



Workplace Ergonomics & Arthritis

Hosts: Rebecca Gillett, MS OTR/L, and Julie Eller

Guest: **Nikki Weiner**, OTD, OTR/L, AOEAS,
Ergonomics Specialist, The Rising Workplace

More than 50% of the U.S. population age 12 and older are now fully vaccinated, according to the CDC. Workers are returning to their traditional workplaces and life in many parts of the country is slowing returning to “normal.” And as more and more of us are vaccinated, heading back to our old workspaces may soon become a widespread reality.

Whether you’ve been working from home or from another alternative workspace, circulating back will likely call for a re-evaluation of your workspace and work habits. Paying special attention to workplace ergonomics can have a huge impact on the health of your joints.

In this episode of the Live Yes! With Arthritis Podcast — Workplace Ergonomics & Arthritis — we welcome returning guest speaker, ergonomics specialist Nikki Weiner, a licensed occupational therapist and founder of The Rising Workplace. She and her team provide comprehensive, on-site ergonomic, injury-prevention and environment health and safety services. Tune in to the podcast as she shares expert insights into biomechanics in the workplace and helps us break down the key principles to protecting our joints while we work. If you’ve ever experienced workplace challenges, this is an episode you won’t want to miss!

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Workplace Ergonomics & Arthritis

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PODCAST OPEN

Welcome to Live Yes! With Arthritis, from the Arthritis Foundation. You may have arthritis, but it doesn't have you. Here, you'll learn things that can help you improve your life and turn No into Yes. This podcast is for the growing community of people like you who really care about conquering arthritis once and for all. Take a moment to subscribe to, rate and comment on Live Yes! With Arthritis wherever you get your podcasts ... and never miss an episode. Our hosts are arthritis patients Rebecca and Julie, and they are asking the questions you want answers to. Listen in.

Rebecca Gillett:

Welcome to the Live Yes! With Arthritis podcast. I'm Rebecca, an occupational therapist living with rheumatoid arthritis and osteoarthritis.

Julie Eller:

And I'm Julie, a JA patient who's passionate about making sure all patients have a voice.

MUSIC BRIDGE

Rebecca:

Thanks for joining us on the Live Yes With Arthritis podcast. Today we are talking about ergonomics and how we need to look at what we're doing and how we're moving our bodies so that we don't cause us more arthritis pain or injuries. So, we'd like to welcome Nikki Wiener. She is an ergonomic specialist and an occupational therapist. She's in my realm of work. And she's also the co-founder of the Rising Workplace. Welcome to our show, Nikki.

Nikki Wiener:

Thank you so much for having me.



Julie:

Let's get started with a really basic question. Can you define what it means when we say ergonomics?

Nikki:

Sure. When I say ergonomics, I think about the design of work. So that a person is well matched not only to the job tasks that they're doing, but also the work environment. The idea being that, when the individual is matched well to the work environment into the job itself, we're reducing our risk for workplace injury and aches and pains, which will increase your comfort at work and out of work. Because we know that workplace pain tends to follow us home in the evenings. Practicing ergonomics has an overall impact on our quality of life and our work performance.

Julie:

So, we can live ergonomically, and have a job that's well suited to us, but also maybe some day-to-day tasks that are well suited to us ergonomically. Is that fair to say?

Nikki:

Absolutely. We're talking about work today. But these same principles can be applied to life in general, including housework and leisure activities. You can think about ergonomics with anything. And it's all about kind of working and moving in neutral postures, using the right tools, finding the right balance with taking breaks when you need to. And this can be applied to anything from gardening to childcare to housework and beyond.

Rebecca:

Like we say in the OT world, it's any activity that you do, any occupation that you do, something that takes up your time. You can always find a way to be more ergonomic about it.

Nikki:

Yes.

Rebecca:

What are some of the things that are important for people to keep in mind as far as ergonomics? You mentioned the neutral body position. Can you kind of describe what that is?

Nikki:



Yes. So, we want to work in what we call neutral postures. And that basically means avoiding awkward postures, because those awkward postures, they cause unnecessary stress on our joints and they cause inflammation, and over time they cause injury. We could take a computer workstation, for example: that when you're viewing your screen, your head isn't turned up or down, side to side. It's a nice neutral posture.

When you're using your keyboard, your wrists aren't bent up or down or side to side. When you're bending over to pick up something from the floor, you're using your hips and your knees, or if it's your back. It's these type of neutral postures that optimize our blood flow to our bodies, tissues and joints, and protect our joints at the same time.

Julie:

How can you learn to perform some of these neutral positions? I think everybody knows the adage, "Lift with your legs, not with your back," right? When you're lifting a heavy box or moving houses or something. But beyond that, where can we learn to live more ergonomically?

Nikki:

I think speaking to an occupational therapist about it might be a good place to start. Your physical or occupational therapist. There are all kinds of diagrams, for example, when it comes to ergonomics. But at the same time, not everyone is going to be able to fit into those diagrams, you know?

For example, if you have a mobility impairment, you're not going to necessarily fit into the mold of somebody standing in a certain posture at a workstation. You kind of have to avoid straining yourself into some of these neutral postures if they don't work for you. You could look online, you could speak to an expert. And also, it's important to listen to your body in that and experience for you what feels good and what causes pain.

Julie:

Let's think about applying it to a traditional workplace setting. If you were to think about some ideal ergonomic conditions for work, what might you think about for someone who works nine to five in an office?

Nikki:

For the average office worker, I feel like the number one thing you want to start with is seating. Getting to know your chair, what make and model it is and how it adjusts. And that's the number one thing when I go into offices: I see that folks don't know how to adjust their chairs. And then from there, you want to look at some other accessories. You might need a footrest if you're above average height or shorter. Basically what that allows you to do is to sit up high enough so that you cannot have to overreach for your



mouse and keyboard. And that puts your wrist into a more neutral position and your shoulders as well.

And then as far as the monitor height, you want to think about the top of the screen being about eye level. But this could be different person to person. For example, if you wear bifocals, you might have to have your screen lower than average, for example. It's just kind of finding that sweet spot, where you don't have to gaze up or down with your neck and an awkward posture.

Julie:

What about keyboards and mouses and phones? Do they have any impact when it comes to neutral positions?

Nikki:

It's not a one-size-fits-all approach. Oftentimes, people in a good faith effort, experiencing wrist pain, they might go to Amazon and search for an ergonomic keyboard and find a million things on the internet that are "ergonomic." When, in fact, it's not necessarily the right fit for that individual. And a lot of things are labeled ergonomic out there.

For example, split keyboards. I think of the split keyboard for a pretty unique problem, and that is when our wrists are turned outward. And we see that a lot with broad-shouldered individuals, but that might not necessarily be the issue for you. Just kind of a word of caution there that the split keyboard is not necessarily the quick fix for everyone, just because it's called ergonomic. It might be, in fact, a mini keyboard. Say that you're more narrow-shouldered, and you're having to reach too far for your mouse. A keyboard that allows your mouse to come in closer to your body would be the solution for that user.

As far as mice, there's all kinds of products out there. And again, it's not a one-size-fits-all, but it just really depends on the specific user and the function. Vertical mice, you may have seen they help an individual use maybe their shoulder more than their wrist for the excursions of the mouse. That might work for some people.

The drawback of that is that you can only use them on your dominant side. They're right-handed or left-handed mice. An even better strategy would be to learn to alternate your mouse position, because that's just going to reduce the force and the repetition on that dominant side that fatigues so quickly. There's a lot of products out there, and it's difficult to tease them out. Bottom line: It's not a one-size-fits-all. And what works for you may not work for your officemate.

Rebecca:



It just kind of reinforces the fact that it's important to maybe have somebody who specializes in this to help you. Tell us, what does an ergonomic specialist do? I know you're also an occupational therapist, but how does somebody access somebody who specializes in ergonomics like you?

Nikki:

Many employers have in-house ergonomics specialists, and many do not, in which case they would reach out to a company like the Rising Workplace that brings in a consultant. Typically, we provide in-depth assessments for people that are having musculoskeletal disorders or work-related aches and pains. We want to come in and do a really advanced assessment that involves providing education to the person, fitting them to their existing workstation and maybe making recommendations for products or additional modifications to really make their setup ergonomic.

And then we like to come in and do also more preventative spot assessments, just kind of from a proactive approach: sitting folks to their workstations to prevent aches and pains. If you're seeing a physical therapist, you might ask if they recommend a group to come in and do ergonomic assessments or speak with your employer first.

PROMO:

The Arthritis Foundation tests and certifies products that make life easier for people with arthritis and other physical limitations. Ease of Use Certified products are easy to use by everyone. Learn more at <https://www.arthritis.org/partnership/ease-of-use>.

Julie:

Where do we start the conversation about ergonomics? In the doctor's office? With our employer? Who do we talk to first?

Nikki:

That's a good question. In this good faith effort to make an improvement oftentimes, the doctor, trying to do the best thing for the patient, will go ahead and write a note for a sit/stand desk, when in fact, an individual's needs could be probably much better met by using an ergonomic specialist that could come in and do a full assessment of their needs and get them equipped with the right modifications that will truly make a difference with their aches and pains.

Rebecca:

A lot of times it's up to you as the employee to maybe go to your employer and say, "I need some help. I need some support."



Nikki:

Yeah, exactly. And a lot of individuals reach out to us on their own. They call us directly, and we help them kind of navigate the process if they want to go through the service on their own. Or do they want to bring it up to their employer and see if they might be able to assist them with the process?

Rebecca:

Yeah. And that brings up a touchy subject for people. When you have a chronic disease like arthritis, a lot of times people are afraid to disclose this information to an employer or their co-workers for fear of losing their job. They get their insurance there. They don't wanna lose that and don't want to disclose that. How do you suggest people manage that?

Nikki:

Yeah, it's a touchy subject. I think you have to in the forefront do a little investigation. See if your workplace would be covered under ADA. And this is generally private sector employees of 15 people or more. It helps to give a call to your local ADA coordinator, they can provide you with a wealth of information related to ADA and kind of talk through your specific situation if you're having any hesitancy about it at all.

It's up to the employee to disclose. And you don't have to disclose at any given time. You don't have to disclose it at the time you're hired. You can do that when you're ready. And I always say: This is not about necessarily the disability, but it's about the functional limitation. How it limits you from doing a specific job task. You might go back to your job description and think about, "OK, so what is the real issue here, and what accommodation will help me perform my job more comfortably and better?"

Having that information at the beginning shows your employer that you've investigated it. You thought this through. And in that case, your employer might request a limited amount of medical information given that the disability is not obvious. They don't have access to your whole medical record. It might just be simply a doctor's note stating that, for example, you have limited standing tolerance, or you have back pain or wrist pain or something like that. But it really comes down to the functional limitation. Thinking about how it affects your work, not necessarily the disability itself.

Julie:

Reframing it, so it's not, "I can't do this because of my arthritis." But more of, "I would be able to do this easier if I had this accommodation." That makes a world of difference for people who are figuring out how they can share and talk to their employer about this. "I would be able to do this better. I would be able to meet this deadline. I would be able to exceed expectations or really perform to my best ability."



I'm gonna give you my work/life scenario. It really changes as my arthritis behaves differently. If I'm in a flare, I behave totally different in the office. But right now, I don't have a whole lot of "ergonomic tools." I'm using air quotes there that I would say, "Oh, that's definitely an ergonomic tool." But if ever I have knee swelling, I flip over the recycling bin that's under my desk. Instead of recycling that day, I use it to elevate my foot.

Instead of coming in and going to the fridge to get a bottle of water to start my day, I usually go in and grab my ice pack that I keep in the freezer or my heating pad that I keep in my desk drawer. Do those count as ergonomic tools? Or is that just an accommodation I use to make my day to day better?

Nikki:

It's my feeling that ergonomics and practicing good ergonomics does not have to be expensive, and it doesn't have to be high tech. It doesn't have to be fancy or high cost, and there are makeshift solutions that work quite well. But they might not work well for everybody.

Rebecca:

If somebody is going to talk to their employer about accommodations, what are considered reasonable accommodations that were covered under the ADA laws per se?

Nikki:

Reasonable accommodations can be a lot of things. It can be anything from, for example, accessible parking. It could be installing a ramp if you have a mobility impairment. It could be modifying a work schedule. And then it could be something more of the ergonomic nature. For example, sit/stand desk could be effective for back pain, just for somebody who needs to change positions because they become uncomfortable with sitting for long periods of time.

Or it might be a footrest to elevate your legs. Or it might be some type of ergonomic master keyboard to keep your wrist and hands in a neutral position. It covers a large span. Accommodations can be a lot of different things, some of which are ergonomic and some are not. Some are more on the assistive technology side, which would be things like screen readers for visually impaired folks, or dictation software, that type of thing.

Reasonable accommodations, much like ergonomic interventions, and because there is some overlap since both are dealing with sitting the individual to the job — they have proven return on investment. I think the pretty average accommodation: It costs \$600. And the average return on investment is \$1,000.



Rebecca:

Wow.

Julie:

That's great. I think that's a really good data point, too. That the return on investment is often greater. And when we go into a workplace scenario, where you're talking to your employer and you want to navigate that conversation, remembering that stat adds a little confidence boost, as you go through those emotions there, I think is a really great way to build your confidence.

Nikki:

Right. And shift your perspective of this is going to burden my employer. You have to remove that out of your mind. Because no, it's going to increase your work performance and your comfort. And it's going to make you a greater asset to your company.

Rebecca Gillett:

And it's also going to make sure that you don't give yourself more pain just trying to do your job. You could limit your pain, prevent pain, and then also maybe improve your productivity. So, it's a win-win on both sides.

Nikki:

Absolutely.

PROMO:

Check out the Arthritis Foundation's new app, called Vim, to help people with arthritis gain power over their pain. The app features expert educational content, a goal and activity tracker and opportunities to connect with others. It'll help you set attainable goals and achieve small wins that add up to big victories. Download the app at <https://www.arthritis.org/vim>, spelled V-I-M.

Rebecca:

A lot of states have a vocational rehab program. Can you talk about what that is different to an ergonomic specialist or an OT?

Nikki:

Vocational rehab is a federal state program that helps people who have physical or mental disabilities get or keep a job. I kind of think of them as the first place you go to,



even prior to even related to hiring or finding a job that fits you well. And their role is to provide this counseling support service, whereas an occupational therapist is more of a health care background.

We can come in and perform advanced assessments, do environmental modifications we may have experienced with assistive technology and adaptive equipment. And we may very well work alongside vocational rehab. And it could be that vocational rehab might point you in the direction of an OT to have an ergonomic assessment or work in unison with an OT. Or an OT might point you in the direction of Voc Rehab if you're just getting started in the process of trying to locate employment that's gonna work well for you, given your functional limitations.

Rebecca:

So, are these typically free programs that people can access, or is there cost associated?

Nikki:

To my knowledge, Voc Rehab is a state-funded program.

Nikki:

Occupational therapy, in its traditional sense, is something that's built through insurance with the exception of ergonomic specialists, who most of the time, it's either the employer covers the cost, the individual covers the cost, or it's a workers compensation scenario.

It's not necessarily considered a medical service when you're working in the workplace. Doing these type of accommodations kind of follows a different model than traditional therapy, if that makes sense.

Rebecca:

Yes, it does.

Julie:

So, Nikki... The Arthritis Foundation is running a patient-reported outcomes study where we're collecting assessments from patients all across the country to share with us their experience living with arthritis. One of the stats that really stood out to us was that 72% report having trouble doing usual work, whether it's in the workplace or in their home life.

Nikki:



That's a large majority there. If you're having issues at work, then chances are that's gonna spill into your well-being at home. If you are in pain after performing your work tasks, you come home, you're gonna probably skip going to the park with your grandchild. You probably need to take a rest at that point. So, the role of ergonomics and having a positive impact on quality of life, I think it's huge, honestly.

I think, when we go onsite and make some of these modifications and adjustments with individuals, you can kind of feel that immediate, aha. Like, wow, this feels different. This feels so much better. And I think the difference is almost immediate for folks in terms of how it can improve your comfort.

Julie:

Reaching out to a specialist like you sounds like one of our first steps for experiencing pain that's keeping us from participating in work or in our family home life fully. So, thanks so much.

Rebecca:

Are there some key takeaways that you would suggest to people to really understand and learn how to change their environment or the task to be more ergonomic and better for their joints?

Nikki:

Absolutely. So first, you wanna look at how the environment is set up. You wanna keep frequently used items within easy reach. Setting up the environment in that way, and then also going back to the idea of tool use. Are the tools that you're using aggravating your joint pain?

The other thing comes down to working in neutral postures. When you're standing and working in your workstation, that your wrists or your neck are in a neutral posture when you're moving, you're moving neutrally.

Rebecca:

My key takeaway from everything you just said is, you need to work with somebody to understand what your neutral positions are. Or what the best position is for you, depending on your joint issue. And understanding how you can decrease the impact of stress on your joints.

Julie:

And I think there's a thread of being aware of what it looks like when you hold a tool, what it's like for your wrist? What is your hand doing? And paying attention to those



things and thinking about what's normal and what's comfortable and what causes pain. I think a lot of times we have pain, and it's constant and it's there. But identifying the root cause, and maybe finding some alternative motions, is a really important way to navigate. So, thank you so much.

Nikki:

Absolutely. And the only other thing I would add to that would be just the importance of taking breaks. And not holding these fixed positions for a long time. It's recommended that you sit for two hours, stand for five hours of an eight-hour workday. And that includes getting up every 30 minutes. So not necessarily changing the position of the desk every 30 minutes. But the fact that you're at least getting out of the chair or taking a step away from the desk every 30 minutes, what we call maybe an Ergo break, right?

Julie:

Ergo break.

Nikki:

That's a bit of a blanket statement. I do think that everyone should try and change your position every 30 minutes, whatever that means for that individual. Whether it's doing a back stretch or ankle circles or wrist stretch. Some type of movement to break it up, whatever you're doing, every 30 minutes. It's gonna be mostly coming down to listening to your body, when you start to get those first pain signals. That's a message that you have to change something in what you're doing.

Rebecca:

Thank you so much, Nikki, for helping us decipher what ergonomics really is. And how we can apply that to just everything that we need to do every day. We appreciate your time. And thanks so much for joining us on this episode.

Nikki:

You're welcome. I enjoyed it.

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