



# Officer Demand, Capacity and Welfare Survey Descriptive Statistics Summary Report ABSENCE BEHAVIOURS January 2017

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# 1. FOREWORD

## INTRODUCTION

In recent times policing in England and Wales has experienced unprecedented budgetary cuts, amounting to an 18% real-term reduction since 2010.<sup>i</sup> The impact on police officer numbers has been considerable, with a 14% fall in officer numbers over a seven-year period from a high of 143,734 in 2009,<sup>ii</sup> to 124,066 in 2016.<sup>iii</sup> Evidence from a focus group study conducted by the Police Federation of England and Wales (PFEW)<sup>iv</sup> highlighted that these reductions may be having a negative effect on officers individual wellbeing. It was within this context that the 2016 PFEW Officer Demand, Capacity, and Welfare Survey took place.

This document is derived from the initial descriptive report<sup>v</sup> and provides a national summary of responses to key questions regarding **absence behaviours** from the 2016 PFEW Officer Demand, Capacity, and Welfare Survey. Where additional data are available and appropriate, the national results are benchmarked against other comparator populations such as the Armed Forces.\*

Please be aware that the total number of responses for each item may vary slightly as not all items were answered by all respondents, in addition the actual differences between groups may be quite small and these details should be considered when interpreting the data.

## RESPONSE RATES AND DEMOGRAPHICS

Survey responses were gathered on-line, over a four-week period in February 2016. All officers of federated ranks in England and Wales were eligible to participate. Analyses were conducted on a sample of 16,841 responses drawn from all 43 forces across England and Wales.\*\*

14% of eligible officers completed the survey. The respondent sample was broadly representative of the overall federated officer population.<sup>\*\*\*</sup> Although this is lower than the response rate attained by the annual PFEW workforce survey in 2016, this may be due to the sensitive and specific nature of the survey topic.

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\*Please note that question wording and sample sizes between populations may differ – for full details, please see Houdmont & Elliott-Davies (2016).

\*\*Data were removed where the respondent indicated they were not currently a police officer or they gave implausible answers – for full exclusion criteria, please see Houdmont & Elliott-Davies (2016).

\*\*\* Although some significant differences were observed between the survey sample and the federated ranks population, in percentage terms these differences were small, allowing for the conclusion that the respondent sample was broadly representative of the national federated officer population in terms of its socio-demographic composition – for full details, please see Houdmont & Elliott-Davies (2016).

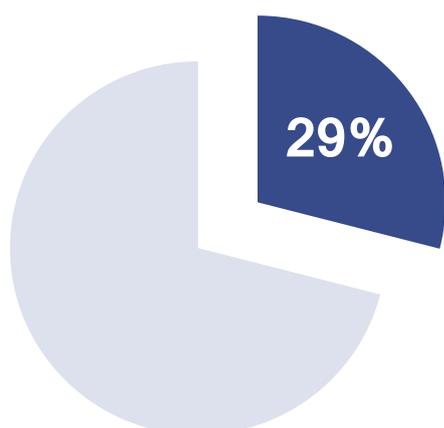
## 2. ABSENCE BEHAVIOURS

### 2.1. SICKNESS ABSENCE

The survey asked respondents to first indicate the total number of days of sick leave taken in the preceding 12 month period, and then to indicate how many of these absences were due to stress, depression, or anxiety.\* It should be noted that officers who were on long-term sick leave at the time of survey administration are unlikely to have responded. As such, the level of sickness absence reported here might offer an under-representation.

**Almost three-fifths of respondents (58%) reported one or more days of sickness absence.**

**% who indicated that at least one day of their sickness absence was due to stress, depression, or anxiety**



In addition, **29% of respondents indicated that at least one day of their sickness absence was attributable to stress, depression, or anxiety.**

Though not directly comparable, this figure is consistent with 2014-15 Labour Force Survey data which indicated that **32%** of lost working days were due to stress, depression, or anxiety caused or made worse by work<sup>vi</sup>

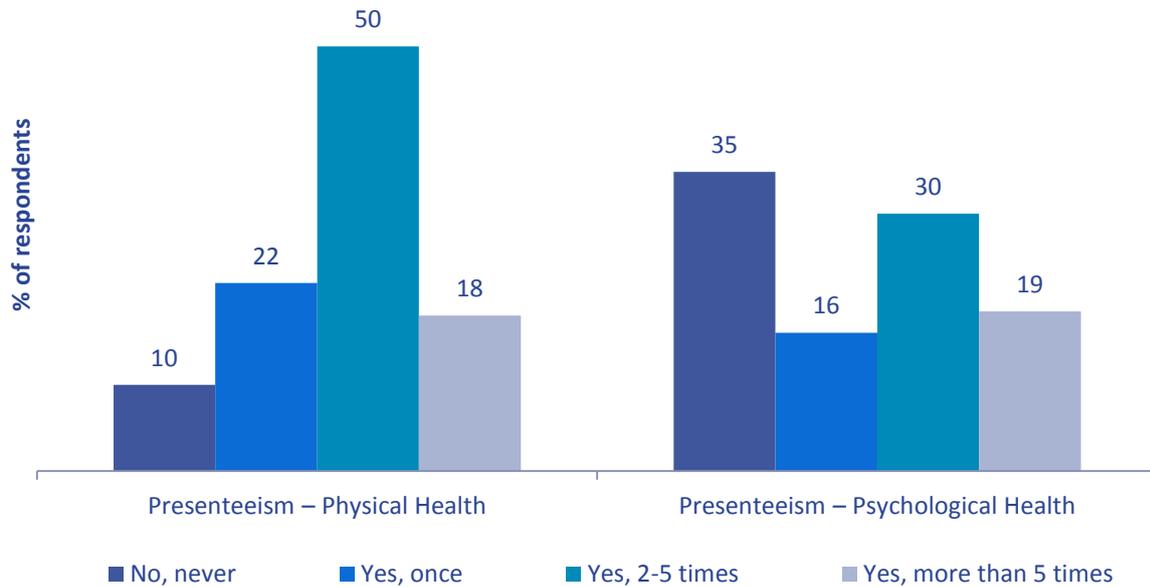
### 2.2. PRESENTEEISM

Presenteeism is the act of attending for work while ill, and has been shown to be associated with subsequent health decline (particularly in relation to burnout),<sup>vii</sup> negative job attitudes, withdrawal from work,<sup>viii</sup> and can lead to elevated absenteeism.<sup>ix</sup>

The 2016 PFEW Demand, Capacity and Welfare Survey measured presenteeism associated with both physical and mental health. **90%** of respondents reported **one or more episodes of presenteeism associated with their physical health** within the previous 12-month period. **65%** of respondents reported **one or more episodes of presenteeism associated with their psychological health** within the previous 12-month period.

\*Please note – absence due to work-related violence or accidents are reported in *Officer Demand, Capacity, and Welfare Survey Descriptive Statistics Summary Report : Violence, Accidents and Injuries (R061/2016)*.

## Reported frequency of presenteeism



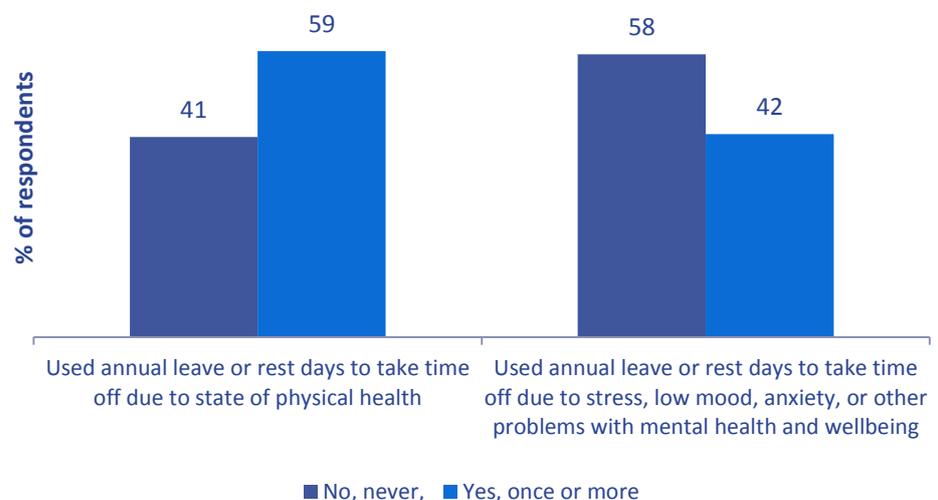
### 2.3. LEAVEISM

Leaveism is a recently coined term to describe hidden sickness absence and work undertaken during rest periods and encompasses the following three types of behaviour:<sup>x</sup>

- 1) utilising allocated time off such as annual leave entitlements, flexi hours banked, rostered rest days and so on, to take time off when they are in fact unwell;
- 2) taking work home that cannot be completed in normal hours;
- 3) working while on leave or holiday to catch up.

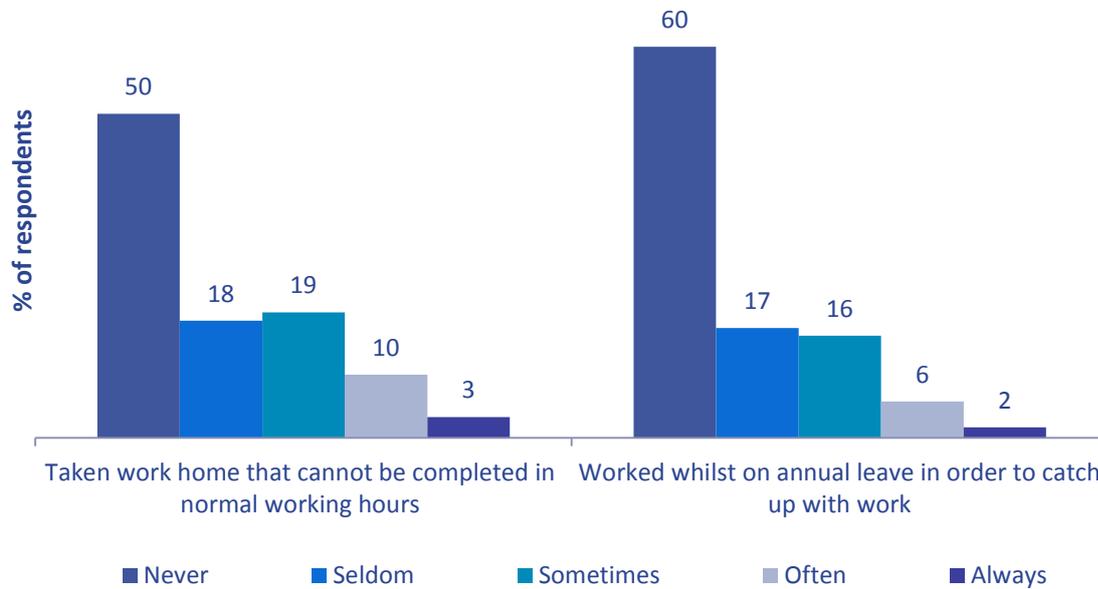
The majority of respondents (59%) have used annual leave or rest days to take time off due to the state of their **physical health**, and just over two fifths (42%) have used annual leave or rest days to take time off **due to psychological health**.

### Reported frequency of leaveism (behaviour 1)



In addition, **half (50%)** of the respondents reported that they have taken work home that cannot be completed in normal working hours and **two fifths (40%)** have worked while on annual leave in order to catch up with work.

### Reported frequency of leaveism (behaviour 2 & 3)



### 3. References

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- <sup>ii</sup> Home Office (2010). Police Service Strength: England and Wales, 31 March 2010. Retrieved September 12, 2016, from [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/115745/hosb1410.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/115745/hosb1410.pdf)
- <sup>iii</sup> Home Office (2016). Police Workforce, England and Wales, 31 March 2016. Statistical Bulletin 05/16. Retrieved September 12, 2016, from <https://www.gov.uk/government/statistics/police-workforce-england-and-wales-31-march-2016>
- <sup>iv</sup> Elliott-Davies, M., Donnelly, J., Boag-Munroe, F., & Van Mechelen, D. (2016). 'Getting a battering' The perceived impact of demand and capacity imbalance within the Police Service of England and Wales: A qualitative review. *The Police Journal: Theory, Practice and Principles*, 89, 2, 93-116.
- <sup>v</sup> Houdmont, J. & Elliott-Davies, M. (2016). *Police Federation of England and Wales 2016 Officer Demand, Capacity, and Welfare Survey: Initial Report - Descriptive Results*.
- <sup>vi</sup> Health and Safety Executive (2015). LFS – Labour Force Survey – Self-reported work-related ill health and workplace injuries: Index of LFS tables. Retrieved 5 September, 2016, from <http://www.hse.gov.uk/Statistics/lfs/index.htm#illness>
- <sup>vii</sup> Demerouti, E., Le Blanc, P., Bakker, A., Schaufeli, W., & Hox, J. (2009). Present but sick: A three-wave study on job demands, presenteeism, and burnout. *Career Development International*, 14, 50-68.
- <sup>viii</sup> Lu, L., Lin, H. Y., & Cooper, C. L. (2013). Unhealthy and present: Motives and consequences of the act of presenteeism among Taiwanese employees. *Journal of Occupational Health Psychology*, 18, 406–416.
- <sup>ix</sup> Gustafsson, K., & Marklund, S. (2011). Consequences of sickness presence and sickness absence on health and work ability: A Swedish prospective cohort study. *International Journal of Occupational Medicine and Environmental Health*, 24, 153–165.
- <sup>x</sup> Hesketh, I., & Cooper, C. (2014). Leavism at work. *Occupational Medicine*, 61, 146-147.