### Presentation Title
A Regional Survey Assessing Total Worker Health® Engagement among Small Employers in the Midwest

### Place in Schedule
Concurrent Session 2.4  
Day 2 – Wednesday  
May 9th, 2018  
2:30-3:45pm

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| Shelly Campo, Kevin M. Kelly, Diane S. Rohlman  
While the majority of employers in the US consist of small businesses, they have received less attention from occupational safety and health and Total Worker Health® (TWH) practitioners. Characterized by higher injury rates, limited financial resources and expertise in health protection, health promotion and worker well-being, these enterprises have greater needs than their larger counterparts. In 2012, as part of the Real Iowan’s Research Initiative, the Healthier Workforce Center conducted a statewide survey of Iowa employers. Based on the Institute of Medicine’s (IOM) Employee Total Health Management model, a foundational model for TWH, the Initiative identified the health and safety practices and needs of workplaces. Seeking to understand how health and safety practice have changed, in 2016-2017 we conducted a modified version of the survey with small employers (employees <250) not only in Iowa but throughout Federal Region VII (Iowa, Kansas, Nebraska and Missouri). Federal Region VII disproportionately suffers from higher burdens of occupational injury and illness, as well as high rates of unhealthy behaviors compared to other regions of the country. In comparing the 2012 data with the current data collection, there was a significant rise in the adoption of programs addressing safety, wellness, and behavioral health among Iowa employers. Overall, 87% of respondents had at least one safety program and 62% had at least one wellness program. Approximately 57% have both a safety | Shelly Campo, PhD  
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and a wellness program. Less than 10% report having neither a safety nor a wellness program. The vast majority of small employers reported utilizing an approach that included employees in program development and that they were evaluating participation and some outcomes. However, there was a reported lack of support for both safety and health programs from management. Only 2.2% of respondents indicated that top management was supportive of both safety and wellness programs with respondents seeing top management as being more supportive of wellness programs (11.9%) than safety programs (3.0%).

Organizations were either in pre-contemplation or maintenance stages of change regarding the adoption of programs. In other words, few employers were contemplating or actively preparing to make changes to their safety and health programs. Integration was demonstrated through the use of health and safety materials to develop programs and the inclusion of employees across departments and levels of the organization in the design and development of safety and wellness programs and policies. Yet, while we saw evidence that many safety and wellness programs and policies had been adopted, there is clearly room for growth and a need to ascertain whether or not the adopted programs are effective. Moreover, despite the adoption of programs that have some characteristics of TWH, survey results showed lack of awareness of the term “Total Worker Health.”