

# CAN ORGANIZATIONAL ADJUSTMENT FOR PRESENTEEISM BE A GOOD OCCUPATIONAL HEALTH INTERVENTION?

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## INTRODUCTION AND OBJECTIVES

The objective of the present study was to explore presence factors and examine what psychosocial factors differentiate the employees characterized as presentees, absentees and long-term healthy. Presenteeism is defined as attending work while ill and involves both positive and negative factors. Positive factors are organizational adjustment in the form of good organizational solutions based on the impairment of the employee, as oppose to negative factors that compels attendance at work despite their health condition.

## METHODS

We investigated factors behind presenteeism and presence factors in a company (N=475) where sickness absenteeism had been kept at a low level for a longer period of time. The aim of the study was to find what psychosocial factors differentiate between three groups of employees; absentees, who had reported themselves sick last year, presentees, who during the same period had attended work while ill, and long-term healthy, who had neither reported sick nor been working while ill. We dichotomized three dependent variables and explored, using logistic regression, what factors predicted sickness presenteeism, sickness absenteeism and long-term health. Comparing the three different analyses made it possible to explore the differences between the employees in the three groups. Presenteeism and absenteeism overlapped to a certain extent and a few employees were represented in both analyses for these dependent variables, but since the analyses were conducted separately, this was not considered a problem.

## RESULTS

Three separate analyses were conducted using the same statistical model.

### 1. ANALYSIS:

Dependent variable: **Sickness presenteeism** (n=180)  
This analysis showed that the presentees were significantly more likely to experience censure pressure, i.e., a pressure to attend from colleagues and supervisor, and significantly less likely to be working daytime with flexible hours. They reported worse subjective health than the other employees, controlled for all other variables included in the analysis.

### 2. ANALYSIS:

Dependent variable: **Long-term health** (n=124)  
In this analysis the results showed that the long-term healthy employees were significantly more likely to report working daytime with flexible hours and good subjective health, compared to the other employees. They also experienced significantly more positive adjustment norms, reported higher moral pressure and significantly less censure pressure.

### 3. ANALYSIS:

Dependent variable: **Sickness absenteeism** (n=279)  
The absentees were significantly more likely to experience censure pressure, and significantly less likely to be working daytime with flexible hours and they reported worse subjective health than the other employees. In addition the absentees experienced significantly less positive adjustment norms and lower moral pressure than the other employees.

## DISCUSSION AND CONCLUSION

The only organizational adjustment found in this company was related to the shift arrangement and can be understood as a positive intervention. A significantly larger number of the long-term healthy reported working daytime with flexible hours, and had the opportunity to vary their working hours. These employees experienced good work place adjustments, and in addition they experienced an internal form of attendance pressure relating to their own conscience (morale). Both presentees and absentees were less likely to be working daytime with flexible hours. The study demonstrated that sickness presenteeism was quite common in the organization. The employees that had been attending work while ill were, similar to absentees, more likely to report poorer health and significantly more attendance pressure. The combination of high censure pressure and poor health may represent a possible problem for presentees in the long run for early retirements or later absenteeism. Comparing the predictors of long-term health and absenteeism shows that the same factors had opposite effect in predicting the two. This is an interesting discovery, indicating that the two phenomena are related to one another. Earlier research has showed that presenteeism is associated with absenteeism (Bergström, Bodin, Hagberg, Aronsson & Josephson, 2009; Caverley, Cunningham & MacGregor, 2007; Hansen & Andersen, 2009), which indicates that the same employees that are sickness present also tend to be sickness absent. The present study supports this assumption by demonstrating that the two groups, presenteeism and absenteeism, coincide. The only variable differentiating between the two groups was the perception of lower morale pressure among the absentees. No real organizational adjustment to stimulate presenteeism was observed.

## REFERENCES:

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**TABLE 1: PREDICTORS FOR THE DEPENDENT VARIABLES**

Table 1 Odds ratio and confidence interval for the different logistic regression analysis predicting long-term health, presenteeism and absenteeism

Variable	LONG-TERM HEALTH		PRESENTEEISM		ABSENTEEISM	
	OR	95% CI	OR	95% CI	OR	95% CI
Constant	7.06		0.73		23.29	
Gender						
Men	1.76	[0.83, 3.72]	.72	[0.38, 1.37]	.65	[0.35, 1.23]
Age						
From 30 to 49 years	1.06	[0.41, 2.75]	1.69	[0.73, 3.91]	.82	[0.37, 1.84]
Over 50 years	2.06	[0.71-5.98]	1.24	[0.47, 3.27]	.58	[0.23, 1.45]
Working hours						
Daytime	1.37	[0.76, 2.47]	.94	[0.54, 1.64]	1.00	[0.59, 1.68]
Daytime with flex	2.72*	[1.09, 6.79]	.25*	[0.08, 0.82]	.30**	[0.12, 0.75]
Seniority						
Over 10 years	1.03	[0.50, 2.10]	.77	[0.39, 1.49]	1.13	[0.60, 2.12]
Demand	.83	[0.59, 1.16]	1.28	[0.93, 1.74]	1.11	[0.82, 1.49]
Control	.84	[0.60, 1.17]	1.10	[0.81, 1.50]	1.08	[0.81, 1.44]
Support	1.07	[0.75, 1.53]	.89	[0.65, 1.21]	.93	[0.69, 1.27]
Change experience	1.00	[0.68, 1.46]	.81	[0.56, 1.16]	1.08	[0.78, 1.51]
Adjustment norms	1.45*	[1.04, 2.03]	.82	[0.60, 1.11]	.71*	[0.53, 0.95]
Importance pressure	1.02	[0.77, 1.34]	.99	[0.77, 1.82]	.96	[0.76, 1.22]
Censure pressure	.70**	[0.55, 0.89]	1.46***	[1.17, 1.82]	1.26*	[1.03, 1.55]
Security pressure	1.05	[0.82, 1.35]	1.05	[0.83, 1.32]	1.04	[0.84, 1.29]
Moral pressure	1.45*	[1.05, 1.98]	1.14	[0.85, 1.52]	.66**	[0.50, 0.87]
Good health	7.06***	[2.66, 18.73]	.22***	[0.13, 0.39]	.47*	[0.26, 0.84]
-2 Log likelihood	417.999***		480.997***		525.807***	

\* = p <.05, \*\* = p <.01, \*\*\* = p <.001

**TABLE 2. CLASSIFICATION OF PRESENTEEISM, ABSENTEEISM AND LONG-TERM HEALTH.**

		Sickness presenteeism					Total
		Not sick	None / no times	1 time	2-5 times	More than 5 times	
Sickness absenteeism	None / no days	41	83	32	29	11	196
	Less than 5 days	4	55	52	55	16	182
	8-10 days	0	7	7	26	12	52
	11-23 days	0	2	5	13	3	23
	More than 24 days	0	4	3	6	9	22
	Total	45	151	99	129	51	475

red= presenteeism  
blue = absenteeism  
green = long-term health