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What are the effects of chronic mental and physical health conditions on sickness absence in the UK?

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Headline findings

- People with chronic health conditions who are in work are more likely to experience sickness absence than people who do not have these conditions.
- The impact depends on the type of health condition. Those suffering from progressive illness like cancer, or a common mental disorder like anxiety and depression are most at risk, while some other conditions have no effect at all.
- As a whole, mental health conditions affect sickness absence much more than physical health conditions. The predicted increase in absence is more than three times greater for mental health conditions than for physical health.
- If we only look at longer term absence of a week or more, a change in physical health has no effect at all on average, but mental health conditions still have an effect.
- The relationship between health and absence is stronger for certain types of worker, including those in full time work, and those working for a large employer or in the public sector.

Implications for policy

- Investing in the prevention and treatment of physical and, in particular, mental health conditions will deliver substantial benefits to the UK economy through reduced sickness absence. We estimate that preventing common mental disorders would reduce sickness absence by about one day per year for every person in the workforce.

- While certain job conditions (namely part time work and working for private sector or smaller employers) seem to reduce the impact of chronic health conditions on long term sickness absence, more research is needed to ascertain whether this is good or bad.
- If people are being encouraged to go to work when not fit to do so (known as 'presenteeism'), this can lead to even worse long term outcomes for both employers and workers. Policy should focus on promoting a consistent approach to managing sickness absence across the workforce, for example in relation to eligibility for sick pay.

Background

- According to the Office for National Statistics, employees in the UK took an average of 4.1 sickness days in 2017, although this figure has dropped substantially since comparable records began in 1993. This reduction could be due to improvements in healthy life expectancy across the population or to the decline in physically demanding work, but may also be due to employees being less willing, or able, to take time off when they are unwell.
- Sickness absence is costly for the economy with the burden falling most heavily on employers. One estimate suggests that the cost of absenteeism to employers amounted to over £500 per employee in 2016.
- Sickness absence can also be costly for individuals, sometimes involving reduced income and reduced access to the wider benefits of work.

Findings

- People with chronic health conditions who are in work are more likely to experience sickness absence than people who do not have a chronic health condition.
- The impact is very dependent on the type of health condition. Experiencing a progressive illness (such as cancer, multiple sclerosis, symptomatic HIV, Parkinson's disease and muscular dystrophy) has the greatest effect, leading to a 1.9 percentage point change in the likelihood of being absent in any given week, while common mental health disorders (such as anxiety or depression) have the second greatest effect, leading to a 0.7 percentage point change in absenteeism.
- Some common physical health conditions, including disabilities connected with arms or hands (e.g. arthritis or rheumatism), chest or breathing problems (e.g. asthma or bronchitis) and heart, blood pressure or blood circulation problems, have no effect on absenteeism on average. This suggests that developing a chronic health condition does not necessarily stop people from attending work.
- As a whole, mental health conditions are much more predictive of sickness absence than physical health conditions. On average, a change in chronic mental health leads to a change in sickness absence more than three times greater than that resulting from a change in chronic physical health.
- For longer term absence of a week or more, a change in physical health has no effect at all on average while mental health conditions still have an effect.

- The effect of mental health on longer term sickness absence is higher for people in full time employment and those working in larger workplaces (more than 50 employees) while the effect of any chronic health condition on longer term sickness absence is higher for those working in the public sector.

Where does our evidence come from?

- Our estimates come from the Labour Force Survey (LFS). This survey covers a representative sample of households from across the UK, with each individual being interviewed about all aspects of life and work five times over 12 months.
- We use data from a ten year period from 2009 to 2018 and focus on a sample of over 200,000 people between the ages of 21 and 55 who were in paid work for at least some of the time during the 12 month period in which they were in the LFS.
- We have information about any chronic health conditions (defined as lasting or expecting to last 12 months or more) reported by each individual at each time point in the survey. We also know whether they did less than their usual hours of work in the previous week due to sickness and whether they did no work at all in the previous week due to sickness (our indicator for longer term absence).

Further points to bear in mind

- People with chronic health conditions may also be disadvantaged in other ways, for example social deprivation or poor quality jobs or relationships at work, which may make them more susceptible to minor illnesses and/or absenteeism regardless of their underlying health condition. To ensure that we are only capturing the direct impact of health conditions on sickness absence, we take account of other personal and work characteristics in our analysis, and also measure the effect of changes in health over time.
- It is possible that people experiencing a recent change in their health may have a lower severity of the condition than those experiencing poor health consistently over a longer period of time. Therefore, it is possible that our results underestimate the full effects of chronic health conditions on sickness absence.

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