EALTHY MAI

April 2014 Newsletter

In This Issue:

- **Cornerstone of Health**
- **Integrating Substance Abuse Prevention & Mental Health Promotion into Worksite Wellness Programs**

Cornerstone of Health Dr. Sheila Pinette, Director of Maine CDC



Ergonomics is the science and practice of designing jobs and workplaces to match the capabilities and limitations of the human body (fitting the worksite to the worker).

Dr. Sheila Pinette

This can help prevent Work-related Musculo-Skeletal Disorders (WMSD) which can happen over time and if not taken care of early can cause serious problems. There are thousands of WMSDs reported in Maine each year.

Jobs involving computer use, working with tools, lifting and manual materials handling, etc. may pose ergonomic problems if they include one or more of these risk factors:

- Repetition: same motion done repeatedly
- Awkward Body Postures: maintaining an unsupported, fixed or awkward posture such as bending, reaching or twisting
- Force: pressure applied to any part of the body while working such as lifting, pushing, pulling, or gripping a tool
- Vibration: using vibrating or impacts tools or equipment

Common symptoms of these injuries include pain, numbness/tingling, stiffness or cramping, and loss of grip strength.

The benefits of ergonomics include:

- Improved quality of work and life
- Reduced fatigue and discomfort
- Prevention of injuries such as Work-related Musculo-Skeletal Disorders (WMSD)

For more information visit: www.safetyworksmaine.org

Integrating Substance Abuse Prevention & Mental Health Promotion into Worksite Wellness Programs

The Small Business Office of Advocacy report for February 2013 highlights the importance of small businesses in Maine. It rightfully says that "small businesses, those employing less than 500 employees, significantly impact Maine's economy." They represent 97 percent of all employers and employ 59 percent of the private-sector labor force. There were 143,142 small businesses in 2010 and most employ less than 20 individuals.* These facts highlight why small business is the backbone of Maine economy.

Employers of all sizes, including small businesses face an abundance of challenges and many struggle to stay afloat. Recent statistics regarding behavioral health among Maine's workforce portray a compelling picture of why employers would do well to consider implementing a comprehensive worksite wellness program that includes behavioral health components.

The National Survey on Drug Use and Health (NSDUH) in 2012 reported:

- Approximately 75% of binge drinkers (5+ drinks on one occasion) and heavy drinkers were employed full or part time
- The percent of illicit drug users who were employed increased from 8% (2011) to 9% (2012)
- 68% of illicit drug users were employed full or part time.**

Mental illnesses are also a major cause of disability, absenteeism, presenteeism, and productivity among working age adults.*** While unemployment among adults with a serious mental illness stands at a disproportionately high rate, the 2009 NSDUH shows that there are about 17% who do work either full or part time.****

The effects of behavioral health issues on any size business can level a direct threat to a business' bottom line profits. Examples can include:

- Productivity loss (come to work distracted or impaired)
- Attendance issues (chronically late or don't show up at all)
- Safety concerns (distracted, workplace conflict and/or violence).

Each workplace has a culture all its own. It doesn't take a lot to offset the balance of the workplace and cause a negative reaction that can affect the whole business. Protecting and sustaining the behavioral health of an employer's most important asset (their employees) is one of the best ways to protect their business.

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Paul R. LePage, Governo

Mary C. Mayhew, Commissioner

For more information or support with your worksite wellness program contact Meredith Backus at 207.287.5364 or meredith.backus@maine.gov.

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Successful workplace wellness programs may result in reduced health risks associated with poor choices and may relate to:

- reduced insurance premiums
- workers compensation claims
- indirectly reduce the costs of absenteeism and productivity.

Behavioral health problems do not develop in a vacuum and they don't usually disappear on their own. There is much an employer can do to assist their employees living with substance use disorders and mental illness. Creating a mentally healthy workplace starts with developing a mentally healthy workforce through education and awareness campaigns that reduce the stigma of mental illness and substance use disorders. This can be accomplished with measures that range from providing private accessibility to online screening tools for depression, problem drinking or substance use, to flexible work schedules that allow employees to attend outside meetings or appointments and even offer incentives for employees who meet certain criteria of caring for themselves.

While workplace wellness programs are of great benefit for employees and oftentimes their families, the employers are not left lacking. Many studies have been performed on the return on investment for workplace programs and all have somewhat differing conclusions. Most studies show that for certain the return for every dollar spent outweighs the investment.

Strategy and timing are key; the financial cost to establish a wellness program may not initially produce ultimate results. Beginning with no cost or low cost strategies like drug free workplace policies and employee and supervisor education are good places to start. When employers begin to see the positive results of these efforts they can expand their investment to strategies requiring more effort and expense.

In the end, an employer who strategically invests in the welfare of their workforce by integrating behavioral health and physical health in workplace wellness programs can decrease their healthcare costs, improve productivity and profit. A healthy workforce is a happy workforce and a happy workforce gets results.

For more information contact Cheryl Cichowski, Prevention Specialist– SAMHS, at 287-4391 or <u>cheryl.cichowski@maine.gov</u>.

**Small Business Profile*. Rep. U.S. Small Business Administration, Office of Advocacy, Feb. 2013. Web. 2 Mar. 2014. http://www.sba.gov/sites/default/files/mel2.pdf>

**Substance Abuse and Mental Health Services Administration, *Results from the 2012 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-46, HHS Publication No. (SMA) 13-4795. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2013.

****Centers for Disease Control and Prevention*. Centers for Disease Control and Prevention, 23 Oct. 2013. Web. 02 Mar. 2014. http://www.cdc.gov/workplacehealthpromotion/implementation/topics/depression.html>.

****"Results from the 2009National Survey on Drug Use and Health:Mental Health Findings." Results from the 2009 National Survey on Drug Use and Health: Mental Health Findings. N.p., n.d. Web. 02 Mar. 2014. http://www.oas.samhsa.gov/NSDUH/2k9NSDUH/MH/2k9MHResults.htm

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April Health Observances

- <u>Alcohol Awareness Month</u>
- National Distracted Driving Awareness Month
- National Donate Life
- <u>Occupational Therapy Month</u>
- <u>Sexual Assault Awareness and Prevention</u>
 <u>Month</u>
- <u>STI Awareness Month</u>
- Women's Eye Health and Safety Month
- World Health Day (April 7)
- <u>Air Quality Awareness Week</u> (April 28-May 2)

May Health Observances

- Global Employee Health & Fitness Month
- Healthy Vision Month
- <u>Mental Health Month</u>
- <u>National Asthma & Allergy Awareness Month</u>
- UV Safety Month

<u>Additional Resources</u>





OSHA

Occupational Safety and Health Administration





Department of Health and Human Services Maine People Living Safe, Healthy and Productive Lives

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner