

February 2019

Welcome to the February edition of the energy health and safety bulletin, which is issued to all Prospect health and safety representatives in the sector.

In this edition:

- Prospect health and safety conference – 3 April
- Time to Talk day – 7 February
- Distribution Network Operators, incident reports, January 2019
- Musculoskeletal pain and mental ill health closely related, says HSE committee
- Stress up to 40% higher for full-time working mums
- Prospect health and safety members' guides

Prospect health and safety conference

Prospect will hold its seventh health and safety conference on 3 April in London. It will focus on stress, which continues to be a Prospect priority.

Expert speakers will talk about evidence-based approaches to tackling – and preventing – stress; new research; why social support is vital in workplaces and successful approaches taken by Prospect branches.

[Find out more about the event and how to express an interest in attending](#)

Make time to talk on 7 February

Thursday 7 February is Time to Talk day so why not encourage your employer to sign the Time to Talk pledge, have a conversation about mental health with a colleague or perhaps even hold a mental health-themed awareness-raising event?

Best of all, encourage your employer to carry out a stress risk assessment, so they and the union can work together to tackle work-related mental ill health.

[Find out more about Time to Talk](#)

[Download Prospect's guide to preventing work-related stress](#)

Distribution Network Operators: January DINs and SOPs

Ten dangerous incidents (DINs), suspensions of operational practice (SOPs) and national equipment defect reports (NEDeRS) were reported by DNO businesses to the Energy

Networks Association trade body in January. This briefing describes the incidents, which included three manufacturing and design faults.

[Download the briefing](#)

Chronic stress levels up to 40% higher for full-time working mums

Mothers who work full time have levels of chronic stress that are up to 40% higher than other people, according to a new study.

Researchers found that biological stress indicators for mums working 37 or more hours a week while bringing up a child were 18% higher than for women without children. Biological markers for women bringing up two children while working, including stress related hormones and blood pressure, were 40% higher.

But flexitime or working from home had no effect on stress levels, according to the study published in the journal *Sociology*.

Employers often introduce flexible arrangements to help employees balance work and home commitments. But the research found that working fewer hours was the only thing that reduced participants' biomarkers.

Chronic stress levels for women with two children working reduced hours through part-time work, job share and term-time flexible working arrangements were 37% lower than those working in jobs where flexible work was not available.

Men's chronic stress markers were also lower if they worked reduced hours, with the effect being about the same as for women.

Researchers from the universities of Manchester and Essex analysed data from 6,025 participants in the UK Household Longitudinal Survey. This collects information on working life and measures of stress response, including hormone levels and blood pressure.

Raw data was adjusted to rule out other influences, such as the women's ages, ethnicity, education, occupation and income, so that the influence of working hours and family conditions could be studied in isolation.

Eleven markers in five biological systems were used to measure stress:

- the neuroendocrine system
- the metabolic system
- the immune and inflammatory systems
- the cardiovascular system and
- the anthropometric system.

The measurements were taken by nurses as part of the UK Household Longitudinal Survey.

These markers measure the overall "allostatic load", or the long-term stress a person experiences. The allostatic load model is therefore a measure of cumulative wear and tear in

a number of physiological systems. It has been consistently associated with poor health and greater risk of death.

Musculoskeletal pain and mental ill health closely related, says HSE committee

People with musculoskeletal disorders (MSDs) such as lower back pain or tennis elbow are far more likely to also have a mental ill health condition, according to an HSE advisory committee.

When someone has co-morbid musculoskeletal pain and mental ill health, treating one is highly likely to reduce the consequences of the other, said the HSE's Workplace Health Expert Committee (WHEC).

WHEC, an advisory body of scientists and academics established to provide the regulator with expert evidence on occupational health issues, carried out a review of evidence of the relationship between MSDs and mental ill health, and released a position paper in January.

Despite studies showing that treating one co-morbid condition will help the other, the committee said there was insufficient evidence to demonstrate whether workplace interventions to prevent (rather than just treat) either of the conditions would have the same effect.

Mental health problems and musculoskeletal pain are both extremely common. In 2017/18, 595,000 people had work-related stress, depression or anxiety, while a further 469,000 people had an MSD that was connected to their job, according to HSE figures. It is therefore likely that the two conditions will often co-exist in the same individual by chance alone.

However, the WHEC said they cluster together more often than would be expected by chance, "as evidenced by innumerable scientific reports".

For instance, one survey reviewed by WHEC questioned 46,394 people from 16 countries with chronic pain. It found that one in five (one in four respondents from the UK) had been diagnosed with depression because of it.

Another study of 85,000 people from 17 countries found the odds of having a formally diagnosed mood disorder, anxiety disorder or alcohol dependence were raised 1.6 to 2.3-fold for those with chronic back or neck pain compared with those without.

A study of older people with osteoarthritis supported the committee's view that treatment of one condition will alleviate the other. Older people with osteoarthritis were randomly allocated to a group to receive either care for depression or care as usual.

One year later, those in the depression care group reported a significantly lower intensity of pain, particularly the extent to which pain from their osteoarthritis interfered with everyday activities.

Prospect health and safety members' guides

We are in the process of updating and revising our members' guides. You can download them by logging into our website.

- [Preventing work-related stress](#)
- [The menopause: a workplace issue](#)
- [Working time and the law](#)
- [Homeworking](#)
- [Harassment and bullying](#)
- [Whistleblowing](#)