Designing work organization based on “occupational” collectives and “inter-occupational” relations: methodological implications of ergonomic interventions to prevent psychosocial disorders

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1. Objectives
The objective of this presentation is to explore methods of ergonomic intervention to reduce the risk of work-related mental health disorders and improve prevention. The aim is to show that the design of organizational structure can be enhanced through debates about work among occupation-specific collectives and through the development of relations among various occupations. Creating openings for discussion about work activity and quality of work helps to foster the development of collective activity, which guides work organization design choices. Organizational design projects based on collective activity affords greater room to maneuver and increases each occupational group’s power to act and to collaborate with other occupations.

2. Context and intervention work
In the European Union, occupational health and safety regulations are tending towards the obligation to work in a multidisciplinary fashion to improve prevention efficiency. In France, multidisciplinary teams in occupational health departments set up a service project with defined prevention priorities. We are carrying out several intervention projects in this area. The requests often describe conflicting relations between occupations and their difficulty working together, and hence collectively designing a service project.

3. Methodology
The intervention is based on a participatory design approach and work activity theory. We shall present two interventions of occupational health departments whose contexts, in terms of multidisciplinary team composition and operating mode, are very different. The intervention approach is similar in both cases, based on running “occupational” groups to begin with and then “inter-occupational” groups at a later stage. The occupational groups discuss work activity, which observed of each occupational (doctor, nurse, risk engineer, prevention specialist) on their typical work situations (for e.g. consultation with employee, visit in companies). The aim of this approach is to have the occupation-specific collective express their points of view about the occupational health project prevention themes (for e.g. diagnosis of exposure, recommendations of safety and health in companies) and their organizational needs for the inter-occupational groups to design the arrangements and means necessary to manage the prevention themes.

4. Results
Developing such collective activity aims to help the members of an occupational group to define their stance and future directions in relation to the service project themes and, above all, to question possible forms of work organization for better multidisciplinarity while enabling each occupational to develop specific aspects of their activity. To achieve this, we have set up organizational simulations to try out new forms of work organization with the occupational group. The first results show that this methodology allows different organizational choices to be put forward (new procedures, other forms of task-sharing or new ways to manage company requests, etc.).

In second result, we found that the changes to occupational health departments carry with them the risk of doing less and less occupational health and focusing technical matters of risk prevention. Our two intervention cases, which are based on the idea that it is necessary to build collective activity in order to redesign work organization, show us that this methodology is not easy to implement in a context of deep-
reaching change and requires constant adjustments. This suggests that the methodological ingredients to be used in intervention projects should be adjusted to make collective activity possible.

The third result shows that the building of multidisciplinary teams is not easy when collective work is required and the activity contexts are not conducive to the building of an occupation-specific collective. Inter-occupational relations are limited when there is no shared collective viewpoint about the way a job should be done. Experimenting with or simulating collective work organization appears to offer an opportunity for occupational groups and managers to discuss real work situations. Particular attention must be paid to the participation of management. Designing organizational choices with needs and sense of collective activity, which may become a resource for developing the individual activity of specific occupational, will prevent the psychosocial disorders.