

Work

Headlines

Being in work is a key component of mental and physical wellbeing. However, jobs that are insecure, low paid and that fail to protect employees from stress and danger make people ill, as does becoming redundant. Unemployment has both short and long term effects on mental and physical health, including premature death. The number of people unemployed for more than 12 months in Kirklees rose by 150% in the year to February 2010. Amongst those aged over 60 years this was double (300%) and these people are unlikely to work again.

The impact of poor health or disability on a person's likelihood of finding and keeping a job is significant. Around 20% of Kirklees' working age population, more than 50,000 people, have a disability of some sort. Of these, only 60% have a job, compared to 76% of those without a disability, the rate for people with a mental health problem is even lower (40%). This effect can be mitigated by educational qualifications.

Nearly 18,000 adults are not in work and claiming benefits based on their illness or disability, 2 in 3 have been on the benefit for more than five years and nearly half are claiming because of a mental health problem.

Unemployment amongst young people is rising, whilst 2 in 3 employers locally report that they do not employ any people aged under 25 years.

Why is this issue important?

Patterns of employment both reflect and reinforce the social gradient. Peoples experience of good work is linked to positive health outcomes, however jobs that are insecure, low paid and that fail to protect employees from stress and danger make people ill^{1 (p72)}. Unemployment has both short and long term effects on mental and physical health, including premature death. Being made redundant has an immediate negative impact on a person's health, and the longer someone is unemployed the worse these negative effects become. Unemployment affects health in three ways:

- Causing financial problems leading to lower living standards.
- Triggering stress, anxiety and depression, caused by loss of status and social participation.
- Increasing unhelpful coping behaviours such as smoking and alcohol consumption and decreased physical activity^{1 (p67)}.

Returning to work can be good for health, reversing the harmful effects of long-term unemployment and prolonged sickness absence².

What significant factors are affecting this issue?

Impact of the recession on Kirklees²

- Fewer jobs for young people. The number of unemployed 18-24 year olds increased by 2,000 between April 2008 and February 2010. 61% of employers in Kirklees did not employ any workers aged under 25 years. The long term impact on young people of unemployment and a low likelihood of finding a job is far more significant than among older people and could seriously impact on their mental and physical health.
- Older workers leaving the job market. Unemployment among people aged over 50 increased by 126% over the same period. Among people aged over 60, the increase was nearer 300%. Many people in this age group are unlikely to work again.
- Between July 2007 and July 2009, the most significant reductions in the number of Kirklees residents in work were in the construction, transport and communications sectors, all with a largely male workforce. With many of these men facing the prospects of long term unemployment, so their health may deteriorate.
- The number of people unemployed for more than 12 months increased by nearly 150% between February 2009 and February 2010.
- As jobs are lost and not replaced, the pressure on those in work increases. The drive for employers to do more with less in an uncertain labour market is likely to result in increased stress levels within their workforce, many of whom may also have taken a cut in pay, making it harder to live healthy lives.
- People who have lost their jobs since the beginning of the recession may not have been unemployed before. The impact of unemployment on many of these people could be profound.

Which groups are affected most by this issue?

Unemployment rates for people with a disability are around double of those with no limiting health problems. Almost 40% of adults with mental health conditions are unemployed. The extent to which limiting illness and disability act as a barrier to work is highly dependent on educational qualifications, nationally 1 in 3 men with no qualifications and a limiting longstanding illness were in employment, whilst for those with higher qualifications it is 3 in 4^{1(p70)}.

A breakdown of those people of working age in Kirklees, who are claiming Incapacity Benefit/Severe Disablement Allowance (IB/SDA), but not Employment Support Allowance (ESA), shows the main two conditions reported were:

- Mental and behavioural disorders – reported by 41% of all claimants - and diseases of the musculoskeletal system - 19% of claimants.
- 62% of all claimants had been claiming these benefits for more than five years.

While the number of IB/SDA claimants fell between August 2007 and 2009, those claiming for over five years rose from 54% to 62%, and those claimants with mental disorders rose from 39% to 41%.

Where is this causing greatest concern?

There is a clear link between poor health and socio-economic deprivation. The most disadvantaged parts of Kirklees, inner Huddersfield, Dewsbury and Batley, also have the largest number of ESA/IB claimants.

Across Kirklees, 7% of working age residents (nearly 18,000 people) claim ESA/IB. In Deighton, Dewsbury East and West, rates are more than 10%, while Crosland Moor, Paddock, Batley West and Newsome all have above average claim rates.

By contrast, in the more affluent and healthier populations of rural and suburban South Kirklees for example, the Holme Valley and Kirkburton, claim rates were half the Kirklees average.

As well as the individuals affected directly by poor health, there is also a significant impact on the rest of the family. Overall, in Kirklees, about 3,260 adults receive Carer's Allowance – a claim rate of 1.3% of the working age population. In Crosland Moor, Dewsbury West and Thornhill, the rate increases to 2.2%.

What could commissioners and service planners consider?

- The local authority and its partners have a key role to play in helping to support and regenerate communities, improve their wellbeing and reduce inequalities between communities. Providing effective support to young adults and people with health problems or disabilities to reap the benefits of employment will be a major challenge that will require more creative partnership solutions than have been tried previously.
- How to enable people who have not worked for a long time to be ready for work, and enabling those for whom paid work is unlikely to be a realistic option in the near future to participate in appropriate purposeful activity.
- The local authority and NHS are Kirklees largest employers and should actively promote and support local labour market initiatives.
- The Boorman review has recognised the importance of staff wellbeing in the NHS and made recommendations for improvements³. They should be applied across the whole of the public sector, which can then lead by example and demonstrate the importance of improving health in the workplace.
- With budget cuts and a reduced workforce, the local authority and its public sector partners' ability to carry out these roles effectively will come under strain and so require innovative approaches.

References

1. Marmot, M. *Fair Society, Healthy Lives: Strategic Review of Health Inequalities in England post 2010*. 2010
<http://www.marmot-review.org.uk/>
2. Kirklees Council. *Kirklees Local Economic Assessment 2010*.
<http://www.kirklees.gov.uk/business/economicassessment/economicassessment.shtm>
3. NHS Health and Wellbeing, Dr Steven Boorman, Department of Health, 2009.