



Working at Home Wellbeing Survey

Summary Report of Global Findings

Global Centre for Healthy Workplaces
November 2020



BACKGROUND

2020 has presented us with extraordinary challenges in the form of a global pandemic. Next to the massive public health challenges the working world has radically changed since March. Most employers have required their employees to work from home, which represents the biggest disruption to working practices yet. Many employees remain working from home to this day with some major employers proclaiming staff can work from home forever. No doubt will the pandemic leave its mark on the working world in the long run and the new work ecosystem will come with new health-related challenges.

The Institute for Employment Studies (www.employment-studies.co.uk) decided to shed light on how homeworking has been affecting both the physical and mental wellbeing of a new army of homeworkers by conducting the Working at Home Wellbeing Survey in the United Kingdom. Under the direction of the Global Centre for Healthy Workplaces (www.globalhealthyworkplace.org) a global response was coordinated with the survey being conducted in Brazil, India, Mexico and the Emirate of Sharjah (UAE) over a time span of six months with the following partners:

- Brazil: FGV EAESP

- India: Arogya World
- Mexico: HSPM
- Emirate of Sharjah, UAE: Health Promotion Department, Supreme Council for Family Affairs

Demographics

Data samples ranged from 500 respondents in the UK, 653 in Brazil, 689 in Mexico, 922 in India to 1796 in Sharjah (all government employees in Sharjah). In Brazil, UK and Sharjah the majority of homeworkers was female, in India and Mexico the majority was male.

Home Office

A significant gap was revealed with regard to creating healthy and safe workplaces at home. While the majority of surveyed homeworkers have access to occupational health services (57% in India, 76% in Mexico, 73% in the UK) most of their employers did not conduct a risk assessment for their home office (84% in Brazil, 75% in the UK).

Physical Health

Many employees reported pain, changes in their sleep and exercise habits. Musculoskeletal pain varied across the globe: 25% in Sharjah and 33% in India report an increase in pain while in Mexico 69% did, 55% experienced back pain in the UK and for Brazil there was a 56% increase in back pain, 55% in neck pain and 50% in shoulder pain. Other noticeable pain reported were headaches and migraine (42% in Brazil, 55% in the UK, 56% in Mexico) and eye strain (43% in Sharjah, 45% in Brazil, 55% in the UK).

Lost sleep from worry was reported by 31% in India, 28% in Sharjah, 55% in Brazil, 64% in the UK and 67% in Mexico. Keeping up with exercise had mixed results: 30% in Sharjah, 44% in Mexico and 60% in the UK exercised less while 57% in India found ways to be more physically active (e.g. through yoga).

On the bright side, more are eating healthier while working at home (78% in Sharjah, 82% in India and 68% in Mexico) with 33% eating less healthily in the UK.

Mental Health

The pandemic has increased mental health risks with a number of studies documenting the increase of depression¹ and anxiety as well as burnout². The Working at Home Wellbeing surveys partially confirms these concerns. 88% of homeworkers in Mexico have financial concerns and 76% are anxious about the health of the family. In Sharjah 34% are afraid of the future. 32% in the UK do not feel cheerful and in good spirits and 40% are not calm or relaxed. 45% in Mexico feel isolated working at home, 20% in India, 33% in the UK, 26% in Sharjah, 20% in the UK and 19% in Brazil.

The WHO-5 Wellbeing Index³ was calculated in Brazil and India with average scores of 13.8 and

¹ Boston University

² Mental Health America survey, July 2020

³ www.psychcongress.com/saundras-corner/scales-screeners/well-being-index/who-five-well-being-index-who-5

17.3 respectively. The maximum score is 25 and a score below 13 indicates poor well-being and is an indication for further evaluation.

Work-related Wellbeing

More questions were asked with regard to the work organization the homeworkers are experiencing. Work pressure, workload and presenteeism are issues to be aware of. In Brazil 47% experienced work pressure, 40% in Mexico and 36% in India and in the UK. Many homeworkers have carried on working despite being ill: 65% in Sharjah, 52% in Brazil, 33% in Mexico, 26% in the UK. Satisfaction with work life balance is mixed: 42% in Brazil, 48% in India, 50% in the UK, 52% in Sharjah and 72% in Mexico.

For many working at home has been a positive experience. The majority feel they have enough time to get their work done (57% in Brazil and in the UK, 63% in Mexico, 75% in India and 83% in Sharjah). Line managers were good at keeping in touch in all countries: 71% in the UK, 80% in Brazil, 84% in Sharjah and Mexico and 87% in India. And the vast majority of respondents feel they are productive: 76% in Brazil, 78% in India and Mexico and 90% in Sharjah.

Interestingly, 74% of homeworkers in Sharjah feel they have more opportunities to develop new and better ways of doing their job. On the other hand, in Mexico 88% have concerns about keeping their jobs.

Conclusion

The Working at Home Wellbeing survey has provided us with useful data to assess the impact of the new working arrangements in various countries. The findings can inform us to better prepare for the new work ecosystem, which features a much stronger reliance on homeworkers. Health and wellbeing will remain at the core of the working world in the future coming out of a pandemic and with rising mental illness levels.

Looking back at the first six months after the pandemic hit the world workers are coping well and above all staying motivated and productive in their jobs. However, some key warning signs have been revealed by the global survey data (in varying degrees depending on the country):

- an initial significant decline in musculoskeletal health
- poor sleep and increased fatigue a concern
- exercise frequency declining for many
- increased alcohol consumption for some countries
- mental health concerns over finance, isolation, job security, work-life balance & family health.

Based on the survey findings the following actions are recommended for employers:

1. Ensure the home 'office' set-up is safe and ergonomic.
2. Equip your employees with needed tools (e.g. technology, office furniture).
3. Offer information and activities for healthy eating, sleep and exercise.

4. Provide mental health support via informal messaging groups, virtual coffee mornings, access to employee assistance programs (EAP), resilience building and regular contact with bosses and colleagues.
5. Encourage employees to take time off to recharge (e.g. mental health days).
6. Provide financial education and additional resources to support financial wellbeing.
7. Focus on 'high risk' groups, i.e. with financial concerns, eldercare, those struggling to adjust, those prone to feelings of isolation, those at risk of domestic abuse.
8. Rethink performance targets and monitoring, involve employees in decisions about reorganising work and reallocating tasks and priorities.

As renewed lockdowns are implemented in a number of countries and the impact on wellbeing may differ by sector (e.g. government vs. private) ongoing and more specific surveying of the impact is called for in order to better tailor wellbeing policies and interventions.

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