THE HAZARDS OF BEHAVIOR-BASED SAFETY

Behavior-based safety: today and yesterday

"Behavior-based safety" is a term used for programs focused on changing the behavior of workers in order to prevent occupational injuries and illnesses. These programs rely on the false claim that workplace injuries and illnesses are the result of "unsafe acts." Behavior-based programs target specific worker behaviors and solicit workers and management in monitoring these behaviors on the shop floor. Depending on the program, such "observations" may be followed up with positive reinforcement (complimentary evaluations, prizes, rewards) or discipline (not necessarily overt).

"Behavior-based safety" is not a new concept. It originated in the 1930s and 1940s with the work of H. W. Heinrich at the Travelers Insurance Company. Heinrich conducted "research" on thousands of insurance and injury/illness reports written by corporate supervisors. The reports blamed the workers, so-called "man failure" in the jargon of the time, for 73% of the accidents. Heinrich revised this figure upwards to conclude that 88% of industrial accidents could be blamed on workers. Some management-side safety professionals have based their work on Heinrich's faulty theories ever since.

What is wrong with behavior-based safety programs?

Behavior-based safety programs appeal to many companies because they make health and safety seem simple, do not require management change, focus on workers and seem cheaper than correcting health and safety hazards. By requiring workers to monitor each other, behavior-based safety programs generate fear and conflict among members and undermine union solidarity.

By directing attention to the workers who in most cases had little or nothing to do with the selection of machinery, processes, and procedures and methods, such programs undermine legitimate health and safety activities and excuse management's shortcomings.

Companies selling behavior-based safety programs claim the number of lost workdays drops with these programs. Lost-time accidents are known to be the least reliable measures in

determining the effectiveness of a health and safety program since lost workday rates can depend on a company's ability to put injured workers on light duty or to discourage workers from reporting injuries. This can drive safety and health problems underground. In some cases, companies threaten workers with drug tests, loss of overtime opportunities and/or days off if they report job-related injuries and illnesses. By knowing that if an injury or illness occurs they will be blamed, workers can be strongly discouraged from reporting injuries and illnesses.

By discouraging workers from reporting injuries, companies know that they stand to be looked upon favorably by OSHA (the Occupational Safety and Health Administration) and to have lower workers' compensation rates.

Many companies are also turning to behavior-based safety as a way of side-stepping the safety and health risks associated with increased line speeds, work duties, mandatory overtime and other forms of work restructuring. (See IBT Fact Sheet, *Overtime and Extended Work Shifts: Injuries, Illnesses, and Other Effects*)

What are the most effective ways to control safety and health hazards?

To prevent accidents, the emphasis should be on eliminating and minimizing hazardous conditions, involving equipment, work practices, and chemical, physical or biological agents which might endanger health and safety at the worksite. Health and safety professionals and organizations, including the IBT Safety and Health Department, support a systematic approach to solving safety and health problems which relies on a "Hierarchy of Controls." This approach emphasizes the following:

- 1. Elimination of Hazards
- 2. Substitution of Hazardous Processes or Materials With Less Hazardous Processes of Materials
- 3. Engineering Controls
- 4. Training and Administrative Procedures, and
- 5. Personal Protective Equipment

Behavior-based safety programs turn the hierarchy upside down. Most programs begin with the identification of 'critical worker behaviors.' Critical worker behaviors typically include wearing personal protective equipment and following safety procedures. Behavior-based safety programs do not improve safety; in fact they increase the likelihood of workers being exposed to serious health and safety hazards by focusing on the least reliable methods for protecting workers. Worst of all, they are based on an assumption the workplace doesn't need to be redesigned to remove safety or health hazards and that workers don't care about their own safety and need to be bribed or bullied to work safely.

What can be done about it?

Like other management proposals and policies that influence conditions of work, behavior-based safety is a bargaining issue. The National Labor Relations Board (NLRB) has ruled that employee safety and health is a mandatory bargaining subject. Therefore, it is the IBT's recommendation that an employer's proposal to introduce behavior-based safety policies should be open for negotiation and discussion. Education of members is key in terms of mobilizing

around this issue. Teamster members, stewards and representatives have worked hard to establish strong safety and health initiatives in all Teamster industries. Since behavior-based safety fails to address the root causes of injuries and illnesses, it is important for union members and representatives to demand resources for safety programs targeting workplace hazards. Management should be prevented from forcing any bargaining unit members from participating in this program unless they volunteer.

The IBT Safety and Health Department can assist in evaluating various policies that might have an adverse effect on the safety and health of our members.

For more information, please contact the Safety and Health Department at (202) 624-6960.

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