The HACCP Implementation and the Mental Illness of Food Handlers As the 4th Eventual Hazard

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ABSTRACT

As it is well known, there are three types of hazard which has to be undertaken and controlled in food industry and other industries as well. There are number of hazards that can be found in almost any workplace. There are obvious unsafe working conditions, such as unguarded machinery, slippery floors or inadequate fire precautions, but there are also number of categories of insidious hazards (that is, those hazards that are dangerous but which may not be obvious) including:

- chemical hazards, arising from liquids, solids, dusts, fumes, vapors and gases;
- physical hazards, such as noise, vibration, unsatisfactory lighting, radiation and extreme temperatures;
- biological hazards, such as bacteria, viruses, infectious waste and infestations;
- Although, by practicing hazard analysis critical control point (HACCP) in factories providing insurance that all products are safe, but, it is not yet eliminate one other important factor which we found that it is important and could be effecting to not only the product but also to the workers and factories it self. We can call this factor the (psychological hazards resulting from stress and strain).

In this paper, we are going to discuss how this factor can effects the production, the workers, and the factory and how to prevent it too. Psychology in Worker's Compensation has been viewed much more favorably in the last ten years. Prior to that, there was little consideration of the psychosocial factors involved in a work-related injury and reactions to the injury.

KEY WORDS: Hazard control, HACCP, mental illness, psychology problems, food, industry

INTRODUCTION

According to WHO (1), psychological or what they call mental illness is still undefined and hidden burden. The undefined burden refers to the economic and some other factors, and stated that this burden has not been efficiently measured. Mental illness affect the functioning and thinking process of the person, greatly diminishing their role and productivity in the community.

SOCIAL AND ECONOMIC COSTS

Mental illness cause some cost in economic and social aspects which include, lost production from premature deaths caused by suicide. Also, it causes lost production from people with mental illness who are unable to work, in the short medium and long term. It also causes lost productivity from people being ill at work. The cost of accidents by people who are psychologically disturbed, specially dangerous in people like drivers, pilot and factory workers.
The European Mental Health Agenda of the European Union (EU) has recognized the prevalence and impact of mental health disorders in the workplace in EU countries. It has been estimated that 20% of the adult working population has some type of mental health problem at any given time (2). In the USA, it is estimated that more than 40 million people have some type of mental health disorder and, of that number, 4-5 million adults are considered seriously mentally ill (3). Depressive disorders, for example, represent one of the most common health problems of adults in the United States workforce. The impact of mental health problems in the workplace has serious consequences not only for the individual but also for the productivity of the enterprise. Employee performances, rates of illness, absenteeism, accidents and staff turnover are all affected by employees’ mental health status. In the United Kingdom, for example, 80 million days are lost every year due to mental illnesses, costing employers £1-2 billion each year (4). In the United States, estimates for national spending on depression alone are US$ 30-40 billion, with an estimated 200 million days lost from work each year (5,6). Mental health problems cause disability as illustrated in this monograph, mental health problems affect functional and working capacity in numerous ways. Depending on the age of onset of a mental health disorder, an individual’s working capacity may be significantly reduced. Mental disorders are usually one of the three leading causes of disability, together with cardiovascular disease and musculo-skeletal disorders. In the EU, for example, mental health disorders are a major reason for granting disability pensions (7). Disability not only affects individuals but also impacts on the entire community. The cost to society of excluding people with disabilities from taking an active part mental health and work: Impact, issues and good practices.

Statistical reports shows that Psychological problems account for 61% of absences from work each year, 65-85% of employee terminations and 80-90% of industrial accidents. An estimated 1,000,000 workers are absent on an average of workday because of stress related complaints. (The American Institute of Stress, 2000). Unscheduled absenteeism costs employers as much as $688 per employee per year

The symptoms of psychological problem can be identified in general by

- heavy drinking
- increased use of drugs
- smoking
- eating disorders
- increased sickness absence
- increased accident rates
- breakdown of relationships

Mental health problems are among the most important contributors to the burden of disease and disability worldwide. Five of the 10 leading causes of disability worldwide are mental health problems. They are as relevant in low-income countries as they are in rich ones, cutting across age, gender and social strata. Furthermore, all predictions indicate that the future will see a dramatic increase in mental health problems

WHAT IS THE REASON?
There is increasing evidence that an unsatisfactory work environment may contribute to psychological disorders. Studies have shown that factors contributing to an unsatisfactory work environment may include work overload, lack of control over one's work, non-supportive supervisors or co-workers, limited job opportunities, role ambiguity or conflict, rotating shift-work, and machine-paced work. (8,9). Psychological disorders that can result from such factors may be classified as

- affective disturbances (e.g., anxiety, irritability),
- behavioral problems (e.g., substance abuse, sleep difficulties),
- psychiatric disorders (e.g., neuroses), and
- somatic complaints (e.g., headache, gastrointestinal symptoms).

In addition to psychological disorders, stressful working conditions may have a systemic influence, possibly affecting the etiology and/or prognosis of other disease states, as suggested by recent studies of stress-related immunologic suppression (10). A prevention strategy for psychological disorders should take into account both the causal mechanisms and the factors that perpetuate these disorders. Work-related psychological disturbances are known to be influenced by both the physical and psychosocial characteristics of given job situations. Moreover, these factors operate in concert with factors unrelated to the job—such as life events; familial demands and support; and the traits, capacities, and needs of the workers themselves (e.g., personality, age, sex, and experience/learning). The interaction of these variables is complex, and the relative influence of each is not thoroughly understood. Nevertheless, approaches to prevent work-related psychological disorders should still be taken using the information currently available.

According to the National Institute for Occupational Safety and Health, and the American Psychological Association, improved training, better job design, and reduction of stress in the workplace are important tasks that can contribute significantly to the promotion of health and well being, the prevention of work-related psychological disorders, and reduction of health care costs.

**MAJOR WORK-RELATED FACTORS CONTRIBUTING TO HEALTH**

Four factors are a major influence on employee health and health care costs experience. These job and work environment (cultures) factors are:

- **HIGH DEMAND** means having too much to do in too short a time over too long a period
- **LOW CONTROL** means not having enough influence over the way your job is done on a day to day basis
- **HIGH EFFORT** means having to expend too much mental energy over too long a period
- **LOW REWARD** means not receiving adequate feedback on performance, acknowledgement for work well done, recognition.

**HEALTH CONSEQUENCES OF UNHEALTHY WORK CONDITIONS**
High demand/low control conditions at the extreme (highest 25% demand level, lowest 25% control level) compared with high demand/high control, and low demand/high control are associated with:

- significantly higher rates of anxiety, depression and demoralization
- significantly higher levels of alcohol and prescription, including over-the-counter drug use; and
- significantly higher susceptibility to a wide range of infectious diseases

High effort/low reward conditions at the extreme (highest 33% effort level, lowest 33% reward level) compared with high effort/high reward conditions are associated with:

- significantly higher incidences of anxiety, depression and conflict-related problems

High demand/low control conditions and high effort/low reward conditions are associated with:

- higher incidence of back pain
- higher incidence of repetitive strain injuries

These conditions of work arise more often by choice than by chance. They are the result of the assumptions organizations have about how to work and how to be successful. There are choices open to managers or owners even when the nature of the work constrains them to some extent.

**WHAT WE CAN DO?**

The coming suggestions may reduce work-related psychological disorders.

1. Work schedule. Design work schedules to avoid conflict with demands and responsibilities unrelated to the job. Schedules for rotating shifts should be stable and predictable, with rotation in a forward (day-to-night) direction.
2. Participation/control. Allow workers to provide input for decisions or actions affecting their jobs.
3. Workload. Ensure assignments are compatible with the capabilities and resources of the worker, and allow for recovery from especially demanding physical or mental tasks.
4. Content. Design tasks to provide meaning, stimulation, a sense of completeness, and an opportunity to use skills.
5. Roles. Define work roles and responsibilities clearly.
6. Social environment. Provide opportunities for social interaction, including emotional support and help directly related to one's job.
7. Future. Avoid ambiguity in matters of job security and career development. In addition to evaluation of these suggested actions, efforts are needed to advance the understanding of work-related psychological disorders and of methods appropriate for their control, including:

8. Train Managers to Recognize Signs of Trouble.
9. Establish Safe Complaint And Reporting Procedures.

10. Investigate Problems Quickly and Thoroughly.


12. H. Provide Counseling When Necessary

CONCLUSION

The central themes of this paper were: to identify the mental health problems in workers, and to consider the role of the workplace in promoting good mental health practices for employees. Employers, employees and unions are starting to realize that, mental health problems are the single most important cause of Disability responsible for a global burden of disease larger than that due to Infections. It was also found that the highest prevalence rates occurred amongst the youngest age group with the lowest socioeconomic status.

Further, most individuals with mental health problems do not receive professional Help. With respect to the impact of mental health problems at work, a major study (11) suggested a prevalence of 18.2% for any mental health problems. Work Impairment is always higher in workers with co morbid psychiatric disorders (more Than one disease at the same time). “The average number of psychiatric work days loss was 6 days per month per 100 workers, and the average number of psychiatric work cut-back days was 31 days per month per 100 workers.” Loss of productivity is often substantial, especially since absenteeism caused by mental health problems can be prolonged, the more so if it is not officially recognized and adequately addressed as part of the health coverage benefits avail-able to the employee. There will be instances in which mental health problems appear to be mostly related to difficult working conditions. In other cases, the illness may Appear regardless of the nature of the work environment. Employers of all sizes are beginning to recognize that depressive disorders often constitute their single highest mental health (medical) and disability cost. Employers experience expensive consequences of depression through absenteeism, lower productivity, disability, accidents and the inappropriate use of medical services (12). A large percentage of employers understand the relationship between health and productivity and are improving their management strategies by developing and implementing programmes supportive of work/family/life issues, such as flexi time, part-time schedules, child care benefits, personal leave, wellness health programmes, and family counseling.

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