

When Help Leads to Harm: Injured Worker Stigma in the Compensation System

AWCBC Learning Symposium
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Overview

- ▶ **Workplace Safety and Insurance Board (WSIB)**
 - Administers 300,000 claims and 240,000 employer accounts each year
 - More than 4,200 employees in 15 offices across Ontario

- ▶ **Research Action Alliance on the Consequences of Work Injury (RAACWI)**
 - Program of research into the social, health and economic results of work injury. Goals include:
 - Filling knowledge gaps about the consequences of work injury and illness
 - Encouraging evidence-informed policy decision making in workers' compensation
 - Increasing sensitivity to and knowledge of injured worker experiences and awareness of the need to involve non-academic communities in research

The Problem

- ▶ Widespread perception that injured workers will cheat the workers' compensation system.
- ▶ Found in workplaces, health care, the community and the workers' compensation system.
- ▶ Reinforced by workers' compensation systems and culture.
- ▶ Increases distrust and impedes health recovery and return to work efforts.
- ▶ Not anyone's fault – a problem deeply embedded into the way society thinks about anyone who gets “easy money.”

Supported by Research

- ▶ Quebec study interviewed 85 injured workers -- more than half described the stigmatization, prejudice and stereotypes that painted all injured workers as “fraud artists abusing the system.” (Lippel, 2003)
- ▶ Ontario study found “institutionally–embedded expectations that injured workers will violate or abuse entitlements.” (Eakin, 2005)
- ▶ Australian study found that injured workers felt the need to justify their injury to doubting employers, friends and colleagues and experienced diminished sense of social status within the workplace, family and general community. (Roberts–Yates, 2003)

RAACWI Project on Stigma

Purpose:

- ▶ To determine nature, extent and consequences of stigma faced by injured workers
- ▶ To explore supports, strategies that assist injured workers to cope with effects of injury and stigma

Methods:

- ▶ Qualitative methodology
 - 4 focus groups in Ontario; 2 focus groups in Thunder Bay; Individual interviews with focus group participants
 - Analysis: Transcripts coded, constant comparative analysis, themes generated

RAACWI Project on Stigma

Themes:

- ▶ **Doubt, Suspicion and Blame:** Stereotype of IW as malingerer: “Easy money”; injury is exaggerated.
- ▶ **The Run-Around:** No straight or consistent answers: Creates anger, frustration -- some abandon claim
- ▶ **Intimidation:** Power in hands of system: Threats of loss of benefits –
– workers do not know how to navigate the system
- ▶ **Labelling and Disrespect:** Psychological testing reinforces stereotypes -- labels attached without knowledge of injured workers
- ▶ **A shrinking social and occupational world:** Social engagement declines due to pain, poor mental health, financial stress – fear of being “spotted.”

What would things look like in a perfect world?

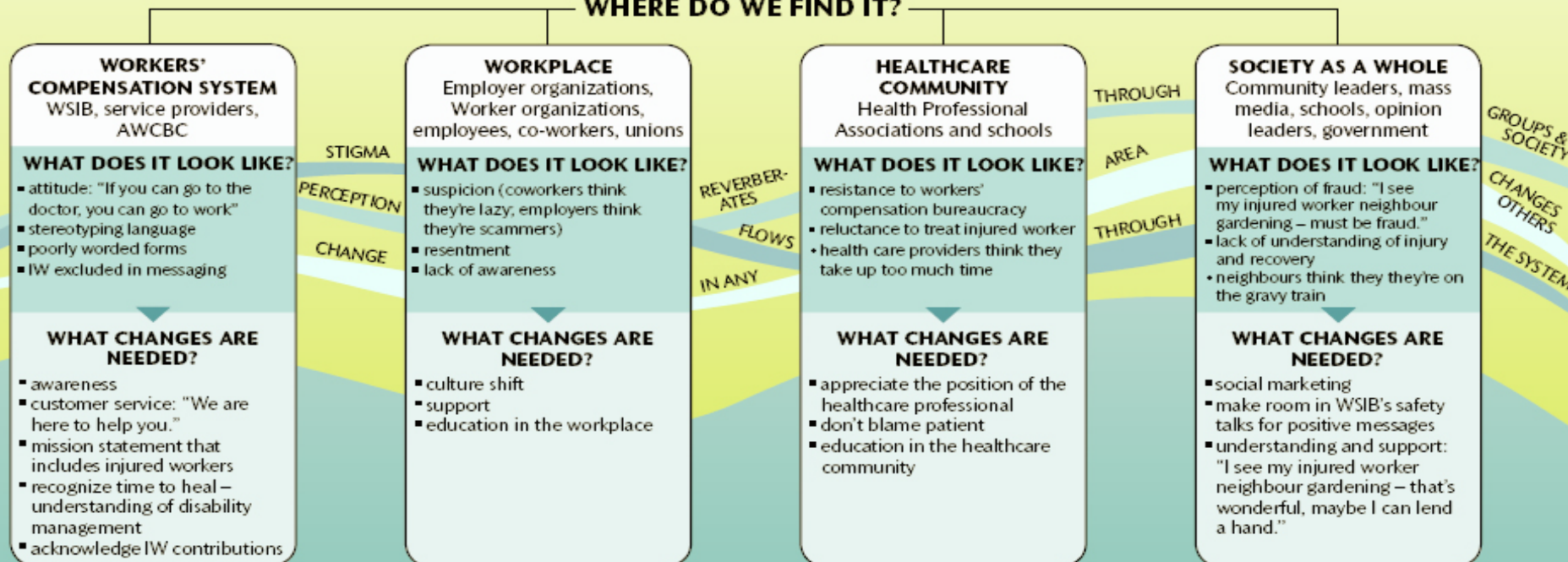
INJURED WORKER STIGMA FRAMEWORK

WHAT IS STIGMA? Stigma is a mark of disgrace that negatively sets a person apart from others. It is based on myths, misunderstandings and stereotypes that lead to stigmatization and discrimination. It affects our actions because it involves creating a negative image, looking for it and then discounting people that fall short of our expectations.

WHY IS STIGMA HARMFUL? Stigma causes us to devalue workers. It creates feelings of shame, blame, hopelessness, depression, distress, secrecy, loneliness, isolation and social exclusion and can delay recovery and return to work. It can affect the service workers get from WSIB and the health care community as well as affect their employment prospects.

WHAT DO WE WANT? Understanding of the consequences of injury and the impact of stigma on the injured worker (IW). IW treated promptly, fairly, with dignity.

WHERE DO WE FIND IT?



WHAT'S NEXT? ACTION

- Organize a voice for change; recognize the voice of the injured workers
- Continue to look for opportunities to challenge the groups above to treat workers with dignity and respect

GETTING INJURED ON THE JOB IS NOTHING TO BE ASHAMED OF; STIGMATIZING INJURED WORKERS IS.

Why does it matter?

- ▶ Impacts a worker's mental health, which can lead to depression, exacerbating the disability and making return to work difficult.
- ▶ Leads workers to avoid participating in normal activity (e.g., gardening) for fear someone will think their injury is a scam.
- ▶ Increases the risk of workers returning to work too soon or without appropriate accommodation, leading to re-injury.
- ▶ Can lead to a reluctance to report workplace injuries and illnesses.

"It's not what my co-workers say, it's how they look at you and treat you, and you become an outcast."

Blue Sky Process: Building a partnership

- ▶ RAACWI – WSIB discussion about injured worker stigma
- ▶ Review of research
- ▶ “Go round” – discussion of individual experience of stigma
- ▶ Identified key issues and formed a working group

Injured worker stigma at the WSIB

Systemic:

- The WSIB controls access to benefits.
- This sets up a power-based relationship with injured workers.
- Competing corporate imperatives – balancing revenue and expenditures.
- Employers contribute **revenue** to the system; injured workers are a **cost**.
- Non-cooperation policy and impact on benefits.
- Existence of Regulatory Services suggests widespread fraud.

Injured worker stigma at the WSIB

Cultural:

- “Us” and “Them” relationship in frontline service delivery.
- Workers are treated differently depending on their perceived attitude.
- Employers are **expected** to try to gain an economic advantage by disputing claim costs.
- Workers are **suspected** if they try to gain an economic advantage by asking about entitlements.
- Some staff personalize relationships with employers – seen as a way to build rapport.
- Workers are held at a distance to avoid becoming emotionally involved their pain and difficulties.

Awakening to the Problem

- ▶ Uncertainty about process, topic and where it would go
- ▶ Making time to listen and discuss
- ▶ Reflection exercise
- ▶ Internalizing the research findings
- ▶ Personal engagement, commitment
- ▶ Doing it again
- ▶ Commitment to evidence based policy and practice
- ▶ CEO sponsorship plus senior WSIB lead

WSIB/RAACWI Collaboration

- ▶ Formed working group
- ▶ Co-leadership
- ▶ Preparing the ground
 - reading the literature
 - understanding current (new) WSIB service delivery model
 - reflection exercises
- ▶ Variety of roles at the table
- ▶ Individual empowerment & leadership
- ▶ Brainstorming initiatives
- ▶ Identification of scope and priorities
- ▶ Project charter
- ▶ Monthly meetings – momentum

The Relationship

- ▶ All work done together – two sub committees
- ▶ Early “wins” – Stigma Framework
- ▶ Rich dialogue
- ▶ Openness and candor
- ▶ Dropping defences & positional agendas

Approach

- ▶ Integrate change into existing work activities
- ▶ “Organic” expansion of network of change agents
- ▶ Continual learning & knowledge exchange
- ▶ Action, follow through
- ▶ Introduce topic within WSIB “top – down”
- ▶ Do the work “bottom–up”

Initiatives

- ▶ Stigma Framework
- ▶ Recruitment screen
- ▶ Stigma brochure
- ▶ Staff learning solutions
- ▶ Key Messages
- ▶ Sensitivity check
- ▶ Stigma Presentation – series of “talks”

Initiatives

The facts about
**injured worker
stigma**

**wsib
cspaat**
ONTARIO



What is the Worker Sensitivity Check Tool?
The Worker Sensitivity Check Tool provides examples and indicators that you can use to recognize and indicate potential stereotypes when you communicate with injured workers. Our tool helps you contribute towards a more positive work environment for injured workers.

How do you use the Worker Sensitivity Check Tool?
This tool can be used to write, edit or update communications that will be shared with injured workers.

wsib
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Words Matter: Using language to combat injured worker stigma

Worker Sensitivity Check Tool

Question	Example/Indicator
Does this communication directly or indirectly create a negative impression or stereotype about injured workers?	<ul style="list-style-type: none"> ▶ A form or letter that asks the employer if they have any doubts that the worker's claim is genuine. ▶ A prevention ad that makes a worker look foolish, careless, clumsy or incompetent. Language like "the worker failed to..." ▶ Conversation that suggests a worker "abused their entitlement/the system." ▶ Use of the term "entitlement mentality" in reference to an injured worker. ▶ Anything suggesting workers are a "cost" to the system.
Are negative images created by key terms or words?	<ul style="list-style-type: none"> ▶ Using words like "evidence" and "objective findings" without explaining what they mean in context (e.g., "evidence" means information received on trial. ▶ Words like "co-operation" and "compliance" can create the impression that workers are devious or dishonest if over-used. They can also be threatening to a worker who may have real and legitimate issues that we should be listening to. ▶ "Exaggerated" (pain/symptoms/disability) can be a loaded term. ▶ Forms or letters requesting information that include an explanation of why the information is needed. ▶ Acknowledge that the person has been hurt; avoid putting the worker through hoops when providing service. ▶ Discussions about fraud include examples of fraudulent behaviour by employers, health care providers and injured workers. ▶ Include references to the historic compromise in speeches, training programs, descriptions of the role of the WSIB.
Does the communication promote an image of the WSIB as an organization that supports and helps injured workers?	
Is the communication balanced in its approach to an issue?	
Hot Button words	
Evidence	Discussion
Entitlement	At the WSIB, we use this word to describe objective information, usually received from a health professional. Many injured workers are threatened by the word evidence because it's normally used in relation to a crime. Instead of "evidence" consider a less threatening word, like "information."
Failure	For many people, this word means the same as "privileged." Saying someone is "entitled" or has "a sense of entitlement" suggests that they're demanding more than their fair share or expecting something they haven't earned. There's nothing wrong with the word itself, but when we talk to a worker or employer about "entitlements" or what someone's "entitled" to, it's important to explain that, in this context, we're talking about eligibility for benefits. Many of our communications are needlessly formal or use quasi-legal terms when they're not really necessary. In any context, the word "failure" has a negative connotation. Instead of saying someone "failed to respond," why not simply say they "did not respond"?

Awareness

Causes of Injured Worker Stigma

There are many systemic and structural conditions that lead to injured workers feeling stigmatized or less valued. Some of these conditions are embedded in the workers' compensation system.

Although legislation, policies, guidelines and procedures are necessary to administer the compensation system, the process can often leave the injured worker feeling isolated and depersonalized.

Click on the image.

Stigma Awareness



Awareness

Worker to Injured Worker

A worker experiences many changes after an injury including:

- Loss of gainful employment
- Loss of well-being
- Alienation by family, friends and co-workers
- Confusion and frustration in dealing with the workers' compensation system and health care professionals

These changes create a new and less valued identity: the identity of an injured worker.

Click on the image for more information.

Stigma Awareness

Worker

- Going to work every day
- Earning a paycheque
- Participating in family activities



Key Challenges

- ▶ Sensitive, emotional issue
- ▶ Understanding diverse perspectives
- ▶ Competing priorities

Critical Success Factors

- ▶ Executive support
- ▶ No blaming
- ▶ Co-creating
- ▶ Mutual respect
- ▶ Finding common cause
- ▶ “Project management”

Combating injured worker stigma

- ▶ Apply a "stigma lens" to existing
 - forms
 - publications
 - messaging
 - practices
- ▶ Create a more positive and respectful environment for workers within the workplace safety and insurance system.
- ▶ Positive messaging:
 - Meredith Principles: Workers have the right to prompt and fair compensation, appropriate health care, and help moving forward with their lives.
 - Injured workers want to recover their health and get back on the job.

Final Thoughts

- ▶ We can eliminate stigma through:
 - Education-- working to identify how it has become embedded in the system.
 - Re-evaluating our own ideas about injured workers and the role of the WSIB in helping them move forward with their lives.