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Differential mental health consequences of strikes and lockouts

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Abstract

Do different types of industrial action have differential effects on union members' mental health? We compared the effects of a strike and a lockout on members' psychological distress 6 months after industrial action was resolved. Participants were 156 secondary school teachers in 2 different school boards, all of whom belonged to the same union. Six months prior to survey administration, both school boards had experienced the same industrial relations negotiation process, both had a settlement imposed on the same day by back-to-work legislation, but differed on the type of industrial action taken: members of one board went on a 4-week strike, while members of the other board were locked out by board management for 4 weeks. Compared to members who went on strike, members locked out reported higher levels of context-free psychological distress 6 months after being legislated back to work. We discuss implications for theory, practice, and policy.

Keywords: industrial action, lockouts, mental health, strikes

Public Significance Sentences

- Strikes and lockouts have different effects on the mental health of union members, with lockouts potentially worse for mental health than strikes are.
- It is important that during and after labor action, union members have access to mental health support services.

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Involvement in industrial relations processes, from everyday activities such as policing the terms of a collective agreement through participating in industrial action, has widespread implications for unions and their members, management and their organizations, and even the general public (e.g., Day, Stinson, Catano, & Kelloway, 2006; Kelloway, Francis, Catano, & Dupré, 2008; Scales, Kelloway, & Francis, 2014). From an individual perspective, involvement in industrial action such as a strike or being locked out of work can affect the psychological well-being of union members (Bluen & Barling, 1988). The current study used a serendipitous design to examine how the specific type of industrial action (strike vs. lockout), with everything else being largely equal, affected union members' mental health six months after the industrial action was completed.

Industrial relations involvement can be a form of stressor for those involved (Bluen & Barling, 1987, 1988). For example, Bluen and Jubiler-Lurie (1990) simulated labor-management negotiations and found that those involved in the negotiations experienced greater negative changes in anxiety. While that study examined a singular event, other practices associated with industrial relations may occur over an extended period. Labor disputes in which employees or management seek industrial action by taking the form of a strike or initiating a lockout can also be stressful. Going on strike – that is, when the union and its members refuse to work – often involves major role changes from employee to picketer (Barling & Milligan, 1987). Similarly, in lockouts, employees are prevented from striking due to management initiating action preemptively – by literally locking employees out of the premises preventing employees from working.

Previous research has associated labor action with lower psychological well-being. MacBride, Lancee, and Freeman (1981) studied employees who voted in favor of a strike that was ultimately prevented when the government intervened and ordered employees to return to work. Despite the aborted strike, employees reported higher levels of psychological distress and a deterioration in psychological well-being. Studying another strike context, Barling and Milligan (1987) found that negatively perceived industrial relations events predicted detrimental changes in post-strike psychological well-being both two and six months later. Extending these findings, Bluen and Jubiler-Lurie (1990) conducted a longitudinal study with industrial relations practitioners: negatively perceived industrial relations stress predicted negative changes in psychological wellbeing, even after controlling for initial psychological well-being, initial industrial relation stress, age, and tenure. More recently, Fowler, Gudmundsson, and Whicker (2009) investigated the relationship between psychological well-being and members' involvement with union activity during a strike: compared to non-strikers, strikers reported lower levels of mental health, in particular higher levels of depression, anxiety, and irritation.

While all these studies demonstrate an association between industrial action and psychological well-being, the extent to which these findings inform our understanding is limited as different forms of industrial action such as strikes and lockouts may well exert different effects. Although there is a body of knowledge on the psychology of strikes (e.g., Bluen, 1994), one aspect of labor disputes that has escaped empirical scrutiny is the consequences of management-initiated lockout. In a formal strike situation, unions would first seek the support of their membership, ensure that they have the legal right to go on strike, and then withdraw their labor in an attempt to influence the direction of negotiations and collective bargaining. In contrast, in a lockout, management pre-empt the union by seizing control of the situation. While

strikes can be stressful, they still offer workers an opportunity to exert control over their work situation by influencing the context in which disputes can be settled (Bluen, 1994). However, felt personal or collective control is reduced dramatically, if not lost, during a management-imposed lockout. This is a crucial distinction, as employees who are locked out of work may well experience a sense of loss of control, as well as an increase in the degree of external threat (Blackwood, Lafferty, Duck, & Terry, 2003), both which are associated with reduced psychological well-being more generally.

Despite the factors differentiating strikes from lockouts, there appears to be no research addressing the potentially differential psychological consequences. This should not be surprising for several reasons. First, strikes themselves are relatively uncommon events, but lockouts occur even less frequently: according to Briskin's (2007) analysis of Human Resources and Skills Development Canada (HRSDC) data, lockouts represented between 6.9% and 16.4% of total work stoppages occurring in Canada between 1976 and 2004. Second, many government agencies responsible for maintaining national databases on labor-related issues in both the United States (e.g., Bureau of Labor Statistics) and Canada (e.g., HRSDC) do not maintain separate databases on strikes and lockouts. Instead, data on strikes and lockouts are routinely collapsed into a single category (e.g. "strikes and lockouts", "major work stoppages"), exacerbating the difficulty of obtaining nuanced information on the nature of their occurrence and thus studying their effects. Third, union density has declined in Canada in the past several decades (Statistics Canada, 2018), and with this decline the number of both strikes and lockouts has decreased (Briskin, 2007), making it more difficult to research such situations.

In the current study, we compared the mental health effects of a strike versus a lockout. The contextual conditions that lead up to these two types of industrial action were identical, the

length of the industrial action was both four weeks, and the termination of the industrial action occurred at the same time by government-imposed back-to-work legislation. This contextual symmetry provided the opportunity to study the relative effects of a strike and lockout on employee mental health.

Method and Results

Historical and study context

In December 1997, the provincial government of Ontario (Canada) implemented Bill 160 (Reshef & Rastin, 2003), named the *Education Quality Improvement Act*, proposing major changes to teachers' work conditions. This legislation included regulating classroom sizes, increasing time spent in the classroom (e.g., 1250 minutes a week for secondary school teachers), reducing preparation time, and moving education tax control from the school boards to the province (Lewington, 1998; Toronto Sun, 2012; Wheeler, 1998). Consequently, 126,000 public (non-denominational) and Catholic school teachers who were represented by one of five unions held a province-wide walk-out to oppose the changes in the lead-up to the bill, resulting in one of the largest strikes in North American history (Toronto Sun, 2012). After ten days, the walk-out concluded when each union asked teachers to return to work (Arnold, 1997; Lewington & Mahoney, 1997).

Despite this concerted effort, Bill 160 passed in December 1997 (Reshef & Rastin, 2003). The Ontario government not only pressured school boards to meet the new requirements, but were also given a tight deadline to implement them (Toronto Star, 1998), resulting in a unilateral approach to collective bargaining across the unions (Mackie & Lewington, 1998). At the same time, collective bargaining opened up as all collective agreements for teachers in Ontario ended on August 31, 1998. These two features put pressure on school boards and unions to come to an

agreement before the start of the new school year in September, and created a strained collective bargaining environment among school boards, unions, and members for years to come (MacDonald, 2000).

Just after the expiration of collective agreements, two bargaining units consisting of secondary school teachers from two school boards faced industrial action: one unit embarked on a strike, while the other was locked out by management (Brennen, 1998; Mallan, 2000). Both units were legislated back to work four weeks later in October 1998 (Edwards, 2015). With the back-to-work legislation imposing a deadline of January 26, 1999 for reaching an agreement (Clairmont, 1999), the two units took approximately six months to reach a collective agreement, with both units arriving at a collective agreement at approximately the same time, and both ultimately complying with Bill 160's requirements.

Procedure, study sample, and measures

In early 1999, we sought permission to mail paper-and-pencil questionnaires to the union representatives in the school board that had gone on strike (approximately 1,600 teachers) and the school board that had faced a lockout (approximately 400 teachers). To enable a comparable sampling strategy between the two school boards, the union representative of the school board that had gone on strike agreed to distribute questionnaires to every fourth teacher on their membership list. As such, approximately 800 questionnaires were distributed in total to teachers across the two school boards, with 156 questionnaires returned: 91 teachers in the striking school board returned surveys (23% response rate) and 65 teachers in the locked-out school board returned surveys (16% response rate). The average age of striking teachers (56.5% female) was 41.11 years (SD = 8.00) and had been teaching for an average of 14.55 years (SD = 7.96). The average age of locked-out teachers (50% female) was 39.36 years (SD = 8.60) and they had been

teaching for an average of 12.19 years (*SD* = 8.41). There were no significant differences between the two school boards on these three demographics, suggesting that the average respondent in both boards were very similar. In addition to collecting these demographic data as part of the survey, we measured *mental health* using three items from what became Shevlin and Adamson's (2005) anxiety-depression sub-scale of the General Health Questionnaire ("Please indicate how often you have experienced the following items recently" on 1 = always to 5 = never: 'lost much sleep over worry?', 'felt constantly under strain?', and 'been feeling unhappy and depressed'). We used the mean item score, with higher scores indicating better mental health (whole sample: $\alpha = .74$; strike: $\alpha = .68$; lockout: $\alpha = .79$)

Analyses

We used an alpha level of .05 for all statistical tests. An independent samples *t* test between the teachers who had experienced a strike versus a lockout showed a statistically significant difference on mental health. Six months after being legislated back to work, teachers who experienced a strike reported better mental health ($M = 3.08$, $SD = .81$) than teachers who had experienced a lockout ($M = 2.78$, $SD = .84$), $t\ (154) = 2.28$, $p = .02$, Hedges' $g = .36$, which would be considered between a small (.20) and medium (.50) effect size (Cohen, 1988). We also tested an additional exploratory model with age, gender, and number of years of teaching experiencing as statistical control variables; no between-group differences emerged on any of these variables, and the difference between strike and lockout mental health remained statistically significant.

Discussion

Our study extends previous research investigating the effects of industrial action on members' mental health by comparing two types of industrial action: a strike versus a lockout.

Both industrial actions had identical pre-conditions, both lasted the same length of time (4 weeks), and both settled by back-to-work legislation on the same date. As such, these conditions enabled an opportunity to compare the mental health consequences of two different types of industrial action. Six months after industrial action ended, teachers who went on strike reported better mental health than teachers who were locked out for the same period.

Unlike a strike, a lockout prevents members from participating in strike activity (e.g., walking the picket line), with previous strike literature (e.g., Nicholson & Kelly, 1980) suggesting that involvement in strike activity can positively benefit those involved and can be a coping strategy. Most recently, Fowler et al. (2009) found that strikers who were highly involved in strike activity demonstrated lower levels of depression and anxiety, as well as higher levels of general mental health. In a similar vein, we speculate that those experiencing a lockout may have been unable to benefit from the coping mechanism that comes from being involved with being on strike or involvement in strike activities, despite being involved in some form of industrial action.

Implications, limitations, and future research

The results of this study have several implications for theory, policy and practice. From a theoretical standpoint, the present findings support the importance of differentiating between strikes and lockouts, as opposed to treating all types of industrial action the same. While we can only infer support from the present findings for control as a mechanism differentiating the mental health effects of a strike and lockout, future research should test these constructs directly. In any such research, use of a control group might illuminate whether the differences were a function of the loss of control experienced in a lockout, or the positive effects of the maintenance of control during a strike, or both. It is also possible, however, that differences in mental health result from

the amount or type of industrial relations conflict experienced *after* the dispute, as although both units were legislated back to work at the same time, there may have been differences in how management and union dealt with the fallout. In addition, pre-existing differences with respect to mental health constitute a rival explanation for the findings; pre-test measures would have helped to rule this out. However, the circumstances that would have allowed researchers to do this would have likely been serendipitous: the researchers would have had to be in a position to take advantage of naturally occurring differences in type, length, and nature of industrial action, while also having pre-test measures of mental health.

A cautionary note with the current study is the low response rate and potentially biased sample, but these two limitations are abated for several reasons. First, the demographic characteristics of our two samples closely paralleled those of the entire union. The union estimated that 60% of the union members were female, and in our total sample 54% of the participants were female. Similarly, the union estimated that the average age of the teachers was early-to-mid 40's, and the average age of our sample was 40.38 years of age. Second, relatively low response rates are not uncommon when studying union-related issues using unsolicited surveys (e.g. 15.5% for Fullagar's [1986] membership sample, 11% in Kelloway, Catano, and Southwell's [1992] sample of unionized flight attendants, and 11.6% for administrators), so are quite consistent with sampling in the existing literature.

It is becoming clear that industrial action affects more people that those directly and actively engaged in the action. For example, Lusa, Häkkänen, Luukkonen, and Viikari-Juntura (2002) addressed the well-being of union members who chose to continue working through a strike, Kelloway et al. (2008) focused on the critical role of members of the public in the outcome of a strike, and Scales et al. (2014) examined managers' (as opposed to members')

stress about industrial action. In the same way, we argue that there could have been indirect effects of teachers' post-industrial action mental health on student outcomes (e.g., Jennings & Greenberg, 2009), implicating the nature of the post-strike/post-lockout industrial relations process on subsequent student learning and quality of teaching provided. Further, management in many jurisdictions retains the legal right to impose a lockout during labor disputes. From a mental health perspective, the results of this study might question the benefit of pre-empting a strike with a lockout: the short-term strategic benefits may create longer-term negative consequences for members, union-management relations, and beyond.

The findings in this study also have policy-related implications. As noted previously, it would appear as if most major agencies responsible for maintaining labor-related databases do not distinguish between strikes and lockouts; instead, they amalgamate details about strikes and lockouts into a single 'work stoppage' category. Our findings question the appropriateness of this strategy, because worker-initiated strikes and management-initiated lockouts seem to denote a different locus of power and exert different effects, including on members' mental health.

In conclusion, the findings from the present study point to differences in type of industrial action on members' mental health. While further replication is warranted, the current results have implications for understanding the consequences of labor disputes in general, and in particular how industrial action can affect those most directly engaged in it.

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