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Management Strategies of Occupational Stress: Implications for Life Expectancy

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Abstract

Employees' assimilative and adaptive skills are constantly put to the test by daily demands in the workplace. This paper considered 'Management strategies of occupational stress: implications for life expectancy' with focus on occupational stress introductory background, its consequences as well as its management strategies and implications for life expectancy. Some causes of occupational stress include having insufficient skills for the job, excessive workload, interpersonal conflicts with other staff, discrimination and harassment in workplace, threat of malpractice litigation and poor wages. Ill-health, burnout, deaths and economic loss are just some of the detrimental effects of occupational stress. Its management strategies follow a pattern of physical, cognitive, emotional and behavioural targets as well as combinational change approach or at organizational level. It was recommended amongst others that workplaces management should implement public enlightenment programmes on occupational stress and its coping mechanisms for the organization members; and that routine medical examination for all workers be made part of corporate body policies against occupational stress complications.

Keywords: implications, life expectancy, management strategies, occupational stress

INTRODUCTION

Occupation, employment, work or job, is an essential need for everyone. If some persons could be trained for a particular line of work, they are said to have a career. An occupation would typically be a part of a person's career. Occupational stress, one of the most expensive occupational health problems currently facing organizations in the twenty-first century, is now becoming a global problem that affects all nations, all employee categories, families, and society, its psychological aspect being related to one's job especially in chronic conditions. Occupational stress is really a growing global concern following its global influence. Due to the quantity of time spent there, the workplace stands out among other life events as a possible significant source of stress. Sources of work-related stress include aspects that are inherent in the employment, work environment, type of occupation, organizational structure, relationships at work, economic factors of the job, challenges with training and career growth, conflict between work and family duties, and a toxic work environment.

Karasek (2017) found an estimate of adults that spend more than 75% of their non-sleeping time working, and many find fulfillment in their jobs as a result. Moreover, Afnan et al. (2018) referred to stress as the physiological and psychological response to circumstances that threaten/challenge us requiring some specific kind of adjustment. In the light of this, Gansesan et al. (2018) had stated that two types of stress exist namely: eustress and distress adding that environmental and stressful private situations are generally referred to as "stressors." According to a global organization for stress, 75% of Americans experience moderate to high levels of stress level (Megan, 2020). But Egbelu et al. (2021) in their study of perceived stress level among community health students found moderate stress level (68.5%) for the males and high stress level (73.5%) for the females. They added that the reason might not be unconnected with the fact that larger number of respondents was females. Similarly, Singh et al. (2018) noted that girls experience more stress than boys (guys) do. A pattern of emotional, cognitive, behavioural, and physiological responses to negative and toxic features of work-

related content, work structure, and work environment are referred to as occupational stress. This paper considered causes and sources of occupational stress, its consequences, management strategies and implications for life expectancy. Causes of occupational stress are linked to diverse sources.

Both a general category of what the primary occupational stressor is and a more detailed category of what causes occupational stress can be used to group the causes of occupational stress. Among the many factors that fall under the wide category of occupational stress include poor management techniques, the demands of the job, a lack of support or autonomy, and many others. The following are some of the more specific reasons of occupational stress: lengthy hours, lacking the necessary skills for the position, discrimination, and harassment (Campbell & James, 2016). Employee stress, by definition, is an external organizational factor or stimulation that makes an employee in an organization physically, emotionally, or mentally uncomfortable. While work pressure can be positive, it has a negative impact when in excess. In this case, launch an effective and direct challenge against the situation. Although it has been highlighted that a certain level of stress is important for optimal productivity, excessive or negative stress in the workplace poses a risk to the health and safety of employees (Pulat & Ruchika, 2017).

According to Murtaza et al. (2015), occupational stress sources include factors intrinsic to the job itself, role in the organization/position held (e.g. company CEO, motor driver or ship captain), relationships at work, organizational structure, institutional determinants (poor interpersonal relations, unfair management practices), climate and extra-organizational source of stress, workplace/its environment, and type of occupation (lecturing, medical practice, nursing, engineering and occupational health and safety profession). Other sources are Financial and economic aspects of the job, conflicts between work and family responsibilities, problems with training and career development (lack of opportunities for advancement), a toxic work environment marked by an absence of leadership commitment to the organization's core values, ineffective communication methods, etc. (National Institute for Occupational Safety and Health, NIOSH, 2018). Emergency medical care is also a clear clinical source of occupational stress. Indira et al. (2019) noted that caregiving for sick patients, the anxiety of finishing clinical requirements, interacting with uncooperative patients, work overload, prolonged standing, and learning psychomotor skills, such as beds bathing and making in the ward, as well as keeping track of vital signs, are all examples of clinical sources of stress. Factors intrinsic to or associated with the job or task demands as sources of stress cut across a variety of occupations (including health care sector) and these are: poor working condition, extended working hours, work overload, position in workplace, lack of task control, role ambiguity, workplace conflict and sexual harassment. These had been attested to by Marjrahi et al. (2021). The presence of stressors emanating from these sources are not without consequences.

Some complications of occupational stress could be grouped into three namely: health effects, disease burden and death, and economic loss and physical injuries. When creating workplace treatments, the conceptualization of job stress is of utmost relevance. In an organization, both employees and employers/managers feel stressed. Stress weakens professional efficacy, compromises decision-making abilities, and hinders a provider's ability to build trusting relationships with patients. (Seigrist, 2014; Baker & Ahlbom, 2017; Ali & Ahmed, 2018; Binta, 2020). Saha, (2017) had observed that psychological suffering, in addition to physical and mental disorders, could result from work stress. Up to 440 000 persons in the UK reported experiencing illness as a result of work-related stress, depression, or anxiety; as a result, approximately 9.9 million workdays were lost in 2014/2015. According to the most current Health and Safety Executive (HSE) Report (2015), work stress is more prevalent in organizations that provide public services, with a prevalence of 1380 and an incidence of 740 per 100,000 workers (Solantaus & Punamaki, 2016; Wallace et al., 2017). Nonetheless, Pariat et al. (2014) indicated that the effects of stress can cause headache, sleep problems, anxiety, and restlessness, sadness, drinking problems, depression and many other health problems as the person experienced strain and worry. Ganesan et al. (2018) posited that the prevalence of moderate anxiety was at 67% while Bhargava and Trivedi (2018) advanced the fact that prevalence of depression was at 81.60%. According to Henderson et al. (2013), the following are some of the complications of poor stress management: menstrual issues; obesity and other eating disorders; mental health issues such depression, anxiety, and personality disorders; cardiovascular disease, including heart diseases like coronary heart disease (CHD) and arrhythmias, heart attacks,

stroke etc.; Sexual dysfunction includes impotence, early ejaculation in men, and lack of sexual desire in both men and women. Skin and hair issues include acne, eczema, psoriasis, and irreversible hair loss.

According to the World Health Organization (WHO) and International Labour Organization's first joint estimates, 1.9 million deaths in 2016 were attributable to illnesses and accidents at work (ILO). Long working hours, which are thought to operate through increased psycho-social occupational stress, were determined to be the occupational risk factor with the highest attributable burden of disease in this historic study by the WHO and the ILO (2021). Yahaya and Jaalam (2019) noted that in 2016, it is believed that workplace stress contributed to 745, 000 worker deaths from ischemic heart disease and strokes. Furthermore, Riberro et al. (2017) noted that higher education students' self-reported stress levels are typically linked to lower wellbeing and quality of life. Some were even committing suicide (Saha, 2017).

Stress at work is projected to have cost the British economy E14.3 billion in lost revenue in 2013/2014, and the increased expenses in the public sector come to E1.2 billion annually. Occupational stress is a persistent ailment brought on by job circumstances that obstruct or adversely affect a worker's advancement in their employment and overall well-being. Occupational stress is a permanent condition caused by workplace circumstances that can adversely affect employees' employment advancement and general well-being. (Yahaya & Jaalam, 2019). Stress at work has a detrimental effect on employees' attitudes and behaviours, which can be expensive for the business. According to Sutherland and Cooper (2019), such effects as attitudes changes being costly, shrinking workforce/absenteeism, high work force turnover, production reduction, lack of team work, and safety issues are often observed. Decision-making is hampered by stress, which raises the possibility of workplace accidents and material waste. These dire consequences of occupational stress call for the need to design tactics on how to assuage them.

Management strategies of occupational stress

Since people who are stressed can employ a variety of coping mechanisms to buffer, limit, or accept the impacts of the stressor, occupational stress management has been viewed as a crucial component in the stress literature. It could be referred to as physical and psychological resources that help with coping with or counteracting the consequences of work stress. It could also be viewed as an attempt made by individuals to manage environmental stressors, whether through cognition or behaviour. Confrontation, coping, distance, self-control, seeking social support, accepting responsibility, avoiding escape, tackling painful problems, and positive reappraisal are some of the management techniques. These could be organized into physical activity adjustment with reduction, cognitive process slow down, behavioural change implementation, and combinational change approach. However, these tactical techniques to managing work-related stress can also be divided into organizational and individual levels. Employee assistance programmes (EAP) and changes to job procedures are often organizational level strategies. Furthermore, according to a 2012 report by the European Agency for Safety and Health at Work, socio-demographic traits of workers have steadily become crucial elements in the evaluation and management of occupational stress. These approaches are subsequently taken below.

1. Physical Activity Adjustment: Work load of employees must be reduced by adjusting earlier required production limits downwards and/or employing more hands. The management can equally encourage decentralization of job handling. Job rotation and its enrichment need be promoted. Enterprise managers could have a productive hiring and orientation process. Taking breaks during physical exercise helps reduce tension. Employees can work hard but aim to fulfill their goals, properly handle work pressures, avoid harming their peers, families, or health, and remain stress-free (Juneja, 2019).

2. Cognitive process reduction and re-direction strategy: Slow-down of cognitive processes helps to lessen tension and ultimately stress at work. Juneja (2019) opined that an employee whose daily activity involves much of cognition could promote certain approaches for stress reduction like yoga, music, and meditating on other issues rather than what he/she is presently handling. The employee

could also release tension by cracking jokes or making any other fun as well as playing an in-door game, golf, tennis etc. Physical exercise indulgence helps to keep fit but diverts mind away from work pressures. So stop being totally pre-occupied with one-self but turn focus outwards and help others, thereby releasing some stress.

3. Emotional stress check-mating: The employer needs to provide a conducive and safe working environment. The management should encourage employee's participation in decision-making so as to release role stress. Authorities of companies must have a proper and equitable distribution of rewards and pay scales (Juneja, 2019). Organizations have to appreciate their employees when exceeding their goals and achieving their objectives. Employers should grant the employees greater independence/responsibility as well as meaningful and timely feedback. Employers should ensure more organizational communication with employees in order to avoid role ambiguity/conflict. In the same vein, managers could use better symbols and short, well-scripted indicative messages for easy identification by employees so as to avoid misinterpretation and associated stress. Similarly, a company has to ensure that the organization has specific, motivating, and attainable goals, and it gives its employees feedback on how well they are doing in achieving those goals.

The employees should make a daily duty roster of prioritized acts and organize the actions accordingly, but take regular breaks to unwind themselves while working. It is believed that by using good time management, employees can meet their goals or deadlines and reduce stress. Juneja (2019) advised that employees should possess self-awareness, emotional intelligence, and confidence at work. The staff should foster a sense of community. They ought to be close friends with some reliable coworkers or contemporaries who will listen to them out of the corner of their mouth, thus boosting their level of confidence. Building such network of social connection often help employees to overcome stress.

4. Behavioural change strategy: The employees must adopt and encourage healthy lifestyles. The employees should have healthy eating habits; have enough potable water, and take regular, adequate sleep each day. Anything short of these requirements needs immediate change. Counselling is a very effective method to combat employee stress as it helps behavioural change for success in occupational stress management. It helps the employees develop techniques for modifying their behaviour by becoming aware of their strengths and how to maximize them, as well as their flaws and how to eradicate them. Each employee is eligible to get career guidance to assist them reduce extent of their ambiguities to the career (Juneja, 2019). They have to exercise self-control at workplace.

Some coping strategies on this aspect are herein x-rayed. Studies have shown that some demographic variables (age, marital status, status of being married, number of years of employment or length of service, experience in current field, line of business, and daily hours worked, income, and hierarchical level) have a strong correlation with the coping mechanisms used by doctors, nurses, pharmacists and insurance employees (Jose & Bhat, 2013; Shafaghat et al., 2018). According to French et al. (2017) each coping strategy functions independently in stressful situation with profit of the individuals' stress perception and demographic characteristics. Ogba (2020) carried out a survey on occupational stress and its management among healthcare workers in University of Port Harcourt Teaching Hospital, Choba, Rivers State found that various cadres of healthcare workers used a variety of coping mechanisms, with doctors and nurses coming to work with a positive attitude, prioritizing and focusing on what's important at work, and managing their stress levels with support from coworkers and family; laboratory scientists have trained their minds to believe that things will improve in due course, pharmacists make sure that tasks are properly divided and that supervision is effective, administrative staff rank their tasks according to importance, and some take breaks to listen to music and talk with workmates. The following have been listed Secondary school principals can use a variety of techniques to manage their stress at work, including using their coworkers as human resources, building strong relationships with their staff, enhancing teamwork, collaborating with teachers to solve problems, and hiring qualified staff to help with administrative tasks. Principals, whether they are male or female, who do not take use of the aforementioned stress management

measures run the risk of becoming stressed out, which will lower their performance and productivity at work.

5. Combinational change approach for occupational stress management: The most effective method for preventing stress at work is frequent modification and stress management, a combinational in deed by two-prong targets. Organizations and employees can both use techniques at the individual and organizational levels (Naghieh et al., 2015). According to Pega et al. (2021) meta-analysis of experiments conducted, cognitive behavioral interventions had a greater impact on reducing psychological distress symptoms in workers than relaxation and organizational therapies. In a systematic study of stress-reduction methods for healthcare professionals, cognitive behavioural therapy was found to reduce emotional tiredness and a sense of personal failure. Understanding the stressful work environments and taking action to change them can help manage occupational stress.

In furtherance of combinational change and occupational stress management work-life balance is required. In a systematic study of stress-reduction methods for healthcare professionals, cognitive behavioral therapy was found to reduce emotional tiredness and a sense of personal failure. Understanding the stressful work environments and taking action to change them can help manage occupational stress. Griffin and Clark(2016) explained that for the lowest paid workers in particular, the intervention enhanced home life, sleep quality, and safety compliance. A recent rule in France ensures that employees may spend quality time with their families by prohibiting companies from expecting them to be available after work hours. In a similar vein, the "Thriving at Work Act" was passed in Britain, encouraging employers to assist workers who are dealing with personal issues(Management Study Guide, 2022).

Experts from numerous doable strategies to lessen occupational stress were suggested by the National Institute for Occupational Safety and Health (NIOSH) in 2018. These consist of clearly defining the roles and responsibilities of each employee, allowing them to participate in decisions that impact their jobs, fostering social contact among employees, ensuring that the volume of work is appropriate for each employee's capabilities and resources, creating stimulating work environments, and providing opportunities for employees to put their skills to use and establishing good communication about workplace issues. Achieving these implies hope for longer life expectancy.

Implications for life expectancy

Manual labour has a long history of being strongly associated with shorter life spans. A career that makes you anxious will directly affect your health and longevity. Due to the varied causes of high average lifespan or expectation of life, certain data are more difficult to understand. Therefore, skilled professionals, workers with stable jobs, and people in low-anxiety occupations may live a long life for several reasons. Stress, in contrast to apprehension over a situation, is typically negative, with accompanying unfavorable psychological and physiological changes that lead to decreased productivity, sickness, and occasionally death. A person is more likely to live a longer life if their profession has more pleasant aspects. Other significant factors include gender, nation, and statistically proven risks. (Theorell &Tores, 2018). Since stress is inevitable in healthcare workers work environment, it is fundamental that the healthcare workers do have proper perception and attitude towards occupational stress along with its management strategies as it concerns their health, well-being and effectiveness on the job.

Conclusion

The consequences of occupational stress including ill-health, disease burden/death, physical injuries and economic losses with implications for life expectancy had been x-rayed. Employers and employees are both concerned about occupational stress since it has an impact on employees' physical and mental health as well as their ability to execute their jobs with the manager worrying in meeting production targets. It is, therefore, imperative that strategic management steps and coping mechanisms be put in place against its sources and causes. It can be managed at organizational and individual levels. Ultimately, personal responsibility and employer-supported measures would inadvertently address the present crisis in organizations and result in healthier, happier workplace as well as improved organizational outcome.

Recommendations

Based on the review, the following recommendations were made:

1. The management of workplaces should implement public enlightenment programmes for the knowledge of occupational stress and coping mechanisms for members of the organization and the public.
2. Government and private sectors should review their daily activities at work in line with the capacity of the workers.
3. The company authorities employing labour should agree with workers on commensurate length of break time at work.
4. Administrators of private sectors and of government agencies should ensure the practice of routine medical examination is a regular norm for members of the organization in order to avoid illnesses that would have been prevented at the initial stage.
5. The workers' union executive should intermittently organize an interactive forum of members in any establishment to share experiences on managing occupational stress with its coping strategies.
6. Workers in an organization should encourage themselves to effectively support chosen intervention of a stress management programme.
7. The management of a company should employ more competent workers in sections of the establishment where such manpower is needed as a strategy to reduce workers stress.

References

- Afnan, K., Akmgir, K., Salahuddin, K., Sami, U. K. & Muhammed, K. K. (2018). Causes and coping strategies for stress among employees. *Journal of Physical Fitness Medicine and Treatment in Sports, 1*(4), 1-5.
- Ali, M.A.& Ahmed, B. (2018). Work-related stress among nursing staff working in government hospitals and primary healthcare centres in Kastina State. *International Journal of Nursing Practice, 24*(5), e12676.
- Baker, D.M. & Ahlbom, T. (2017). Job decision latitude, job demands, and cardiovascular disease: a prospective study of Swedish men. *American Journal of Public Health, 71*(7), 694-705. doi:10.2105/ajph.71.7.694
- Binta, M., (2020). Effect of occupational stress among healthcare workers towards effective healthcare delivery in General Hospital Kastina State. *INCJ of innovation healthcare Research, 8*(1), 7 – 11.
- Campbell, H.D, & James, F. (2016). Occupational stress, preventing suffering enhancing wellbeing. *Environmental Research and Public Health, 13*(5),459. Doi:10.3390/ijerphi3050459
- European Agency for Safety and Health at Work (2012). Management of psychological risks at work, an analysis of the findings of the European Survey of Enterprises on New and Emerging Risks (ESENER), European Union.
- French, J.R., Rodgers, W. & Cobbs, S. (2017). Adjustment as person-Environment Fit. *Coping and Adaptation, 3*, 6-33.
- Gansesan, Y., Talwar, P., Norishah, F. & Oon, Y. (2018). A study on stress level and coping strategies among undergraduate students. *Journal of Cognitive Sciences and Human Development, 3*(2), 37-47.
- Griffin, M.A.& Clarke, S. (2016). Stress and well-being at work. In S. Zedeck (Ed), APA hand book of industrial and organizational psychology.
- Henderson, C., Evans-Lacko, S. & Thornicroft, G. (2013). Mental illness stigma, help seeking, and public health programmes. *American Journal of Public Health, 103*(5), 777–780.
- Indira, A., Kalavathi, B., Rajeswari, H. &Shabana, S. (2019). Level of stress among first year B.Sc. nursing students. *Nrayana Nursing Journal, 5*(3), 29.
- Jose, T. T. & Bhat, S. M. (2013). A descriptive study on stress and coping of nurses working in selected hospitals of Udupi and Mangalore Districts Karnataka, India. *IOSR Journal of Nursing and Health Science, 3*(1), 10-18. www.iosrjournals.org
- Juneja, P. (2019). *Employee stress - strategies for managing stress at workplace.*

- <https://www.managementstudyguide.com/employee-stress-and-performance.htm>
- Karasek, R. (2017). Job demands, job decision latitude, and mental strain. Implications for job redesign. *Administrative science quarterly*, 24(2), 285-308.doi:10.2307/2392498
- Majrashi, A., Khalil, A., Nagshabandi, E. A. &Majrashi, A. (2021). Stressors and coping strategies among nursing students during the COVID-19 pandemic: scoping review. *Nursing Resources*, 2(1), 1-11.
- Management Study Guide (2022). How to combat stress, burnout, loneliness, and low productivity at the workplace. <https://www.managementstudyguide.com/how-to-combat-stress-at-workplace.htm>
- Megan, H. (2020). *Stress facts and statistics*. <https://www.therecoveryvillage.com>
- Murtaza, M. (2015). Causes and preventing of occupational stress. *Journal of Deaf. Medical Science*, 2, 216-221.
- Naghieh, A., Montgomery, P., Bonell, C. P., Thompson, M. & Aber, J. L. (2015). *Organizational interventions for improving well-being and reducing work-related stress in teachers. Cochrane Database of Systemic Reviews*. John Wiley & Sons.doi: 10.1002/14651858.CD010306.pub2
- National Institute for Occupational Safety and Health(2018). Worker Health Chartbook, National Institute for Occupational Safety and Health, NIOSH.
- Ogba, A. (2020). Occupational stress and its management among healthcare workers in the University of Port Harcourt Teaching Hospital, Rivers State. *Health Science Journal*, 14(5), 738. Doi:10.36648/1791-809X.14.5.738
- Pega, F., Náfrádi, B., Momen, F. C.,Ujita, Y.,Streicher, K. N., Pruss-Ustun, A. M. &Technical Advisory Group (2021). Global, regional, and national burdens of ischemic disease and stroke attribute to exposure to long working hours for 194 countries, 2000 – 2016: a systematic analysis from the WHO/ILO joint estimates of the work-related burden of disease and injury. *Environment International Journal*, 154, 106595.doi:10.1016/j.envint.2021.106595
- Pariat, L., Rynjar, A., Joplin, F. & Kharjang, M. (2014). Stress level of college students: interrelationship between stressors and coping strategies. *Journal of Humanities and Social Sciences*, 19(8), 40-46.
- Pulat, G.S. & Ruchira, S. (2017). Study of occupational stress and its relationship of occupational functioning and quality of life among Indian military personnel. *International Journal of Scientific Research*,7.
- Ribeiro, I. J. J., Pereira, R., Freire, I. V., de Oliverira, B. G., Casolthi, C. A. & Boery, H. (2017). Stress quality of life among university students. A systematic literature review. *Health Professions Education*, 2(3), 1-8.
- Saha, D. (2017). Every hour, one student commits suicide in India. Hindustan Times. <http://www.hindustantimes.com/health-and-fitness/every-hour-one-student-suicide-in-india/story>
- Seigrist, J. (2014). Adverse health effects of high-effort/low-reward conditions. *Journal of Occupational Health Psychology* 1(1), 27-34.
- Shafaghat, T., Zarchi, M.K.R.. & Karosi, Z. (2018). Occupational stress and how to confront it: a case study of a hospital in Shiraz. *Hospital practices and research*, 3(2), 64-68. <http://doi.org/10.15171/hpr.2018.13>
- Singh, S., Singh, S. K., Manav, M. K., Kar, S., Gupta, A., Baja, P. & Sharma, N. (2018). Epidemiology of stress among nursing undergraduate students. *Indian Journal of Community Health*, 30(3), 233-238.
- Solantaus, T.L. & Punamaki, L. (2016). Children's mental health in times of economic recession: replication and extension of the family economic stress model in Finland. *Dev psychology*, 40, 292-412.
- Sutherland, V. J. & Cooper, C. L. (2019). *Strategic Stress Management*. Palgrave Publishers.
- Theorell, J.J. & Tores, V. (2018). Combine effects of job strain and social isolation on cardiovascular disease morbidity and mortality in a random sample of the Swedish male working population. *Scandinavian Journal of Work, Environment & Health*, 15(4), 27-29. doi.10.5271/sjweh.1852
- Ugbelu, J. E., Obayi, B. A. &Enemuo, N. K. (2021). Perceived stress levels among community

- health students in School of Health Technology, Nsukka, Enugu State, Nigeria. *Nigerian Journal of Health Promotion, 14*, 119-127.
- Wallace, D. D., Boynton, M. H. & Lytle, L. A. (2017). Multilevel analysis exploring the links between stress, depression and sleep problems among two-year college students. *Journal of American College of Health, 653*, 187-196.
- Yahaya, A.I. & Jaalam, S. (2019). Occupational stress and its effect towards the organization management. *Journal of sciences, 5*, 390-397.
- World Health Organization & International Labour Organization (2021). Almost 2 million people die from work-related causes each year. WHO/ILO Joint Estimates of the work-related burden of disease and injury, 2000-2016: Global Monitoring Report (Press Release of September).