

## Workplace Illness – How HR Can Prepare

Family crises, psychological disorders, and professional development activities... there are a range of issues that can impact performance from the short-term to long-term. With mental and physical health problems likely to affect everyone at some point in their working lives, employers need to be prepared to face crises before they arise.

There are two complementary foundations of performance which are affected by challenges like mental health: workplace participation and work functioning (Lagerveld *et al*, 2010). Workplace participation considers the actual ability to be present at work and is affected by issues such as sick leave, while work functioning considers effects on the individual's performance at work such as physical limitations or the ability to cope with emotions.

These two foundations are affected during a period of illness by three factors: the nature of the disorder or illness itself, personal characteristics of the affected worker, and work-specific issues such as the work to be undertaken and the hours of work. For example, a parent with a child suffering from a minor illness may be more able to participate in work if the nature of their role allows telecommuting. Their work functioning may be severely limited regardless if their child is suffering from for example a terminal illness.

For employers, the costs of poor performance can be direct, indirect or intangible (Adis data information, 2008). The phenomenon of 'presenteeism'—attending the workplace physically yet failing to accomplish work—is well documented; the more important question now is why this is or should be the case. Attending work while ill may point to an individual's desire to continue being productive "in the face of adversity", but if they are suffering from an illness, they may in fact be lowering their subsequent health (Johns, 2011). Also, if employers allow this to occur, other employees may begin to believe that attendance is expected unless an illness becomes serious. As those with more responsibility are more likely to turn up at work while ill, the effect of missing work needs to be balanced

against the possibility of lower productivity not only during, but after the period of illness. Another important factor to remember is the ease of illness spreading in a close environment where much is shared between staff!

### **Health: A Snapshot from Australia**

What proportion of the population...

Consider their health “very good” or “excellent”? <sup>2</sup>	56 %
Will have a mental disorder at some point in their lifetime? <sup>1</sup>	45 %
Have experienced a disorder in the last year? <sup>1</sup>	20 %
Have a long-term behavioural or mental condition? <sup>2</sup>	14 %
Rate their health as poor? <sup>2</sup>	4 %

Sources:

<sup>1</sup> Australian Bureau of Statistics, 2008

<sup>2</sup> Australian Bureau of Statistics, 2012

The likelihood of an employee or a family member being ill now or in the future is almost a certainty. Human resource practitioners need to consider health as an ongoing priority management issue. Maintaining a list of potential resources can be of benefit such as local mental health associations and support centres. Learning about government grants and services for employers of people with physical disabilities or mental health issues will help you be aware of what financial options are open. In any case, it is important for the health of your business’ longevity to adapt a caring workplace where expectations during temporary sickness (including all law requirements) are made clear. Physical and mental health issues are prevalent in the contemporary workplace and even the healthiest person

may find themselves and their work suffering from a mental or physical illness in the near future.

### *References*

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