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

AWCBC Learning Symposium  
October 7, 2010
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.”
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?

WORKERS' COMPENSATION SYSTEM
WSIB, service providers, AWCBC

WHAT DOES IT LOOK LIKE?
- attitude: “If you can go to the doctor, you can go to work”
- stereotyping language
- poorly worded forms
- IW excluded in messaging

WHAT CHANGES ARE NEEDED?
- awareness
- customer service: “We are here to help you.”
- mission statement that includes injured workers
- recognize time to heal – understanding of disability management
- acknowledge IW contributions

WORKPLACE
Employer organizations, Worker organizations, employees, co-workers, unions

WHAT DOES IT LOOK LIKE?
- suspicion (coworkers think they're lazy, employers think they're scammers)
- resentment
- lack of awareness

WHAT CHANGES ARE NEEDED?
- culture shift
- support
- education in the workplace

HEALTHCARE COMMUNITY
Health Professional Associations and schools

WHAT DOES IT LOOK LIKE?
- resistance to workers' compensation bureaucracy
- reluctance to treat injured worker
- health care providers think they take up too much time

WHAT CHANGES ARE NEEDED?
- appreciate the position of the healthcare professional
- don't blame patient
- education in the healthcare community

SOCIETY AS A WHOLE
Community leaders, mass media, schools, opinion leaders, government

WHAT DOES IT LOOK LIKE?
- perception of fraud: “I see my injured worker neighbour gardening – must be fraud.”
- lack of understanding of injury and recovery
- neighbours think they're on the gravy train

WHAT CHANGES ARE NEEDED?
- social marketing
- make room in WSIB's safety talks for positive messages
- understanding and support: “I see my injured worker neighbour gardening – that's wonderful, maybe I can lend a hand.”

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 in 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

The WSIB is committed to providing customer service excellence. As part of this commitment, the WSIB is working to achieve cultural transformation to reduce injured worker stigma. This involves raising awareness and understanding of the challenges faced by injured workers and their families. The WSIB is working to create a culture of respect and understanding, where injured workers are treated with dignity and respect. The WSIB is also working to provide support and resources to injured workers to help them return to work as quickly as possible.

### Worker Sensitivity Check Tool

#### Words Matter: Using language to combat injured worker stigma

The WSIB conducts research to better understand the needs and perspectives of injured workers. This research is used to inform the development of the Worker Sensitivity Check Tool. The tool helps to ensure that communication with injured workers is respectful and supportive.

| Question | Example/How to use
|-----------|------------------|
| Does the communicator explain an injury or disability in a respectful way? | A simple open-ended question like “How did you feel when you heard about your injury?”
| Does the communicator show empathy towards the injured worker? | Asking about the injured worker’s feelings and needs.
| Does the communicator provide clear and accurate information? | Asking for clarification if any information is not clear.
| Does the communicator avoid using negative language? | Asking the injured worker if they are comfortable with the language used.

### Met Breach Words

#### Example

<table>
<thead>
<tr>
<th>Met Breach word</th>
<th>Evidence</th>
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| Neutral | The injured worker feels neutral about the interaction.
| Empathy | The injured worker feels empowered and supported.
|尊重 | The injured worker feels respected and valued.
| Support | The injured worker feels supported and encouraged.
| Engagement | The injured worker feels engaged and involved in the process.
| Sustain | The injured worker feels sustained and able to manage the process.

The Worker Sensitivity Check Tool helps to ensure that communication with injured workers is respectful and supportive. It is a tool that helps to ensure that injured workers feel heard and valued.

### Conclusion

The WSIB is committed to providing customer service excellence. As part of this commitment, the WSIB is working to achieve cultural transformation to reduce injured worker stigma. This involves raising awareness and understanding of the challenges faced by injured workers and their families. The WSIB is working to create a culture of respect and understanding, where injured workers are treated with dignity and respect. The WSIB is also working to provide support and resources to injured workers to help them return to work as quickly as possible. The Worker Sensitivity Check Tool is a tool that helps to ensure that communication with injured workers is respectful and supportive.
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.
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
<table>
<thead>
<tr>
<th>Key Challenges</th>
<th>Critical Success Factors</th>
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<tbody>
<tr>
<td>Sensitive, emotional issue</td>
<td>Executive support</td>
</tr>
<tr>
<td>Understanding diverse perspectives</td>
<td>No blaming</td>
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<tr>
<td>Competing priorities</td>
<td>Co-creating</td>
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<tr>
<td></td>
<td>Mutual respect</td>
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<td></td>
<td>Finding common cause</td>
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<td></td>
<td>“Project management”</td>
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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.