

THE IMPACT OF PSYCHOSOCIAL ISSUES ON MUSCULOSKELETAL DISORDERS

This factsheet provides an overview of what musculoskeletal disorders (MSDs) are, the multifactorial nature of these conditions and the need to address both physical and psychosocial hazards in preventing and managing these disorders.

WHAT ARE MUSCULOSKELETAL DISORDERS?

The term 'musculoskeletal disorder' covers any injury, damage or disorder of the musculoskeletal system (that is, muscles, nerves, tendons, ligaments, joints and bones). MSDs can occur suddenly or over time, often resulting from lifting or handling objects or from muscular load with no objects being handled, with or without repetitive movement. This comprises over 100 diseases and syndromes, including carpal tunnel syndrome, arthritis, vibration white finger, sciatica, chronic back pain as well as musculoligamentous strains, sprains and tears.

Globally, musculoskeletal conditions are one of the leading causes of morbidity and disability, giving rise to enormous healthcare expenditures and loss of work¹, and reducing the quality of life of affected employees and their families. Work-related MSDs exert a substantial economic burden in healthcare and compensation costs, lost salaries and productivity borne not only by the employers and employees, but also by the community.

WHAT CAUSES THESE DISORDERS?

The term 'disorder' indicates the multifactorial nature of these conditions, which often develop from exposure to more than one risk factor and do not always fit neatly into an 'injury' or 'disease' category.

A variety of workplace hazards exist that can lead to people developing workplace MSDs. These can be both physical and psychosocial in nature.



Psychosocial factors that contribute to an increased risk of MSDs:

- > Organisational: high workloads, poor leadership and support, low job control, poor change management.
- Relationships: Poor relationship with the supervisor, poor relationship with the team, poor reward and recognition

Research² indicates that:

- > improving job satisfaction can reduce 17-69 per cent of work-related back disorders
- > improving a worker's ability to control their work can reduce 37-84 per cent of work-related wrist disorders

There is a need to put in place practical strategies for both physical and psychosocial factors, including improving relationships at work, increasing job control, providing support, managing change and job demands, and ensuring recognition and reward and appropriate skill use.

WHAT CAN WE DO TO REDUCE THE RISK?

MSD risk is influenced by a large and diverse range of hazards, both physical and psychosocial in nature. This means that MSD risk cannot be adequately addressed by simply assessing each hazard in isolation, but rather a more holistic approach is required to achieve effective and sustainable results.

- > Apply the risk assessment from the Hazardous Manual Tasks Code of Practice, making sure you include psychosocial as well as physical risks in your assessment.
- Consult with workers and their Health and Safety Representatives. Those who perform or have performed the task are best positioned to provide valuable information concerning any physical or psychological hazards that may need to be addressed.

WHO IS RESPONSIBLE FOR HEALTH AND SAFETY IN THE WORKPLACE?

Under section 19 of the *Work Health and Safety Act 2011* (Cth), persons conducting a business or undertaking (PCBUs) must ensure, so far as is reasonably practicable, the health and safety of their workers while they are at work. This includes ensuring:

- > the physical and psychosocial work environment is without risks to health and safety
- > safe systems of work
- > the provision of information, training, instruction or supervision necessary to protect all persons from psychosocial risks to their health and safety.

Regulation 60 of the *Work Health and Safety Regulations 2011* states that PCBUs must manage risks to health and safety relating to a MSD associated with a hazardous manual task in accordance with Part 3.1 of the Regulations.

Workers also have a responsibility under section 28 to take reasonable care for their own health and safety and that of other persons, to comply with reasonable safety instructions and to co-operate with reasonable health and safety policies and procedures.

FURTHER INFORMATION

WHS Act and Regulations:

- > Work Health and Safety Act 2011 (WHS Act)
- > Work Health and Safety Regulations 2011 (WHS Regulations)

Codes of Practice:

- > Hazardous Manual Tasks
- > How to Manage Work Health and Safety Risks
- > Work Health and Safety Consultation, Cooperation and Coordination

¹ World Health Organisation (2003). Preventing Musculoskeletal Disorders in the Workplace

² Punnett, I., Wegman, d.(2004). Work-related Musculoskeletal Disorders: The Epidemiologic Evidence and the Debate. Journal of Electromyography and Kinesiology