



6th World conference on Psychology Counseling and Guidance, 14 - 16 May 2015

Stress-related health symptoms and working environment of older employees in Lithuania

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Abstract

The paper identifies stress-related health symptoms and work environment characteristics that older employees face in Lithuania. The data set consisted of 119 respondents of 50 years and older. Health symptoms were evaluated using 20 items derived from the Bristol stress and health work study (Smith et al., 2000). The work environment characteristics were measured using 10 scales from the Short Inventory to Monitor Psychosocial Hazards (Notelaers et al., 2007). The most prevalent health symptoms were backache, difficulty sleeping, heartburn, feeling of tiredness, etc. Respondents often had good relationships with colleagues and supervisor, and often experienced job variety and clarity. However, they had fewer opportunities to learn, lower independence at work and could rarely participate in decision making.

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Peer-review under responsibility of Academic World Research and Education Center.

Keywords: ageing workforce; health; work environment

1. Main text

Tikkanen (2008) argued that from a historical perspective the situation of older employees can be distinguished to the following four periods:

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- Work as the option, retirement as a crisis;
- Early exit from labour;
- Exit from early retirement;
- Towards active ageing and an ageless society.

The latest perspective is a recent policy development that was at least partially encouraged by the trend of ageing. Indeed, ageing is considered to be one of the most challenging issues that societies and organisations face in the recent decades (Shah & Gregar, 2013). Hence, as Shah and Gregar (2013) argued, it is of a critical importance “to retain the aging workforce in an organisation in order to avoid the labour shortages and also to retain the knowledge and expertise of the employees” (p. 449).

Health problems and peculiarities of the working environment are the issues constantly addressed in terms of ensuring older employees remain on labour market (European Centre for the Development of Vocational Training, 2010). Studies demonstrated that the working environment can have a major effect on an employee’s well-being (Tims, Bakker, & Derks, 2013, Attridge, 2009). For instance, the work environment was often considered to be an antecedent of early retirement and illness, dissatisfaction, poorer well-being which also interfere with older employees’ productiveness (European Centre for the Development of Vocational Training, 2010). Despite a number of studies carried out globally, the working environment and health conditions of ageing employees in Lithuania have not been studied much.

Some authors pointed out that the ageing tendencies in Lithuania are similar to the tendencies in the other European countries, e.g. the number of retired people is rising up (Daugeliene & Tamošiūnas, 2007). However, Mikulioniene (2013) argued that the pace of ageing population in Lithuania has been, and is expected to remain, higher than in many European countries. Hence, analyzing situation of ageing employees in Lithuanian organisations is particularly important.

1.1. Older Employees and the Working Environment

Previous studies highlighted a number of challenges that older employees face in their organizations (von Bonsdorff et al., 2011). First, older employees (especially in non-managerial positions) may be treated as being less valuable at work compared to their younger colleagues (European Centre for the Development of Vocational Training, 2010). Second, studies demonstrated that the working environment may encourage older employees to retire (von Bonsdorff et al., 2011). A study by Wahrendorf, Dragano, and Siegrist (2012) demonstrated that the psychosocial working environment contributed to the intentions to retire. Tikkanen (2008) argued that “the older workers’ decisions to remain, return, retire, or renew the work contract is moderated by organisational decisions to retain, retrain, recruit or redesign the work contract for older workers” (p. 208, citing Rocco et al., 2003). Third, longitudinal studies demonstrated that physical and psychological job demands influenced health. For example, physical job demands, such as repetitive movements, awkward posture, and pace have been associated with morbidity, disability retirement, and even mortality; whereas, psychological job strain has been linked to an early exit from working life, mortality, and coronary heart disease (von Bonsdorff et al., 2011). In Lithuania there is a shortage of studies that would identify specific working environment characteristics that ageing employees face. Having in mind that working environment is often related to such consequences as health related problems, retirement, productivity, identification of peculiarities of the working environment seems to be important.

1.2. Older Employees and Health

Previous studies demonstrated that older employees face various health problems. For example, Saastamoinen, Leino-Arjas, Laaksonen, and Lahelma (2005) demonstrated that older employees were at the excess risk for chronic

pain. Sustaining good health of older employees is a critical factor for their productiveness, motivation, satisfaction, and loyalty. Previous studies demonstrated that health promotion may increase older employees' wellbeing, higher productivity, and an improved image of the workplace (Naumanen, 2006). In the study of Kooij, de Lange, Jansen and Dijkers (2013), subjective general health mediated the negative association between age and growth motivations. Schaufeli, Taris, and Van Rhenen (2008) showed that employees who defined themselves as having better physical health, better psychological well-being, demonstrated higher work engagement. Finally, Abramson (2007) demonstrated that health was often a major factor in midlife women decisions to change labour-force activity. Hence, along with the peculiarities of the working environment, health problems faced by ageing employees are important to address, mostly due to their impact on employees' productivity, engagement, and retirement.

1.3. Older employees in Lithuania

It is important to note that since 1990 different methods have been applied to support the employment of older people in Lithuania. However, this effort was not sufficient to satisfy the needs of the elderly population (Cesnaite, Gruzevskis, & Moskvina, 2003). Insufficient satisfaction of the needs of older employees results from the limited extent of research in the national context.

In the previous studies worldwide, research have focused on the issues of older employees' job satisfaction (Bedeian, Ferris, Kacmar, 1992), opportunities and barriers for vocational education (Schmid, 2012), significance of psychological climate for an active involvement in the labour market (Siegrist, Wahrendorf, Knesebeck, Jurges, Borsch-Supan, 2007), older employees' learning (De Baets & Warmoes, 2012), and differences between younger and older employees (Zwick, 2012). In the Lithuanian context research mostly addressed the issues of unemployment and lack of occupation in older age (Okuneviciute, Neverauskiene, & Moskvina, 2008; Pocius & Gruzevskis, 2014). Hence, there is a need for a more extensive research on the older employees' health issues and peculiarities of the working environment in Lithuania.

Considering the fact that the pace of the population ageing in Lithuania seems to be higher than in other European countries and that identifying peculiarities of working environment and health issues are critical to insure productivity, motivation, loyalty and satisfaction of the older employees, in the present study we aim at identifying the stress-related health symptoms and work environment characteristics that older employees (of 50 years and older) face in Lithuanian organisations.

2. Methodology

2.1 Participants and Procedure

The data set was obtained using anonymous self-reported questionnaires, completed by employees in various private Lithuanian organisations (in 2011-2012). The data set used in the present study consisted in 119 responses of respondents aged 50 years and older. Twenty one (17.6%) participants were male and 96 (80.7%) were female; 1.7% did not specify their gender.

2.2 Instruments

Health symptoms were measured using a list of 20 symptoms (e.g. a cough, diarrhoea, heartburn, shortness of breath, etc.) derived from the Bristol stress and health work study (Smith, Johal, Wadsworth, Smith, & Peters, 2000). The respondents were asked to indicate whether during the last 14 days they experienced any of the symptoms (e.g. difficulty sleeping, dizziness or giddiness, a sore throat, headache, etc.). The response ratings were based on a two-point measurement system with answers *yes* and *no*.

Ten scales from the Short Inventory to Monitor Psychosocial Hazards (SIMPH; Notelaers, De Witte, Van Veldhoven, & Vermunt, 2007) were used to measure such work environment elements as pace and amount of work

(Cronbach $\alpha = .78$), emotional load (Cronbach $\alpha = .58$), relationships with colleagues (Cronbach $\alpha = .84$), relationships with supervisor (Cronbach $\alpha = .85$), job variety (Cronbach $\alpha = .44$), opportunities to learn (Cronbach $\alpha = .79$), independence at work (Cronbach $\alpha = .75$), participation (Cronbach $\alpha = .75$), clarity at work (Cronbach $\alpha = .77$), difficulty dealing with changes (Cronbach $\alpha = .88$). Although internal consistency reliability of job variety scale was lower, it was integrated in further data analysis for comparison purposes.

3. Results

As demonstrated in Table 1, the most prevalent health symptom among employees aged 50 years and older is backache or pains in the back. Almost 40 per cent of the respondents indicated that they experienced backaches during the last 14 days. Other prevalent symptoms were: difficulty sleeping, heartburn, wind or indigestion, being nervy, tense or depressed, a headache, a cough, catarrh or phlegm, and a feeling of tiredness for no apparent reason. The least frequent forms reported by the respondents were wheeziness, nausea or vomiting and diarrhea.

Table 1. Frequency of health symptoms among Lithuanian employees of 50 years and older

Health symptom	No	Yes
	N (%)	N (%)
Backache or pains in the back	71 (59.7)	47 (39.5)
Difficulty sleeping	81 (68.1)	36 (30.3)
Heartburn, wind or indigestion	84 (70.6)	33 (27.7)
Being nervy, tense or depressed	87 (73.1)	29 (24.4)
A cough, catarrh or phlegm	90 (75.6)	28 (23.5)
Headache	88 (73.9)	28 (23.5)
Feeling tired for no apparent reason	88 (73.9)	28 (23.5)
Blocked or runny nose	91 (76.5)	25 (21)
Swollen ankles	97 (81.5)	21 (17.6)
Toothache or trouble with gums	97 (81.5)	20 (16.8)
Dizziness or giddiness	94 (79)	20 (16.8)
A sore throat	97 (81.5)	19 (16)
A cold or flu	99 (83.2)	17 (14.3)
Pains in the chest	99 (83.2)	14 (11.8)
Rashes, itches or other skin trouble	104 (87.4)	13 (10.9)
Earache or discomfort on the ears	105 (88.2)	9 (7.6)
Shortness of breath	107 (89.9)	9 (7.6)
Diarrhea	108 (90.8)	7 (5.9)
Nausea or vomiting	110 (92.4)	7 (5.9)
Wheeziness	108 (90.8)	6 (5)

Note. The items are presented in descending order, so, the most frequent forms are on the top (i.e. with the least frequent response of *no*), $n = 119$

Results presented in Table 2 demonstrated that employees of 50 years and older rarely faced high pace and amount of work, emotional load or difficulties dealing with changes at work. They often had good relationships with colleagues and supervisor and often experienced job variety and clarity at work. However, they had fewer opportunities to learn, less independence at work, and could less participate in decision making.

Table 2. Mean rates of work conditions as reported by employees of 50 years and older

Work characteristic	M
Pace and amount of work	1.86
Emotional load	2.15
Relationships with colleagues	3.06
Relationships with supervisor	3.25
Job variety	2.87
Opportunities to learn	2.46
Independence at work	2.58
Participation	2.53
Clarity at work	3.13

4. Discussion and conclusions

Results of the present study demonstrated several important aspects related to ageing employees' health and work environment that organisations may wish to address. First of all, organisations may wish to give greater attention to the stressful working environment that may cause older employees to face such stress-related symptoms as backaches, difficulty sleeping, heartburn, wind or indigestion, nerviness, being tensed or depressed, having headache, a cough, catarrh or phlegm, and feeling tired for no apparent reason. Balancing working environment in a way that stress would not become overwhelming as well as building ergonomic conditions at work may be important aspects to reduce/manage some of the latter mentioned health symptoms.

Second, it is necessary to highlight that, overall, older employees seem to face quite healthy working environment with good relationships with colleagues and supervisors, job variety and clarity at work, rarely faced high pace and amount of work, low emotional load and little difficulties dealing with changes at work. On the other hand, older employees had fewer opportunities to learn, less independence at work, and could less participate in decision making. The European Centre for the Development of Vocational Training (2010) stressed the importance to encourage continuous learning and development of ageing employees within the organisation. Shah and Gregar (2013) proposed that workforce development and training should be provided to meet the challenges of labour shortage and to ensure professional development among the senior employees. Hence, organisations should be more aware of these potential challenges that may interfere with the older employees' productivity, motivation and should create more learning opportunities, integrate older employees into the decision making and keep them active members of the organisation.

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