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WHITEPAPER

Seeing Presenteeism Differently:

Revealing the Good,
the Bad and the
Misunderstood

Foreword:

EDF Nuclear Operation's challenge to Robertson Cooper



Ben Moss

Managing Director, Robertson Cooper

EDF Nuclear Operations has been working in partnership with Robertson Cooper for several years, employing its Good Day at Work survey across parts of the EDF UK organisation to delve into the **drivers of health and wellbeing**, advancing their Wellbeing Strategy to industry leading standards. Early in 2023, **EDF Nuclear Operations** approached Robertson Cooper seeking deeper insights around the concept of presenteeism, a topic garnering significant attention in the media, particularly in the wake of the pandemic which permanently transformed the workplace. This was driven by Nuclear Operation's proactive approach to explore wellbeing related concepts more fully.

While EDF Nuclear Operations had already been utilising Robertson Cooper's existing measure of presenteeism through the Good Day at Work survey, unpicking how to address presenteeism remained a challenge. There was always a sense that there were aspects of the issue that the current measure wasn't picking up and, in turn, that more could be done to support employees with this issue. Robertson Cooper eagerly embraced this challenge because, for us as well, presenteeism was something we've measured for many years, yet it remained shrouded in ambiguity. In short, **we always had the suspicion that there was more to know and do.**

Our journey involved **revisiting the research** on presenteeism, **collecting fresh data** and **analysing the intricate relationships** among key presenteeism-related metrics, including productivity and absence. **This process led us to a pivotal realisation: not all instances of working whilst unwell are alike.** In fact, there are three distinct types, with some forms likely to be deemed acceptable, even desirable, by many organisations and their employees.

Armed with this newfound clarity, we were able to **develop our own approach to measuring the behaviours relating to working whilst unwell, including presenteeism.** We've been careful to ground it in our proprietary Good Day at Work measurement framework, so that all of our clients will truly be able to understand and manage these issues effectively moving forward.

We extend our sincere gratitude to EDF Nuclear Operations for igniting our curiosity and inspiring this investigative journey. Our aspiration is that by sharing these insights with a broader audience, we can help other businesses to **create more Good Days at Work for everyone, everywhere.**

This re-evaluation of presenteeism is a major breakthrough

In today's dynamic work landscape, the concept of presenteeism has increasingly garnered attention as organisations strive to understand its true **impact on productivity and employee wellbeing**.

In "Seeing Presenteeism Differently," Robertson Cooper draws on contributions from **Professor Ivan Robertson, Professor Sir Cary Cooper**, and our team of senior **Business Psychologists and analysts** in an attempt to demystify this complex, often misunderstood phenomenon and offer fresh perspectives.

This whitepaper seeks to answer a series of **critical questions regarding presenteeism** that have been on the 'too hard to do pile' for far too long. Enabling employees to experience more Good Days at Work is Robertson Cooper's mission – and it's fair to say that, traditionally, this does not involve working whilst ill. However, this issue isn't always quite that simple and, in the pages that follow, we hope to transform your thinking – the way we've transformed ours – around this important topic.

Along the way, we will introduce Robertson Cooper's groundbreaking **new approach** to measuring presenteeism, and with that, your businesses will be able to unlock what we believe is huge **potential for enhancing workplace wellbeing and productivity**.



"This re-evaluation of presenteeism is a major breakthrough. It enables employers to truly understand presenteeism: what it is and what it isn't; its real impact on workplace performance; what you can do to manage it more effectively. By dispelling outdated notions, it opens up a new era of informed strategies that optimise productivity and foster a culture of employee health and wellbeing. And it starts with changing how we measure presenteeism"

Professor Sir Cary Cooper
Co-Founder of Robertson Cooper

—Changing the conversation

01
The **definition** of presenteeism is **attending work while ill** and does not include procrastination, disengagement, or demotivation.

02
The **costs** of presenteeism that are widely published in the HR press and articles are **unreliable** and, largely, **misleading**.

03
There are **three different types of working whilst unwell** and two of those are not necessarily undesirable for businesses; the final type is presenteeism and businesses should take steps to prevent it.



Key takeaways

04
The **measurement of presenteeism is currently crude and unhelpful**; it does not identify the different types of working whilst unwell or make connections with other outcomes such as **productivity** and **absence**; this needs to change to make presenteeism a meaningful – and actionable – metric for businesses.

05
Robertson Cooper's new measurement approach enables businesses to **identify three different types of working whilst unwell**, including presenteeism. It uncovers what drives this behaviour and the impact it is having on productivity and absence, empowering employers to build strategies to **manage it more effectively**.



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—Introduction: Seeing presenteeism differently

There's an **endemic issue at the heart of workplace culture and performance**, one that threatens to undermine a range of important business level outcomes: **presenteeism**. Frequently discussed within HR circles, it is often portrayed as a formidable adversary, a relentless drain on productivity and a financial burden that businesses can ill-afford. But in reality, presenteeism is not well understood, and even less well addressed, by most businesses.

The concept is accompanied by a number of claims about its **extortionate costs** and assumptions about how it relates to **absenteeism**. This whitepaper aims to provide clarity around this important topic, and importantly, decipher the actionable strategies that can empower businesses to confront this challenge head-on.

In doing so, we'll draw on the **latest research** and what our own **data** reveals about the real state of play when it comes to presenteeism – what it is, what it isn't and what a new view of presenteeism looks like for employers.

Gauging the 'real' impact of presenteeism

We typically hear hard-hitting, headline statistics exclaiming both the **high incidence and cost of presenteeism**, things that often go something like this:

The CIPD's Health and Wellbeing at Work Survey (2023) reported that a **high percentage of respondents stated they are aware of presenteeism** in their organisation: 76% in the office and 78% homeworking.

"The fact that over a third of UK workers admit to working despite being unwell is a serious cause for concern"

"The Centre for Mental Health calculated that presenteeism from mental ill health alone costs the UK economy £15.1 billion per annum, while absenteeism costs £8.4 billion"

"...it is conservatively estimated that in the UK presenteeism attributable to mental health problems accounts for 1.5 times as much working time lost as absenteeism. The average cost of presenteeism is put at around £145 per working day lost...it is estimated that the annual costs of presenteeism attributable to mental health problems amount to £605 for every employee in the UK workforce, or £15.1 billion in total"

While these numbers are cited in nearly every article discussing presenteeism, here at Robertson Cooper a nagging curiosity has prompted us to embark on a thorough investigation, **looking behind the headlines** at the research driving these conclusions.

What follows is a comprehensive exploration of the entire presenteeism phenomenon. Our aim is to **offer much-needed clarity** to this enigmatic issue, one that allegedly exerts a multi-billion-pound toll on businesses while leaving them searching for solutions.

The questions we had are likely to be similar to the ones you have, and here we aim to answer them:



Is presenteeism genuinely **more costly** than absenteeism and how can this assertion be justified?



Is the presence of employees, even at reduced productivity, always **worse than their absence** from work?



How are these **costs** calculated and can we rely on them to be accurate?



What is the **interplay between absenteeism and presenteeism**? Is the prevailing belief that when absence goes down, presenteeism goes up accurate?



Is all presenteeism the same? Are all forms of working whilst unwell **undesirable**?



What is the **relationship between productivity and presenteeism**? Are productivity dips permanent or do they fluctuate over time? How does this dynamic play out in the long run?



Is presenteeism a useful **metric** for businesses to track to **drive organisational performance**? If so, are current measures fit for purpose?

So, let's get going...

Part 1:

**Defining what
presenteeism is
and isn't;
understanding
what causes it**

The phenomenon of being physically present at work but not fully functioning due to physical or mental ill health.



CURRENT DEFINITION OF PRESENTEEISM

The most cited definition of presenteeism is **“the phenomenon of being physically present at work but not fully functioning due to physical or mental health issues.”** A very important caveat here is that presenteeism is not generally inclusive of ‘procrastination’ or being ‘unmotivated’.

These motivational factors may exist independently of mental or physical illness and therefore, our premise here is that the word ‘presenteeism’ as its currently used relates to working while experiencing illness, whether it be physical or mental.

Before examining the specific drivers of presenteeism, it’s important to cover off one more important aspect of its definition. There’s no doubt that in organisations, and broader society, ‘-isms’ are almost always seen as a negative. And so it is with presenteeism, which for so long has been seen as the other side of the absenteeism coin, and as such, something to be avoided wherever possible. In this paper we

argue, however, that this framing precludes any consideration of circumstances in which working whilst unwell could be functional for employees and employers alike. In this context, we will challenge current terminology and introduce a new taxonomy that is, at once, more meaningful and practical for organisations.

DETERMINANTS OF PRESENTEEISM

As with any HR issue or trend, presenteeism does not have a single cause; it is multi-factorial. Having statistically analysed our own dataset and conducted an extensive literature review, **we have uncovered four different types of driver** (overleaf) that demand consideration when exploring the driving forces behind presenteeism.

The value of a framework of this kind is to help us to visualise how organisations can take action to deal with presenteeism. If we know what **causes** presenteeism, we can think about **ways to manage it**.

What drives the behaviours associated with presenteeism?

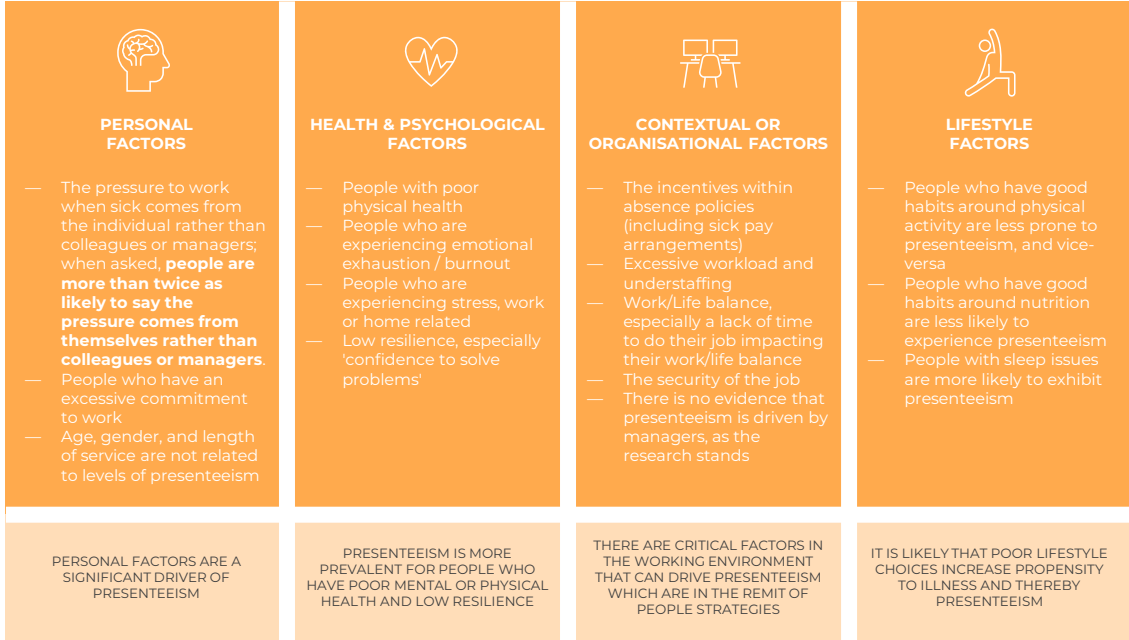


Figure 1: Unpacking the drivers of presenteeism: four areas, including what the research tells us is at play in each

What do employees say about why they work whilst unwell?

A model like this helps us frame the factors at play when it comes to presenteeism, but there's nothing like asking employees directly. So, our next step was to interrogate 1800 cases where we'd asked employees from a range of sectors the reasons for their presenteeism. **Figure 2** below shows the results:

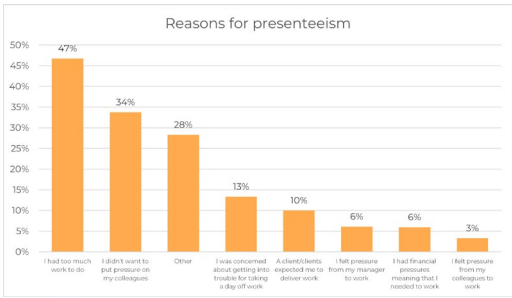


Figure 2: Reasons for presenteeism

The implication here is that 47% of respondents stated that having **too much work to do** was the reason for their episode of presenteeism, whereas 34% cited **not wanting to put pressure on colleagues** and 13% were **concerned about getting in trouble**. There are clear implications here for employers wanting to improve the way they manage presenteeism.

SUMMARY: Our multifactorial model shows that the causes of presenteeism encompass both individual aspects, such as **personality and health behaviours**, as well as **organisational factors**. Personal factors are one of the strongest drivers of presenteeism, but the organisational factors encompass elements like the absence policy's influence on behaviour, the demands placed on employees by workload, how secure people feel in their job and how all these factors interact with an individual's work/life balance. Working to address both of these aspects will go some way to reduce the occurrence of presenteeism.

At the same time our data shows that, as well as ensuring that workload isn't driving unhealthy levels of presenteeism, there are cultural and practical implications for employers around helping employees to make better decisions about when to come to work and when to take sick leave.

All that said, and in line with our contention about the limitations of using '-isms' to describe workplace phenomena, we will show that **not all presenteeism is undesirable** and the focus for organisations should be about identifying only instances of presenteeism that lead to negative outcomes for both employee and employer.

Part 2:

**Revealing the
three types of
working whilst
unwell:
introducing ‘true’
presenteeism and
the two
‘functional’ types**

—The different types of working whilst unwell: a new paradigm

We have seen so far that presenteeism is more complex than is typically presented. Here we will introduce a new, practical **way to think about and categorise working whilst unwell**, which enables employers to make **better decisions** and **drive better action**.

The obvious benefit of sickness absence is the recovery of health. Absence is desirable when withdrawal from work will lead to a more rapid recovery. But what about 'presence'? Can there be any **benefits to being present when not in full health**? Or is it always **just a cost to a business**?

The short answer to this question is 'it depends', and the devil is in the detail. There is nuance around the topic and not all instances are the same – there are dependencies around the type of illness that is

driving the decision to work (e.g. going into the office with an infectious disease is very different to doing so with back pain). However, we believe there is a better way to think about these concepts and will now present some new terms and categories that distinguish the different reasons for working when unwell. This opens up new possibilities for managing these issues and, importantly, other performance-related outcomes such as productivity and absence.

The first assumption we want to challenge is that all presenteeism is bad, because our research and data shows something different (*Whysall et al., 2018*), (*Waddell & Burton, 2006*). Our contention is that there is such a thing as **'Functional Presence'**: namely when making the decision to work when not in full health is a constructive one for both employee and employer. There is, of course, another category - 'presenteeism' - which is dysfunctional and helps no one. In this section we unpack those claims:

There are two types of 'Functional Presence':



PRAGMATIC PRESENCE

When people **perform** close to, or at, their full capacity and at the same time recover at least to a certain degree from their health impairment. These are the occasions when employees **want** to be in work to **complete some tasks** despite not feeling their very best; there are things they just want to get done. They accept they are not at full capacity, but prefer to complete some of their tasks at least, perhaps making some adjustments such as leaving work early.



THERAPEUTIC PRESENCE

This is when people are performing well below their maximum productivity, but they get some form of 'therapeutic' benefit by being in work. The benefit is usually the **social connection** and purpose they get from coming to and being at work. You may have heard people say **"I am sick of being stuck at home doing nothing, I want to come into work"**; this is Therapeutic Presence.

It is easy to place yourself in both of these scenarios at times in your working life; we know intuitively that it is not always the case that making the decision to work whilst unwell is a **negative** for employees or for businesses.

—Functional Presence vs Presenteeism



These new categorisations force us to see the traditional concept of presenteeism differently. This is because we now have two types of presence that are, at worst, functional and, at best, somewhat **desirable** for both employees and businesses. If recovery is aided, or at least not hampered, it could be better for businesses that such employees are in work rather than being absent in many cases. In our view, if an employee's presence is **functional** or **therapeutic**, the challenge for organisations is to manage it, rather than taking action to prevent it. **Critically, they should no longer count these instances as part of any cost estimate relating to presenteeism.**

- One important **caveat** here is around employees who work in **safety critical environments**: clearly, greater supervision is required if the consequences of working whilst unwell present a risk to the employee themselves and/or to other people. The ideas of Functional and Therapeutic Presence are still valid in this context, but the parameters are likely to be different and decisions should be tailored to the specific environment and job role.

It is only the third type of working whilst unwell that is undesirable, and this is what the traditional term 'presenteeism' should be reserved for.

Think about the prevalence numbers discussed in the introduction to this paper – 60%+ of employees experiencing an episode of presenteeism in the last three months – **but which type was it?** Could it be that only one-third of recorded cases actually falls into the 'true' presenteeism category? **If that is the case, it fundamentally changes our understanding of how to measure and manage presenteeism in the workplace.**

As an example, the CIPD's Health and Wellbeing at Work Survey (2023) claimed that '41% of employers took steps to discourage presenteeism compared with 53% last year'. This is presented as a drop-off in organisations paying proper attention to presenteeism; that is, all presenteeism is framed unequivocally as a problem for employers. However, if two-thirds of cases shouldn't, in fact, be 'discouraged' at all because they just need to be understood and

'TRUE' PRESENTEEISM IS ALWAYS DYSFUNCTIONAL

True presenteeism either offers **no functionality** for the employee (i.e. people are too ill to perform their tasks) or has **no therapeutic benefit** (i.e. people do not gain other benefits such as social connection and meaning). **It is these outcomes that we need to identify and manage.** They are the source of costly outcomes such as long-term **absence, sustained drops in productivity and even attrition.**

supported appropriately, the picture is very different.

So, **understanding what proportion of episodes of working whilst unwell are functional Vs. negative** is a key step to managing it effectively. This starts with reliable measurement to enable meaningful conversations about action and support.

SUMMARY: Organisations' efforts to measure and monitor instances of employees working whilst unwell need to evolve to distinguish between functional presence and 'true' presenteeism. Current measures conflate these two things and dilute any focus on real and costly presenteeism. Organisations should reconsider their approach to measuring and managing presenteeism based on a traditional, one-dimensional conception. Done right, this could prevent long-term reductions in productivity and reduce the risks of costly long-term or frequent absenteeism.

Part 3:

**Unpacking
popular assertions
around the costs
of presenteeism**

—Presenteeism costs: looking behind the headlines

In the introduction we talked about the numbers that are quoted around the costs of presenteeism, headlines about it being somewhere **between 1.8 times and 3 times the cost of absenteeism**. We wanted to look behind the headlines, to get a grip on the true scale of the issue around presenteeism, as it's currently measured.

Here is what we found:



As we've established, the **definition** and measurement of presenteeism is hugely important when it comes to calculating the potential costs for businesses and planning action. Upon investigation, the studies referenced in a lot of contemporary articles about the costs of presenteeism seemingly use varying definitions which possibly **skew the figures** used in conversations and articles about presenteeism. So, as you might expect, how your organisation measures presenteeism determines how the cost calculations are worked out.

For example, a study by *Stewart et al (2003)* is used by almost all of the articles we have come across about presenteeism to make estimates of the costs (such as the '3 times the cost of absenteeism' claim). However, when we went back to source itself, **the measure of presenteeism is not what we would typically regard as presenteeism at all**. The authors were, in fact, looking at 'Lost Productive work time (LPT)' and to assess LPT they included six criteria which are as follows: 'Loss of concentration', 'Repeating a job', 'Working more slowly', 'Time to get going in the morning', 'Doing nothing', 'Feeling fatigued'.



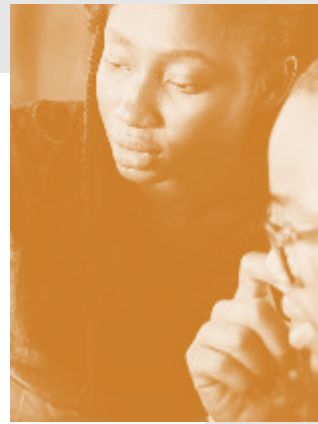
It's fairly clear that these criteria are not typically what would be used to identify 'modern' concepts of presenteeism because there is **no reference at all to being unwell**, either mentally or physically, while working. Indeed, if you think about yourself experiencing these challenges, you will know, for example, that there are many reasons why you might lose concentration in a working day ranging from technology interruptions, a lack of motivation, multi-tasking or even noise disruptions. In our view, this is not a good measure of presenteeism as most organisations now define it. Indeed, the authors never actually claimed that their study was about presenteeism, yet somehow this study has become the cornerstone of claims about the costs of presenteeism in the public literature.

When we want to provide a clear picture regarding costs, it matters what **type of illness** is driving presenteeism. For infectious disease the position is clear; if people work when they have an infectious illness there is a risk that other workers will be infected and sickness absence rates are likely to increase as a consequence. Overall, there is a negative impact on the organisation and reducing infectious disease presenteeism is likely to result in cost savings (*Asfaw et al., 2017*).



However, for presenteeism related to other forms of ill health, such as mental health, musculoskeletal problems or chronic illness the costs and benefits are not so clear. Some research (*Zhang et al., 2015*) suggests that the cost implications of presenteeism may be more negative for individuals who work in collaborative team settings and less damaging for people who are in non-team settings and experience brief periods of presenteeism, although this finding only held for small organisations and not large ones.

—Presenteeism costs: deciphering the claims



Our conclusion from examining the costing models for presenteeism is that despite the confident claims about its costs in the general narrative, **there is actually no single accepted method of valuing presenteeism costs**. Furthermore, the costs arrived at in these claims are dependent on the measurement tool used and, in some cases, it may not be measuring presenteeism at all!

“The estimation of reduced productivity at work (presenteeism) seems to be very limited in current economic evaluation practice. The development of various presenteeism measurement instruments has also not translated into applied costing practice. To enable wider inclusion of presenteeism costs, a reference case and guidance regarding standard instruments and a methodology for estimating and valuing productivity costs related to presenteeism need to be developed” (*Kigozi et al., 2017; p505*). To our knowledge, this has not yet happened.

And this is the state of the art using the traditional definition of presenteeism! If you accept our new definition of ‘working whilst unwell’ being made up of **functional presence and presenteeism** the cost calculation equation changes again. This is because significant costs are only associated with one of the three categories we presented. Current models attribute cost to all three.

SUMMARY: Currently, there exists no dependable – and commonly available – method for accurately measuring the costs of traditional presenteeism. If you accept the new definition of working whilst unwell proposed in this paper, the gap to a reliable solution widens further because current measures do not distinguish between the three categories of presence we describe.

Until they do, we believe all presenteeism costs are over-stated.

There is clarity that infectious disease presenteeism represents a significant cost to business, but for other health conditions our suspicion is that these costs have been extrapolated in a manner that renders them unrealistic. Due to the unreliability of cost data, the question of whether a period of absence is less costly in the long run than a period of presenteeism remains unanswered.

What we do know:



We know that the **definition** of presenteeism matters when it comes to understanding its costs and consequences... and we're suggesting a new definition.



We know that there are **no agreed measurement criteria** for presenteeism beyond ‘I worked whilst ill’.



We do not have a clear and confident view of the **costs of presenteeism** at this time and claims about the costs of presenteeism that are frequently published in HR space are, in our view, **unreliable**.

With this in mind, our next step is to unpick **the relationship between presenteeism and productivity** – is the productivity loss and risk to costs as great as often claimed?

Part 4:

Rethinking the relationship between presenteeism and productivity

—The impact of presenteeism on productivity



It is clear that presenteeism will have some impact on productivity, but how much and for how long? Again, we interrogated our own data and reviewed the literature to look for answers. Our findings were interesting and will perhaps, for some, be surprising:

- Around **60% of people report an episode of presenteeism** over an average 3-month period, so prevalence is relatively high.
- There is **no clear pattern in terms of how role/seniority affects presenteeism**. We checked this because there have been claims that presenteeism is more prevalent in less senior positions, where there is lower control over work, and less prevalent in more senior positions where there is high control over work (*Eurofound, 2012*); we did not find this to be the case in our own data.
- During a period of presenteeism, **productivity drops by approximately 40%**.

SUMMARY: Our data revealed that during a period of presenteeism employee productivity is typically a lot lower, as would be expected. Thinking more broadly though, annual productivity would be lower for any employee who displayed even one period of presenteeism compared with one who didn't, but how low depends on prevalence.

This is because productivity losses are the greatest during the period of presenteeism itself but may return to normal fairly quickly. For example, if people are only having 1 day of presenteeism with a 40% drop in productivity for that day and the rest of the time their productivity is close to or above the average, the impact is small. If the period of presenteeism lasts 3 months, the productivity loss picture is very different.

productivity drops by approximately 40%

The impact of productivity losses from presenteeism over time

We analysed our own data to examine what the impact of presenteeism is on productivity over time. We found that when you consider longer periods of presenteeism, things shift markedly in terms of the real impact on productivity.

Figure 3* below shows that:

- When people have only 1 to 3 days of presenteeism, their overall productivity (yellow line) is actually higher than the mean for the General Working Population (grey line) over a 3-month period.
- Levels of productivity during the period of presenteeism itself (i.e., on that one day or two days) is fairly consistent (the red line) and the reduction in productivity is generally the same regardless of how frequently someone experiences it. (approx. 40% reduction).
- Overall productivity **losses due to presenteeism become significant only if the prevalence of presenteeism is high** – specifically, above 5 days in a 3-month period.

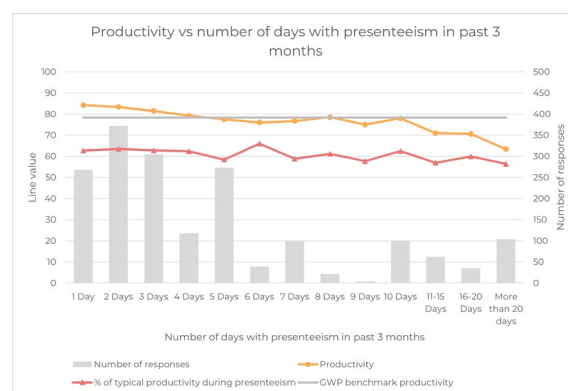


Figure 3*: Productivity variation vs. number of presenteeism days

**The data this is based on uses the traditional definition of presenteeism, rather than the new one proposed elsewhere in this paper*

Can we be confident that all forms of working whilst unwell are bad for business?

The understanding that small amounts of presenteeism **don't impact productivity** when viewed over a longer period provides valuable insight for employers and raises an important question: can we be confident that all instances of working whilst unwell are bad for business?

In addition to this analysis, we also looked at the correlation between traditional presenteeism rates and productivity and compared it to the correlation between absence rates and productivity.

We looked at absence and presenteeism rates for 734 employees across nine sectors. Based on this cross-sector sample, our data shows that the correlation between rate of presenteeism and productivity (-0.48) is much stronger than that between the rate of absence and productivity (-0.23). In fact, **it's double**.

At the same time, we also found a very strong correlation between presenteeism and absence rates across the sectors – 0.87 – meaning that the two things move up and down almost perfectly in line with each other

There are clear implications here for employers who want to **reduce the costs of absence and maximise productivity**, because presenteeism is likely to be a quicker, more effective route to productivity gains than focusing directly on absence. If presenteeism is under control, then absence is likely to follow.

However, an important caveat here is that we believe new measures will bring new insights. We've outlined the case for distinguishing between functional presence and presenteeism. Inherent in this argument is the idea that pragmatic and therapeutic presence can be **constructive** for all concerned and should not be discouraged by employers.

These categories are currently accounted for alongside 'real presenteeism' in current measures of presenteeism, so it would be true to say that, as currently captured, not all presenteeism is bad.

SUMMARY: Presenteeism certainly impacts productivity during the specific episode (a 40% reduction); however, when you look at the impact over time against the prevalence, it is only when there are over five days in a 3-month period that overall productivity is reduced to a significant and impactful level below the mean. This is not taken into account in most organisations when they measure and evaluate presenteeism data.

In addition, we've discovered that **presenteeism has a much stronger relationship with productivity than absence**, whilst presenteeism and absence rates themselves are highly correlated. This has the potential to influence where employers focus to find productivity gains.

Finally, the idea that there are both functional presence and presenteeism categories when it comes to explaining why people work whilst unwell challenges employers' assumptions about needing to minimise presenteeism (as currently defined) at all costs.



Part 5:

**Re-evaluating the
relationship
between
presenteeism and
absenteeism**



The relationship between absenteeism and presenteeism

For many years, the prevailing narrative has been that when presenteeism goes down, absenteeism goes up and vice versa. However, it seems the picture is much more nuanced than it first appears. The research (*Bergström et al., 2009; MacGregor & Cunningham, 2018*) shows that there is, in fact, **a positive relationship between absenteeism and presenteeism** – that is, that absence and presenteeism rates rise and fall together. Our own data, discussed in Part 4, has replicated this finding with a correlation as high as 0.87 between presenteeism and absence rates based on over 700 cases of data.

The reality in most organisations is therefore that employees ebb and flow between absence and presenteeism, influenced to a large extent by a particular underlying health condition. As an example:



Workers with allergies and gastritis are more likely to turn up for work despite their conditions



People suffering from emotional problems or blood pressure problems will tend to stay at home



Back pain can result equally in absenteeism or presenteeism (*Gosselin et al., 2013*)

Despite the positive correlation between presenteeism and absenteeism, the more prominent causal line is from presenteeism to absenteeism (*Whysall et al., 2018*). This finding carries the important implication that **by reducing presenteeism employers can reduce absenteeism**, making presenteeism a leading indicator of absence and potentially a way for businesses to control the costs of absenteeism. This could be a particularly timely insight for organisations given that the CIPD's recent Health and Wellbeing at Work Survey (2023) shows that **absence is now at a new ten year high**. They found that employees are absent 7.8 days a year, compared with 5.8 days pre-pandemic. This is a huge cost increase for employers.

It therefore follows that organisations need as many levers to pull as possible to reverse this trend: **it turns out that presenteeism is one of those levers.**

However, that comes with the huge caveat that the measurement of presenteeism needs to be improved significantly to take account of the nuances we are uncovering in this paper regarding the three categories of working whilst unwell (see Part 2).

SUMMARY: The positive correlation between presenteeism and absenteeism indicates that we can potentially view presenteeism as a way to influence absence rates directly. Seen in this light, it becomes less important that it's currently difficult to reliably estimate the cost of presenteeism because we know that presenteeism is likely to lead to higher absence costs in any case.

In this context, managing presenteeism can be an important part of an employer's strategy for tackling the costs of absence; it's an early indicator of what is potentially coming down the line.

This is still not the full picture because, as we've heard, certain types of working whilst unwell can generate significant costs and productivity dips for organisations and their employees, whereas others may not. Being able to understand the true picture will enable decision-making about the best course of action for organisations.



Part 6:

**Measurement:
shifting the
paradigm from
measuring
presenteeism alone
to understanding
working whilst
unwell**

Measuring all aspects of working whilst unwell

We have established that managing presenteeism effectively potentially offers you, as an employer, the opportunity to **get ahead of employee absence**. However, we also know that not all instances of working whilst unwell are equivalent, and there are occasions when it may be deemed acceptable (or even desirable!), provided it is either functional or therapeutic. This now prompts the question:

—how can we distinguish and categorise the various types of working whilst unwell?

Until now, the answer to this question has been a definitive "we can't." Even the most dependable scales, such as the Stanford Presenteeism Scale, **do not differentiate between the various types of working whilst unwell**. As part of a joint project with EDF Nuclear Operations, Robertson Cooper are set to launch a brand new, **validated scale** that will enable our clients and partners to track the different types of working whilst unwell, including presenteeism, that are at play in their workplace. This will enable them to examine both the prevalence and the consequences in terms of behaviour and cost.

Importantly, it opens the way to a new approach to **tracking working whilst unwell**.

One where each employer reports both a **Functional Presence rate** and a **'True' Presenteeism rate**. As things currently stand, both types of working whilst unwell are subsumed in one presenteeism rate, which has limited meaning and does not form a reliable basis for action.

The insights from this research have enabled the team at Robertson Cooper to integrate the new categorisations into our existing measurement framework so organisations can understand the types of working whilst unwell that exist and their implications for important outcomes. This evolution of our **holistic measurement framework** will enable our clients to truly get ahead of outcomes such as absenteeism and, importantly, empower them to take strategic action to manage working whilst unwell in all its forms. (see Part 7).

With these new measures from Robertson Cooper, organisations will be able to **assess how 'true' presenteeism is influencing important outcomes such as productivity, absenteeism and intention to leave**. At the same time, they will understand how to empower managers to support employees effectively when it comes to functional presence. Finally, with a true picture of what working whilst unwell looks like, employers will be in a position to take meaningful strategic action.

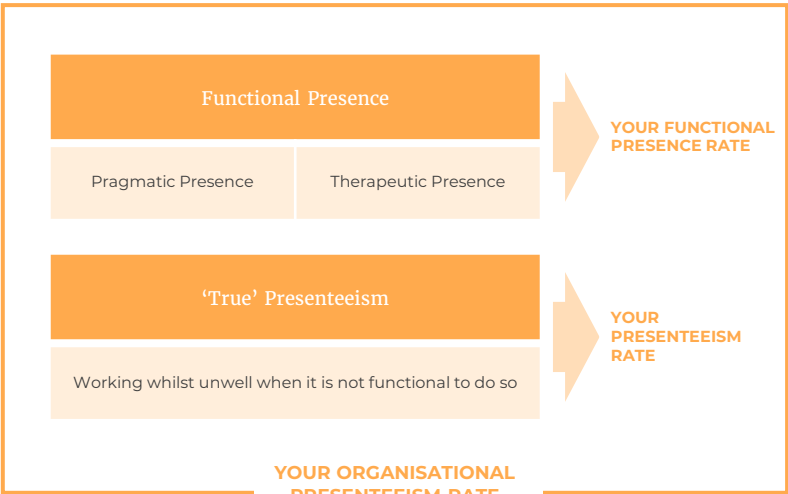


Figure 4: Measuring the different aspects of working whilst unwell



Part 7:

Managing working whilst unwell in your business

Getting into action

In this paper we have reviewed the state of the art when it comes to managing presenteeism inside organisations and broadened the concept to be more about 'working whilst unwell' than presenteeism alone. We have put forward the case that **different types of working whilst unwell matter** when it comes to outcomes, which may not always be negative. We also have built a picture of **what causes presenteeism** in the hope that you will feel more equipped when it comes to thinking about how to tackle it and then use it as a lever to influence other outcomes such as productivity and absence.

Below is a summary of **how employees make decisions around working whilst unwell**, and this representation will enable us to think about how we can go about positively managing the issue. This is about taking into account both the cultural and personal factors that influence the decision someone makes to either take absence or be present at work despite a health impairment.

A model of this sort can be used to help raise awareness amongst employees and their managers around the decisions that lead to an episode of working whilst unwell. For managers, in particular, it provides a new lens on the issue and an entry point for them when it comes to hosting conversations with employees.

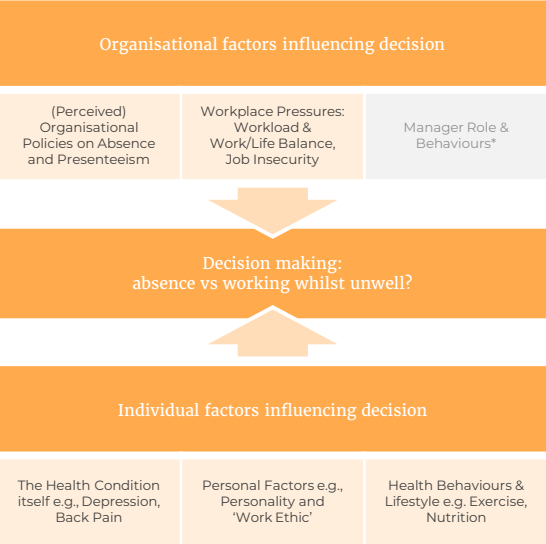


Figure 5: The individual and organisational factors influencing employee decision-making around working whilst unwell

*Managers and their role in presenteeism

To our surprise, when we looked into the research around the role of managers when it comes to presenteeism, the research showed that the direct impact of management is relatively small (Miraglia & Johns, 2016) (Robertson et al, 2012). This was surprising because we would have expected to see that managers would be critical for people while deciding whether to come into work or not when they are ill - and indeed, what they do next time.

Our working hypothesis on this finding is that the research is inconclusive purely because the concept of presenteeism has, until now, also been **incomplete**. We firmly believe that managers who are trained and cognisant of the different types of working whilst unwell, including presenteeism, will have a **major influence** on how this important issue plays out in their teams.

A manager who is skilled in **spotting the difference** between 'functional presence' and 'true' presenteeism, a manager who is able to **have good conversations** about individual circumstances, and one who is willing to **empower their team** to make good choices will, in our view, have a major positive impact on presenteeism in their teams. Right now though, managers neither have the knowledge nor skills to have an impact. Seen this way, the research finding is less surprising.



Cultural and workplace factors

— Actions to consider

At Robertson Cooper, we take a holistic and cultural view of employee wellbeing and performance - and presenteeism is one of many things that we look at in our quest to drive a culture of **high performance and wellbeing**. As this paper has revealed, presenteeism (and other forms of working whilst unwell) can be a useful indicator for other outcomes, in particular productivity and absenteeism, and therefore it may be a useful focus for your business to drive performance and get a handle on costs.

More broadly, there are various aspects of working life and culture that will influence the way the presenteeism and absence play out in your organisation. The following are areas for consideration that intuitively fall out of the findings we have presented throughout this paper.



01 POLICIES AND PROCESSES THAT DRIVE THE RIGHT BEHAVIOURS

What does your **sickness policy** say to your employees? What **behaviours** does it encourage? There is reasonably good evidence that sick pay, coupled with **clear guidelines** and **strong cultural norms** on when to work make a real difference. Signposting when and why to be absent, coupled with flexible working arrangements and additional rest breaks for monotonous work will also help to reduce (negative) presenteeism.

02 STEP BACK AND TAKE A HOLISTIC, DATA-DRIVEN VIEW

Being able to see working whilst unwell, including the issue of presenteeism, inside an **integrated framework** (see Fig 6) provides the basis for informed action. Gathering data to understand the **drivers and types** of working whilst unwell that are at play is the first step, but the real value flows when you can connect that to a range of important **business level outcomes**.

Tracking this data over time provides the opportunity to take a systematic and, ultimately, cost-saving approach to managing working whilst unwell.

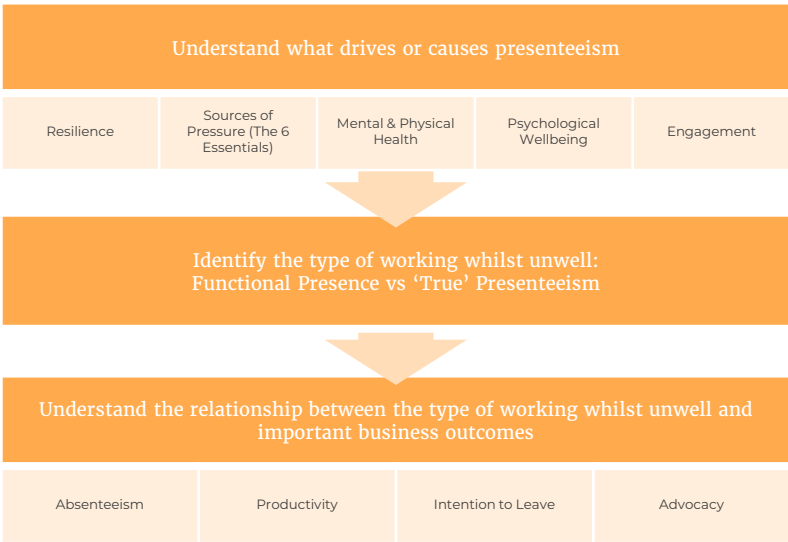
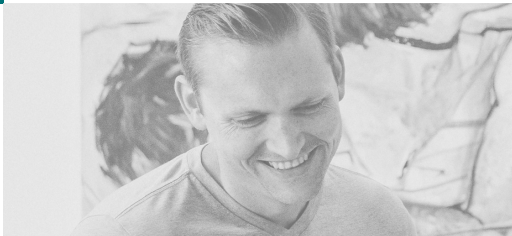


Figure 6: A model to identify the different types of working whilst unwell and the impact on key business outcomes





—Cont.

03 SET OUT EXPECTATIONS

'Intervention mapping' has been shown to be helpful in successful presenteeism management (*Kok et al., 2004*). This is an explicit statement of what options are viable and acceptable in your business. For example, we know that it's worthwhile to combat presenteeism when there is infectious disease, but what specifically is the expectation for someone who has a cold in your business? Is there an option to work from home should they wish to? Can they access sick pay? Is there a medical profession or EAP services that they can access? Mapping out the routes that are available for people has been shown to support them in **making good decisions**.

04 KEEP PRESSURE POSITIVE

Workload is a critical factor in driving presenteeism – what do you know about the **pressures** people are experiencing around their workload? How do you provide cover when people need to recover from an illness or work at a reduced rate? What are the **preventative measures** you can take around overly demanding workloads? Taking a preventative approach to avoiding work overload – and therefore unsustainable performance – can be a key aspect of keeping pressure positive. When employees trust that the business and its managers care about their health and wellbeing, they are more likely to make good judgements about when to work, and when not to.

05 MOBILISE YOUR MANAGERS

The current research does not support the proposition that manager behaviour drives presenteeism levels; however, it is likely that managers who are able to recognise the new categories of **working whilst unwell**, that we have uncovered in this paper, will be **more equipped to prevent poor outcomes** when they see 'true' presenteeism and to **manage the functional types of working whilst unwell** on behalf of the business. So, managers who are trained to have purposeful conversations when they recognise the signs of presenteeism are likely to have a positive impact. At the same time, they will be more likely to manage functional presence so that it remains healthy and productive by, for example, facilitating temporary adjustments to working patterns to aid recovery.



Personal factors

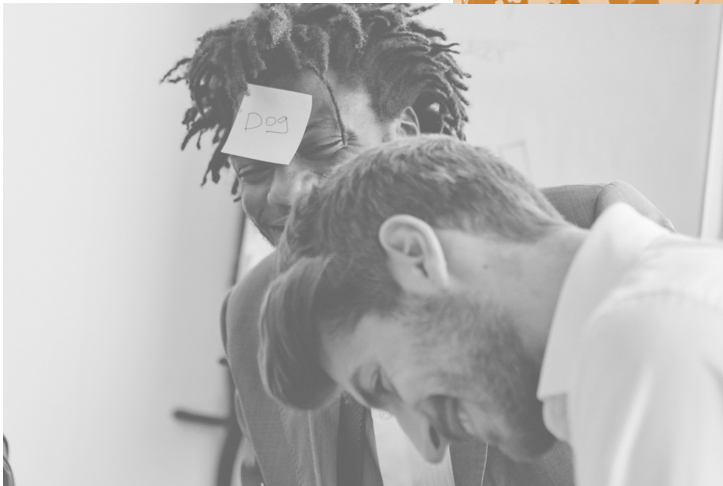
—Actions to consider

If you accept the premise of this paper, a major mind shift is required to move from thinking about presenteeism as a standalone to a concept of working whilst unwell, of which presenteeism is one part. This is as true for employees as it is for organisations. Here we put forward some areas for actions specifically to support employees:



01 ENCOURAGE HEALTHY BEHAVIOUR

Given that we know that people who exhibit healthy behaviours around **exercise, nutrition** and **sleep** are less likely to exhibit presenteeism, these programmes can provide some improvement in levels of presenteeism (along with many other benefits). Many organisations could take steps to ensure they are getting maximum value out of their **EAP and employee benefits providers**, who are often more than willing to support you in driving healthy habits with your employees.



02 PROMOTE GOOD CONVERSATIONS

Personal Factors are a big driver of presenteeism, so for people who are prone to **over-committing** and coming into work when unwell when it's not functional to do so, a **trained manager** who can have **good conversations** with them about when working whilst unwell is harmful / when it is acceptable - can help mitigate a propensity towards presenteeism.

03 EMPOWER GOOD DECISIONS

Employees need to have the **autonomy** to make good decisions when they are experiencing a health issue – does your **culture** support them to make a good choice? That choice may be to work if it is **pragmatic** or **therapeutic** for them, but if it is not, does the business encourage and enable them to take the time off to recover?



—Conclusions



In this paper, we've attempted to lift the lid on current conceptions of presenteeism. We looked at **what drives the phenomenon**, re-examined **its impact on productivity** and challenged **its relationship with employee absence**. As part of this, we've re-evaluated the evidence for the costs of presenteeism and questioned the way in which it is currently measured by most organisations.

Part of this was using our own data, alongside the research literature, to identify **three different types of working whilst unwell**, only one of which - presenteeism - should definitely be avoided by employers and employees alike.

This key insight creates a paradigm shift: **organisations should no longer be talking simply about measuring and managing presenteeism on a standalone basis**. Rather, the focus should be a joined-up approach to **measuring and managing employee behaviour around working whilst unwell**. This involves distinguishing between functional presence and dysfunctional presenteeism which, as far as we are aware, almost never happens currently.

In addition, it is our belief that there's a genuine opportunity for organisations based on the following key findings presented in this paper:



The relationship between presenteeism rates and **productivity** is twice as strong as the one between absence rates and productivity



There is a very high correlation between presenteeism and absence rates (0.87) meaning that the two things move up and down almost perfectly in line with each other



And finally, presenteeism tends to be a precursor to **absence** in this relationship

So, if your aim is to **reduce the costs of absence** and **maximise productivity**, the implication of these findings taken together is that presenteeism should be a priority area of focus for your organisation.

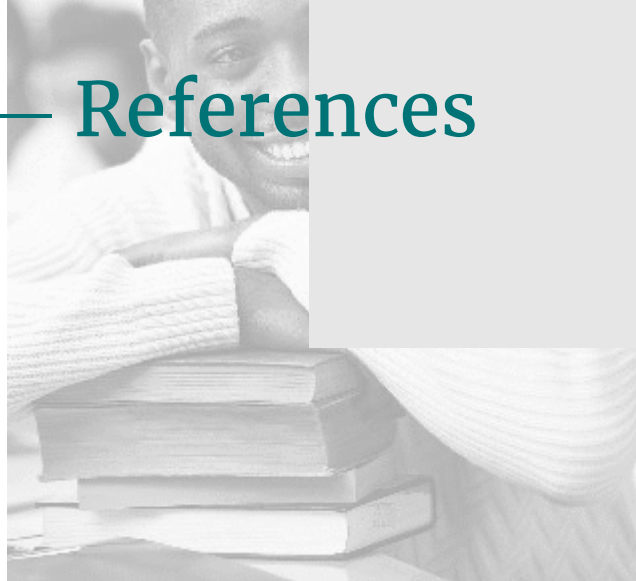
This is because it represents a quicker, more effective route to productivity gains than focusing directly on absence - and, in turn, we know that if presenteeism is under control, then absence will follow because of how closely correlated their respective rates are and the causal direction of the relationship.

If you accept these arguments, the question becomes where to focus - which levers to pull - to start to manage presenteeism more effectively. Our data, based on around 1800 cases, tells us that **managing workload** should be a key focus, but also focusing culturally on giving people **permission to take sick leave** when appropriate (34% didn't want to put pressure on colleagues; 13% were concerned about getting in trouble).

Finally, our findings argue for **educating managers and employees** regarding the three different types of working whilst unwell to help them make better decisions about when it's appropriate to work and when to take absence... and to enable more meaningful tracking and measurement.

It's true to say that tracking and managing presenteeism is not an exact science, but our hope is that we've shown how the science of health and wellbeing at work can be used to make the task easier and more purposeful. With a clear and broadened **definition** of the concept, the means to **measure** it and routes to **action** based on the data, there is certainly hope that we can create a common and accessible approach to this ever-present issue.

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WHITEPAPER

Seeing Presenteeism Differently

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