

iBedrift®

Arbeidsplasstiltaket iBedrift - og forskningen frem til nå

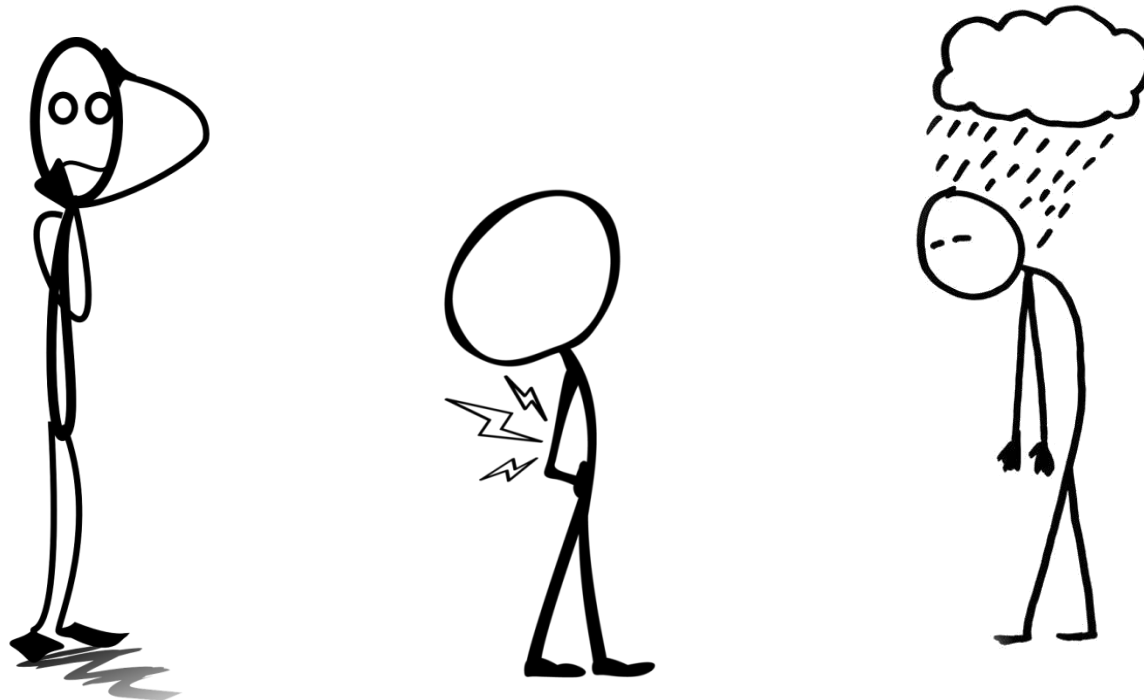
Tone Langjordet Johnsen

Stipendiat

Sykehuset i Vestfold

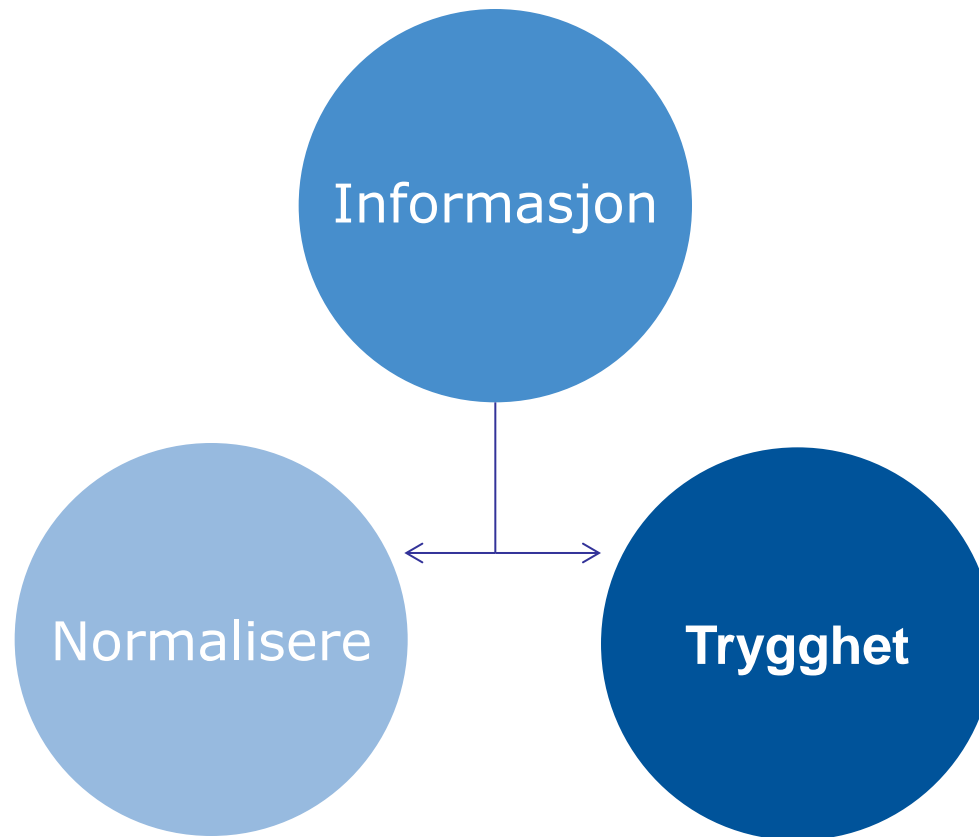
Formål

frembringe forskningsbasert kunnskap som kan bidra til å øke deltakelse i arbeidslivet for personer med subjektive helseplager



Hvordan

- Kunnskapsformidling om alminnelige helseplager på arbeidsplassen



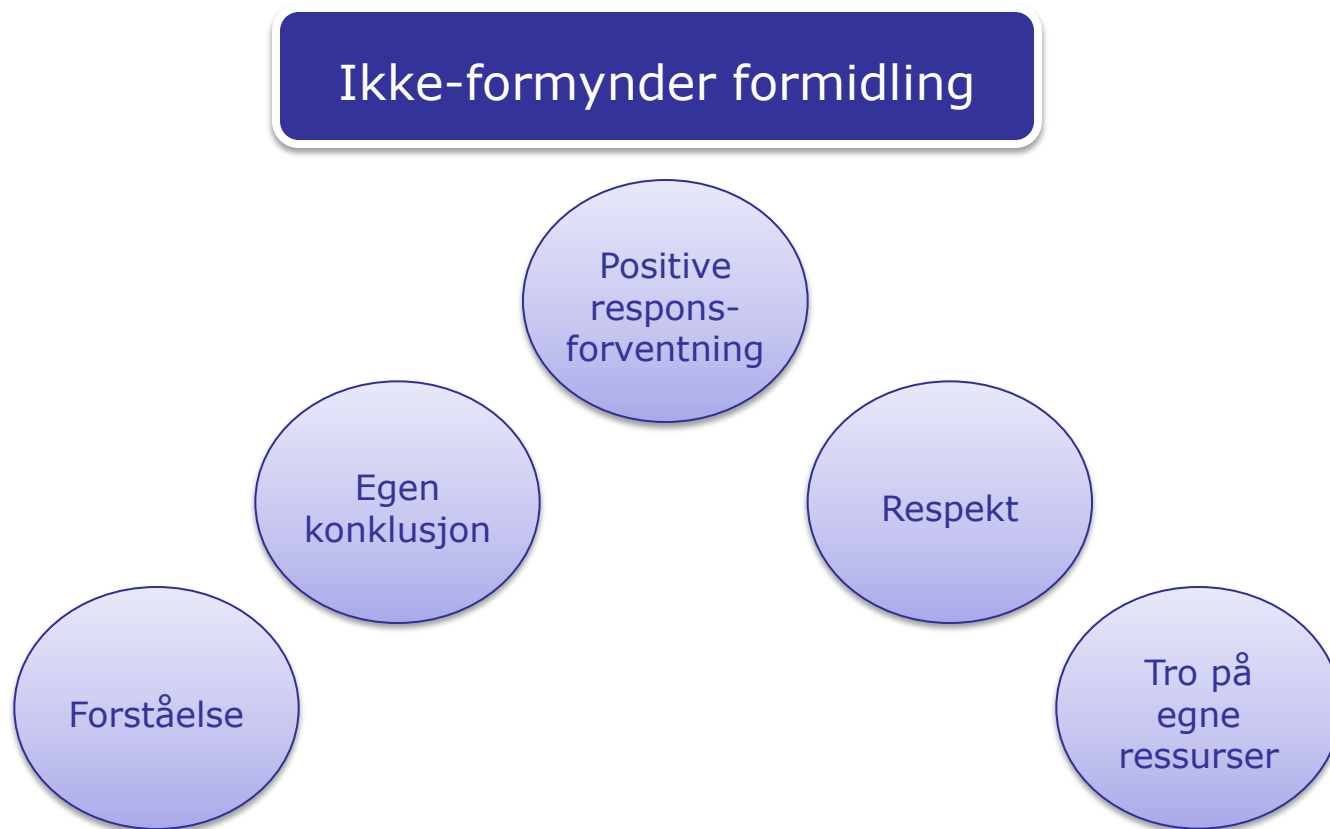
Hvordan

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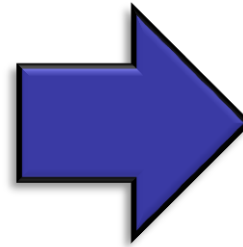
Hvordan

- Kunnskapsformidling om alminnelige helseplager på arbeidsplassen





“Hvorfor er det ingen som har fortalt meg dette før?”



AKUTT VOND RYGG?

Ryggoperasjon er sjelden nødvendig



- Reduksjon i det generelle sykefraværet
- Reduksjon i det ryggspesifikke sykefraværet
- Reduksjon i bruk av helsetjenester
- Reduksjon i tro på myter om ryggplager

Peer support in an occupational setting preventing LBP-related sick leave

Erik L. Werner^{1,2}, Even Lærum³, Marjon E. A. Wormgoor², Erik Lindh² and Aage Indahl²

Background Low back pain (LBP) is among the most frequent causes of sickness absence in Norway, and it is thought that it could be reduced by 30–50% if present day knowledge was implemented in the workplace. Evidence-based interventions in occupational settings to prevent sickness absence are still lacking.

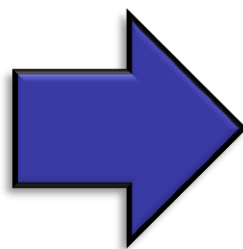
Aim To evaluate whether peer support would be able to modify general beliefs about LBP, pain experiences, health care utilization and sickness absence due to back pain.

Methods In addition to a media campaign in two Norwegian counties in 2002–05, aiming at improving beliefs about LBP in the general public, the 'Active Back' project trained a peer adviser in six participating workplaces. The task of this peer adviser was to provide information aimed at reducing fear of the pain, supportive advice and arrange for modifications of workloads, etc., for a limited period of time.

Results The prevalence of back pain remained constant throughout the study period, but self-reported intensity of LBP decreased at the end. There was a small decline in use of health care professionals and significant improvements in beliefs, in line with the messages of the campaign. Total sickness absence decreased by 27% and the LBP-related sickness absence by 49%.

Conclusion The combination of peer support and modified workload seemed to have additional effects to the general media campaign, and resulted in decline in sickness absence and improvements in beliefs about back pain.

Werner et al., 2007



- Reduskjon i det generelle sykefraværet
- Reduksjon i tro på myter om ryggplager

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DOI 10.1007/s10926-013-9451-z

Effect of Peer-Based Low Back Pain Information and Reassurance at the Workplace on Sick Leave: A Cluster Randomized Trial

Magnus Odeen · Camilla Ihlebæk · Aage Indahl · Marjon E. A. Wormgoor · Stein A. Lie · Hege R. Eriksen


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Abstract *Purpose* To evaluate whether information and reassurance about low back pain (LBP) given to employees at the workplace could reduce sick leave. *Methods* A Cluster randomized controlled trial with 135 work units of about 3,500 public sector employees in two Norwegian municipalities, randomized into two intervention groups; Education and peer support (EPS) (n = 45 units), education and “peer support and access to an outpatient clinic” (EPSOC) (n = 48 units), and a control group (n = 42 units). Both interventions consisted of educational meetings based on a “non-injury model” and a “peer adviser” intervention year, while sick leave was increased by 7 % during the intervention year. *Results* Relative Risk Ratios (RR) were statistically significant (RR = .84 (C.I = 0.71–1.09)) in a multivariate analysis. *Conclusions* Educational interventions and peer support and access to an outpatient clinic were effective in reducing sick leave. **Keywords** Sick leave · Peer support · Educational interventions · EPS · EPSOC

Odeen et al., 2013

- Høyere arbeidsnærvær
- Høyere arbeidsevne
- Reduksjon i bruk av helsetjenester
- Ryggplagene ble opplevd som mindre plagsomme
- Reduksjon i tro på myter om ryggplager
- Reduksjon i nedstemthet


 PLOS ONE

RESEARCH ARTICLE


Can group-based reassuring information alter low back pain behavior? A cluster-randomized controlled trial

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Data Availability Statement: I have now signed in at Figshare and published a data file with the data used to produce our results available to all. By following this URL, you will find the dataset: https://figshare.com/articles/Data_FCT_PF_xlsx/4506164

Abstract

Background

Low back pain (LBP) is common in the population and multifactorial in nature, often involving negative consequences. Reassuring information to improve coping is recommended for reducing the negative consequences of LBP. Adding a simple non-threatening explanation for the pain (temporary muscular dysfunction) has been successful at altering beliefs and behavior when delivered with other intervention elements. This study investigates the isolated effect of this specific information on future occupational behavior outcomes when delivered to the workforce.

Design

A cluster-randomized controlled trial.

Methods

Publically employed workers (n = 505) from 11 Danish municipality centers were randomized at center-level (cluster) to either intervention (two 1-hour group-based talks at the workplace) or control. The talks provided reassuring information together with a simple non-

Fredriksen et al., 2017

Oppsummert

- Vi ser positive effekter på sykefravær når vi benytter arbeidsplassen som arena for kunnskapsformidling om rygg- og nakkeplager

Videre

- I tillegg til rygg- og nakkeplager er psykiske helseplager en vanlig grunn til sykemelding
- Kan vi øke effekten på sykefravær og andre helserelevante variabler ved å også inkludere psykiske plager som tema i iBedrift?



Protocol for the atWork trial: a randomised controlled trial of a workplace intervention targeting subjective health complaints

Tone Langjordet Johnsen^{1,4}, Aage Indahl¹, Valborg Baste², Hege Randi Eriksen^{2,3} and Torill Helene Tveito^{2,4*}

Abstract

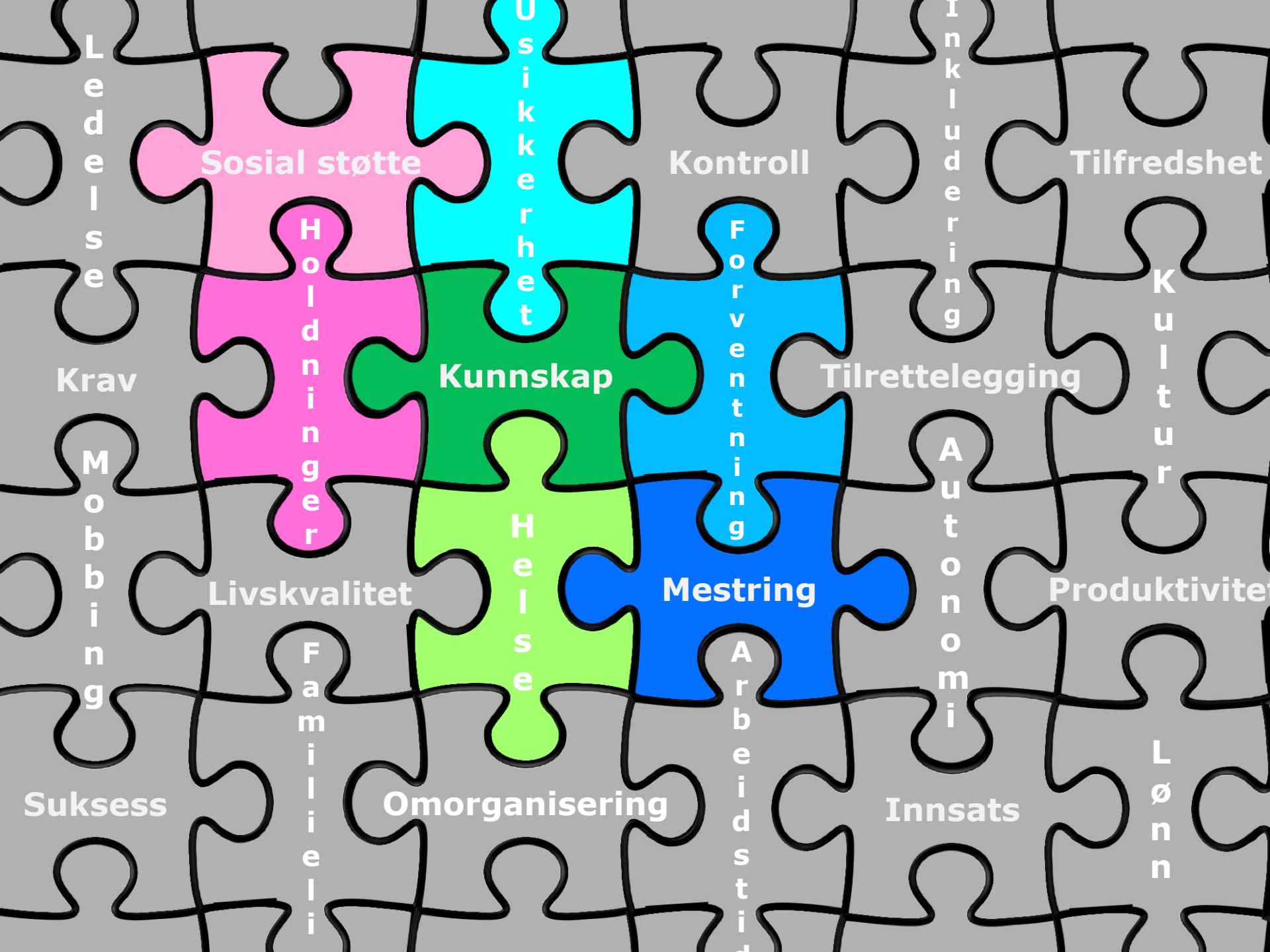
Background: Subjective health complaints, such as musculoskeletal and mental health complaints, have a high prevalence in the general population, and account for a large proportion of sick leave in Norway. It may be difficult to prevent the occurrence of subjective health complaints, but it may be possible to influence employees' perception and management of these complaints, which in turn may have impact on sick leave and return to work after sick leave. Long term sick leave has many negative health and social consequences, and it is important to gain knowledge about effective interventions to prevent and reduce long term sick leave.

Methods/Design: This study is a cluster randomised controlled trial to evaluate the effect of the modified atWork intervention, targeting non-specific musculoskeletal complaints and mental health complaints. This intervention will be compared to the original atWork intervention targeting only non-specific musculoskeletal complaints. Kindergartens in Norway are invited to participate in the study and will be randomly assigned to one of the two interventions. Estimated sample size is 100 kindergartens, with a total of approximately 1100 employees. Primary outcome is sick leave at unit level, measured using register data from the Norwegian Labour and Welfare Administration. One kindergarten equals one unit, regardless of number of employees. Secondary outcomes will be measured at the individual level and include coping, health, job satisfaction, social support, and workplace inclusion, collected through questionnaires distributed at baseline and at 12 months follow up. All employees in the included kindergartens are eligible for participating in the survey.

Discussion: The effect evaluation of the modified atWork intervention is a large and comprehensive project, providing evidence-based information on prevention of long-term sick leave, which may be of considerable benefit both from a societal, organisational, and individual perspective.

Trial registration: Clinicaltrials.gov: NCT02396797. Registered March 23th, 2015.

Keywords: Sick leave, Subjective health complaints, Mental health complaints, Musculoskeletal complaints, Back pain, Anxiety, Depression, Coping, Workplace intervention, Randomised controlled trial



Sosial støtte

Holdninger

Kunnskap

Helse

Mestring

Usikkerhet

Kontroll

Forventning

Tilrettelegging

Arbeidstid

Inkludering

Tilfredshet

Kultur

Produktivitet

Autonomi

Lønn

Ledelse

Krav

Mobbing

Suksess

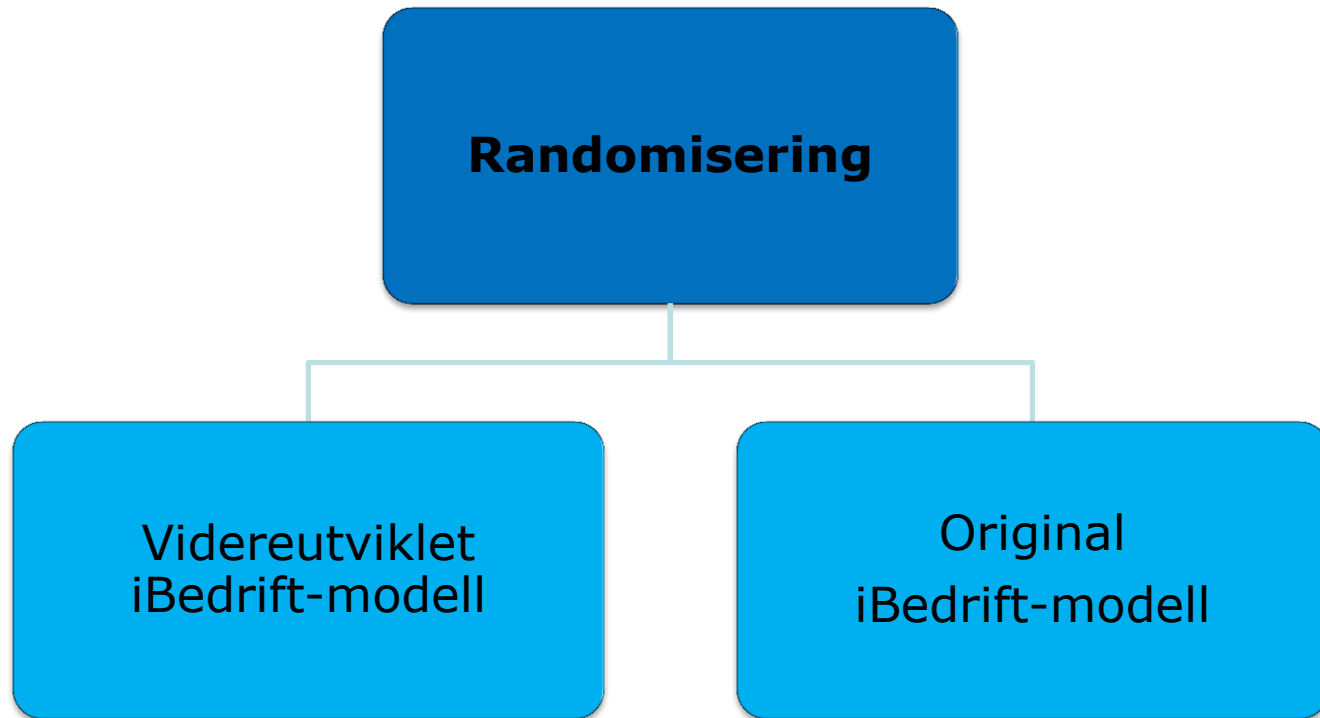
Familie

Omorganisering

Livskvalitet

Innsats

Effektstudie



Datainnsamling

- Sykefraværersdata på enhetsnivå
- Spørreskjema
 - Theoretically Originated Measure of the Cognitive Activation Theory of Stress (TOMCATS)
 - Subjective Health Complaints Inventory (SHC)
 - Hopkins Symptom Checklist (HSCL-10)
 - Global Job Satisfaction (GJS)
 - Demand-Control-Support-Questionnaire (DCSQ)
 - Social Support Inventory (SSI)
 - Workplace Inclusion Questionnaire



uni Research

iBedrift - kunnskapsformidling om alminnelige plager på arbeidsplassen

Dette er første spørreskjema, av totalt to, i prosjektet "iBedrift - kunnskapsformidling om alminnelige plager på arbeidsplassen". Undersøkelsen utføres av Sykehuset i Vestfold, i samarbeid med Uni Helse. Svar så godt du kan på spørsmålene. Det oppfordres til at du svarer på alle. Å besvare spørreskjemaet vil ta ca 20 minutter.

På forhånd takk for hjelpen!

Utdypende informasjon om studien finner du ved å trykke på linken under:

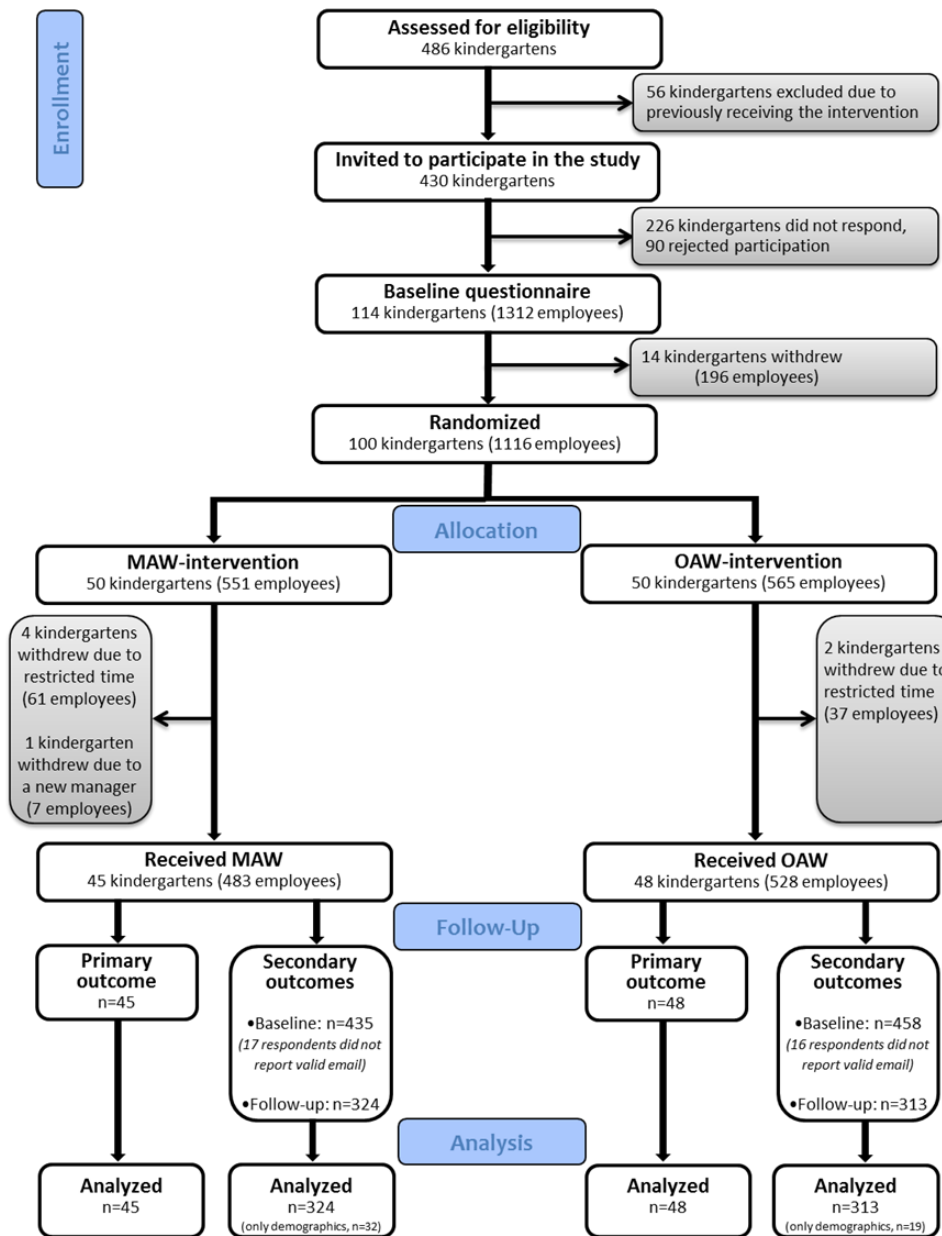


Figure 1. Flowchart of enrollment, allocation, follow-up, and data analysis for the atWork trial, modified from the CONSORT 2010 Statement

Utvalg

- 97 % rapporterte en eller flere subjektive helseplager de siste 30 dagene
 - 88 % rapporterte muskel- og skjelettplager
 - 78 % rapporterte pseudonevrologiske plager
 - 60 % rapporterte gastrointestinale plager
 - 51 % rapporterte forkjølelse/influenza
 - 44 % rapporterte allergi
- Kvinner rapporterte signifikant mer muskel- og skjelettplager og pseudonevrologiske plager enn menn
- Den vanligste helseplagen var trøtthet (63 %), etterfulgt av hodepine (62 %), nakkesmerter (51%) og korsryggsmerter (50.3%)

(Johnsen et al., 2017)

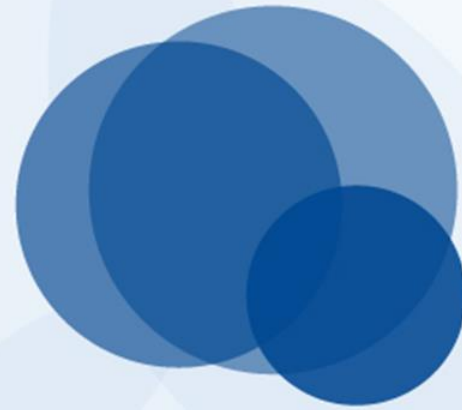
Resultater

To be continued...

TAKK FOR OPPMERKSOMHETEN!



SPØRSMÅL?



iBedrift®