

National Statistics feature

Sickness absence from work in the UK

By Catherine Barham and Nasima Begum, Labour Market Division, Office for National Statistics

Key points

- In the three months from March to May 2004 some 1.7 million scheduled working days were lost to sickness absence among employees. Some 2.9 per cent of employees took at least one day off work because of sickness or injury.
- The days lost to sickness were fairly evenly spread across the weekdays. This is counter to the common perception that sickness absence is higher on Monday and Fridays as a result of non-genuine absence.
- Female employees and younger employees aged 16 to 34 were more likely than other groups to take at least one day off sick.
- Lone mothers had the highest rate of sickness absence, followed by women with no dependent children (4.4 per cent and 3.4 per cent respectively). Men without dependent children had the lowest rate of absence.
- The proportion of employees who took at least one day of sick was higher in the public sector than the private sector (3.1 per cent compared with 2.8 per cent).

Introduction

Interest in levels of sickness absence has been growing in recent years. In 2004 workplace absence rose for the first time in five years according to the latest report by the Confederation of British Industry. Employers are increasingly becoming aware of the direct and indirect costs of absence to their organisations. The direct costs include statutory sick pay, cost of replacement staff and loss of output. It has been estimated that the direct cost of absence to the UK economy in 2003 was £11.6 billion. In addition to direct costs, there can also be a number of indirect or hidden costs which are harder to quantify. These include low morale among staff who have to carry out additional work to cover for those who are absent because of sickness, the cost of managing absence and the impact on training and development, all of which impact on the overall levels of output for the organisation.

The Labour Force Survey (LFS) collects information from

respondents on whether they took days off because of sickness or injury in the reference week (usually the week before the respondent was interviewed). It also records which particular days were taken off. From this information, an estimate of the number and proportion of working days lost because of sickness absence in the reference week can be constructed. A sickness absence rate can also be produced, which is the proportion of all employees who took at least one day off sick or injured in the reference week. These rates do not, however, account for the total length of a person's sickness absence as the use of the reference week means the LFS can only measure sickness absence lasting for up to seven days. Although the LFS is unable to measure the total length of a period of sickness absence, it is worth mentioning that the majority of absence is because of short-term sickness. Despite the fact that long-term absence only accounts for around 5 per cent of all sickness absence cases, it is responsible for around a third of the total days lost

► (CIPD, 2001). It should therefore be noted that there may well be differences between the people who are absent from work because of short-term sickness and those who are absent for long periods of time. Unfortunately this cannot be looked at using the current LFS data.

Particular groups of employees may be more or less likely than

others to be off sick. For example, an employee's age, sex, occupation or level of responsibility in the workplace can all affect their likelihood of taking sickness absence. This article presents sickness absence rates by various individual, workplace and job-related characteristics. It also looks at other sources of information on

sickness absence in order to present a fuller picture.

Sickness absence by day of the week

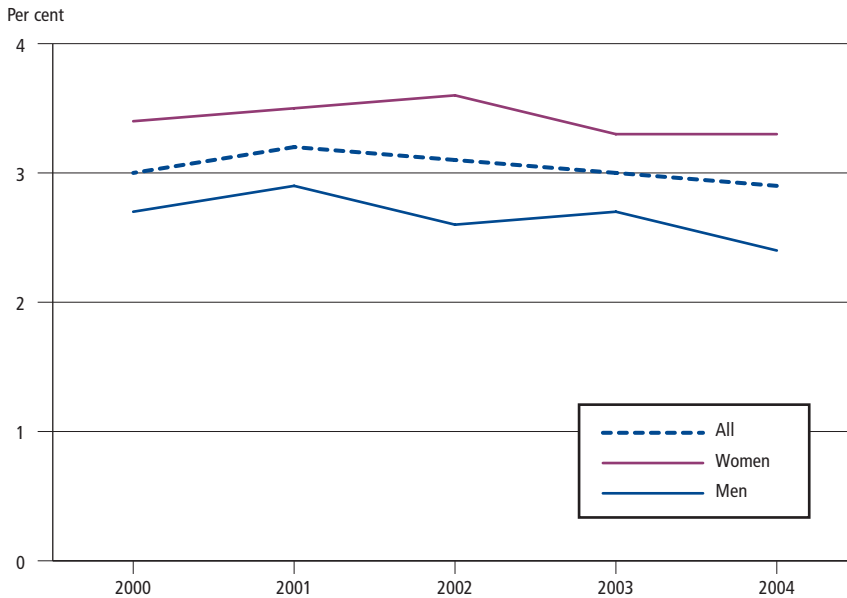
There were 1.7 million scheduled working days lost to sickness or injury in the spring 2004 quarter. This accounted for 1.7 per cent of scheduled working days (see **Table 1**). ►

Table 1

Sickness absence from work for men and women by day of the week; United Kingdom; spring 2004, not seasonally adjusted

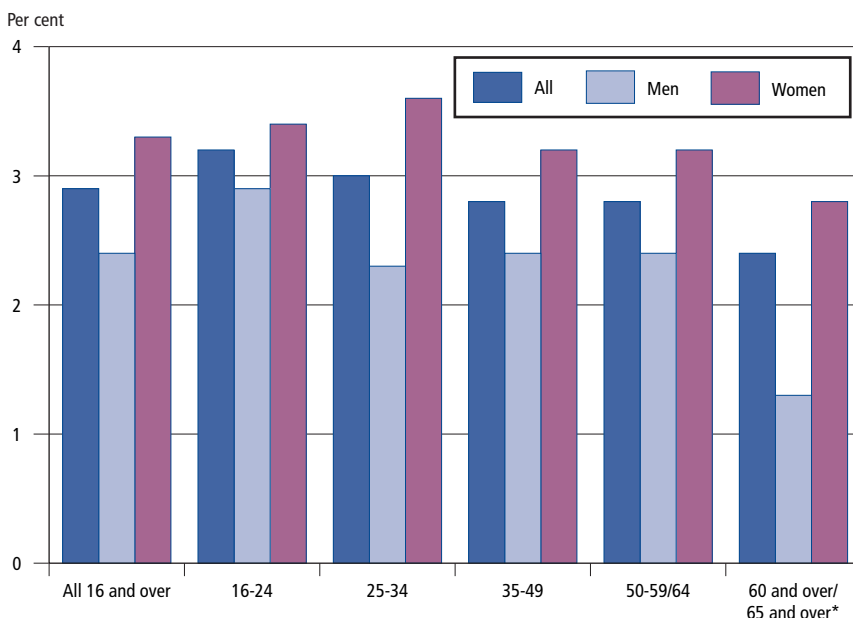
	Days scheduled to work (thousands)	Days absent from work (thousands)	Proportion absent on that day (per cent)	Distribution of absences over the week (per cent)
Men				
Monday	9,595	141	1.5	18.5
Tuesday	10,317	152	1.5	19.9
Wednesday	10,352	147	1.4	19.2
Thursday	10,284	142	1.4	18.6
Friday	9,794	139	1.4	18.2
Saturday	2,545	28	1.1	3.8
Sunday	1,402	12	0.9	1.7
All working days	54,290	761	1.4	100.0
Women				
Monday	8,075	161	2.0	17.0
Tuesday	8,734	179	2.1	18.9
Wednesday	8,763	178	2.0	18.7
Thursday	8,629	185	2.1	19.4
Friday	8,088	180	2.2	18.8
Saturday	2,065	41	2.0	4.4
Sunday	1,118	24	2.2	2.7
All working days	45,472	949	2.1	100.0
All people				
Monday	17,670	303	1.7	17.7
Tuesday	19,051	332	1.7	19.3
Wednesday	19,115	325	1.7	19.0
Thursday	18,914	327	1.7	19.1
Friday	17,883	318	1.8	18.5
Saturday	4,610	69	1.5	4.1
Sunday	2,520	37	1.5	2.3
All working days	99,762	1,710	1.7	100.0

Source: Labour Force Survey

Figure 1**Sickness absence rates;^a United Kingdom; spring 2000 to spring 2004, not seasonally adjusted**

Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

Figure 2**Sickness absence rates^a by age and sex; United Kingdom; spring 2004, not seasonally adjusted**

Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

* This estimate is based on small sample sizes and is subject to large sampling variability.

► Sickness absence rates were generally higher for women than men. In spring 2004 the absence rate for women was 2.1 per cent, compared with 1.4 per cent for men. **Table 1** also shows that when scheduled working days are taken into account, days lost to sickness absence are fairly evenly spread across the weekdays. This is counter to the common perception that sickness absence is higher on Mondays and Fridays as a result of non-genuine absence. The latest CBI survey – which questions managers and human resource practitioners – found that firms thought 15 per cent of absence was a result of employees taking non-genuine sickness absence. The survey also found that the majority of absence is in fact because of genuine sickness. Saturdays and Sundays had the lowest proportion of working days lost from work because of sickness (both at 1.5 per cent). However, these were also the days of the week with the lowest number of people scheduled to work.

Trends in occurrence of sickness absence

The LFS introduced new questions on sickness absence in spring 2000. These allow a comparison of five spring quarters. Looking at the figures in terms of people who are absent from work, **Figure 1** shows that the occurrence of absence among employees has remained fairly stable over the five-year period at around 3 per cent.

Age and sex

The occurrence of sickness absence varied by age and sex (see **Figure 2**). Some 2.9 per cent of employees took at least one day off work in the reference week because of sickness in spring 2004. Female employees were more likely to take at least a day off ►

Table 2

Sickness absence rates^a for men and women by age of youngest dependent child;^b United Kingdom; spring 2004, not seasonally adjusted

Per cent

	No dependent children		Dependent children			
	Age of youngest dependent child					
		0-18 years	0-4 years	5-10 years	11-18 years	
Men	2.4	2.5	2.7	2.5	2.2	
Women	3.4	3.3	3.2	3.9	2.9	
All	2.9	2.9	2.9	3.3	2.6	

Source: Labour Force Survey

a Proportions of employees who were absent from work for at least one day in the reference week.
b Dependent children are all those aged 0 to 15, and those aged 16 to 18 in full-time education.

► sick than men (3.3 per cent and 2.4 per cent respectively). Younger employees were more likely to take sickness absence than older employees, with 3.2 per cent of 16 to 24-year-olds and 3.0 per cent of 25 to 34-year-olds taking at least one day off sick in the reference week. This compares with 2.8 per cent of 35 to 49-year-olds and 2.8 per cent of 50 to 59/64-year-old employees. Among men, those aged 16 to 24 were the most likely to be off sick (2.9 per cent) whereas for women, those aged 25 to 34 had the highest rate of sickness absence (3.6 per cent).

Age of youngest dependent child

The higher rate of sick leave among women is commonly perceived to be associated with the presence of dependent children. However, women with no dependent children had a similar rate of sickness absence to women with dependent children aged 0 to 18 (3.4 per cent and 3.3 per cent respectively, see **Table 2**). Only if their youngest dependent child was 5 to 10-years-old were

women with dependent children more likely to take sickness absence (3.9 per cent) than women with no dependent children. However, age does seem to have an impact because women aged 25 to 34 with dependent children were more likely to take sickness absence than women in this age group with no dependent children (3.8 per cent and 3.6 per cent respectively). The opposite was true for women aged 35 to 49, where women with dependent children were less likely to take sickness absence (3.1 per cent) than women with no dependent children (3.5 per cent). Men were most likely to take sickness absence where their youngest dependent child was aged between 0 and 4 (2.7 per cent).

Family type

The patterns of absence described above are likely to be associated with family structure. **Table 3** shows that lone mothers had the highest rates of sickness absence, followed by women without dependent children. The table also shows proportions of employees who reported a longstanding illness or disability by

family type. Interestingly, women without dependent children had the highest rates of longstanding illness or disability, with 14 per cent reporting such a problem. Both men and women without dependent children had higher rates of illness than mothers and fathers with dependent children (13.5 per cent and 10.7 per cent respectively). These figures indicate that although there appears to be a link between sickness absence and actual levels of morbidity, there are a number of cases where this pattern is not quite as straightforward. Lone parents, for example, have the highest levels of sickness absence but lower rates of longstanding illness. Men without dependent children have the lowest rate of sickness absence but one of the highest levels of longstanding illness. A study which followed a sample of civil servants over a number of years found that the presence of a longstanding illness is a moderate predictor of long-term sickness absence but is less effective at predicting more general short-term absence (Kivimaki et al, 1993). So these differences may well be

Table 3

Sickness absence rates^a and proportion of employees^b with a long-term disability by family type; United Kingdom; spring 2004, not seasonally adjusted

	Sickness absence rate	Proportion with a long-term disability
		Per cent
Employees with dependent children	2.9	10.7
Married/cohabiting women	3.0	10.3
Married/cohabiting men	2.5	10.8
Lone parents	4.1	12.2
Lone mothers	4.4	12.2
Employees without dependent children	2.9	13.5
Women without dependent children	3.4	14.0
Men without dependent children	2.4	13.0
All employees	2.9	12.6

Source: Labour Force Survey

a Proportions of working-age employees who were absent from work for at least one day in the reference week.

b Working age is 16 to 64-years-old for men and 16 to 59-years-old for women.

Table 4

Sickness absence rates^{a,b} by long-term disability status; United Kingdom; spring 2004, not seasonally adjusted

	Men	Women	All
			Per cent
Work-limiting disabled	5.5	7.8	6.6
Disability Discrimination Act disabled	4.8	7.0	5.9
Long-term disabled ^c	4.6	6.5	5.5
Not disabled	2.1	2.9	2.5

Source: Labour Force Survey

a Proportions of working-age employees who were absent from work for at least one day in the reference week.

b Working age is 16 to 64-years-old for men and 16 to 59-years-old for women.

c Either work-limiting disabled or Disability Discrimination Act disabled or both.

- complicated by the fact that we are unable to distinguish between short-term and long-term sickness absence.

Disability

LFS respondents can be defined as having a current long-term disability covered by the Disability

Discrimination Act (DDA) or a work-limiting disability, or both. DDA disabled (current disability) includes people who have a long-term disability that substantially limits their day-to-day activities. Work-limiting disability is a long-term problem that affects the kind or

amount of work that a person can do. Employees with a work-limiting disability were the most likely to take sickness absence at 6.6 per cent (see Table 4). This was followed by employees who were DDA disabled (5.9 per cent). Disabled employees were more than twice as likely to take sickness absence in the reference week as employees who were not disabled (5.5 per cent compared with 2.5 per cent).

Occupation

The occurrence of sickness absence in spring 2004 varied between occupations from 2.0 per cent for managers and senior officials to 3.6 per cent for personal service occupations (see Figure 3). In addition, employees in process, plant and machine operatives (3.5 per cent), administrative and secretarial (3.3 per cent), elementary occupations (3.2 per cent) and sales and customer service occupations (3.1 per cent) were more likely to take sickness absence than the average for employees in all occupations at 2.9 per cent. Differences by seniority may well explain some of the differences in absence rates by occupation. The Cabinet Office's annual report on sickness absence in the public sector found that absence as well as actual sickness was most pronounced among junior grades. In the civil service the clerical grade averaged three times the average absence per head of those at or above the managerial grade, although it could well be that reporting of absence is higher among junior grades than those with greater seniority.

Industry

Sickness absence also varied between industries (see Figure 4). Employees were most likely to take at least one

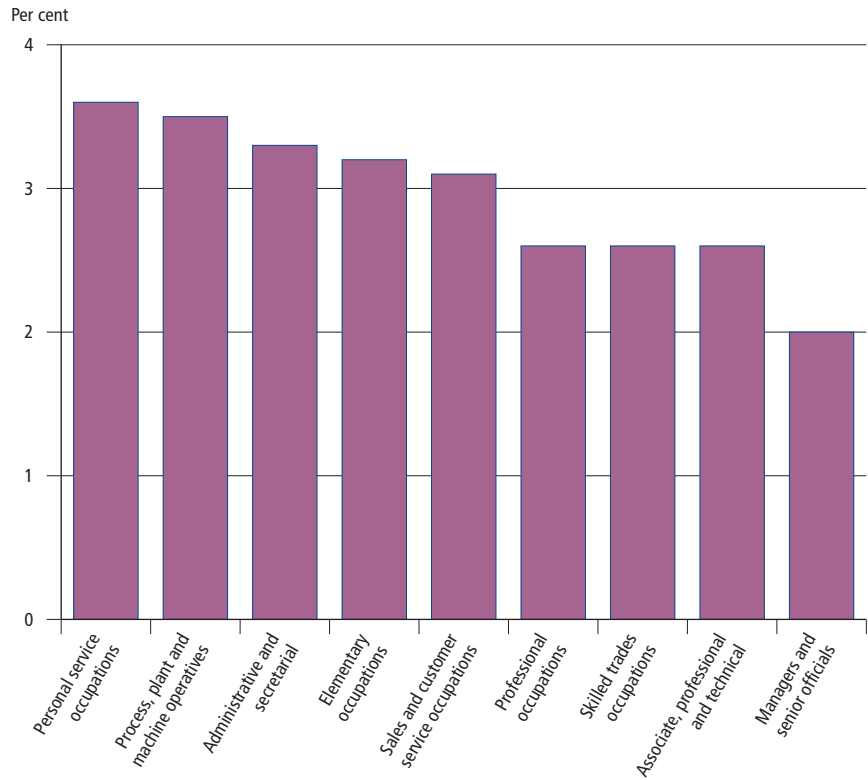
► day off in the reference week in financial intermediation (4.0 per cent). This was followed by health and social work (3.4 per cent). In addition employee sickness absence was higher than the UK average in education (3.1 per cent), transport, storage and communication (3.0 per cent) and manufacturing (3.0 per cent). The sickness absence rate was lowest in hotels and restaurants (2.1 per cent) and agriculture, forestry and fishing, energy and water (2.1 per cent).

Sector and workplace size

The LFS asks respondents whether they work in the public or private sector. The proportion of employees who had taken sickness absence was higher in the public sector (3.1 per cent) than the private sector (2.8 per cent). However, when looking at type of sector by workplace size, larger public and private workplaces do not follow the same pattern as smaller workplaces (see **Table 5**). The public sector had a higher proportion of employees taking at least one day off sick in the reference week than the private sector in workplaces with less than 500 employees. However, private sector workplaces with 500 or more employees had an absence rate of 3.1 per cent compared with 2.9 per cent for the public sector, although this difference is not statistically significant. A Chartered Institute of Personnel and Development report, *Employee Absence 2004*, may provide a possible explanation for the difference between large and smaller workplaces. The report found that public services and non-profit organisations were more likely to have a written absence management policy than private services or manufacturing and production. Furthermore, the majority of organisations who employed 500 or

Figure 3

Sickness absence rates^a by occupation; United Kingdom; spring 2004, not seasonally adjusted



Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

Table 5

Sickness absence rates^a by public/private sector and workplace size; United Kingdom; spring 2004, not seasonally adjusted

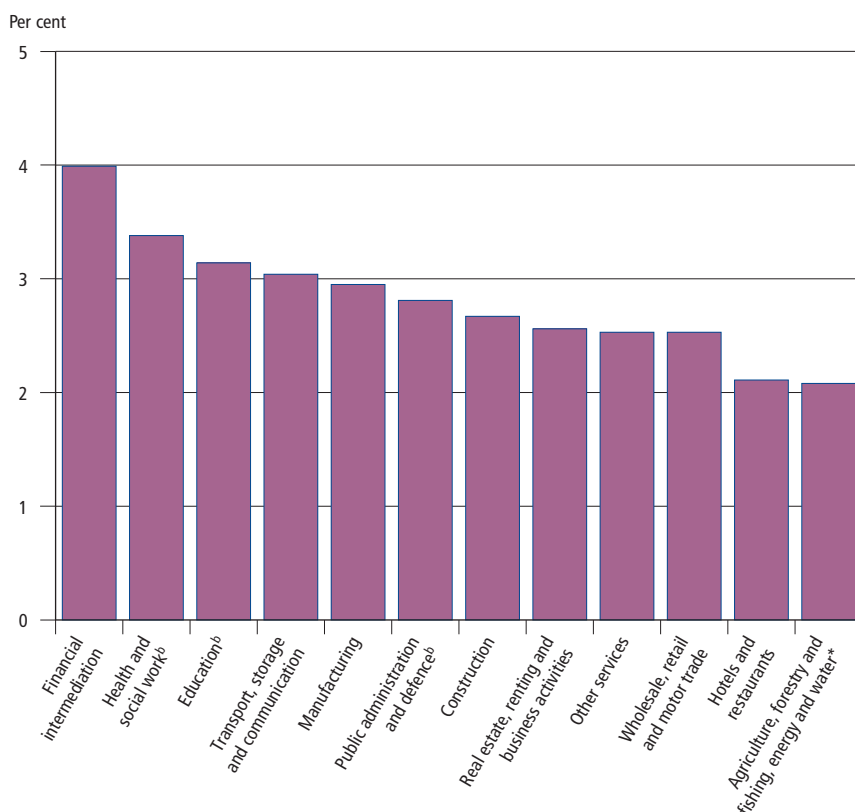
	Per cent		
	Private	Public	Total
Number of employees			
Less than 25	2.4	2.7	2.5
25 to 49	2.9	3.8	3.1
50 to 499	3.0	3.2	3.1
500 and over	3.1	2.9	3.0
All employees	2.8	3.1	2.9

Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

Figure 4

Sickness absence rates^a by industry; United Kingdom; spring 2004, not seasonally adjusted



Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

^b This includes employees in both the public and the private sector.

* This estimate is based on small sample sizes and is subject to large sampling variability.

Table 6

Employee sickness absence rates^a by sex and usual hours worked;^b United Kingdom; spring 2004, not seasonally adjusted

Usual hours worked	Per cent		
	Men	Women	All
Less than 16	1.6*	2.1	2.0
16 to 30 hours	1.9	3.2	3.0
31 to 45 hours	2.7	3.7	3.2
Over 45 hours	2.1	3.8	2.5

Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

^b Total usual hours worked in main job including overtime.

* This estimate is based on small sample sizes and is subject to large sampling variability.

more staff employed possessed policies on sickness absence. Both these factors combined may explain why public sector workplaces with 500 or more employees had a lower occurrence of sickness absence than private sector organisations.

Workplaces with less than 25 employees had the lowest proportion of employees who had taken at least one day off sick in the reference week (2.5 per cent). One possible reason why smaller workplaces have a lower occurrence of absence is that employees in smaller workplaces may feel their absence will have a greater impact on the running of the workplace. Therefore they may be more likely to attend work with minor illnesses than employees in large workplaces. The provision of sick pay is also likely to be less generous in smaller organisations than larger ones, and this may also have an impact.

Hours worked

Employees working between 16 and 30 hours a week and between 31 and 45 hours a week were more likely to take sickness absence than employees working less than 16 hours a week or over 45 hours a week (see Table 6). The occupation of employees working over 45 hours a week may explain why they take more time off sick. Managers and senior officials are most likely to work over 45 hours a week (see pp227-235, *Labour Market Trends*, June 2004). Figure 3 of this article shows managers and senior officials were also least likely to take sickness absence. On the other hand, because employees working for less than 16 hours are working fewer days, this reduces their chances of taking a day off in the reference week because of sickness when they were actually scheduled to work.

Region

Table 7 shows sickness absence rates for employees according to region of residence and region of workplace. The regions of residence with the highest proportions of sickness absence were the West Midlands and Yorkshire and the Humber, with 3.3 per cent and 3.2 per cent respectively. The North East had the lowest incidence of sickness absence at 2.3 per cent.

Turning to respondents' regions of work, an interesting finding is the difference in absence rates within London. Central London had the highest proportion of employees who worked in this area off sick at 3.1 per cent, compared with 2.9 per cent for Inner London and 2.2 per cent for Outer London. This may be because of the industries in which employees are working in these areas within the London region.

Employees working in education, health, and public administration; transport and communication; and banking, finance and insurance were most likely to be off sick. When looking at the proportion of employees working in these three industry groups according to the region of workplace, some 72 per cent of employees in Central London were working in these three industry groups, 63 per cent in Inner London and 58 per cent in Outer London.

Characteristics most associated with sickness absence

The analysis presented so far in this article shows the various characteristics related to sickness absence in isolation. In order to establish which of these characteristics are most associated with employees having at least one day off in the reference week, a

Table 7

Sickness absence rates^a by region of residence and workplace; United Kingdom; spring 2004, not seasonally adjusted

	Per cent	
	Region of residence	Region of workplace
UK	2.9	2.9
North East	2.3	2.3
North West	3.1	3.1
Yorkshire and the Humber	3.2	3.3
East Midlands	3.1	3.0
West Midlands	3.3	3.2
East of England	2.7	2.7
London	2.5	2.7
Central London ^b		3.1
Inner London	2.6	2.9
Outer London	2.5	2.2
South East	2.8	2.7
South West	3.1	3.2
Wales	3.0	3.1
Scotland	2.4	2.5
Northern Ireland	2.9	2.9

Source: Labour Force Survey

^a Proportions of employees who were absent from work for at least one day in the reference week.

^b Data for Central London by region of residence is grouped in Inner London.

logistic regression analysis was conducted. A number of characteristics were considered together in order to assess the association with sickness absence. These included age, sex, industry, occupation, region, whether the respondent works in the public or private sector, total usual hours worked, age of youngest dependent child, disability and workplace size. After the interactions between these factors were taken into account, the following variables showed a significant association with sickness absence; whether the respondent was disabled, occupation, workplace size, age of youngest dependent child and age of respondent. This supports the findings shown earlier in the article and consequently the detailed figures are not shown here. Further work is

necessary to look at the detailed relationships between these and other variables and sickness absence in order to paint a complete picture.

Other sources of sickness absence data

The LFS collects information on sickness absence from employees. An alternative method is to survey employers and their records of levels and reasons for absence. Two large-scale surveys include those conducted by the Confederation of British Industry and the Chartered Institute of Personnel and Development (see Box 1). These surveys provide information which is not available from the LFS, including data on long-term sick leave, reasons for absence, cost of absence and how employers manage absence. However, employer

Box 1

Non-ONS sources of sickness absence information

	Key findings	Key observations
Chartered Institute of Personnel and Development <i>Employee absence, July 2004</i>	<ul style="list-style-type: none"> • The analysis is based on replies from 1,110 organisations employing a total of 2.9 million people. • The average sickness absence was 4.9 per cent or 9.1 working days per employee (based on a working year of 228 days). • The public sector had a higher level of sickness absence than the private sector (4.7 per cent and 3.4 per cent respectively). • Almost two-thirds (61 per cent) of absence was for less than five days. • The average annual cost of absence per employee was estimated at £588. 	<ul style="list-style-type: none"> • The most common cause of sickness absence for both manual and non-manual workers was minor illness, followed by stress for non-manual employees, and back pain for manual staff. • Employers believe that almost 20 per cent of absence is not genuine. • Public sector organisations were more likely to set targets to reduce absence levels than private sector organisations.
Confederation of British Industry <i>Absence and labour turnover 2003</i>	<ul style="list-style-type: none"> • A total of 1.4 million employees were covered by the survey, equivalent to 6 per cent of the employed workforce. • An average of 6.8 days per employee were lost because of sickness absence. • The absence rate for non-manual employees was 2.4 per cent, compared with a rate of 3.7 per cent for manual employees. • Public sector employees took 2.4 more days absence on average than their private sector colleagues. • Absence rates were higher among larger organisations. • The direct cost of absence was estimated at £476 per employee. 	<ul style="list-style-type: none"> • Most employers believe that the majority of reported sickness absence is genuine. • Short-term illness caused the most spells of absence. Minor illnesses such as colds and flu were ranked as the most important causes of absence for both manual and non-manual employees. • Long-term absence accounted for only 5 per cent of cases. However, 31 per cent of days were lost because of long-term absence, compared with 69 per cent for short-term. • Rates were lower where senior management had primary responsibility for absence management.

surveys rely on human resources records and the quality and accuracy of these may vary between organisations. For example, the 2004 Chartered Institute of Personnel and Development report found that public service organisations were more active in managing sickness absence. Targets to reduce absence were set by almost

two-thirds of public service organisations, compared with 33 per cent of private service organisations. In addition, public service and non-profit organisations were more likely to have a written absence management policy than private services or manufacturing and production. The accuracy of the results is likely to be

affected by the response rates. For the 2004 Chartered Institute of Personnel and Development report the response rate was only 16 per cent. In the Confederation of British Industry report the public sector accounted for 12 per cent of responses received, the service sector 50 per cent and manufacturing 38 per cent.

Summary

The results of this analysis show absence is concentrated among certain groups of people, including women, young people, those

working in the public sector and employees in large workplaces. The logistic regression analysis suggests that when various factors are considered together, sickness absence is most associated with the presence

of disability, the relationship between sex and hours worked, occupation, workplace size, age of respondent and age of youngest dependent child.

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Further information

For further information, contact:

Catherine Barham,
Room B3/05,
Office for National Statistics,
1 Drummond Gate,
London SW1V 2QQ,

E-mail:

catherine.barham@ons.gov.uk

Tel: 020 7533 5092.