

Health & Safety Executive - Survey of Workplace Absence Sickness and (III) Health (SWASH) - 2005.

Report on emergent headline findings

Summary

This research set out to explore and better understand social and other influences on workplace sickness absence rates in Great Britain through a household based survey of over 10,000 employees. Findings reveal a number of socio-demographic differences, most notably with respect to gender, age and size of employing organisation, with modest differences attributable to employment sector (i.e. public versus private).

- The average duration of sickness absence was found to be longer in large (250+ employees) organisations, and higher for women and older workers. Compared with the private sector, the public sector has proportionately more female workers and an older age profile - almost all public sector employees work in large organisations.
- Standardising the sample by age, gender and size of organisation revealed that mean differences between private and public sector absence rates were modest, with public sector employees taking an average of 0.3 days per annum more than their private sector counterparts.
- There is evidence more under-recording of absence within the private sector, this appearing to reflect practice within smaller businesses.
- Reports of symptoms of high work related stress were more prevalent within the public sector and appeared to be associated with greater exposure to face-to-face contact with the public.
- A higher proportion of public than private sector employees report working while ill, i.e. during periods when they could have taken sick-leave; and
- There appear to be notable differences in sick-pay arrangements between the private and public sectors, with over a fifth of private sector respondents reporting that they received no pay for the first three days of continuous absence.

Findings are discussed with reference to previously reported survey evidence on workplace absence in Great Britain.

1.0 Scope

Drawing on previous research, the survey was designed to explore a range of variables with potential to influence workplace absence rates and to permit the statistical testing of differences by age, gender, size of employing organisation¹ and employment sector (private and public).

Key variables explored within the survey included:

- Symptoms of ill health and ratings of work-relatedness
- Absence attributable to workplace accidents
- Employers arrangements for recording and managing absence
- Hours of work and flexibility over hours worked
- Sick-pay arrangements
- Annual leave and unplanned absence arrangements
- Variables impacting upon motivation to return to work
- Levels of social support at work

2.0 Methodology and sampling

The HSE's Survey of Workplace Sickness Absence and (ill) Health (SWASH) was conducted by an independent research organisation, GfK NOP, between July and October 2005. This GB-wide telephone survey elicited responses from a realised sample of 10,193 employed individuals. The self-employed were excluded from the survey.

In order to permit reliable statistical testing of differences between the demographic variables of interest, the sample was constructed to over-represent respondent groups from the public sector ($N = 3,502$) and large private sector organisations (250+ employees; $N = 3,197$). Respondents were interviewed in their own home, rather than at work, using a sample generated by random digit dialling techniques.

The questionnaire was designed to elicit respondent's views and accounts of their experiences of absence over a 12-month reference period, prior to the date of their interview. The sourcing of feedback on workplace sickness absence directly from employees was considered to have the advantage of providing a useful point of comparison with employer records and an insight into the extent of employment group variability.

¹ Defined by number of employees.

3.0 Main findings

This report focuses on mean absence rates and the exploration of primary demographic differences in the profile of absence. Its focus is on sickness absence, but includes other causes of absence from work. A detailed technical report on findings, that will include aspects relating employers practice in absence management, sick-pay arrangements and non-sickness related absence is scheduled for publication later in 2006.

3.1 General ratings of health status

When asked to rate their current health status, nearly nine in ten respondents (87%, $N = 8,878$) stated that they enjoyed either 'good' or 'very good' health. No substantive differences in ratings of general health status were found in terms of age, gender or public/private sector, although there appeared to be a modest decline in self-reported health by age.

3.2 Sickness absence

An initial exploratory analysis performed on the entire data set, using the CHAID multivariate analysis tool², revealed that the strongest associations (in essence *predictors*) of sickness absence were the variables of gender, age and size of organisation. The predictive power of employment sector (private versus public) was found to be modest, i.e. there are larger differences in absence rates attributable to gender, age and size of organisation, than employment sector. The modest effect attributable to employment sector is in contrast with established debates that have tended to focus on headline public and private differences (CBI/AXA 2006).

In order to address the public/private sector issue, it is necessary to consider the demographic profile of employment within the two sectors, and the basis on which comparisons can reasonably be made.

An initial appraisal of the raw results from the survey reinforced established understandings of structural differences between the sectors. However, an examination of the demographic profiles revealed that public sector employees were older on average and were more likely to be female than their private sector counterparts; they were also heavily concentrated in large organisations (250+ employees). Thus, the public sector is characterised by large employers, with a higher proportion of women and older workers (see Table 1).

	Public sector ($N = 3,502$)	Private sector ($N = 6,691$)
<i>Gender</i>	%	%
Male	35	54
Female	65	46

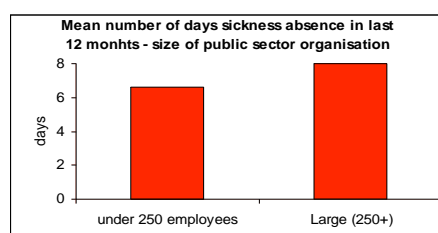
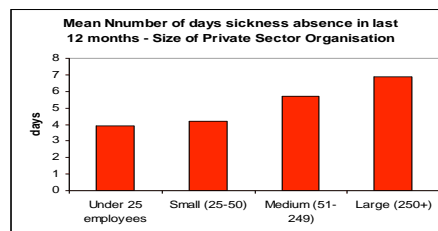
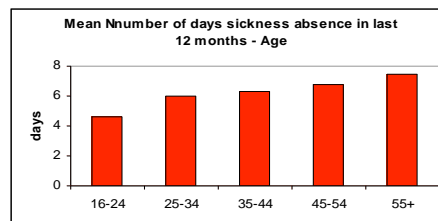
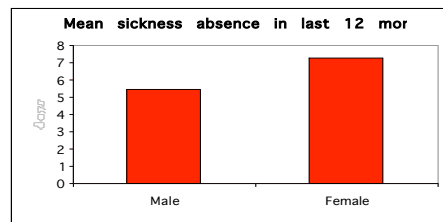
² CHAID - an exploratory multivariate analytical tool based upon a development of the Chi statistic.

<i>Size of employing organisation</i>	%	%
Under 25 employees	5	24
Small (25-50)	4	11
Medium (51-249)	7	17
Large (250+)	85	48

<i>Age</i>	%	%
16-24	5	11
25-34	22	23
35-44	29	27
45-54	27	23
55+	17	17

As noted above, sickness absence rates were found to vary by size of organisation, gender and age. Table 2 summarises the key points of contrast. Few people worked for public sector organisations with fewer than 250 employees so they have been consolidated into a single group for the purpose of this analysis.

Table 2 Mean number of days sickness absence in last 12 months	
	All (N = 10,193)
<i>Gender</i>	
Male	5.5
Female	7.3
<i>Age</i>	
16-24	4.6
25-34	6.0
35-44	6.3
45-54	6.8
55+	7.5
	Private sector (N = 6,691)
<i>Size of private sector business</i>	
Under 25 employees	3.9
Small (25-50)	4.2
Medium (51-249)	5.7
Large (250+)	6.9
	Public sector (N = 3,502)
<i>Size of public sector employer</i>	
Small/medium (under 250 employees)	6.6
Large (250+)	8.0



Based upon the raw data, the mean sickness absence rate for the public sector was found to be 7.8 days, compared with 5.7 days for the private sector, a difference of 2.1 days. This is 0.4 days less than the degree of disparity reported by the CBI/AXA in 2006 from their annual survey of employers.

When differences in size of employing organisation were controlled for, i.e. making a comparison of large (250+ employee) organisations from both sectors, although the public sector rate remained higher, the degree of difference was found to halve (to 1.1 days).

Applying further degrees of standardisation to the profile of the sectors, using Labour Force Survey data to take account of differences in the age and gender profiles, saw the figures further reduce to 7.5 for public sector and 7.2 for private sector organisations; i.e. a mean difference of 0.3 days.

Further standardised analyses of the data set are planned. These will focus on exploring the potential impact of factors associated with conditions of employment and the employer's approach to absence management, in particular sick-pay arrangements, policy on recording absence and the requirement for certification by a General Practitioner. Preliminary findings (see sections 5.0 and 6.0 of this report) on these topics indicate that the mean difference attributable to sector may drop below the 0.3 day figure cited above. These issues will be explored and reported on in detail in the full technical report on findings, available later in 2006.

4.0 Working whilst suffering from ill health

When asked if there were any occasions during the previous 12 months "*...when you went to work when you were really too ill and should have taken sick-leave?*", a higher proportion of public sector respondents reported that they had worked on occasions when they considered that they were really too ill to go to work, and could justifiably have taken sick leave.

The raw data revealed 44% ($N = 1,524$) of public sector employees reported that they attended work when suffering from ill health, compared with 37% ($N = 2,480$) for the private sector. Controlling for size of organisation reduced the degree of difference between the sectors, although reports of attendance at work whilst ill remained higher for the public sector (43%; $N = 1,278$) than their private sector counterparts (39%; $N = 1,242$).

5.0 Employer behaviour in recording absence

Employee perceptions of employer practice in recording periods of absence were found to vary by sector. For single-day absences public sector respondents considered the maintenance of a formal records more likely than their private sector counterparts; 87% ($N = 3,034$) and 77% ($N = 5,140$) respectively.

Controlling for size of organisation revealed that there were no statistically significant differences in perceived likelihood of formal record keeping between the public and private sector organisations with 250+ employees, 87% and 88% respectively.

Therefore, it would appear that, at least part of, the revealed sector based differences in recording practice may be attributable to disparities in record keeping practice. The implication here is that the maintenance of accurate formal records is less widespread within smaller private sector organisations.

Evidence of systematic differences in absence record keeping practice associated with size of employing organisation may raise questions about the reliability of any survey data derived from employer records alone. If, as the evidence here suggests, under-reporting is greater in the smaller, predominantly private sector, businesses this could have the effect of inflating differences between the public and private sectors.

6.0 Employer sick-pay arrangements

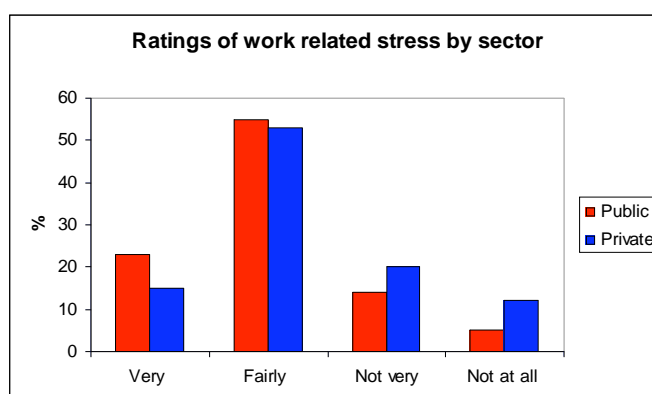
Public and private sector respondents reported notable differences with regard to employer arrangements in the provision of sick-pay.

Just over a fifth (21% - $N = 1,423$) of private sector respondents reported that they would not receive any sick-pay from their employer to cover periods of up to three consecutive days of absence. By contrast, 87 % of public sector respondents reported that they would receive their normal rate of pay for up to three consecutive days of absence. Exploration of this issue revealed modest cross sector differences between larger organisations (250+ employees), with less generous arrangements being present in smaller private sector organisations. Responses also indicated that differences in employer arrangements associated with size of organisation also exist in the case of longer periods of absence.

However, the global finding was that private sector sick-pay arrangements were less generous than those enjoyed by public sector employees. The degree of difference was most marked with regard to payments made for periods of long-term absence.

7.0 The profile of work related absence

Turning to the profile of ill health associated with work related absence, it was apparent that psychological stress, attributed to work, features prominently. Over three quarters of the public sector sample (78% - $N = 2,736$) rated their jobs as either '*quite stressful*' or '*very stressful*' – with two-thirds of those working in the private sector (68% - $N = 4,545$) providing equivalent ratings. This difference between the sectors was most marked amongst those who rated their job as '*very stressful*'; 23% of public sector workers ($N = 822$) compared with 15% of those in the private sector ($N = 1,017$).



Detailed exploration of this issue revealed no statistically meaningful differences with respect to size of organisation, however a strong global association was apparent where respondents worked face to face with the public. A relatively higher proportion of public sector employees (74%, N = 2,606 - compared with 56%, N = 3,732, in the private sector) reported having regular face-to-face dealings with the public in the course of their work. Hence, it would seem that that notable differences in personal ratings of work-related stress between the public and private sectors may relate to aspects of job role, notably the extent and possibly the nature of contact with the general public. Corroborative evidence of this association was provided by the finding that there were no statistically significant differences between the subjective stress ratings for public and private sector employees in instances where the respondent's job did not entail direct contact with the public. Moreover mean absence was found to be higher for public sector employees who worked directly with the public than those who did not.

7.0 Conclusions

Notable differences in rates of absence are apparent with respect to gender, age and between large (250+ employees) and smaller (fewer than 250 employees) organisations.

It would seem that previously reported differences in mean sickness absence rates between the public and private sectors (e.g. CBI/ AXA 2006) may be biased by a failure to take account of differences in organisational demographics. Controlling for these variables revealed that differences between the private and public sector absence rates (mean difference 0.3 days per employee, per annum) were significantly less than previously reported.

Effects associated with age are likely to reflect the general decline in health with age; and/or the consequence of other long-term exposure to variables that impact on health and well being.

Where public/private sector differences were found they related to: evidence of more widespread under-recording of absence within the private sector, principally in smaller businesses; less favourable sick-pay arrangements in the private than the public sector, and particularly in smaller organisations; and a higher proportion of public than private sector employees report working while ill, i.e. during periods when they might reasonably have taken sick-leave.