

President's Message: Workplace Wellness & Academic Credibility

Julia Wright, DFA President, 2019-20

In my [second President's message](#), I expressed some frustration with the upper administration's use of "loosely framed surveys" instead of engaging in meaningful collegial governance. This month, we asked a faculty member with academic expertise in survey design, Professor Karen Foster, to give us her thoughts on the BAC and Workplace Wellness surveys—you can read her very useful piece later in this newsletter.

Here, I want to turn to this larger discourse of "Workplace Wellness." I suspect a fair number of us bristle at both our employer asking questions that are properly asked by our physicians and the implication that we need to be reminded of what we generally consider "common knowledge." The complaint I've heard the most from my colleagues is this: "I know I should, but I can't because of my workload."

Well, that's kind of the point. Bluntly, Workplace Wellness began in the corporate world to support two goals: **1. reduce healthcare costs; 2. boost productivity.** In other words, the purpose of Workplace Wellness is to get more done, more cheaply, without hiring more people.

Corporate models are often spawned in the US where there is no universal healthcare, so [reducing healthcare costs](#) is big business. But recent studies suggest Workplace Wellness doesn't actually make much of a difference: see, for instance, [this Canadian piece that's nearly six years old](#), and a recent *Scientific American* article that raises questions about "[the Workplace Wellness Industry.](#)" A 2017 article on the industry in *Health*

Matrix: The Journal of Law-Medicine also raises serious concerns about some "vendors" "[disregard\[ing\] clinical guidelines.](#)"



The emphasis on [boosting productivity](#) suggests why reducing workload is rarely featured in the conventional rhetoric of Workplace Wellness. So, here at Dalhousie, we have a "[Work Well](#)" Strategy, not a "Reasonable Workloads Support Excellence" Strategy. We are enjoined to participate in "[Walktober](#)," not encouraged to report teaching schedules that extend for four hours or more without a break. Workplace wellness is about helping us work longer hours, take fewer sick days, and endure.

I'm not opposed to people finding support to be healthier, of course, and if you're fine with getting it from your employer then it's good that the administration is able to provide some resources. But the seminars can be poorly designed to meaningfully assist us. Some are run over long periods on weekdays, even over multiple weeks, so they're inaccessible given our schedules, for instance.

Corporate-world boosterism can also be incompatible with standards of academic as well as clinical rigor. In May 2017, the administration offered seminars over three half-days "On Being Positive," including instruction on "the Losada Line and the Positivity Ratio." This appears to be based on [an article](#) that was partially retracted (my thanks to a colleague who tracked this down and shared

the information back then!). You can find a link to the authors' correction at the top of the online article, and it reads, in part,

The hypothesis tested in this article was motivated, in part, by the nonlinear dynamic model introduced in Losada (1999). . . . This model has since been called into question. . . . [T]he modeling element of this article is formally withdrawn as invalid and, along with it, the model-based predictions about the particular positivity ratios.

This session was run again in 2018 and, yes, you will also find it in this year's [calendar](#).

The Workplace Wellness industry also pushes "[Wellness Champions](#)" and Dalhousie's administration has picked up on this fad, too—it's mentioned in the latest Workplace Wellness survey. One company that supports this concept has [the torturous slogan](#), "We bring wellness to your workplace & champion the belief health comes from within." (*If it's within, why do they need to bring it?*) But this company is in the business of sending consultants. The other "Champion" model is to get existing employees to do the work (adding to workload...), and of course that's where our administration is going.

If you look at corporate Wellness sites like [this one](#) or [this one](#), you will find a lot of elements we've been seeing at Dalhousie over the last five years: Wellness [champions](#), a [survey](#), and various low-cost activities, such as [a workplace garden](#), [no-equipment exercise](#), [online tools](#), and so on. While there's not a lot about it on Dalhousie webpages, these sites say it over and over again: the explicit

goal is to reduce healthcare costs and increase productivity.

Given the kind of work we do, does any of this make us more productive? If the upper administration wants faculty to increase "research productivity" (as a way of pulling Dalhousie back up the world rankings, [as Senate has recently heard](#)), then a concerted effort to ensure reasonable class sizes might be a lot more effective than healthy-living seminars we don't have time to attend—and smaller classes could help our students, too.

If we get sick for a few days, it doesn't affect how much work we do: if we're teaching, the prep and marking don't change and we likely have to do extra work to adjust for missed classes; in other contexts, our colleagues may have to pick up our work for a while; research deadlines and peer-review standards are also unaffected by a nasty cold. For short illnesses, our work generally gets redistributed—not reduced.

Instead of Workplace Wellness surveys, champions, and half-day seminars, the academic mission could be better served by more attention to the practical ways in which we could be supported. This could include not only addressing workload creep, but also ensuring prompt access to accommodations for those of us who need them: an assistive device, an appropriate classroom, a reasonable amount of time to deal with a family crisis or loss.

Instead of jumping on the corporate bandwagon, let's use evidence, reason, and compassion to determine what will do the most good.

Please contact me anytime, Julia.Wright@dal.ca, or the DFA office at dfa@dal.ca.