Health and well-being at work: A report based on the fifth European Working Conditions Survey

Executive summary

Introduction

Health and well-being are key dimensions of the policy debate on how to improve the lives of individuals in society. Health and well-being have an intrinsic value and are fundamental to the concept of progress of individuals and the functioning of society because of their direct link with issues such as labour force participation, productivity and sustainability. This report examines the relationship between work, health and well-being, based on findings from Eurofound’s fifth European Working Conditions Survey (EWCS).

Work is central to a person’s well-being, as it both provides an income and is a means of broader social advancement. Work and well-being are closely related, in that the good or bad quality of working conditions have a direct impact on an individual’s quality of life. Work is also central to health, due to specific risk factors in the workplace which may lead to injuries and professional diseases, work-related illnesses or long-term health consequences.

Policy context

Health and well-being at work are key elements of the overall Europe 2020 strategy for growth, competitiveness and sustainable development. A healthy economy depends on a healthy population. Without this, employers lose out on worker productivity and citizens are deprived of potential longevity and quality of life. This is especially important in view of the current debate on demographic ageing of the European population.

Safeguarding the entitlement of all to work and ensuring that people of different health capacities can engage in paid work was an objective set by EU Member States in both the Lisbon and Europe 2020 strategies. The European Treaties legislation and policy measures recognise the importance of preserving the health and safety of workers, and maintaining their well-being. Directive 89/391/EEC on measures to improve the safety and health of workers states that work should be adapted to individuals and not the other way around.

Both depression and work-related stress are the focus of increasing attention, as they can lead to lower well-being and eventually result in the incapacity to work. In 2004, the EU-level social partners concluded a European Framework Agreement on Work-Related Stress to identify, prevent and manage problems related to work-related stress. In 2008, the European Commission, along with relevant social partners and stakeholders, signed the European Pact for Mental Health and Well-being, highlighting the importance of mental health and well-being for a strong and competitive Europe.

Key findings

- Poor general health is mentioned by 2.5% of European workers while 47% report more than two health problems, with a strong connection between the physical and mental dimensions.

- In total, 60% of the workers who declare very good or good health are confident in their ability to do the same job at the age of 60, while the proportion is significantly lower among those with poor health.

- Job quality is strongly and positively associated with well-being. Among its many dimensions, intrinsic job quality and job prospects (job security, career progression, contract quality) have the most impact on well-being. As job quality deteriorates, variability in well-being increases substantially: when faced with poor job quality conditions large differences in the capacity to cope emerge.
Unskilled workers and those in transportation, hotels and manufacturing report very demanding work situations and insufficient control over their work. Individuals facing these ‘high-strain’ working conditions report the lowest well-being. Social support from co-workers is the main factor helping them to cope.

Among the indicators mostly associated with poor health and well-being are atypical/variable working hours, disruptive interruptions, exposure to restructuring, environmental hazards and job insecurity. On the positive side, support, ‘rewards’ (feelings of pay fairness and of career advancement chances) and skills are important protective factors.

Workers in transportation and construction are subject to the worst dimensions of the psychosocial work environment. Employment status and gender also have a significant impact.

Using the mental well-being index (WHO-5) designed by the World Health Organization as a measure of emotional and psychological well-being, 23% of workers in Europe report low levels of well-being and should be assessed for depression, and 6% are likely to suffer from depression, with women reporting lower levels than men.

Some 40% of workers in Europe report having been absent from work due to sickness. Absence is significantly higher with higher job security/job protection, hinting at possible opportunistic behaviour among workers. It also increases with psychosocial factors linked to lower well-being at work (bullying, discrimination, emotional demands).

A total of 41% of men and 45% of women reported having worked while ill (‘presenteeism’) at least one day in the previous 12 months. This phenomenon is more frequent among high-grade, over-committed white-collar workers with high autonomy and engagement with their job. The positive association observed with exposure to work intensity, verbal abuse or discrimination, handling chemicals, awkward postures and shift work seems to indicate that presenteeism is also increased by several unfavourable working conditions.

Policy recommendations

- Policy interventions targeting health, well-being and safety of workers can have a significant impact if the focus is on employment quality, the psychosocial work environment and organisational factors.

- Employment quality is identified as a key element for workers, with a high influence on their well-being. Poor job quality leads to worryingly low levels of well-being for individuals less capable of coping with it. The policy focus should go beyond the average relationship and target a range of individual situations.

- Physical and mental health and work safety have a weak association with traditional dimensions that tend to steer the debate, such as industry, firm size or even job contract. The main split is between manual and non-manual occupations; the main associations are to be found with the psychosocial work environment and organisational determinants. Once these are taken into consideration, even cross-country differences tend to disappear.

- In relation to the psychosocial work environment and organisational factors, the multiplicity of individual situations should also be a policy target: low-skilled manual workers are those likely to benefit most from improvements in job design and a more supportive work environment.

- Low well-being and poor health have a high societal cost in terms of absenteeism and presenteeism. Working conditions have a role over and above their link with health and well-being: good working conditions are indicative not only of better health, but also of less opportunistic behaviours in the case of absenteeism, and a lower incidence of presenteeism.

Further information


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