promote their health and employability. In this connection the workers of Turkish origin were asked to indicate what they do to reduce occupational stress and complaints or to make them more tolerable.

Figure 5 shows the percentages of respondents who apply the relevant strategy.

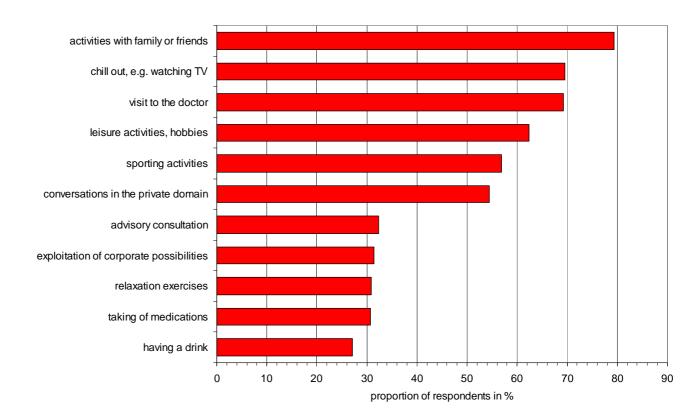


Figure 5: Individual strategies for reducing the stress impact on health for all interviewees of Turkish origin

The results show that interviewees of Turkish origin apply both active and passive coping strategies. Social activities with family or friends in particular play a significant role: four of five workers indicate this form of coping with work-related consequences. Other frequently indicated strategies include the practice of hobbies and sports. The interviewees indicate more relaxation by "chilling out" and obtaining medical advice as more passive strategies.

The results of the present study are also to be compared with those of the survey "Healthy Work NRW 2009" with respect to the individual strategies for reducing stress. Figure 6 shows the information given by unskilled and semiskilled workers in percentages.

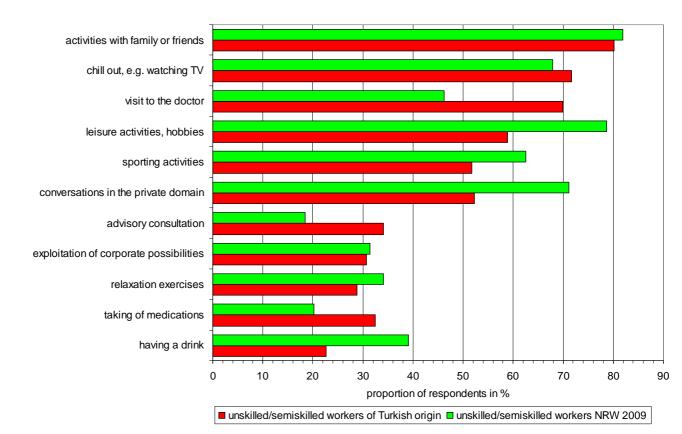


Figure 6: Individual strategies for reducing the stress impact on health by comparison (workers of Turkish origin 2010 / Healthy Work NRW 2009)

Passive strategies such as "chilling out", visits to the doctor, advisory consultations and the taking of medications are used more frequently by unskilled and semiskilled workers of Turkish origin in order to cope than by interviewees in the reference group. To a substantially lesser extent than the reference group the interviewees of Turkish origin, on the other hand, give active strategies such as leisure activities and hobbies, sports, private conversations and having a drink. Special mention should be made here of the small proportion of interviewees who said they used company facilities to reduce the work-related consequences of stress: only every third of the interviewees in both studies indicated that they used this coping strategy. Whether these small proportions are attributable to the relatively low attractiveness of the facilities on offer or complete lack thereof cannot be clarified at this point. The results indicate in any case, however, the need for improvement or intensification of measures of in-company health promotion for this group of highly strained workers.

Assessment of OSH measures

All establishments and enterprises are obliged to ensure the safety and health of employees by means of appropriate work design measures This includes measures for preventing accidents, for avoiding work-related health hazards and for the humane design of work geared to the needs and the employees' individual qualifications for performance on the job.

In the context of the present study the interviewees were asked to estimate the quality of various work design measures taken in their company. For this purpose a series of potential measures were listed and the interviewees had to indicate whether they assessed them as "tends to be good" or "tends to be poor", whether they were not affected or whether they did not know them.

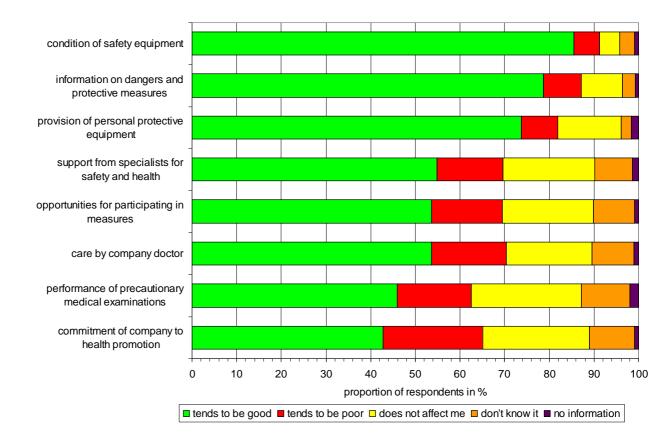


Figure 7 shows the results of the interviewees' assessments.

Figure 7: Assessment of in-company measures by all interviewees of Turkish origin

The condition of the safety equipment, such as escape routes, first-aid equipment and the information given by companies on hazards and protective measures are described by a great number of employees of Turkish origin as "tends to be good". The provision of personal protective equipment is also assessed as positive. The ratings given by the interviewees on individual support/care measures under the Occupational Safety Act are also relatively positive. For instance 55 % rate the support from safety and health specialists as positive and 54 % the company medical services. The conduct of precautionary medical examinations and the companies' commitment to health promotion are rated less positively than the other measures by the interviewees of Turkish origin.

In all, the results indicate that the technical aspects of occupational safety and health in North Rhine-Westphalia has reached a high level in the view of employees of Turkish origin and the companies fulfil their obligations in this area. Health prevention for employees in the form of precautionary medical examinations and company facilities for health promotion should be intensified. The proportions of interviewees who say they are not affected by various measures or are not aware of them are alarmingly high. For example, with respect to support/care under the Occupational Safety Act this is almost 30 %, and as regards the commitment of companies to health promotion even 34 %.

Once again the results of this survey are compared with those of the survey "Healthy Work NRW 2009" with respect to the assessment of company measures for occupational safety and health. Figure 8 shows the proportions of interviewees in percentages who rated the company's measures as "tending to be good".

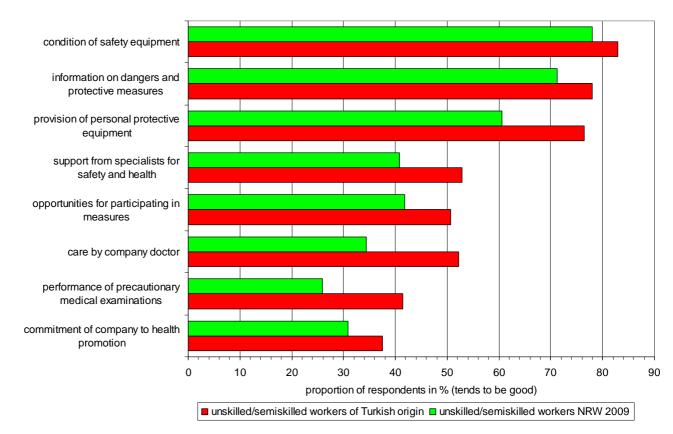


Figure 8: Assessment of in-company measures by comparison (workers of Turkish origin 2010 / Healthy Work NRW 2009

Figure 8 makes clear that the company measures for occupational safety and health are rated more highly by unskilled and semiskilled workers of Turkish origin than by all unskilled and semiskilled workers in North Rhine-Westphalia. This can be seen in particular in the provision of personal protective equipment, the support/care provided by safety and health specialists and the company doctor, and in the conduct of precautionary medical examinations. This result is probably attributable to differences in standards expected by the two comparative groups since it cannot be assumed that the companies make greater efforts for employees of Turkish origin in matters of health protection at the workplace than for other employees.

Satisfaction with working conditions

Finally, the results concerning satisfaction with working conditions on the part of employees of Turkish origin in North Rhine-Westphalia will be shown. In this connection the interviewees were asked to rate various aspects of the work on a four-stage scale from "very satisfied" to "very dissatisfied". Table 2 shows the percentages for the ratings.

	very satis- fied	satisfied	dissatisfied	very dissat- isfied
Relationship with colleagues	34	62	3	1
Relationship with superiors (social contact, leadership)	32	58	8	2
Possibilities for working inde- pendently	29	60	10	1
Work equipment (devices, tools, software)	22	68	9	1
Security regarding dismissal	22	49	22	7
Content of work, task	20	69	10	1
Communication and information	20	67	11	2
Working hours (location and dura- tion)	20	61	16	3
Work environment (room design, room climate)	19	67	11	3
Recognition of performance	19	61	17	3
Opportunities for advancement, qualification	17	47	27	9
Payment (as compared to others)	14	54	26	6

Table 2: Satisfaction with the working conditions on the part of all interviewees of Turkish origin

The employees of Turkish origin in NRW are "very satisfied" or at least "satisfied" with respect to many aspects of their work. The social relations with colleagues and superiors in particular are given an extremely positive rating. Furthermore the satisfaction ratings are high with respect to the task related aspects of the work. This concerns in particular the possibility to work independently, the content of the work, the work equipment used, the communication and information and the work environment. The employees of Turkish origin are less satisfied with two aspects of their activity: the opportunities for professional/career advancement and qualification and their payment as compared to others.

The separate evaluation of the subgroup of unskilled and semiskilled workers repeatedly mentioned with respect to their work satisfaction does not reveal any major differences to the other occupational groups. Only the satisfaction with communication and information at the workplace, opportunities for advancement and qualification and payment is a little less.

The unskilled and semiskilled workers of Turkish origin are subject to high workrelated stress, which, according to their answers, adversely affect health; they rate the health protection measures taken at the workplace very positively and are not less satisfied with their working conditions than employees of other occupational groups.

Conclusion

The results of the survey underscore the integrative function of gainful employment for workers with a migration background. This is supported in particular by the high level of satisfaction with social relations at the workplace and the taskrelated aspects of the work.

The workplaces in North Rhine-Westphalia are designed, from the point of view of employees of Turkish origin, in such a way that these can fulfil their specific cultural and religious needs.

Group-specific stress, especially discrimination at the workplace by colleagues, superiors and customers arises only to a small extent according to the interviewees. However, it should be said that individual groups of employees, such as skilled workers and technicians, are stronger affected by this than others.

The quality of technical aspects of occupational safety and health can be seen from the assessment of the health protection measures taken at the workplace. In particular the condition of safety equipment and the information given on hazards and protective measures are rated positively. However, there is need for action in the area of prevention, for example by means of precautionary medical examinations and measures of workplace health promotion.

The high level of work satisfaction and the positive assessment of corporate health protection measures at the workplace should not hide the fact that the working conditions for many employees of Turkish origin should be optimised. Because of what tends to be their inferior occupational qualifications, many workers of Turkish origin are employed as unskilled or semiskilled workers. This group of workers – and that does not only involve those of Turkish origin – is subject to high physical stress which adversely affects health and well-being. Preventive occupational safety and health measures such as noise reduction, the use of lifting and carrying aids, the safe design of workplaces and compliance with the accident prevention regulations can help minimise inappropriate load and improve the working conditions of this group of workers. The provision of personal protective equipment can also help in this.

Measures of behavioural prevention are also suitable for minimizing the adverse effects of inappropriate load at the workplace. In this connection the commitment of companies in workplace health promotion should be intensified and appropriate facilities expanded, e.g. company sport.

One objective of this survey was to examine whether group-specific strategies of corporate health management to promote and maintain employability are desirable or even necessary.

The survey results show that health protection measures at the workplace and corporate health management tailored specifically to the needs of employees of Turkish origin are not necessary. The health-promoting design of work has a positive effect on employability, regardless of ethnic affiliation of the employees.

In this connection it is desirable to consider specific cultural needs and peculiarities in a way which is sensitive to the target group. The results have therefore shown with respect to knowledge of German language that employees of Turkish origin in general have a very good linguistic proficiency. The widespread desire to be questioned in Turkish, however, suggests a close identification of those of Turkish origin with their mother tongue. This state of affairs should be taken into account in the planning and implementation of work design measures and in-house communication. Further approaches to the optimisation of working conditions include vocational qualification programmes and the ageingappropriate design of work. From this not only those of Turkish origin, but also all employees and the companies in North Rhine-Westphalia will profit.