

Miller, Diane M. (CDC/NIOSH/EID)

From: Katy Cooper [katy.cooper@oxha.org]
Sent: Wednesday, March 19, 2008 1:02 PM
To: NIOSH Docket Office (CDC)
Subject: 132 - NIOSH WorkLife Essential Elements
Importance: High
Attachments: NIOSH input from OxHA v 0 a 20080319.doc

<<NIOSH input from OxHA v 0 a 20080319.doc>>

Dear Sir/Madam

Please find attached comments from the Oxford Health Alliance on the NIOSH paper (docket number NIOSH-132), 'Essential elements of effective workplace programs and policies for improving worker health and wellbeing'.

Best wishes
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Oxford Health Alliance input to: 'Essential elements of effective workplace programs and policies for improving worker health and wellbeing' (NIOSH-132)

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Oxford Health Alliance (www.oxha.org and www.3four50.com: contact: katy.cooper@oxha.org)

Comments

1. The document mentions the importance of leading from the top – but also very important (and perhaps not sufficiently highlighted) is the importance of involving the workforce in identifying relevant health issues and including them in the discussions about the design of any health initiatives. This will greatly increase the feeling of 'ownership' (it is sometimes called 'co-creation'), and can help to increase participation rates when the schemes are launched. In addition, involvement by formal staff organisations can mitigate a feeling that the schemes are being imposed from the top down.
2. Confidentiality is mentioned in point 12 – but what is not mentioned is ensuring that there is no stigma attached to programmes (for example, if there is a 'competition' to lose weight, those who fail to do so successfully could be stigmatised by others in their team).
3. Measurement is covered in points 18+. However, there is a significant lack of evidence around the effectiveness of workplace health programmes, as they are often not rigorously measured – this Guideline could help to redress this balance by encouraging companies to report on the results of their programmes. In addition, well-designed workplace health programmes can help address issues of inequalities and health, reaching the people who are most vulnerable.

General point

Might we suggest that you define the impact that prevention can have? At the Oxford Health Alliance we use a 3-FOUR-50 message – that 3 risk factors (poor diet, tobacco use, lack of physical activity) lead to four chronic diseases (CVD, chronic lung disease, many cancers and type 2 diabetes) that account for over 50% of deaths in the world.). The World Health Organisation (in its report *Preventing Chronic Diseases: A Vital Investment*) states that up to 80% of premature chronic diseases could be prevented, were the risk factors to be eliminated. Chronic disease is currently mentioned (point 18), but is not explained.

Reference suggestions

1. The Oxford Health Alliance has set up an interactive website, www.3four50.com, containing content supplied by our members and other experts and activists around the world. There is a list of useful links on chronic disease and workplace (see under 'Workplace' on this page <http://www.3four50.com/v2/?page=links#6>), several of which are likely to be of use to your report, if you have not already identified them. 3FOUR50 also contains information posted by users of the site – a library of information about aspects of chronic disease prevention, including at work.
2. The oxha.org website also contains pdfs and links to publications around workplace chronic disease prevention: <http://www.oxha.org/knowledge/knowledge/publications/publications-about-workplace>.

About OxHA

The Oxford Health Alliance (www.oxha.org) is a UK-based charity that enables collaboration between experts and activists from a wide range of disciplines to raise awareness and change behaviours, policies and perspectives about the epidemic of chronic disease at every level of society, worldwide. OxHA advocates and facilitates action and collaboration and encourages research about the risk factors and chronic disease prevention to promote health at local, national and international levels.