

Wellbeing Post-COVID-19

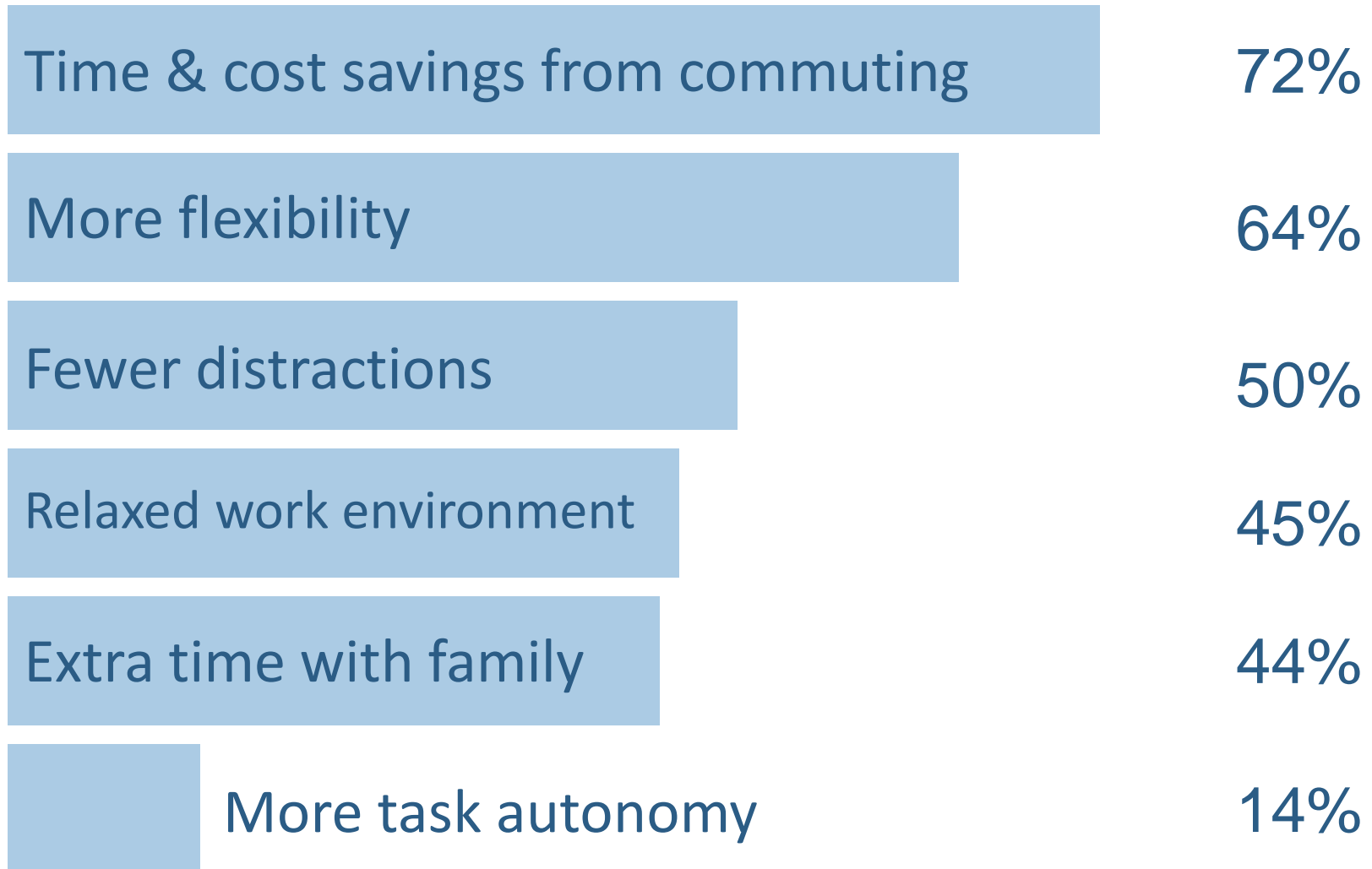
Learning from the Lockdown 'experiment'

Stephen Bevan, Institute for Employment Studies

Themes

- How has workforce wellbeing been affected by COVID-19?
- Lessons from WfH – health & productivity
- How do people want to work after ‘Lockdown’?
- Post COVID-19 challenges

Best features of WfH



Worst features of WfH



WfH – How Does it Feel?

Autonomy, control & discretion high:

- *I am allowed to make my own decisions about how to schedule my work – 82%*
- *I am allowed to decide on the order in which things are done on the job – 83%*
- *I am allowed to plan how I do my work – 89%*
- *I am given the chance to use my personal initiative or judgement in carrying out the work – 86%*
- *I am allowed to make a lot of decisions on my own – 73%*

A minority (33%) had used 'Lockdown' to engage in extra training or learning to enhance their skills

Four Attitudinal Subscales

Organisational
Commitment

Satisfaction
with WfH

Satisfaction with
Work-Life Balance

Job
Satisfaction

Overall, positive scores on these scales were linked to:

- Better Mental Health (WHO5)
- Less unpaid overtime
- More frequent contact with manager
- Having worked frequently from home pre-COVID19

WLB scores ***lower*** for those with dependent adults and those with line management responsibilities

Physical & Mental Wellbeing

45%



Fatigue



MSK
Pain

45%



41%



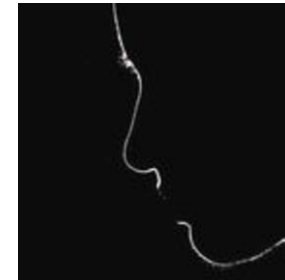
Poor
Sleep



Mental
Health

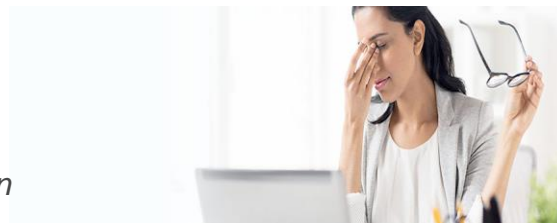


Eye
Strain



Mean
WHO5
score of
47/100

37%



% of respondents reporting worse than normal symptoms in last 2 weeks

Health & Wellbeing - Emotional

Mental wellbeing (WHO5) was generally low

Those with better mental health included:

- Those working contracted hours
- Those with frequent contact with manager
- Those with higher levels of Org Commitment, Satisfaction with WfH, Satisfaction with WLB and Job satisfaction
- Those self-identifying as extroverts

Job Demands vs Resources



Productivity & WfH

Self-reported productivity (as measured by work done per hour worked) compared with pre-COVID19 is generally high:

- Get much more done – 32%
- Get a little more done – 22%
- Get about the same done – 35%
- Get a little less done – 9%
- Get much less done – 2.5%



Drivers of Productive Working?

We asked about some of the components of productive working (% saying these statements are ‘moderately’ or ‘exactly’ true):

- *I can concentrate on one activity for a long time, if necessary – 91%*
- *I can control my thoughts from distracting me from the task at hand – 85%*
- *After an interruption, I don't have any problem resuming my concentrated style of working – 83%*
- *I'm comfortable using the freedom I have to re-order the tasks in my job – 94%*

Each of these ‘drivers’ is positively correlated with self-reported productivity per hour worked and with mental health

Work After Lockdown?

Preferred working patterns post-lockdown (multiple response):

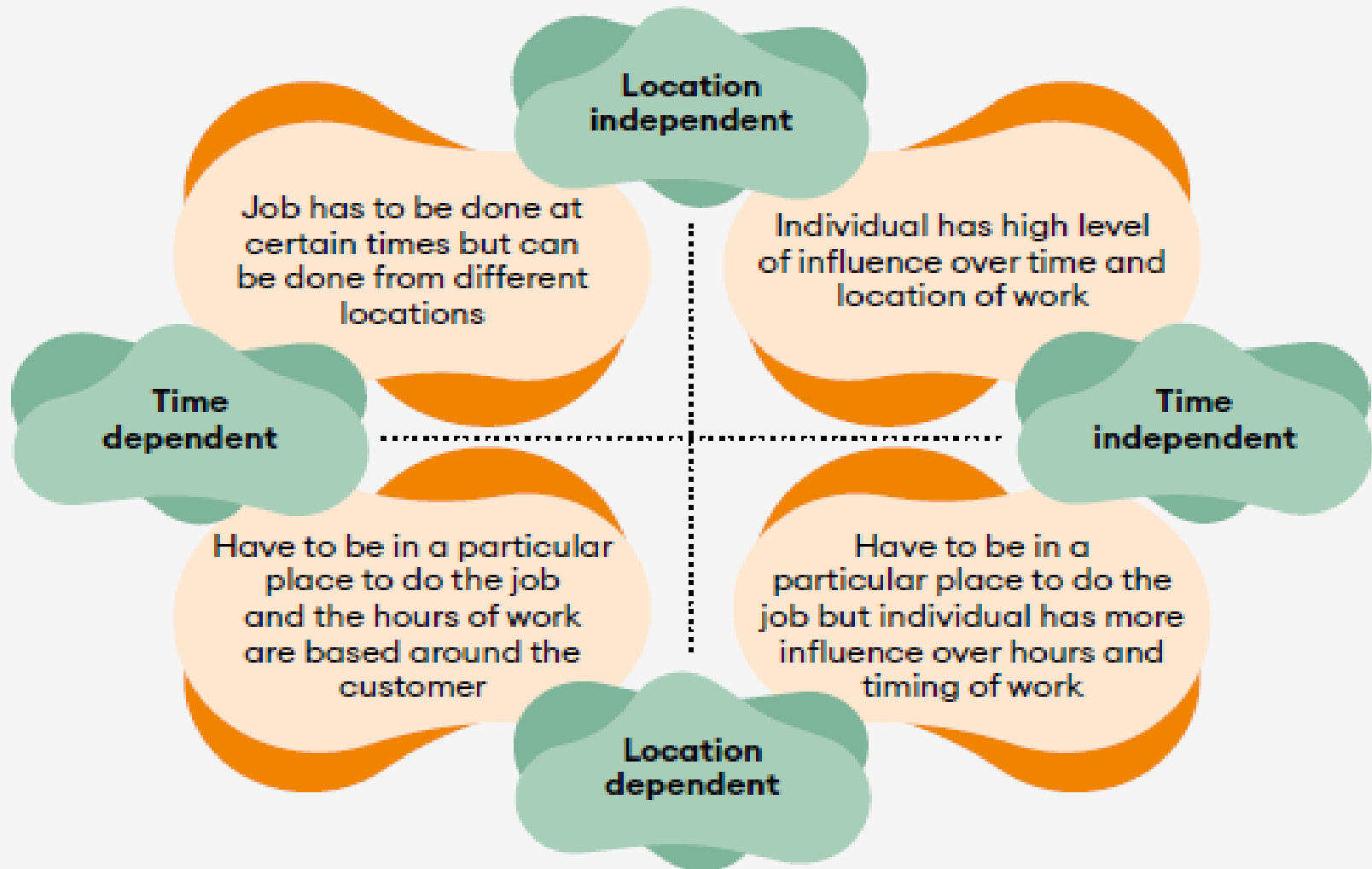
- Prefer to WfH all of the time – 36%
- Prefer to WfH some of the time to perform specific tasks – 73%

Concerns about returning to workplaces:

- Fear of COVID19 exposure – 76%
- Changes to working practices – 51%
- Childcare - 16%
- Travelling by own transport – 15%



Which jobs are truly time and location dependent?



Emerging Issues

- Wellbeing matters, can be fragile & is connected to engagement & line management
- The 'social deficit' – people miss connections, micro-interactions & the chance to work closely to solve problems & to innovate
- Productivity impact of WfH appears positive but more data needed
- Training & skills – self-investment is low
- Work after Lockdown preferences imply an appetite for change in work locations & patterns
- Central role of line managers – only 45% had received guidance on managing remotely – more empathy, focus on outputs, ability to spot the 'weak signals' of problems with employee wellbeing
- Risk that wellbeing may slip down the Board agenda as it becomes less of a 'business continuity' issue – how do we prevent wellbeing being seen only as a 'risk' rather than an asset?

Breakout Group Questions

1. What support have you given line managers to help them manage the wellbeing of remote teams? What measures have worked best & what have you found out about the capability of your line managers?
2. If 'hybrid' or at least more flexible working is set to be more common, how will your approaches to wellbeing and health promotion need to adapt, if at all, post-lockdown?

Further information:

www.employment-studies.co.uk

 @StephenBevan

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