Worksite Dining as a Collective Good or Individualization of Health - a Danish Perspective

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Abstract
This paper is based on a survey of Danish literature about worksite eating carried out as a part of the project ‘Food at work around the clock?’ by Lunds University and Technical University of Denmark and financed by Øresund Food Network. The focus has especially been on the relations between work and diet and the experiences with promotion of healthier eating through intervention projects at worksites.

The overall results of the survey show that there does not exist much Danish research about the influence of work and the work environment on eating habits, including worksite eating. The few analyses that have been conducted show that negative and long-term stress, where the employee lacks influence and control on his own work, may cause health problems and changes in body weight, so that slim persons become slimmer and the obese become more obese.

A small interview survey shows that the type and the organization of work influence how worksite eating is organized. Especially in the service sector, it is difficult for all employees to eat at the same time. Their eating schedule is negotiated among the employees according to the needs of the individual employee.

An area with Danish research is the influence of the worksite eating on work and work environment. The survey showed social inequalities in relation to health, like in many other countries. A national dietary survey has shown that persons with long education eat healthier and are more interested in healthy food. Research also shows a correlation between diet and other aspects of life style: if a person has health dietary habits it is more likely that the person also has a high level of physical activity, does not smoke and does not have a high consumption of alcohol.

An increasing number of Danish worksites have some sort of health promotion activities, including some kind of healthier food, like providing free water, healthier meal options, bread with high fiber content, fruit supply scheme etc. A national survey of these activities is carried out bi-annually. The recent survey shows that 60% of the worksites have some variety of food supply for its employees. For example, 33% of the worksites have a food scheme like a canteen and 48% have a fruit scheme. The surveys show big inequalities with respect to health promotion at the worksites in relation to branch and geographic regions. Within the finance sector, 53% of the worksites have a food supply scheme, while only 30% within the construction sector has some kind of food supply to its employees.

Big worksites are more likely to have a canteen than small worksites. A survey indicates that worksites with more than 50 employees are more likely to have a canteen. The canteens are typically small. Around 75% of the canteens have less than five employees. Of the canteens, 25% are outsourced, while 75% are run by the worksite. A recent survey shows that more and more canteens serve food from a buffet and not from a counter.

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A substantial part of the Danish experience within worksite eating is based on worksite intervention projects aiming at making the food supply healthier. These interventions have achieved bigger awareness about health food and also an average increase in the consumption of fruit and vegetables. How this differs among the individual employees is unknown.

The long term embedding of these activities has up till now only been analysed to a limited extent. The analyses seem to show that employee participation in the planning and implementation of the scheme and a scheme based on voluntary initiatives make employees assess the scheme as a positive initiative. The organizational and economic conditions of the worksite seem to influence the long-term embedding of healthier eating initiatives. For instance, outsourcing of the canteen may make it difficult to sustain results obtained before the outsourcing.

The government initiatives around healthier worksite eating have, up till now, focused on developing policy documents, printed materials for inspiration, guidelines, training, and funding of intervention projects. Most government initiatives have involved a number of different stakeholders in a kind of partnership. The stakeholders include government authorities and agencies, research institutes, health organizations and trade unions. A recent initiative focuses on food and diet policies at worksites. All government worksites at the state level should, before the end of 2008, develop a food and diet policy. The experiences so far from other areas, like public green procurement, indicate that a policy in itself may not change the practice of an organization.

The experiences so far seem not to have focused on the relations between work, work environment and health. Thereby the food interventions may cause a more individualistic approach to health at worksites, compared to the more collective and interest-based approach which characterizes the safety work and the safety organization of public and private worksites. A small international study conducted in relation to the Danish and Swedish survey of food at work show some, although limited, experiences in other countries with integration of concerns about work environment as part of health promotion activities.

Future Danish activities within health promotion, including healthier worksite eating, should integrate a focus on work environment in order to combine an individualistic approach with a collective and interest-based approach to health and the role of the worksite. Work environment research indicates that more problems at the workplace are managed within the human resource (HR) field rather than in the work environment field, which could imply a more individualistic approach to worksite health and health in general, where life style is seen as a free and individual choice.

**References**