

Attitudes to health and work amongst the working-age population

By Suchi Collingwood

Background

This current study gathered and analysed data on attitudes among the working-age population towards the relationship between work and health. The research had two main purposes:

- to fill the evidence gap around attitudes and perceptions to work and health; and
- to provide evidence for the baseline indicator outlined in the Government's response¹ to Dame Carol Black's² review of the health of the working age population, on improving 'knowledge and perceptions about the importance of work to health and health to work' among employers, general practitioners and the working-age population³.

¹ The Government's response *Improving health and work: changing lives* can be found at: <http://www.dwp.gov.uk/docs/hwwb-improving-health-and-work-changing-lives.pdf>

² Dame Carol Black's Review of the health of Britain's working age population – 2008, can be found at: <http://www.dwp.gov.uk/docs/hwwb-working-for-a-healthier-tomorrow.pdf>

³ The headlines from this research have already appeared in *The Health, Work and Well-being: Baseline indicators* report which can be found at: <http://www.dwp.gov.uk/docs/hwwb-baseline-indicators.pdf>

Research methodology

The data was gathered by including a module of questions on the Office for National Statistics (ONS) Opinions Omnibus⁴. An overall sample of 2,965⁵ working-age adults (16-64 years old) across Great Britain was obtained. The questions were cognitively tested to explore in-depth how respondents understood and interpreted the questions and their ability and willingness to answer them.

The final set of questions covered several areas including:

- perceptions about the importance of work to health;
- attitudes towards going to work under various hypothetical health conditions where respondents were asked to imagine they had short-term or long-term health conditions;
- perceptions of the roles of General Practitioners (GPs) and employers in helping to manage long-term conditions and providing support to carry on working;
- self-reported behaviours; and
- perceptions of the behaviour of others.

⁴ Link to Office for National Statistics – Opinions (Omnibus) Survey, <http://www.ons.gov.uk/about/who-we-are/our-services/omnibus-survey>

⁵ Two thousand nine hundred and sixty-five respondents were obtained within the total sample. This consisted of 1,880 respondents who were in employment and 1,085 respondents who were not in employment. The group not in employment was over-sampled so that comparisons could be made with the group of respondents in employment.

Key findings

Perceptions about the importance of work to health

Overall, there was general agreement to the view that work is good for both physical and mental health, with over 80 per cent of respondents agreeing. Respondents who were in employment were more likely to agree to work being good for mental health when compared to those who were not in employment.

Going to work with short-term and long-term conditions

Ninety-one per cent of respondents said that they would go to work in spite of having a cold (a short-term condition), but significantly fewer (around 60 per cent) said they would go into work if they suffered from long-term back pain and were currently in a phase when their back was particularly sore or if they suffered from long-term depression and were currently in a phase of feeling particularly down. With both the long-term conditions, respondents would want their GP to advise them not to go to work but would not necessarily make the same decision by themselves. Respondents who were in employment were much more likely to say they would go to work under all three scenarios when compared to the not in employment group.

Perceptions on roles

There was general support for the idea that GPs should advise respondents not to go to work, on the type of work activities that were appropriate, whether to work reduced hours, and on access to treatment and therapy that would help them manage at work, under both the two long-term condition scenarios of back pain and depression. Over 90 per cent of respondents stated that GPs should have a say in the length of time off if they were signed off ill.

A high proportion supported their GPs advising them of the work activities they could do, 90 per cent under the back pain scenario and 76 per cent under the depression scenario, which supports the further embedding of the 'Fit note'.

Responses to questions on long-term depression were significantly different to those for long-term back pain, except for whether GPs should help access treatment and therapy that will help manage at work, where the responses were similar. Far more respondents agreed that GPs should advise them under the back pain scenario when compared to the depression scenario, to not to go to work, on the work activities they could do, and to work reduced hours until they were feeling better.

There was general support for employers taking steps to help employees so that they could carry on working with long-term back pain and long-term depression. Those in employment said that they would be willing to ask for help but fewer felt that their employer would be willing to take the necessary steps. Significantly fewer (53 per cent) stated that employers should have a say in the length of time off if they were signed off ill.

Self-reported behaviours over last 12 months and perceptions of other's behaviours

Seventy-nine per cent of those in employment went into work in the last 12 months despite feeling quite unwell. Fewer (72 per cent) indicated that it was very or quite usual for people to work when they were quite unwell.

Six per cent of those in employment admitted calling in sick when there was nothing the matter with them, while 32 per cent responded to say that it is very or quite usual for people at their workplace to call in sick when nothing is the matter with them.

Conclusions

As well as supporting the Government's agenda on Health and Well-being, this research has provided evidence that will be of interest to policy makers responsible for engaging GPs, and for employers and individuals involved in Health and Well-being initiatives.

The findings are broadly positive and show that the health benefits of work are widely recognised amongst the working-age population but the findings suggest there may be a need to raise awareness amongst those out of work on the positive impact work can have on mental health.

© Crown copyright 2011.

You may re-use this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence/> or write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

The full report of these research findings is published by the Department for Work and Pensions (ISBN 978-1-908523-06-8. Research Report 763. July 2011).

You can download the full report free from: <http://research.dwp.gov.uk/asd/asd5/rrs-index.asp>

Other report summaries in the research series are also available from the website above.

If you would like to subscribe to our email list to receive future summaries and alerts as reports are published please contact:

Kate Callow, Commercial Support and Knowledge Management Team, Upper Ground Floor, Steel City House, West Street, Sheffield S1 2GQ. Email: Kate.Callow1@dwp.gsi.gov.uk.