

**Project Title**

*Impact on Changing Social Structures  
on Stress and Quality of Life:  
Individual and Social Perspectives*

**Project Acronym/Logo**



**Work Package 5**

*Longitudinal quantitative study on long  
term absent employees: The Netherlands*

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# 1. Introduction

Long term sickness absence has become a key issue in many European countries. Of particular concern has been the increase of the proportion of mental disorders in long term absences. Across Europe it appears that stress and burnout are amongst the most frequently mentioned work related health complaints (Paoli, 1997; Merllié & Paoli, 2001; Weiler, 2004). Stress and burnout are a major cause of absenteeism from work, costing society a substantial amount of money and causing people a great deal of worries and problems. The increase of mental disorders as a reason for absence and disability is particularly interesting, because the prevalence of mental disorders in the entire population has not increased (e.g. Singleton, Bumpstead, O'Brien, Lee, & Meltzer, 2000).

It is generally acknowledged that our society has changed considerably over the past decades. In particular structural changes, such as changing social and working contexts and the introduction of new technology are believed to be important change agents. These societal factors play a major role in the background contributing to the stress process, in the sense that these factors often constitute demands that exceed people's capacities to cope.

It is acknowledged that, although the group of long-term absentees is substantial, information concerning this group is scarce. Developing adequate return-to-work-policies does require information concerning these peoples' present living conditions, health, future perspectives and other factors that might influence their decisions concerning absenteeism and work resumption (e.g. Henderson, Glozier, & Holland Elliot, 2005).

This project's aim is to fill (part) of that gap in the knowledge base on long-term absenteeism. Part of this project is a survey of LTA's enquiring after their experiences on being absent from work, their current health and living conditions, their job(s) before becoming absent, and future perspectives.

This report describes the main findings of this survey.

## **1. 1 Long term absence and incapacity benefit**

In the various EU-countries the percentage of people claiming Incapacity Benefits (IB, or the national equivalent) has been on the rise over the last decade, leading up to almost 10 % of the working population in 2002 in the UK. Around 30 % of this group of people on IB has been diagnosed with ‘mental and behavioural disorders’. In most West-European countries it has become the major reason for receiving incapacity benefits. Some studies suggest that mental health problems are under-represented in the official statistics because they remain unrecognised or are ‘disguised’ by somatic complaints (Hensing & Spak, 1998; Stansfeld et al., 1995). There still seems to rest a taboo on mental health problems or psychological disorders.

Governmental organisations in various countries have estimated that between 30 – 60 % of all sickness absence is related to ‘mental or emotional disturbances’. Therefore it is assumed that the majority of the people with mental and behavioural disorders actually have stress-related complaints. However, ‘stress’ is not an official diagnostic category, and therefore it is difficult to make an exact assessment of the number of Incapacity Benefit recipients who actually are suffering from stress. Since registration systems for sickness absence and long term absence in various countries are not comparable, cross-national studies on this topic are difficult and are only feasible by collecting specific information on this topic. There is little information available on long-term absentees. It appears that when people are absent from work, they also disappear from all kind of statistics. In order to be able to formulate adequate policies on return to work, it is necessary to ‘know’ who the people are who are absent, what kind of jobs they had, et cetera. In particular, since most literature on intervention and rehabilitation strategies focus on people with physical health (injuries, cardiovascular) problems, while it is the group of people with mental health problems that has been growing in the last decade, and of which the least information is available that justifies this study. This means that we need to have information: demographic information and information on current health status, life style, and what kind of jobs they were employed in, what characteristics these jobs had, etc. Jobs with particular characteristics apparently imply a higher risk for (long term) absenteeism compared to other jobs (cf. D’Amato & Zijlstra, 2003).

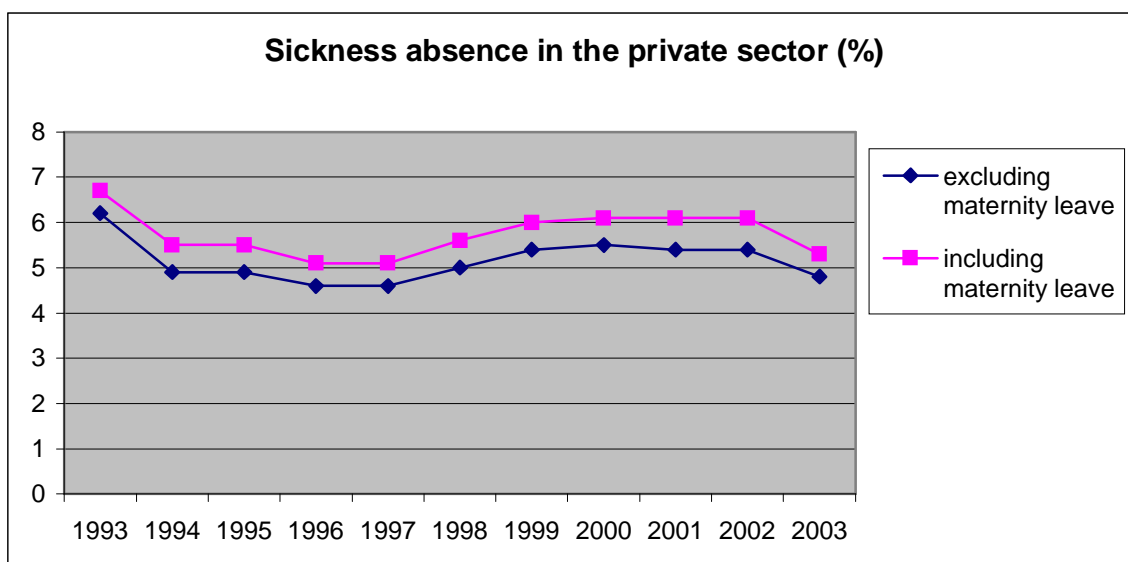
Absence from work can signify many different problems, and therefore usually a distinction is made between frequency and duration of absence. Absence *frequency* has been associated with a ‘voluntary’ component of absence, indicating that the medical condition is a less compelling reason for absence, whereas absence *duration* has been seen as a measure of involuntary absence, which can be attributed to an illness or injury. Therefore, it is argued that long spells are better measures of health status than short spells, which are often also influenced by a number of other factors

(Marmot et al., 1995). There, indeed, are differences between the determinants of short and long spells of sickness absence. For example, socio-economic class seems to be a strong correlate for long but not for short spells of absence (e.g. Vahtera et al., 1996). This is why in many studies short and long spells are studied separately. However, the cut-off point is usually somewhat arbitrary and depends on the registration policy of the country or the company studied. Some of the studies are not clear on their definition of absence, concentrate mostly on short leaves of absence, or use only spells of absence, without referring to their length, which makes the information of these studies difficult to incorporate into models of long term sickness absence.

In this study we are primary interested in long term absence, which we have defined as at least lasting 6 weeks. However, due to the differences in national registration systems, that have been used to recruit participants for this study, the actual length of absence can be substantially longer.

### **1.2 Absence, disability and stress related disorders in The Netherlands**

Figure 1 shows the development of the volume of sickness absenteeism in the private sector in The Netherlands from 1993 to 2003. Sickness absence rates in The Netherlands range between 5% and 6%. After a decline in absence from 1993 to 1994, which can be explained by changes in legislation, sickness absence first stabilised, then rose to a higher level from 1998 to 2000, followed by a new period of stabilisation. In 2003 absence figures dropped again. A comparable picture can be drawn for the absence reports in the public sector (absence rates are about 0.5% higher, on average), with the exception that the drop in absence was already to be shown in 2002.



**Figure 1: Sickness absence in The Netherlands (source: CBS)**

Since the privatization of the Sickness Benefits Act in the mid-nineties, the national sickness

absenteeism figures have mainly been based on employer interviews and registrations in the public sector. Only general statistics have been available. Therefore the Central Bureau of Statistics (CBS) and sector organisation of the Occupational Health Services started a new national registration system in the beginning of the new millennium. At the moment sickness absence rates are available for 2002 to 2004, which are shown in table 1. In 2003 the long term absence rate was 2 % which means a 0.4% reduction compared to the year 2002.

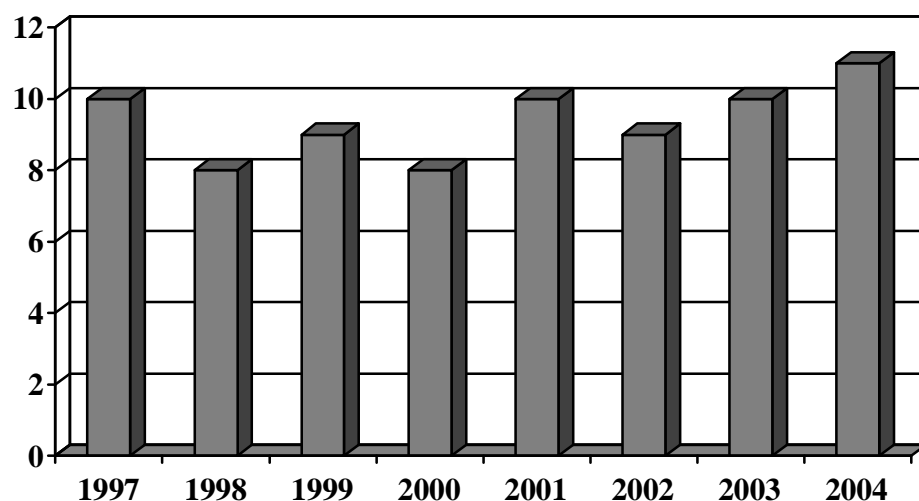
**Table 1 Sickness absence rates<sup>1</sup> in The Netherlands**

| year        | total | 1-7 days | 8-42 days | 43-91 days | 92-182 days | 183-365 days |
|-------------|-------|----------|-----------|------------|-------------|--------------|
| <b>2002</b> | 5,3%  | 0,8%     | 1,3%      | 0,8%       | 0,9%        | 1,5%         |
| <b>2003</b> | 4,7%  | 0,9%     | 1,2%      | 0,6%       | 0,6%        | 1,4%         |
| <b>2004</b> | 4,6%  | na       | na        | na         | na          | na           |

<sup>1</sup> excluding maternity leave

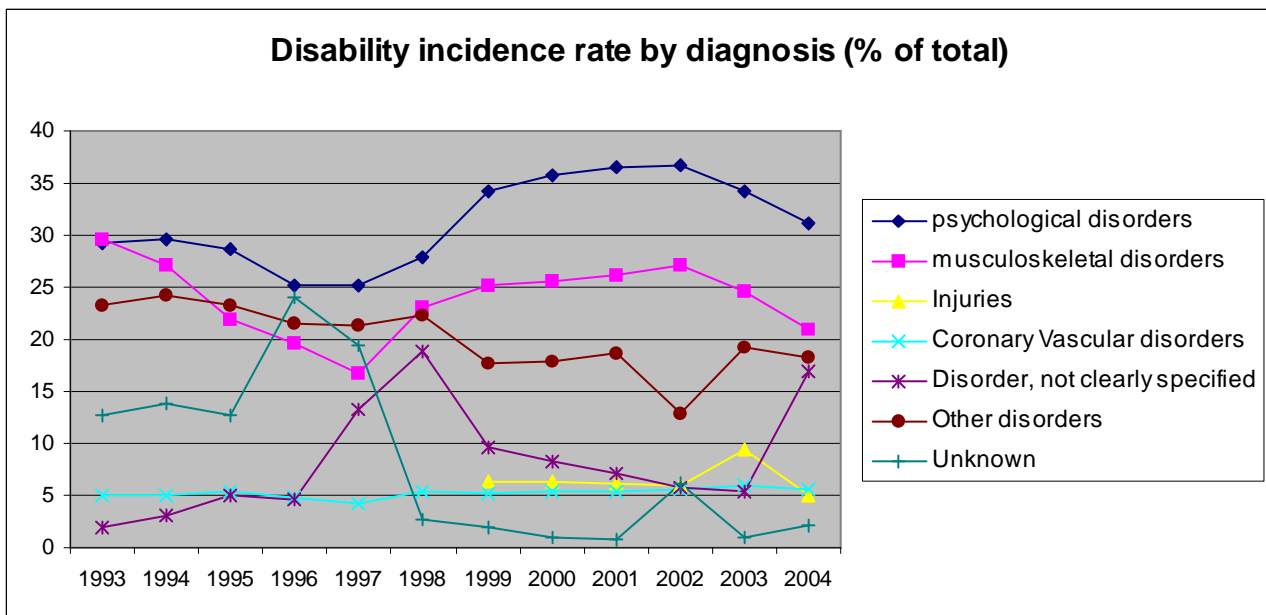
So far, no registered data are available for absenteeism by diagnosis. The only information that is available is based on self-reported information in working condition surveys. For example in the Netherlands Working Conditions Survey respondents are asked to indicate the main reason of their last spell of absence. About 5.5 % of the respondents stated they were absent because of psychological complaints, stress complaints or burnout. Over a third of the 10,000 respondents said their absence was work-related. Almost a third of this work related absence was attributed to extensive workloads and work related stress.

According to the Statistics Netherlands about 8% to 10% of the Dutch labour force suffer from job burnout-complaints (Hupkens, 2005). Figure 2 shows the percentage of employees experiencing burnout complaints, in the period 1997-2004.



**Figure 2: Burnout-complaints in the Dutch Labour Force (Source: CBS)**

Figure 3 shows the development of the disability incidence rate in The Netherlands. Disability pensions due to psychological disorders account for 30% of all new disability pensions in The Netherlands. Nowadays it is the most common diagnosis for new disability pensions, followed by musculoskeletal problems. There is a sharp decline noticeable in 2003, which is most likely caused by a technical change in assessment criteria that took effect in 2002 and 2003. This explanation is supported by the steep increase in the categories 'Other disorders' and 'Disorders, not clearly specified' which coincide with the decline in 'psychological disorders'. Other EU countries show a more or less similar picture (Bergendorff et al., 2002).



**Figure 3: Disability incidence rate by diagnosis in The Netherlands (source: Workers Insurance Authority)**

According to a recent study on the costs of work related mental disorders there were 11.410 new disability pensions that had been caused by work related mental disorders in 2004 (incidence rate of 17 per 10.000 employees). About 2% of the total of 6.2 million Dutch employees (2004) receive a disability pension due to work related mental disorders (Blatter et al., 2005) . The average duration of these pensions was 3 to 4 years. The main diagnostic categories are mood disorders (depression) and adjustment disorders. It is estimated that the total yearly costs due to work related psychological problems are around 4 billion euros. Almost half of these costs can be attributed to disability pensions.

### **1.3 Changing work life, stress and long term sickness absence**

From a review of the literature (cf. D'Amato & Zijlstra, 2003) it became apparent that work related factors can constitute a particular risk for mental health problems, such factors can include the organization of work, productivity issues, and personal relationships at work. A number of models and theories have been developed to describe and explain the etiology and epidemiology of stress (Cooper & Payne, 1988; Hobfoll, 1989; Holt, 1982; Kahn & Byosiere, 1992; Karasek & Theorell, 1990; Lazarus & Folkman, 1984; Sauter & Murphy, 1995). The most prominent of these nowadays include the job demands-job decision latitude model (Karasek, 1979), the Person-Environment fit model (French et al., 1982), the 'Transactional model' (Lazarus & Folkman, 1984) and the Effort-Reward Imbalance model (Siegrist, 1990). In particular high work demands, job insecurity, and low level of job control seem to be risk factors for mental health problems.

A variety of instruments have been developed to explore how these operate within a particular workplace (see e.g. Cox and Griffiths, 1994; Cox, Griffiths, & Rial-Gonzales, 2000; D'Amato & Zijlstra, 2003).

Various parameters of stress, e.g. somatic, behavioural, emotional and cognitive are all moderately correlated to sickness absence (Nielsen et al., 2002). Psychological distress, both general and job related, predict increased absences irrespective of demographic variables (Hardy et al., 2003).

#### **Health status and life style**

Some of the strongest predictors of sickness absences are previous spells of absences and previous ill health (Andrea et al., 2003; Farrel & Stam, 1988). Self-rated health status is a good predictor of sickness absences (Marmot, 1994). Lifestyle factors, such as overweight, smoking and sedentary lifestyle are strongly associated with sickness absence, but not alcohol consumption (e.g. Kivimäki et al., 1998; Ala-Mursula et al. 2002). Sleep appears to have a beneficial effect on recovery from illness, in particular quality of sleep appears to be associated with good health (cf. Groeger, Zijlstra, & Dijk, 2004).

#### **Demographic aspects**

Various demographic aspects have been found to be associated with sickness absence. In general there is a clear relationship between age and health: older people have more health complaints. However, in the workforce this relationship is not always clear, due to either sampling strategy, self-selection of 'healthy workers', but the general tendency is that age increases the risk for long-term absenteeism (Bergendorff et al., 2002).



Also socio-economic class is related to sickness absence (e.g. North et al., 1993; Fuhrer et al., 2002), sickness absence rates are lower for people with a higher education (Ala-Mursula et al., 2002). The greatest divide seems to be that white-collar (non-manual) workers are less absent than blue-collar (manual) workers. This trend can be seen in many European countries and in various sectors of employment (Alexanderson et al. 1994; Benavides et al., 2003; Fuhrer, et al. 2002). However, there seems to be a relationship with the type of the complaints. Psychological problems seem to be over-represented among white-collar workers, whereas blue-collar workers have more physical problems (Riksförsekrinsverket, 2002). Public sector workers have a higher ratio of long-term absences than private sector workers (Riksförsekrinsverket, 2003; Bergendorff et al., 2002). There is some evidence that large organisations have higher rates of absence than smaller ones (Voss et al. 2001; Vahtera et al. 1997).

According to a number of European studies women have a higher level of absence due to sickness than men (e.g. Bergendorff et al., 2002; North et al., 1993; Niedhammer et al., 1998; Voss et al., 2001). However, no satisfactory explanation has been found thus far.

There seems to be very little evidence that the so-called double burden of family and work increases sickness absences in general (Mastekaasa, 2002; Ala-Mursula, 2002; Sonnentag & Zijlstra, in press). Having a family, and number of children do not seem to be risk factors for absenteeism as such. It should be noted, however, that most studies are cross-sectional, meaning a healthy worker selection only within the women with (care for) children. Hardly any longitudinal studies have been performed. Also, self-reported absence has been associated with having young children (i.e. under six years) and with difficulties with childcare (Erickson et al., 2000). These factors also moderated the association between burnout and absence. This suggests that having a family has both positive and negative effects on sickness absence and that excessive strains due to family responsibilities may result in absenteeism or at least increase the risk of stress related illnesses.

This question, whether (or to what extent) stress arises from work or from other life domains, has been a topic of debate among policy makers, employers and trade unions for some time now. The answer to this question would have implications for determining the level of responsibility of various parties, and therefore also for their costs to solve the problem, and the policies to be put in place. However, it may very well be that this question can, as a matter of principle, not be answered. The various life domains (work and non-work) constitute different kind of demands, and it will be very difficult to assess which factor contributes at a particular moment to peoples' levels

of stress. Moreover, the relevance of the various factors/demands will vary over time, and be related to peoples' career and stage of life.

This can probably best be illustrated by using the metaphor of a bucket that is filled with water from different taps. At some point the bucket will be full and the water will spill over if no water is taken out. It will be difficult to assess which tap (or even which drop) actually causes the bucket to spill over. It will be equally difficult to ascertain, when people are confronted with various demands (from different life domains), which of the demand(s) is most responsible for the stress. In fact all demands contribute to the stress and if there is no alleviation in one of the life domains it is likely that the demands will exceed the persons capacity to cope with these demands and they are likely to be perceived as a threat.

However, the most constant and notable demand across the board are the demands from work. Work demands are aspects from the public domain for which an employer has a responsibility, in contrast to aspects of the private life domain. Moreover, work demands can be changed, but many stressors from daily life (divorce, bereavement, etc.) can not be prevented. Nevertheless, the issue of stressors from work and private life domains will have to be addressed in this study; therefore, from a conceptual point of view, aspects of various life domains need to be included in the conceptual framework for this study.

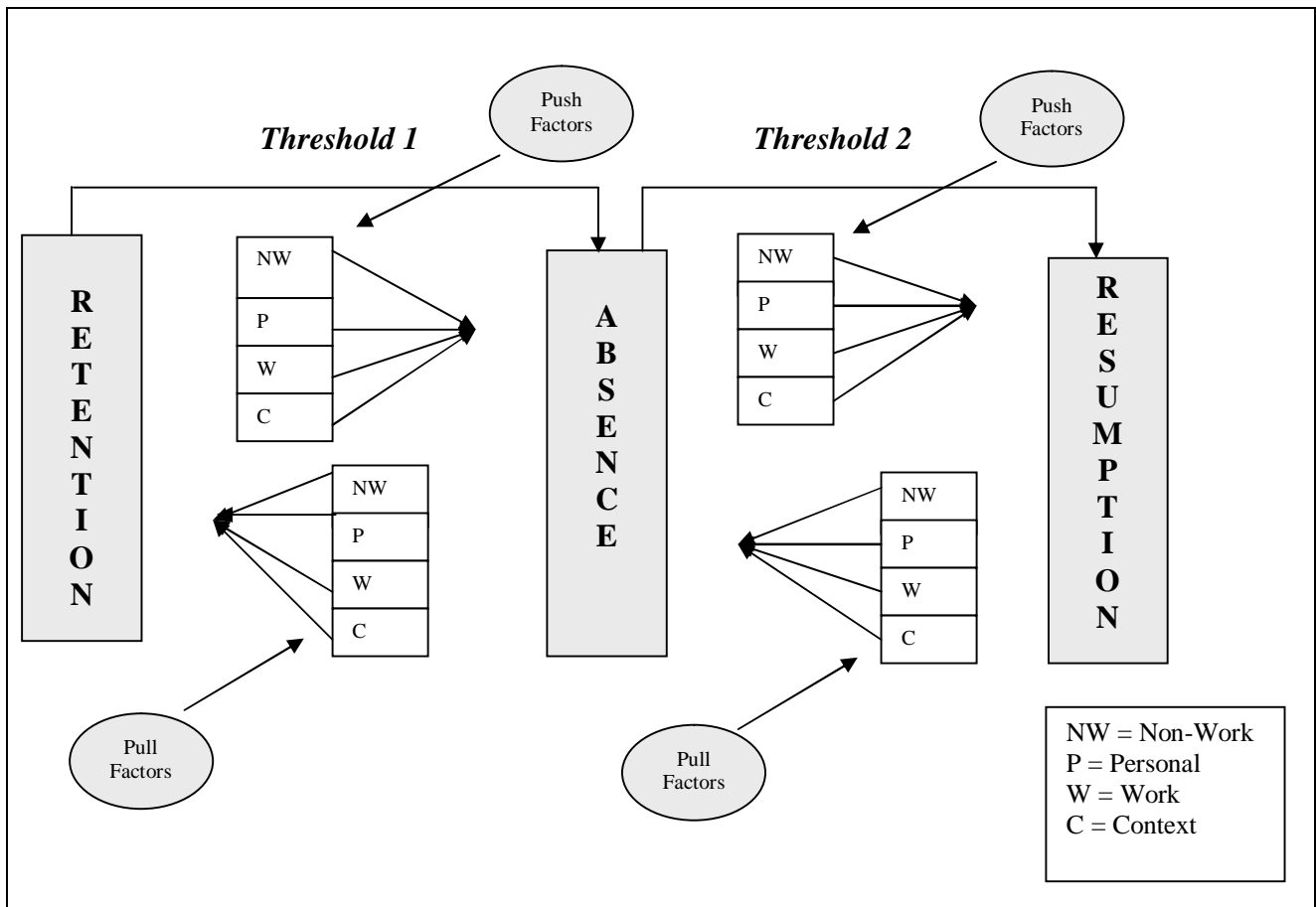
Another reason to look into the topic of 'return to work' is that the work force in Europe is ageing and in order to sustain the productivity at work in Europe, and retain the level of welfare for all Europeans, as many workers as possible should be retained for work. Also the costs for the social security system in most European countries need to be reviewed in order to be sustainable. This means that from the economic perspective our society cannot afford to leave people standing aside. Also for individuals the psychological costs of being excluded from participating in society are unacceptable.

This project has arisen from the acknowledgement that we do not sufficiently understand the general process that affect workers' decisions to either report sick or resume work again. Also a better understanding of the influence of the national systems and their (in)effectiveness to make people return to work (and thus retain workers for the labour force) is required.

#### ***1.4 The conceptual model for this study***

Sickness absence, but also work resumption, can be conceived as the result of a decision making process. People decide to stay at home and not go to work for a particular reason, usually because they feel that they are unable to work, or to deal with the demands of work. This decision making process can be conceived as passing a threshold (cf. Allegro & Veerman, 1998). Our expectation is that there will be a variety of factors influencing this decision. Evidently people's health will be one of these factors, but probably not the only factor. Other factors that might be relevant are the 'opportunity' to be absent (or the necessity to go to work – feeling indispensable), but also the 'necessity' to stay at home (family situation) may play a role. Likewise people need to make a decision (i.e. pass a threshold) in order to return to work again. And again a variety of factors are believed to influence this decision, amongst which health.

This project aims to explore what factors influence peoples' decision to pass the threshold of reporting absent, and also resuming work again, and what is their relative weight in this process. This evidently includes looking into work-related factors and personal circumstances, and also into what kind of interventions have taken place. The conceptual model that has been developed can provide some guidance here.



**Figure 4: Conceptual model of threshold**

The conceptual model represents the various classes of variables that need to be taken into account. There are factors related to the personal characteristics (personality, health situation, life style, social economic class), to people’s work situation (type of organisation, job characteristics, social support, etc.), the non-work domain which includes the family situation and social network, and context variables such as financial situation, geographic location, but also what (health) services are available, etc.

The model is presented as a ‘push and pull’ model, indicating that some factors will ‘push’ people away from work (into absence) and other factors will ‘pull’ people into work (away from absence). Whether a particular factor will actually work as a ‘push’ or a ‘pull’ factors is not always clear on forehand. For some factors it might be clear, i.e. poor job characteristics and unhealthy work situations will contribute to people becoming absent from work, or rather ‘push’ people away from work. On the other hand, interesting and satisfying work and feeling valued and indispensable will generally help people to stay in their work, i.e. ‘pull’ people to work. When an individual has to

make a decision concerning staying at home (i.e. reporting sick) or going to work it is conceivable that various factors will exert different influences upon that individual. These factors will originate from the various life domains and will affect the threshold people will have to take between work and absenteeism.

Of course, peoples' estimate of their own working capacity to deal with the demands of work is relevant as well with respect to their decision, and this, together with their motivation, is likely to affect their future perspectives. Therefore these elements need to be included in the survey.

The main goal of this survey is to provide a description of the most relevant characteristics of the group of people who are long-term absent from work for stress-related reasons. Implicit in this aim is to make a comparison between the groups of people with (stress-related) mental health problems and those absentees that have other than mental health (i.e. physical health) problems, or the group that has both type of problems (co-morbidity).

A second aim is to determine which factors are likely to influence their decision to report absent from work and/or to return to work.

### ***1.5 Mental health and stress-related disorders***

The first aim of this study implies that a distinction needs to be made between 'mental health' versus 'non-mental health' problems. However, first it is useful to clarify the distinction between 'stress' and 'mental health'. 'Mental health problems' refers to psychological disorders of a clinical nature (more or less severe), and includes a much wider group of 'patients' than we are targeting for stress impact. The problems these people have are not necessarily stress-related, and may be dispositional, or resulting from a trauma. On the other side of the spectrum are the mental health problems related to stress and burnout. Stress and burnout are closely related constructs and the distinction between them is somewhat unclear. Nevertheless, they both relate to situations in which people have been over-stretched for a long period without sufficient opportunities to recover from the strains that have been put upon them. This results in a dysphoric and dysfunctional state in individuals often without major psychopathology (Bril, 1984; Schaufeli & Enzmann, 1998). Typical characteristics include high levels of (emotional or psychological) exhaustion, and feelings of reduced personal competence, or self-efficacy, accompanied by depressive feelings. This prevents people from functioning adequately in their job, and from using appropriate coping strategies, thus causing a negative spiral. People are at risk when they perceive a chronic imbalance between their input (effort, time) and the output (material and immaterial rewards) in their work (Siegrist, 1996, Schaufeli, et al., 1993) and usually do not recover from this situation without outside help or

environmental rearrangement (Brill, 1984). Part of the aim of this survey is to make an inventory of the services that these people know of and to what extent they are being used. And subsequently what services and/or interventions are helpful in people returning to work.

This study takes place in the six different EU countries involved in this project. In each of these countries the same methodology and instruments have been employed. A questionnaire has been designed of which the raw skeleton would be applicable and useful in each country. When necessary, country specific (minor) amendments to the questionnaire have been made.

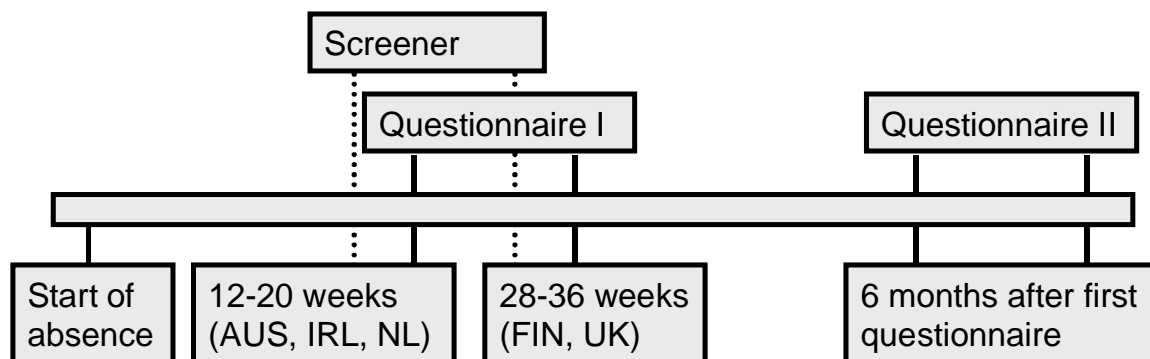
To summarize, the key questions to be answered in this survey are:

- 1) what are the demographic characteristics of long-term absentees,
- 2) what are the psychological characteristics of long-term absentees,
- 3) which factors (including availability and use of services, etc.) contribute to predicting peoples' absenteeism, and or work resumption.
- 4) to what extent can people who are absent for stress-related reasons (mental health problems) be differentiated from other long-term absentees. This differentiation should also include other than demographic factors, i.e. life style, general health, job characteristics, psychological aspects, etc.

## 2. Method

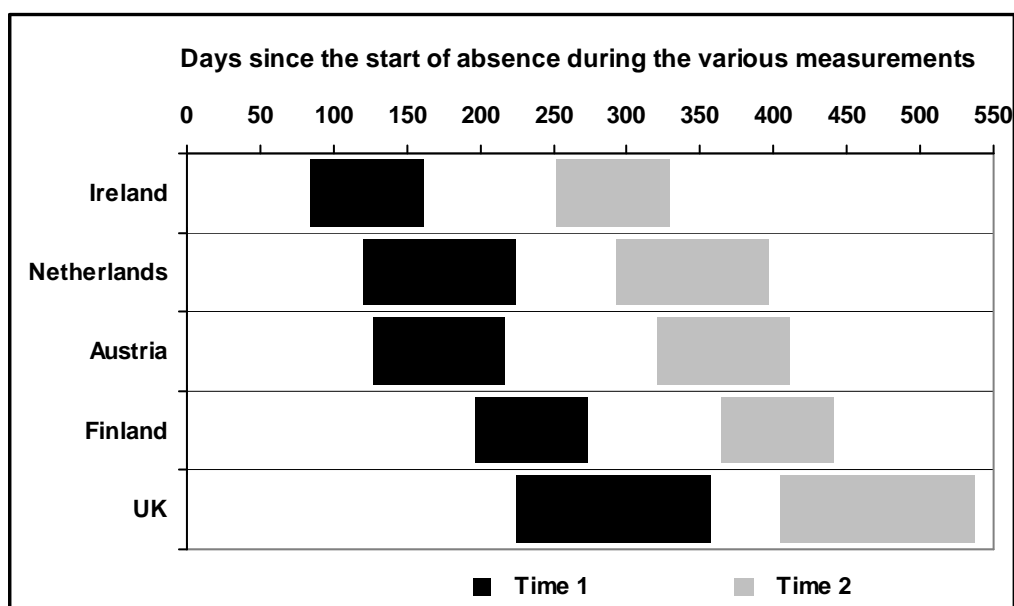
### 2.1 Stress Impact study design

To answer the above questions it was decided that a survey would be the most appropriate method for data collection. A survey enables to collect a large amount of data in a standardized way. Therefore a questionnaire was developed that was administered in all participating countries to a sample of Long Term Absentees (LTA). For each country the objective was to collect information from a national representative sample of approximately 400 LTA's. Therefore preferably the national registration system (if available) should be addressed. A longitudinal study design was used with two measurements, preceded by a screener. The time interval between the two measurements was 6 months. Because of differences in national registration systems it was impossible to fully synchronize the sample of LTA's in all countries, in terms of length of absence. Therefore the country were assigned to either an early group (length of absence between 12 and 20 weeks) or a late group (28-36 weeks). The study design is presented in figure 5.



**Figure 5 Stress Impact study design**

A more detailed sampling time frame for every country is shown in figure 6.



Note. The boxes represent 80% of the cases.

**Figure 6 Sampling timeframe in participating countries**

## 2.2 Sampling procedure in The Netherlands

To obtain a nationally representative cohort of 400 LTA's, absent for 12 to 20 weeks, the Dutch Workers Insurance Authority (Uitvoeringsinstituut Werknemersverzekeringen, UWV) was asked to draw a sample of employees that were absent from work for 13 weeks<sup>1</sup>. This sample received an information letter and a screening questionnaire. A first sample of 5000 employees was drawn in the beginning of March 2004. These employees had their first day of sickness absence between mid-November and mid-December, 2003. The total size of the population of employees being absent for 13 weeks in March was about 25.000. A second sample<sup>2</sup> of 450 employees was drawn in mid May 2004. The first day of sickness absence for the employees in this sample was between the beginning of January and the end of February. Self-employed have not been included in both samples.

The screening questionnaire included several questions that were used to determine study eligibility. Ten days after the sending the screener to both samples a reminder was sent. In total

<sup>1</sup> If an employee is long term absent, his/her employer is obliged to notify the UWV in the 13<sup>th</sup> week of absence, at the latest.

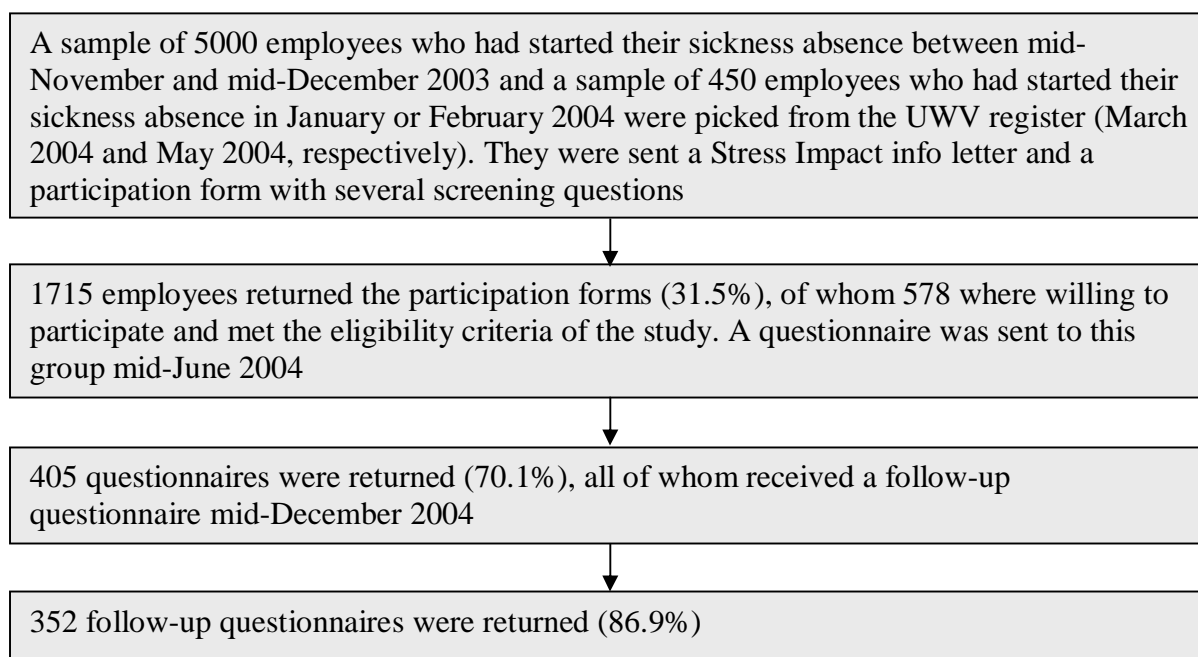
<sup>2</sup> UWV was not able to include enough health care workers (*construction workers and teachers*) in the first sample, therefore an extra sample was drawn in the health care sector.



1715 (31.5%) employees<sup>3</sup> responded to the screener, 1023 (59,7%) of whom were willing to participate in the Stress Impact project. This number was somewhat lower than expected. In case a respondent was not able to complete the questionnaire himself, because of reading and/or writing difficulties, data were collected by telephone. Only 578 of these 1023 respondents met the full eligibility criteria of 1) being absent from work for 12 to 20 weeks and 2) being absent for other reasons than regular maternity leave. The fact that many people did not meet the criteria of

A first full-length questionnaire was sent to this sample of 578 employees around mid June 2004. In total 405 (70.1%) respondents returned this questionnaire upon completion.

Figure 7 shows a schematic overview of the sampling procedure in The Netherlands. Figure 8 provides an overview of the sampling timeframe, for each subsample separately.



**Figure 7 Sampling procedure in The Netherlands**

<sup>3</sup> Another 198 people returned the screener questionnaire without completing it. Some of them filled out a reason for not participating in the study. Frequently mentioned reasons were 'fully returned to work', 'absent for less then 12 weeks', 'too confronting'

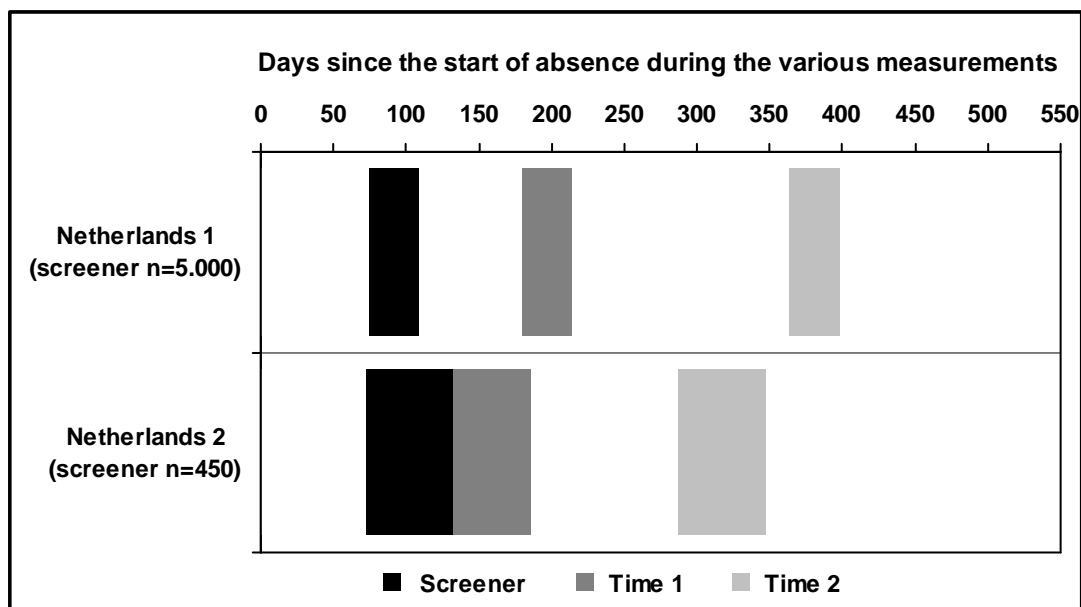


Figure 8. Sampling timeframe in The Netherlands, for both subsamples

### 2.3 Selection bias and non-response analyses

It is possible to compare the total population of employees registered at the Workers Insurance Authority, that were absent from work for 13 weeks, to the sample of 5450 employees that was drawn by the same organisation as well as the initial response and the final cohort. The results of this comparison are presented in table 2. As shown in the table the sample that was drawn by the Workers Insurance Authority is a good representation of the population, as far as gender and age are concerned. Among the employees that responded to the screener however, employees younger than 35 are underrepresented, while employees older than 45 are overrepresented. The same goes for the final cohort. Here, men are also slightly overrepresented.

Table 2 Gender and age distribution in population of LTA's, the sample, screener respondents and final cohort

|               |                | Population<br>UWV<br>% | Sample<br>(n=5540)<br>% | UWV<br>Response<br>(n=1715)<br>% | Cohort<br>(n=405) |
|---------------|----------------|------------------------|-------------------------|----------------------------------|-------------------|
| <b>Gender</b> | Male           | 47,1                   | 43,9                    | 43,9                             | 50,6              |
|               | Female         | 52,7                   | 56,1                    | 56,1                             | 49,4              |
|               | Unknown        | 0,2                    |                         |                                  |                   |
|               | Total          | 100,0                  | 100,0                   | 100,0                            | 100,0             |
| <b>Age</b>    | <25 years      | 6,1                    | 7,0                     | 3,7                              | 1,8               |
|               | 25 to 34 years | 21,5                   | 20,3                    | 16,4                             | 11,9              |
|               | 35 to 44 years | 29,2                   | 28,3                    | 27,2                             | 27,6              |
|               | 45 to 54 years | 28,9                   | 31,6                    | 35,0                             | 37,7              |
|               | > 55 years     | 14,1                   | 12,8                    | 17,7                             | 21,0              |
|               | Total          | 100,0                  | 100,0                   | 100,0                            | 100,0             |

In the screener several demographics questions and questions about the current health status were asked. Therefore it was possible to compare the group that responded to the screener but was not willing to participate in the survey (n= 692; 40,3%) to the group that was willing to participate (n=1023; 59,7%). The distribution of gender, age, level of education, general health status, main reason for absence and contract type for both groups was compared using chi-square tests. The results of this comparison are shown in table 3. The table shows that more men than women were willing to participate in the survey. Also, older employees were less inclined to participate than younger employees. Within the group that was willing to participate, there were relatively more employees with a low level of education and less employees with an intermediate level of education, compared to the group that was not willing to participate. Both groups did not differ as far as health was concerned. Finally, part-timers were less inclined to participate than full-timers.

Separate analyses were carried out for the employees that were willing to participate. Here the group that met the inclusion criteria, was compared to the group that did not meet these criteria. Differences were found for gender, level of education and contract type. All of these differences were in the same direction as in the previous analyses, the non-eligible group resembling the group that was not willing to participate.

**Table 3 Characteristics of the screener respondents**

|   | Not willing to participate |      | Willing to participate |      | Total |      |
|---|----------------------------|------|------------------------|------|-------|------|
|   | n                          | %    | n                      | %    | n     | %    |
| <b>Gender***</b>                                |                            |      |                        |      |       |      |
| Male  | 226                        | 38,4 | 420                    | 47,6 | 646   | 45,7 |
| Female  | 363                        | 61,6 | 463                    | 52,4 | 826   | 54,3 |
| Total   | 589                        | 100  | 883                    | 100  | 1472  | 100  |
| <b>Age*</b>                                     |                            |      |                        |      |       |      |
| < 25 year                                       | 28                         | 4,8  | 26                     | 4,3  | 54    | 3,7  |
| 25 - 34 year                                    | 108                        | 18,5 | 134                    | 20,3 | 242   | 16,5 |
| 35 - 44 year                                    | 145                        | 24,8 | 255                    | 26,3 | 400   | 27,2 |
| 45 - 54 year                                    | 201                        | 34,4 | 313                    | 33,7 | 514   | 34,9 |
| > 54 year                                       | 102                        | 17,5 | 159                    | 15,3 | 261   | 17,7 |
| Total   | 584                        | 100  | 887                    | 100  | 1471  | 100  |
| <b>Level of education**</b>                     |                            |      |                        |      |       |      |
| Primary school                                  | 143                        | 24,5 | 299                    | 33,8 | 442   | 30,1 |
| Intermediate general and professional education | 198                        | 33,9 | 236                    | 26,7 | 434   | 29,5 |
| High school                                     | 50                         | 8,6  | 68                     | 7,7  | 118   | 8,0  |
| Hoger professional or academic educatio         | 147                        | 25,2 | 224                    | 25,3 | 371   | 25,3 |
| Other   | 46                         | 7,9  | 58                     | 6,6  | 104   | 7,1  |
| Total   | 584                        | 100  | 885                    | 100  | 1469  | 100  |
| <b>Health status</b>                            |                            |      |                        |      |       |      |
| Bad   | 84                         | 12,4 | 143                    | 14,2 | 227   | 13,5 |
| Reasonable                                      | 236                        | 34,8 | 346                    | 34,3 | 582   | 34,5 |
| Good  | 236                        | 34,8 | 359                    | 35,6 | 595   | 35,3 |
| Very good                                       | 92                         | 13,6 | 105                    | 10,4 | 197   | 11,7 |
| Excellent                                       | 30                         | 4,4  | 56                     | 5,6  | 86    | 5,1  |
| Total   | 678                        | 100  | 1009                   | 100  | 1687  | 100  |
| <b>Main reason for absence</b>                  |                            |      |                        |      |       |      |
| Physical health problem                         | 286                        | 43,9 | 417                    | 42,6 | 703   | 43,1 |
| Mental health problem                           | 134                        | 20,6 | 186                    | 19,0 | 320   | 19,6 |
| Both  | 192                        | 29,4 | 302                    | 30,8 | 494   | 30,3 |
| Don't know                                      | 40                         | 6,1  | 74                     | 7,6  | 114   | 7,0  |
| Total   | 652                        | 100  | 979                    | 100  | 1631  | 100  |
| <b>Contract type****</b>                        |                            |      |                        |      |       |      |
| Part-time                                       | 333                        | 48,8 | 400                    | 39,4 | 733   | 43,2 |
| Full-time                                       | 350                        | 51,2 | 612                    | 60,5 | 962   | 56,8 |
| Total   | 683                        | 100  | 1012                   | 100  | 1695  | 100  |
| *   | p < 0.05                   |      |                        |      |       |      |
| **  | p < 0.01                   |      |                        |      |       |      |
| ***   | p < 0.001                  |      |                        |      |       |      |

## 2.4 Questionnaire

The questionnaire consists of several nationally and internationally validated scales and several newly developed scales and items, covering the factors that might influence the return to work process, which are described in the introduction of this report. First an English questionnaire was constructed. Then this questionnaire was translated in Dutch and checked by several researchers. As much as possible original Dutch translations of the validated scales were used. The total list of all items and scales used in the questionnaire can be found in appendix A.

## 2.5 Analyses

The analyses of the survey are based on two approaches, breakdown analyses and logistic regression analyses. The breakdown analyses are used for to look how all variables measured in the survey are differentiated between groups of people. Three variables are used in breakdown tables as divisional variables. The first is “stress” or general psychological morbidity, which was constructed on the basis of three factors of mental functioning i.e. emotional exhaustion, depression, and general self-efficacy. A more detailed description of the “stress”-variable is in appendix B. The second breakdown variable is the self-reported main reason for sickness absence. The respondents were asked whether the main reason for their absence was a physical illness, a mental illness or a combination of a physical illness and mental illness (also referred to as 'comorbid'). This distinction was validated against the physician diagnoses the respondents indicated they had from a list of medical diagnoses. The third breakdown variable which was also used as an outcome in logistic regression was return to work at time 2. The respondents were asked to indicate whether they had 1) returned to work completely, 2) returned to work partially or on a therapeutic basis or 3) not returned. The breakdown tables for all variables in the survey can be found in appendix C. The significance of the variables in the breakdown tables is marked so that if the difference is statistically significant AND the estimate for effect size  $r > .1$  there is a triangle next to the category that differs. The direction of the triangle indicates also the direction of the difference. Every marked group is significantly different from the other and/or the comparison group(s). All comparisons are made ‘horizontally’, i.e., per row. ▲:  $p < 0,05$  for significantly high 'scoring' groups; ▼' for significantly low 'scoring' groups.

Multivariate logistic regression was used to look at predictors of return to work at time 2. The outcome variable in the logistic regression model was work resumption asked in the time 2 questionnaire, i.e. whether the absentees had 1) returned to work completely 2) returned to work partially or on a therapeutic basis or 3) not returned. For the regression models full resumption and partial resumption were grouped together. In the logistic models the comparison therefore is between those who have not resumed work at all and those who have resumed work either fully or partially.

The logistic models are constructed so that four different models are analysed first. These models represent different domains in life: personal variables, work related variables, family related variables and contextual variables. The domain specific variables are predetermined on a theoretical basis and are same for all countries participating in the study. These variables are first looked at within the domain specific model and then the most relevant variables from each model are selected into a fifth model. This overall model is constructed for each country separately and includes the most relevant variables relating to work resumption in that country.

There are three different types of variables used in the breakdown tables and logistic regression, first nominal categories (e.g. gender), second yes/no dichotomies (e.g. do you have children under 18 living in the household) and third trichotomies (low, medium, high), which were made for the scales and other continues variables (e.g. depression) based on tertiles of the total sample population of five countries.

## 3. Results

### ***3.1 Main reason for absence and levels of stress: profiling subgroups***

In this section several variables are described according to the main reason for absence (physical, mental, combination of both) and stress (low, medium, high) breakdown. Return to work breakdowns (no, partial, full) are not described here, because they are examined more closely by constructing logistic regression models for the most important variables in predicting return to work. These analyses will be discussed in the following section. The breakdown tables for both main reason for absence, stress level and return to work are presented in appendix C.

#### **Demographics**

In the sample, no significant differences were found between the three main reason for absence categories as far as gender, having children, able to make a living without returning to work and care for elderly/disabled are concerned. There were, however, significant differences in all other factors. For the stress categories statistically significant differences were only found in the factors age, marital status, number of adults in household, having a multiple income and household average monthly income.

#### *Age*

As for age, participants between the ages of 36-45 were more likely to report mental health problems, while participants between the ages of 46-55 were less likely to report these problems. In an analogous manner participants in the age group 36-45, were significantly more likely to report medium levels of stress, whereas relatively many respondents in the age group 46-55 were in the low stress category.

#### *Education*

Employees who had up to lower professional education had lower rates of mental reasons for their absence. Having an intermediate general and professional education was associated with a higher chance of reporting a physical reason for their absence. Employees with higher professional education and academic education were less likely to report physical health problems as a cause of their absence. Those who had an academic education were more likely to report a mental health problem.

#### *Marital status*

As for marital status, married people were more likely to report physical health problems. Divorced respondents were less likely to report physical problems, but more likely to report a combination of mental and physical health problems. Widowed respondents were more likely to report a mental health problems as a reason for their absence and not a physical one. Married respondents were less likely to report high levels of stress. Singles however, are more likely to experience high levels of stress.

#### *Amount of adult living in the household*

Single adult households were more likely to report a combination of physical and mental reasons for their absence and not a physical reason alone. The opposite holds for multiple person households. Single adult households were more likely to be in the high stress category, whereas people in multiple person households were less likely to be in the high stress group.

#### *Multiple income*

Analogous to household composition, having a single income is associated with lower rates of physical reasons for absence, but higher rates for a combination of physical and mental health reasons, as opposed to people with multiple incomes in their household. A relatively high number of respondents with a single income experience high stress levels, whereas high stress levels are less common in the multiple income households.

#### *Household average monthly income*

Finally, respondents with a low household average monthly income (less than 899 Euro) were more likely to have a combination of both mental and physical problems. Also they were more likely to experience a high level of stress.

### **Job characteristics**

In the sample, there was no significant difference between the main reason for absence categories, for the factors contract work hours per week, extra hours per week, job type, private/public sector, and size of workplace. For the stress categories statistically significant differences were only found for job title and work sector.

#### *Job title*

'Professionals' were more likely to be in the mental category. 'Legislators, senior officials and managers' were less likely to experience medium levels of stress. Finally, plant and machine operators and assemblers were less likely to experience high levels of stress.

#### *Job tenure*



Employees that had 21 to 30 years of work experience, were less likely to have a physical reason for their absence. Employees with over 30 years of work experience were more likely to report a physical problem than a mental health problem.

#### *Work sector*

As for work sector, significantly less participants in the physical category worked in education, compared to the mental health and combination group. Participants with high levels of stress tend to work more in the hotels & restaurants sector, and less in the transport sector, compared with participants with low and medium levels of stress.

### **Psychosocial and physical work factors**

No statistically significant differences between the main reason for absence categories were found for control, cognitive demands and family work balance. As far as stress is concerned almost all factors show significant differences. However, no differences were found in physical demands and work centrality.

#### *Job demands*

Those with low job demands were most likely to be absent because of physical reasons and less likely for mental reasons. Those with high job demands were more likely to be absent for both physical and mental reasons. Those with low levels of job demands had low levels of stress, whereas high demands was associated with high levels of stress.

#### *Job control*

The opposite holds for job control. Low control is associated with high levels stress. No significant differences were found for the main reason for absence.

#### *Co-worker support*

Employees experiencing low co-worker support were less likely to be absent for physical reasons. Employees with a medium level of co-worker support were less likely to be absent for mental reasons, but more likely to be absent for physical reasons. Surprisingly, high support was associated with a higher chance of being absent for mental reasons. Low support was also associated with higher levels of stress.

#### *Supervisor support*

Employees reporting low levels of supervisor support, again, were less likely to be absent for physical reasons, but more likely to be absent because of a combination of both physical and mental health problems. Low supervisor support was associated with higher levels of stress. People

experiencing medium levels of supervisor support were more likely to be in the low stress groups and but not in the high stress groups

### *Overcommitment*

Highly overcommitted employees were more likely to be absent for mental reasons and not for physical reasons. Low overcommitment is found more often in the physical group. Also low overcommitment is related to lower levels of stress, whereas the opposite holds for high overcommitment.

### *Job reward*

Employees that experience low job reward were more likely to be absent for both physical and mental health reasons. Low job reward was associated with higher level of stress, while high reward was associated with lower stress levels.

### *Job insecurity*

Job insecurity was higher for employees absent for both physical and mental health reasons compared to employees in the other diagnostic groups. Employees with low job insecurity were more likely to be in the stress compared with participants with low levels of stress.

### *Physical demands*

Employees with low physical demands were more likely to have mental health problems, while employees with medium and high levels of physical demands were more likely to be in the physical group. No differences were found in regard to the stress measure.

### *Emotional demands*

Low emotionally demanding jobs seem to be associated with absence for physical reasons, while employees experiencing high emotional demands at work are more likely to have a combination of both physical and mental health problems. Also, employees reporting high emotional demands at work, were more likely to be in the high stress category.

### *Cognitive demands*

No differences were found in regard to the main reason of absence of employees. Employees in highly cognitively demanding jobs were less likely to be in the low stress category.

### *Job satisfaction*

Employees that report low levels of job satisfaction tend to be absent for physical reasons less often. Also they are more likely to be in the medium or high stress group. Highly satisfied employees are more likely to be in the low stress group.

### *Work-family balance*

Employees that report a low work-family balance (job responsibilities interfere with family life to a large extent), are more likely to report a combination of both physical and mental health problems, rather than physical problems only. A medium level of work-family balance is associated with a higher chance of reporting mental health problems, whereas employees experiencing little work-family interference are more likely to be in the physical category. Not surprisingly a low work-family balance was associated with high stress-levels, whereas high balance was associated with low levels of stress.

### *Family-work balance*

In regard to the extent in which ones family responsibilities interfere with working life no significant differences were found between the main reason for absence groups. A low family-work balance was associated with higher stress levels while employees experiencing a high balance between family and working life are more likely to be in the low stress groups.

### *Work centrality*

Employees with a low score on the work centrality scale were more likely to report a physical reason for their absence. No significant differences were found with respect to the stress measure.

## **Policies**

On the comparison of the main reason for absence only two significant differences were found. One significant difference was found in the comparison of participants with low, medium and high levels of stress.

### *Periodic health screening at-risk staff*

On the question whether at-risk staff had received periodic health screening, participants of the 'combination' category had a significantly higher rate in answering "no", compared to the other categories.

### *Staff counselling support*

On the question whether staff received counselling support, participants of the physical category had a significantly higher rate in answering "no", compared to the other categories.

### *Return to work policy*

Participants with low levels of stress were more likely to have a return to work policy, whereas participants with high levels of stress were not likely to have such a policy.

## **Lifestyle**

All lifestyle variables were statistically significant in regard to the main reason for absence and the level of stress.

### *Working hours spouse/partner*

Working hours of a spouse or partner were more likely to have changed in participants from the 'combination' category and less likely in participants from the physical category. Working hours of a spouse/partner of participants with low levels of stress were more likely to remain unchanged in comparison to participants with medium and high levels of stress.

### *Household duties*

Household duties have significantly increased in participants from the mental category, while they decreased in participants from the physical category. Less participants with low levels of stress saw their household duties increased, compared to participants with medium and high levels of stress.

### *Social/leisure activities*

Significantly more participants from the mental category and less from the physical category have seen their social/leisure activities increased. Social/leisure activities of participants with high levels of stress have decreased, while less participants with low levels of stress reported a decrease of their social/leisure activities when compared with the other participants.

### *Alcohol consumption*

Alcohol consumption increased more in participants from the mental category and less in participants from the physical category. Alcohol consumption of participants with high levels of stress increased, and was more likely to have changed compared to participants with low and medium levels of stress.

### *Smoking*

Smoking has decreased more often in the physical category, while it increased more in the mental category. Also, smoking increased in people experiencing high levels of stress, whereas participants with low levels of stress were less likely to have increased their smoking.

### *Eating*

Significantly more participants from the 'combination' category have seen their eating decreased. Changes in eating were more common in employees with high levels of stress. Both increased and decreased eating was reported more often in participants with high levels of stress, compared with participants in the other groups. Eating in participants with low levels of stress was less likely to have increased compared to participants with medium and high levels of stress.

### *Contact with extended family and friends*

Contacts with extended family and friends have decreased more in participants from the 'combination' category, as compared to the other two groups. Contacts with extended family and friends remained unchanged more often in employees reporting physical health problems as the main reason for their absence. Contacts with extended family and friends, were more likely to have been decreased in participants with high levels of stress, and less likely to have been decreased in participants with low levels of stress.

### *Quality of social relationships within the house*

The quality of social relationships within the house has decreased for significantly more participants in the 'combination' category. It decreased relatively less often for employees with physical health problems. An increased quality of social relationships was found in the mental category, but there was less increase in the physical category. The quality of social relationships within the house were more likely to have been decreased in participants with high levels of stress, and relatively less likely to have been decreased in participants with low levels of stress.

### *Involvement in charity/voluntary work*

The involvement in charity/voluntary work increased somewhat more often for participants in the mental category work. Employees that reported a decrease in their involvement in charity/voluntary work were more likely to be in the high stress group. An unchanged situation was reported more often in the low stress group.

### *Exercise before absence*

A low exercise rate before absence was found more often in the 'combination' category and less often in the low stress group. A high exercise level was found less often in the high stress group.

### *Exercise after absence*

The same goes for exercise after absence. Again low exercise levels are more common in employees reporting both mental and physical problems and less common in the low stress group. Relatively more participants in the mental category had a high score on exercise after absence, and participants from the 'combination' category had a less high score compared to the other categories.

### *Sleeping problems*

Finally, relatively more participants in the 'combination' category had a higher score on sleeping problems, whereas less participants from the mental category had a high score. Also, more participants with low stress levels had a low score on sleeping problems, while more participants with high levels of stress had a high score.

## **Health condition**

Significant differences were found in almost all health condition variables. No differences between the main reason for absence groups were found for the variable work-relatedness of illness. As far as the stress groups are concerned, no differences were found for the variable physical work ability.

### *General health*

When asked to rate their own health, significantly less participants from the physical category and more participants from the 'combination' category rated it as being (very) bad compared to participants from other categories. For the rating “good or even splendid”, the opposite was true. Those who evaluated their general health condition to be (very) bad were more likely to have a high level of stress than a low level of stress, and conversely those who evaluated their health to be good or even splendid, were more likely to have a low level of stress and not a high level.

### *Illness caused by work*

Further, participants with low levels of stress were less likely to have an illness that was caused by work compared with participants with medium and high levels of stress.

### *Depression (CES-D)*

Participants with low scores on the depression scale were more likely to have a physical reason for their absence rather than a mental reason or a combination of both mental and physical problems. Those with a medium level of depression were less likely to have a physical reason for their absence. Those with high scores on the depression scale were more likely to be in the ‘combination’ category and not in the physical category.

The stress breakdown will not be here discussed while the stress measure overlaps with the depression-scale.

### *Exhaustion (OLBI-scale)*

Those with a low score on the exhaustion scale were more likely to report a mental health problem or a combination both mental and physical problems, rather than a physical reason for their absence. Those with a medium level of exhaustion were more likely to be in the 'combination' category. Finally, those with high scores on the exhaustion scale were more likely to report a mental reason for absence and not a physical reason.

The stress breakdown will not be discussed here while the stress measure overlaps with the exhaustion-scale.

### *Disengagement (OLBI-scale)*

Participants with a low disengagement score were more likely to report a mental reason for their absence. On the stress measure people with low scores on the disengagement scale were more likely to have low levels of stress and less likely on the other hand to have high level of stress.

High levels of disengagement are associated with high levels of stress.

### *General self-efficacy*

Those with low scores on the general self-efficacy scale were more likely to be in the comorbid category, and not in the physical category. Participants with a medium level of general self-efficacy scale were more likely to be in the physical category.

The stress breakdown will not be discussed here while the stress measure overlaps with the general self-efficacy scale.

### *Stress*

Participants in the low stress group were more likely to report a physical reason for absence and not a mental one, or a combination of both mental and physical health problems. The opposite holds for those reporting high levels of stress. In other words: stress levels were significantly higher in the mental and comorbid groups. Only 6% of the participants reporting a physical reason for their absence were in the high stress group, compared to 23% of the people in the mental and the comorbid group.

### *Work ability*

Work ability was significantly lower in participants from the comorbid category, and higher in the physical category. Physical work ability was relatively high in the mental category, and low in the comorbid category. Conversely mental work ability was relatively high in the physical group and low in the other groups.

Those who evaluated their work ability as very poor, were more likely to report high levels of stress rather than low levels of stress. The opposite goes for the participants in the high work ability group.

## **Absence & contacts with workplace and health professionals**

Several significant differences between the main reason for absence categories were found with regard to absence related factors. These are: time of previous absences (weeks), length of current absence, whether absence was a particular event or gradual process, whether or not it was an unexpected event, contacts with health professionals, contact between the manager and health professionals during absence, and 'absence experience'.

As far as the stress groups are concerned, more or less the same factors were differed significantly.

### *Number of previous absences*

Those with more than two previous spells of absence in the year before their current absence were more likely to report a high level of stress.

### *Length of previous absences*

Participants who said the total length of absence in the year before their current absence was less than 2 weeks were more likely to report a mental health problem as a reason for their current absence.

### *Length of current absence*

Those with a length of absence between 0-24 weeks more likely to be in the physical group and less likely to be in the comorbid group. Conversely, participants who were absent for 25-34 weeks, were more likely to be in the comorbid group.

Also, the longer the length of the current absence, the higher the probability of reporting a high level of stress.

### *Main reason for absence*

As mentioned before, stress levels were higher in the mental and comorbid groups.

### *Absence as a particular event or gradual process*

People that felt their absence could be described as a particular event were more likely to report a physical reason for their absence and less likely to report a mental health problem. The opposite holds for the people that regarded their absence as the outcome of a gradual process.

Also, stress levels were higher in the latter group.

### *Absence as an unexpected event*

Similarly, participants that considered their absence to be an unexpected event were more likely to report a physical reason for their absence and less likely to report a mental health problem, whereas the opposite holds for those who think their absence was something they could have seen coming.

There were no differences between the stress groups however.

### *Contact with professionals*

As one would expect, participants from the mental and comorbid category were more likely to have been in contact with a psychiatrist and/or psychologist during their absence, than people in the physical group. Also, they were more likely to have contact with an alternative health practitioner and/or other professional than participants from the physical category. Contact with the physiotherapist and/or sports physician was significantly higher in participants from the physical category and lower in the mental category compared. No differences were found with regard to the



general practitioner, occupational health physician and the category 'rehabilitation advisor/case manager and/or social security officer'.

Participants that stated they had been in contact with a psychiatrist and/or psychologist and participants that visited an alternative health practitioner (and/or other professional) were more likely to be in the high stress group. Participants that had been in contact with the physiotherapist and/or sports physician (those with physical complaints) were less likely to be in the high stress group.

#### *Contact manager and health professional*

For people with comorbid health problems it was more likely that the manager had been in contact with the treating health professional.

Accordingly, people who reported no contact between manager and health professional were more likely to report a low stress level.

#### *Contact absent employee and employer/colleagues*

Participants in the high stress group reported fewer contacts between themselves and their employer, compared to the average.

Also, people in the low stress group reported contacts with colleagues more often, than those in the high stress group.

#### *Absence experience*

As for absence experience, more participants from the comorbid category and less from the physical category felt highly attached to work. More participants from the mental category and less participants from the physical category felt highly detached from work.

Both low attachment and detachment to work were associated with low levels of stress.

### **Interventions & work resumption**

Only few significant differences were found between the main reason for absence categories and the stress groups, with respect to interventions and expectancies about work resumption.

#### *Vocational rehabilitation*

Participants in the mental category were more likely to be involved in a vocational rehabilitation program after they had reported absent, compared to participants from the other categories.

#### *Different job/different employer*

Significantly more participants with medium levels of stress and less participants with low levels of stress, expected to return to work in a different job with a different employer.

## **Time 2**

### *Return to work*

Of all participants, the ones in the comorbid category were less likely to have completely returned to work at time 2 (6 months after first questionnaire). In the comorbid category 54% had fully returned to work, compared to almost 66% in the physical group and 69% in the mental group. No differences between the diagnostic groups were found for partial resumption.

A high stress level at time 1 was associated with a low return to work chance at time 2.

### *Job change*

Participants reporting a mental health problem were more likely to remain in the same job, compared to the participants on the other two groups.

### *Factors influencing return to work decision*

The influence of the financial situation on the decision to resume work was more of influence in the comorbid category, and less of influence in the physical and mental groups.

For participants with low levels of stress total recovery significantly more often influenced the decision to resume work, and less for participants with medium levels of stress. The opposite is true for partial recovery. The financial situation was more of influence to resume work for participants with medium levels of stress compared to the other groups. The sick leave benefit running out, was more of influence in resuming work for participants with medium and high levels of stress, and less for participants with low levels of stress.

### *Personal average monthly income and household average monthly income*

Participants in the mental category were more likely to be in a high net income job (€1800/month or more) on time 2, compared to participants from the physical and comorbid category.

Significantly more participants from the comorbid category were in the lowest household income group on time 2 (less than 899 Euro).

### *Self-efficacy and CES-D*

Scores on general self-efficacy at time 2 were significantly lower in participants from the comorbid category, and less low in the physical category. Participants from the comorbid category were also more depressed at time 2, while those reporting physical health problems had a relatively low score on depression.

### *Work ability*

Work incapability was higher in participants from the comorbid category compared with other participants. Physical work ability was lower in participants from the comorbid category and higher

in participants from the mental category, while mental work ability was lower in the comorbid category as well and higher in the physical category.

Again, those who evaluated their work ability as very poor, were more likely to report high levels of stress at time 1 rather than low levels of stress. The opposite goes for the participants in the high work ability group. Both physical and mental work ability was significantly higher in participants with low levels of stress at time 1 and lower in participants with high levels of stress.

#### *Absence experience*

Those who felt highly attached to work at time 2 were more likely to be in the low stress group and not in the group that experiences medium levels of stress.

Detachment from work at time 2 was higher for participants in the mental category and lower for those in the physical category.

### **3.2 Factors influencing return to work**

Logistic regression was used in order to examine which variables measured in the first questionnaire predicted whether the person had returned to work or not at the time of the second questionnaire, 6 months later. The outcome variable was 'having returned to work either fully or partially' versus 'those who had not returned to work at all'. To evaluate the different perspectives related to absence and work resumption the variables were examined in four separate models based on different domains which have an influence on the situation: personal factors, work-related factors, non-work related factors and contextual factors. Each model was controlled for the time 1 return to work status of respondents, while some of the respondents had already returned to work (partially) before receiving the time 1 questionnaire. After examining the relevant variables in these models a comprehensive model was constructed to incorporate the most important variables in the same model.

#### **Personal factors and return to work**

Table 1 shows which personal factors significantly predicted return to work at time 2. Out of the 14 variables that were entered in the model, only three had a significant effect in predicting return to work. First of all, those who reported a high level of self-efficacy at time 1 were almost three times as likely to return to work, in comparison to those who reported a low level of self-efficacy. Although the general health status did not affect return to work chances, mental health status did. Highly depressed people were as much as five times less likely to have returned to work, than those who had a low score on time 1 depression. The third significant variable in the prediction of return to work was the total time in absence in the year preceding the current absence. Those who were absent for two to four weeks in the preceding year were five times less likely to return to work, compared to those who were absent for less than two weeks. No significant effect was found however for those who reported absent for more than four weeks in the preceding year. Together, personal factors accounted for 35% of the variance in return to work (19% without controlling for time 1 return to work status).

**Table 1 Personal factors predicting return to work (Odds Ratio's and Confidence Intervals)**

|                                       | Cox & Snell R <sup>2</sup> =.348<br>N=233 | Odds ratio  | 95,0% C.I. |       |
|---------------------------------------|---|-------------|------------|-------|
| Gender                                | Male                                      | 1           |            |       |
|                                       | Female                                    | 2.08        | 0.62       | 7.00  |
| Age                                   | <=35                                      | 1           |            |       |
|                                       | 36-45                                     | 2.57        | 0.45       | 14.66 |
|                                       | 46-55                                     | 0.44        | 0.09       | 2.24  |
|                                       | >55                                       | 1.63        | 0.23       | 11.55 |
| Education                             | Basic                                     | 1           |            |       |
|                                       | Intermediate                              | 0.92        | 0.26       | 3.19  |
|                                       | High school                               | 3.01        | 0.27       | 33.06 |
|                                       | Professional                              | 1.09        | 0.24       | 4.97  |
|                                       | Academic                                  | 0.72        | 0.08       | 6.29  |
| Marital status                        | Married                                   | 1           |            |       |
|                                       | Co-habiting                               | 0.88        | 0.17       | 4.59  |
|                                       | Single                                    | 0.60        | 0.09       | 3.93  |
|                                       | Divorced                                  | 0.48        | 0.08       | 2.93  |
|                                       | Widowed                                   | 0.45        | 0.01       | 33.07 |
| Personal monthly income               | Less than 899 €                           | 1           |            |       |
|                                       | 900 - 1799 €                              | 2.51        | 0.71       | 8.82  |
|                                       | 1800 € or more                            | 2.53        | 0.47       | 13.78 |
| Multiple household income             | No  | 1           |            |       |
|                                       | Yes                                       | 2.02        | 0.61       | 6.66  |
| Exercise                              | Low                                       | 1           |            |       |
|                                       | Medium                                    | 1.17        | 0.36       | 3.82  |
|                                       | High                                      | 1.36        | 0.39       | 4.75  |
| Sleeping problems                     | Low                                       | 1           |            |       |
|                                       | Medium                                    | 0.75        | 0.25       | 2.26  |
|                                       | High                                      | 1.77        | 0.46       | 6.75  |
| General health                        | Poor                                      | 1           |            |       |
|                                       | Good                                      | 1.42        | 0.52       | 3.86  |
| General self-efficacy                 | Low                                       | 1           |            |       |
|                                       | Medium                                    | 3.00        | 0.80       | 11.30 |
|                                       | High                                      | <b>2.95</b> | 0.83       | 10.41 |
| Depression                            | Low                                       | 1           |            |       |
|                                       | Medium                                    | 0.42        | 0.13       | 1.33  |
|                                       | High                                      | <b>0.19</b> | 0.05       | 0.79  |
| Emotional exhaustion                  | Low                                       | 1           |            |       |
|                                       | Medium                                    | 1.41        | 0.44       | 4.49  |
|                                       | High                                      | 0.83        | 0.21       | 3.27  |
| Absences in the preceding year        | Less than 3 periods                       | 1           |            |       |
|                                       | 3 periods or more                         | 1.57        | 0.51       | 4.86  |
| Time in absence in the preceding year | < 2 weeks                                 | 1           |            |       |
|                                       | 2-4 weeks                                 | <b>0.21</b> | 0.06       | 0.77  |
|                                       | > 4 weeks                                 | 0.81        | 0.25       | 2.62  |

Note. The statistically significant odd ratios are bolded

## Work-related factors in return to work

Table 2 presents the second model where return to work is predicted by work related factors only. Two out of eight variables entered in the model significantly predicted return to work. Firstly a high level of job insecurity resulted in a lower chance of returning to work. Those in insecure jobs were 3,5 times less likely to have returned to work, as compared to those who did not report an insecure job situation. Also, overcommitted employees were less likely to return to work. However, a significant effect was found only in employees with medium levels of overcommitment and not in those who were highly overcommitted. The work related factors accounted for 29% of the variance in return to work (10% without controlling for time 1 return to work status).

**Table 2 Work-related factors predicting return to work (Odds Ratio's and Confidence Intervals)**

|                      | Cox & Snell R <sup>2</sup> =.295<br>N=289 | Odds ratio  | 95,0% C.I. |       |
|----------------------|---|-------------|------------|-------|
| Sector of employment | Public                                    | 1           |            |       |
|                      | Private                                   | 0,54        | 0,20       | 1,43  |
|                      | Non-profit                                | 1,13        | 0,36       | 3,56  |
| Size of workplace    | <10 employees                             | 1           |            |       |
|                      | 11-50 employees                           | 1,86        | 0,45       | 7,63  |
|                      | >50 employees                             | 2,36        | 0,66       | 8,38  |
| Emotional demands    | Low                                       | 1           |            |       |
|                      | Medium                                    | 1,57        | 0,59       | 4,19  |
|                      | High                                      | 0,99        | 0,30       | 3,32  |
| Cognitive demands    | Low                                       | 1           |            |       |
|                      | Medium                                    | 1,75        | 0,57       | 5,41  |
|                      | High                                      | 1,51        | 0,56       | 4,05  |
| Job control          | Low                                       | 1           |            |       |
|                      | Medium                                    | 0,42        | 0,13       | 1,36  |
|                      | High                                      | 1,11        | 0,34       | 3,64  |
| Job satisfaction     | Low                                       | 1           |            |       |
|                      | Medium                                    | 1,93        | 0,66       | 5,62  |
|                      | High                                      | 1,26        | 0,33       | 4,73  |
| Job insecurity       | Low                                       | 1           |            |       |
|                      | High                                      | <b>0,28</b> | 0,11       | 0,70  |
| Overcommitment       | Low                                       | 1           |            |       |
|                      | Medium                                    | <b>3,79</b> | 1,18       | 12,12 |
|                      | High                                      | 1,47        | 0,53       | 4,11  |

Note. The statistically significant odds ratios are bolded

## Non-work factors and returning to work

In the next model the predictive value of three non-work related factors was examined. None of these had a significant effect in predicting return to work. Altogether, the three non-work variables accounted for only 22% of the variance in return to work, including time 1 return to work status.

When time 1 return to work status was not included in the model, not even 1% of the variance was explained.

**Table 3 Non-work factors predicting return to work (Odds Ratio's and Confidence Intervals).**

|                                   |           | Cox & Snell R <sup>2</sup> =.223 |            |            |      |
|-----------------------------------|-----------|----------------------------------|------------|------------|------|
|                                   |           | N=343                            | Odds ratio | 95,0% C.I. |      |
| Work-family balance               | Low       |                                  | 1          |            |      |
|                                   | Medium    |                                  | 1,35       | 0,51       | 3,53 |
|                                   | High      |                                  | 1,33       | 0,52       | 3,39 |
| Number of adults in the household | One       |                                  | 1          |            |      |
|                                   | 2 or more |                                  | 1,60       | 0,72       | 3,58 |
| Children in the household         | No        |                                  | 1          |            |      |
|                                   | Yes       |                                  | 1,32       | 0,69       | 2,52 |

Note. The statistically significant odd ratios are bolded

### **Contextual factor and return to work**

Table 4 shows the influence of contextual factors. Altogether nine variables were entered in this model. In the other countries that took part in the Stress Impact study, a tenth variable was added to the multivariate analyses. This variable focused on the number of months a job position was kept open for an employee. This variable was excluded from the Dutch time 1 questionnaire however, because generally speaking a job position is kept open for employees for at least two years in The Netherlands. None of the nine variables that were included in the model significantly predicted return to work.

Altogether the contextual variables accounted for 20% of the variance in returning to work (4%, without controlling for time 1 return to work status).

**Table 4 Contextual factors predicting return to work (Odds Ratio's and Confidence Intervals).**

|   | Cox & Snell<br>R <sup>2</sup> =.202 |            | 95,0% C.I. |      |
|---|-------------------------------------|------------|------------|------|
|   | N=306                               | Odds ratio |            |      |
| Return to work- policy  | No                                  | 1          |            |      |
|   | Yes                                 | 1,38       | 0,62       | 3,09 |
| Sickness absence- policy  | No                                  | 1          |            |      |
|   | Yes                                 | 1,30       | 0,59       | 2,87 |
| Work arrangements made in the workplace during absence                    | No                                  | 1          |            |      |
|   | Yes                                 | 1,12       | 0,50       | 2,50 |
| Vocational rehabilitation in the workplace during absence                 | No                                  | 1          |            |      |
|   | Yes                                 | 1,78       | 0,78       | 4,07 |
| Medical / psychological interventions provided by employer during absence | No                                  | 1          |            |      |
|   | Yes                                 | 1,30       | 0,41       | 4,19 |
| Contact with supervisor during absence                                    | No                                  | 1          |            |      |
|   | Yes                                 | 0,60       | 0,22       | 1,63 |
| Contact with colleagues during absence                                    | No                                  | 1          |            |      |
|   | Yes                                 | 1,75       | 0,81       | 3,79 |
| Contact with return to work case manager                                  | No                                  | 1          |            |      |
|   | Yes                                 | 0,66       | 0,24       | 1,82 |
| A person co-ordinating return to work                                     | Yes                                 | 1          |            |      |
|   | No                                  | 0,99       | 0,38       | 2,61 |
|   | Don't know                          | 1,20       | 0,48       | 2,99 |
| Job position kept open  | No                                  | -          |            |      |
|   | < 6 months                          | -          |            |      |
|   | 6-12 months                         | -          |            |      |
|   | >12 months                          | -          |            |      |

Note. The statistically significant odd ratios are bolded

### Comprehensive model of return to work

Finally a comprehensive model was composed. This model consisted of variables that significantly predicted return to work in the previous four models. These variables were general self-efficacy, depression, absence history and job insecurity. Absence history was excluded from the model however, because of the high number of missing values on this variable<sup>4</sup>. Also, self-efficacy was excluded because it was highly correlated with depression<sup>5</sup>. The comprehensive model was controlled for gender, age, educational level and time 1 return to work status. Finally, some variables were added that were not necessarily included in any of the four standardized four models (these models were equal in each of the countries that participated in the Stress Impact study).

<sup>4</sup> The number of cases in the final model dropped by more than 25% if absence history was included

<sup>5</sup> The final model was also tested including self-efficacy. Self-efficacy did not significantly predict return to work, while depression did. Including self-efficacy did not change the impact of the significance of other variables either. Therefore depression was chosen over self-efficacy.



These variables were selected on the basis of theoretical or practical significance. This included the variables multiple household income (although not significant in the first model), family-work balance<sup>6</sup> and early contact with an occupational health service. This last variable is particularly relevant for the Dutch situation, where this early contact is actively promoted to stimulate the return to work process.

In the comprehensive model (table 5) five variables significantly predicted return to work. Firstly, being in the age group 46-55 was associated with a four times lower chance of returning to work, as compared to individuals younger than 36. Secondly, higher levels of depression reduced the chances of returning to work. Those with a medium depression score were two to three times less likely return to work, while highly depressed employees were as much as 7 times less likely to return to work, compared to employees that were not or little depressed at time 1. Further, those who reported a high balance between family and working life were two to three times less likely return to work, compared to those reporting low family-work balance. Individuals who have had contact with the Occupational Health Service (occupational health physician and/or occupational health nurse) within a month after the onset of their absence, were almost five times as likely to return to work than those who did not have such contact within a month. Finally, employees that lived in a multiple income household were over two times as likely to return to work, compared to those in single income households. Although initially significant in the situational model, job insecurity was no longer significantly related to return to work in the final model. The final model accounted for 32% of variance (18% without controlling for time 1 return to work status).

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<sup>6</sup> Included two questions: 'family matters reduce time for job', 'family activities stop you getting sleep' (reversed scale).

**Table 5 Comprehensive model of predicting return to work (Odds Ratio's and Confidence Intervals).**

|  | Cox & Snell<br>R <sup>2</sup> =,322<br>N=320 | Odds<br>ratio | 95,0% C.I. |       |
|--|--|---------------|------------|-------|
|  |  |               |            |       |
| Gender   | Male   | 1             |            |       |
|  | Female                                       | 1,26          | 0,55       | 2,85  |
| Age  | <=35   | 1             |            |       |
|  | 36-45  | 0,95          | 0,25       | 3,59  |
|  | 46-55  | <b>0,24</b>   | 0,06       | 0,87  |
|  | >55  | 1,00          | 0,24       | 4,21  |
| Education  | Basic  | 1             |            |       |
|  | Intermediate                                 | 1,05          | 0,39       | 2,82  |
|  | High school                                  | 1,70          | 0,28       | 10,22 |
|  | Professional                                 | 1,17          | 0,42       | 3,28  |
|  | Academic                                     | 1,49          | 0,28       | 7,76  |
| Depression   | Low  | 1             |            |       |
|  | Medium                                       | <b>0,39</b>   | 0,16       | 0,96  |
|  | High   | <b>0,14</b>   | 0,05       | 0,41  |
| Family-work balance  | Low  | 1             |            |       |
|  | High   | <b>0,39</b>   | 0,18       | 0,87  |
| Contact with occ. health service in first month of absence | No   | 1             |            |       |
|  | Yes  | <b>4,88</b>   | 2,11       | 11,30 |
| Job insecurity   | Low  | 1             |            |       |
|  | High   | 0,66          | 0,29       | 1,47  |
| Multiple household income                                  | No   | 1             |            |       |
|  | Yes  | <b>2,33</b>   | 1,06       | 5,12  |

Note. The statistically significant odd ratios are bolded

## 4. Conclusions

### 4.1 *Correlates of main reason for absence*

#### **Mental health group**

Several demographic characteristics were associated with being absent because of mental health problems. Individuals in the age group 36-45 and those who had an academic or higher education (also reflected in job title 'professionals') were more likely to report absent due to mental health problems. On the other hand the age group 46-55, those with up to lower professional education and those with more than 31 years of tenure had significantly lower rates of mental reasons for their absence.

Psychosocial work factors that were highly present in the mental reason for absence group, were high job demands, high co-worker support, high over commitment, low physical demands and a relatively low work-family balance.

Those who were absent for mental health reasons experienced many changes in their life style. Household duties, social leisure activities, involvement in charity work and the quality of social relationships within the house increased. Smoking and alcohol consumption increased as well. Exercise levels were higher and sleeping problems were less common than in other absence groups. Regarding health status, the mental health group experienced relatively high levels of depression, exhaustion, disengagement and stress. They evaluated their physical work ability to be higher than the other groups, while their mental work ability obviously was relatively low.

The total time of absence in the year preceding the current absence was relatively short for the mental health group. Unlike the other absence groups, the current absence was not perceived as something unexpected, but could be regarded as a gradual process. During their absence they felt more detached from work, compared to the other groups.

Obviously, contacts with a psychiatrist or a psychologist were more likely than in other groups. However, over half of the employees that were absent for mental health reasons, had not been in contact with these professionals. Alternative health professionals were visited relatively often as well.

In terms of interventions, it is noteworthy to mention that vocational rehabilitation was offered to 44% of the employees, absent for mental health reasons. In the other groups this percentage was around 30%.

Expectations regarding return to work of the mental health group were not significantly different from those in the other groups. In the follow-up study return to work in the mental health group was achieved by 86% (69% completely, 17% partially), compared to 79% in the overall sample (63% completely, 16%, partially). Compared to the 'comorbid' group return to work percentages were clearly better. Out of all returnees, most people returned to the same job with the same employer (almost 80%).

### **Comorbid group (combination of mental and physical health problem)**

Those who were absent because of a combination of both mental and physical health problems were more likely to be divorced and less likely to be cohabiting. The average income level was also somewhat lower.

Regarding their initial (psychosocial) working conditions, this group was characterized by high job demands, low supervisor support, high emotional demands, low work-family balance, low reward and high job insecurity.

Considering life style changes during absence, those in the comorbid category reported different eating patterns (less eating), and decreased contacts with extended family and friends. Also, the quality of social relationships within the house decreased. Exercise levels, both before and after absence were lower and sleeping problems were more common than in other absence groups.

The health situation of those in the comorbid group was relatively poor. Almost 60% regarded their general health situation to be (very) bad. They were likely to report high levels of depression, high stress, low self-efficacy and low work ability (both mental and physical).

Considering services and interventions, similar to the mental health group, the comorbid group relatively often contacted a psychologist, psychiatrist or alternative health practitioner. Relatively often the manager and health professional contacted each other as well (40%). Compared to the other groups they felt attached to work, during their absence.

Return to work percentages were lower than in the other groups, especially full return to work was less common. The follow-up showed that 72% returned to work (54% completely, 18% partially). Out of all returnees, most people returned to their old job (77%). Relatively often the financial situation was mentioned as an important factor that influenced the decision to return to work.

Finally, the health condition did not improve as much as in the other groups. At follow up still high levels of depression and low levels of self-efficacy and work-ability are found.

## **Physical group**

Those who were absent because of physical reasons only, were more likely to be of intermediate (general or professional) educational level and less likely of higher educational level. This is also reflected in the fact that they were less likely to be in the 'professional' job title category. They were also less likely to be employed in education. They were more likely to be married (and less divorced or widowed) or living in multiple person households, more likely to be in a multiple income household and more likely to have a tenure of over 30 years.

Regarding (psychosocial) working conditions the physical group was characterized by low job demands, a relatively high co-worker and supervisor support, high physical demands and low emotional demands, high work-family balance. Job satisfaction was also high compared to the other diagnostic groups. Work centrality was somewhat lower, however.

Considering life style changes during absence, those in the physical category reported relatively little changes. Only a decrease in household duties and smoking was mentioned.

The health situation of those in the physical group was rather good. When asked to evaluate their general health situation 64% said this was good or even splendid. Compared to the other groups they had low scores on depression, exhaustion and stress, and experienced higher levels of self-efficacy and work ability (mental work ability in particular).

The current absence was relatively often perceived as something unexpected, rather than a gradual process. They were more likely to have had contact with a physiotherapist. However, contact between the manager and the health professional was less likely. During their absence they were less likely to feel detached from work.

Return to work percentages were comparable to that in the mental group. The follow-study showed that 81% returned to work (66% completely, 15% partially). Out of all returnees, most people returned to their old job (89%), which was even higher than in the other groups.

## **4.2 Correlates of stress**

Individuals in the age group 36-45, singles (with only one income) and those with a relatively low income were more likely to experience high levels of stress.

The high stress group evaluated almost all the work-related (psychosocial) factors negatively. The high stress level was associated with high job demands, low job control, low co-worker and supervisor support, high over commitment, job insecurity, emotional demands and cognitive demands, low reward and low job satisfaction. Also, work-family and family-work conflicts were more likely than in the group reporting low stress levels.

With respect to life-style changes during absence the high stress group was more likely to report decreases in social/leisure activities, voluntary work and contacts with extended family or friends. Also a reduced quality of relationships within the household was mentioned more often. High stress levels were associated with increases in smoking and alcohol consumption. Exercise levels, both before and after the absence started, were relatively low compared to the other groups. The high stress group also reported more sleeping problems.

People in the high stress group evaluated their health condition as very poor (almost 70%) and they were more likely to feel that their illness was caused by work (38% versus 28% in overall sample).

Also they rated their work ability as poor (mental work ability in particular).

The high stress group had been absent more often than those with lower stress levels in the year preceding the current absence. Similar to the mental health and comorbid groups the current absence was more likely to be referred to as a gradual process, and not a particular event. During absence they were more likely to feel highly attached to work, compared to the other groups. Return to work policies were less common in organisations that employed employees reporting high levels of stress.

The high stress group was more likely to have had contact with a mental health or alternative health practitioner. Interestingly, relatively few people in the high stress group reported that they have had contact with their manager/supervisor and with their colleagues during the absence (30% no contact versus 18% in the overall sample). This also applies when the high stress group is compared to the 3 diagnostic groups.

Expectations about returning to work were somewhat more negative for the high stress group, but not significantly different. Those experiencing medium or high levels of stress more often expected to return to work in a different job with a different employer, as compared to the low stress group.

Return to work percentages were much lower than in the low stress group and the other diagnostic groups. While almost 80% returned to work in the overall sample, only 52% returned to work in the high stress group (37% completely, 15% partial). Factors that influenced the decision to return to work were partial recovery, the financial situation and the fact that the sick leave benefit ran out.

At follow up the high (and intermediate) stress group still shows high levels of depression, and low levels of self-efficacy and work-ability, compared to the other groups.

### ***4.3 Predicting return to work***

Altogether almost 80% of the persons in the Dutch sample returned to work at the 6 month follow-up, which is quite a lot compared to the other countries that participated in the Stress Impact study (see integrated report). The Dutch situation seems to have improved when these findings are

contrasted with an earlier study by Houtman et al (2002). Over 80% of the returnees returned to the same job, with the same employer.

However, only 18% of the variance in return to work could be explained by the factors that were taken into account in the Stress Impact study. Few factors were able to actually predict work resumption. Five factors were important factors in predicting return to work.

1. First of all, and perhaps most importantly, depressive complaints significantly predicted return to work. The more depressed, the smaller the chances of returning to work. Thus, the mental health condition of absent employees is of great importance in the return to work process. This finding is highly consistent with the main findings in the previous INVENT study by Houtman et al (2002) which was performed in the Netherlands in 1999 (five years before the present study, using a highly comparable research design). In the other countries depression appears to play a less important role. Interestingly enough, the depression scores in the Netherlands are quite low in comparison to the other countries (see integrated report), indicating that it is the development of depressive complaints that is a major threshold for return to work.
2. Secondly, age was a relevant predictor as well. Older employees (46-55) were less likely to return to work. Surprisingly, this effect was not found in the oldest age group (>55). Maybe, particular life-events that are specific to the age group 46-55 account for these differences, rather than limited possibilities in the job situation or the limited ability of employees to keep up with certain job demands or to acquire new skills. On the other hand, selection may have already been quite effective in the age group of 55 years and older. In the Dutch work force of 55 years and older blue collar workers are hardly to be found.
3. Thirdly, early contact with the occupational health care system appears to have positive effects on the return to work process. Being able to intervene at an early stage is actively being promoted in The Netherlands (see: <http://www.werkendperspectief.nl/smartsite.dws?id=187&ct=1> ). The findings of the Stress Impact study support the idea that this approach pays off.
4. A rather surprising finding was the fact that a high family-work balance, which basically means few interference of family with working life, results in a *lower* chance of returning to work. Additional analyses showed that these findings were not confounded by employees who simply lack strong family ties. In this case one might report a high balance, but experience little support in the return to work process as well. Another hypothesis may be that a high family-work balance simply reflects a too supportive family situation, in which one is not sufficiently stimulated to return to work. However, we should also take into account that high family -work balance is particularly found in employees who were absent because of physical health problems, whereas a low family-work balance was found in employees who were absent

because of mental health problems. In the multivariate analyses already depression was a strong inhibitor of return to work, leaving the work-family balance effect to be somewhat spurious.

5. Finally, the chances of returning to work were more than twice as high for people that live in multiple household incomes. This might be an indication that return to work is stimulated more by a supportive *working* partner, rather than by the financial need to start working again.

Altogether, the findings presented above indicate that there are other factors than health related factors only to explain return to work. However, the factor 'work' itself (work content, work characteristics) did not prove to be an important variable itself in predicting return to work in the Netherlands. However, work characteristics may be more important in explaining becoming absent. Personal characteristics, mental health and factors present in the absence period are important for the return to work.

As may have been expected, employees who are absent and report high stress had relatively many contacts with mental health professionals and alternative health practitioners, but they had fewer contacts with their manager or supervisor and with their colleagues during absence (30% had no contact versus 18% in the total sample). In the previous study of INVENT it were particularly the activities of the supervisor or manager that appeared to effectively predict return to work (Houtman and Blatter, 2005). Additionally, recent interventions indicate that explicit and early attention for work and opportunities for a (partial) return to work are found to be highly effective in shortening the absence period (Blonk and Lagerveld, 2003; Bossche & Houtman, 2003; Klink, van der, et. al, 2003). These kind of interventions may more likely be implemented when explicitly involving management or a specially trained occupational health physician than a mental health professional (Blonk & Lagerveld, 2003).

#### **4.4 Recommendations**

Based of the present findings for the Netherlands it can be concluded that return to work can be predicted by several factors. This factors relate to both personal factors and the health situation of employees.

The results of this study emphasize the role of mental health problems and in particular depression in the process of returning to work. Observing these problems at an early stage and intervening adequately might further improve the chances of returning to work. In this respect special attention should be given to those who face the burden of having both mental and physical health problems.

An early contact with the occupational health service might facilitate this process, as is suggested by the study results.



The first results of the Stress Impact study only provide a broad insight in the process of returning to work. Further analyses on subgroups might reveal different barriers for crossing the resumption threshold.

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# Appendix A: Overview of items and scales in the questionnaire

| Variable  | Reference                                   | Reliability ( $\alpha$ ) |
|---|---|--------------------------|
| <b>TIME 1</b>   |   |                          |
| <b>Demographics</b>   |   |                          |
| Gender  |   |                          |
| Age   |   |                          |
| Education   |   |                          |
| Marital status  |   |                          |
| Number of adults in household   |   |                          |
| Number of children in household   |   |                          |
| Number of people working in household   |   |                          |
| Care for elderly/disabled   |   |                          |
| Personal monthly income   |   |                          |
| Household monthly income  |   |                          |
| Ability to make living without returning to work  |   |                          |
| <b>Job characteristics</b>  |   |                          |
| Job title   |   |                          |
| Job tenure  |   |                          |
| Job contract type   |   |                          |
| Private/public sector   |   |                          |
| Work sector specification   |   |                          |
| Size of workplace   |   |                          |
| Availability of sick pay/health insurance/pension at workplace                                  |   |                          |
| Contract work hours   |   |                          |
| Actual work hours   |   |                          |
| <b>Psychosocial work characteristics</b>  |   |                          |
| JCQ-Job Content Questionnaire (modified version)  |   |                          |
| Job Control: 7 items  | Karasek et al., 1998                        | 0.79                     |
| Psychological Job Demands: 5 items  |   | 0.77                     |
| Supervisor Social Support: 4 items  |   | 0.90                     |
| Coworker Social Support: 4 items  |   | 0.77                     |
| Physical Job Demand: 3 items  |   | 0.84                     |
| ERI-Effort Reward Imbalance Scale (modified version)  |   |                          |
| Reward: 8 items   | Siegrist, 1996                              | 0.71                     |
| Overcommitment: 6 items   |   | 0.85                     |
| COPSOQ-Copenhagen Psychosocial Questionnaire (modified version)                                 |   |                          |
| Emotional demands: 4 items  | Kristensen, 2002                            | 0.78                     |
| Cognitive Demands: 3 items (using 2 items from COPSOQ & 1 item from JCQ)                        | Kristensen, 2002<br>Karasek et al., 1998    | 0.84                     |
| MOSI-Masterson Overall Satisfaction Index   |   |                          |
| Job satisfaction: 2 items   | Masterson et al., 2000                      | 0.83                     |
| Work-family balance scale (modified version)  |   |                          |
| Work-family interference: 3 items   | Marmot et al., 1991;<br>Hammer et al., 2004 | 0.73                     |
| Family-work interference: 2 items   |   | 0.80                     |
| QPSNordic-General Questionnaire for Psychological and Social factors at work (modified version) |   |                          |
| Work Centrality index: 2 items  | Lindström et al., 2000                      | 0.61                     |
| <b>Availability of H&amp;S policies, guidelines and health schemes at work</b>                  |   |                          |
| Policies & guidelines: 7 items  |   |                          |
| Health schemes: 6 items   |   |                          |
| <b>Lifestyle</b>  |   |                          |
| Amount of exercise before absence: 3 items  |   |                          |
| Amount of exercise after absence: 3 items   |   |                          |
| PSQI-Pittsburgh Sleep Quality Index: 11 items (modified version)                                | Buysee et al., 2000                         | 0.67                     |
| Sleeping problems: 4 items  |   |                          |
| Life-style changes: 9 items   |   |                          |
| <b>Personality &amp; health characteristics</b>   |   |                          |
| OLBI-Oldenburg Burnout Inventory (full version)   |   |                          |
| Exhaustion: 8 items   | Demerouti et al., 2003                      | 0.86                     |
| Disengagement: 8 items  |   | 0.74                     |
| GSE-Generalized Self-Efficacy scale: 10 items (full version)                                    | Schwarzer & Jerusalem, 1995                 | 0.92                     |



|  |  |      |
|--|--|------|
| CESD-Depression scale: 10 items (short version)                | Radloff, 1977<br>Andresen et al., 1994 | 0.88 |
| Stressfull life-events: 11 items                               |  |      |
| General health status: 1 item                                  |  |      |
| Work ability index (modified version)                          |  |      |
| Medical condition (diagnosis): 16 items                        |  |      |
| Condition work related: 1 item                                 |  |      |
| General work ability: 1 item                                   |  |      |
| Physical work ability: 1 item                                  |  |      |
| Mental work ability: 1 item                                    |  |      |
| Number of previous absences                                    |  |      |
| Length of previous absences                                    |  |      |
| Reason for previous absence                                    |  |      |
| Length of current absence                                      |  |      |
| Main reason for current absence                                |  |      |
| (coded) Diagnosis for absence                                  |  |      |
| Absence: particular event or gradual process                   |  |      |
| Absence: Unexpected event                                      |  |      |
|  |  |      |
| <b>Absence &amp; return to work</b>                            |  |      |
| Main sources household income during absence                   |  |      |
| Experience of absence  |  |      |
| Detached from: 5 items   |  |      |
| Attached to work: 4 items                                      |  |      |
| Have you returned to work                                      |  |      |
| When did you return  |  |      |
| What job after return to work                                  |  |      |
| When do you expect to return to work                           |  |      |
| To what job do you expect to return                            |  |      |
| Likelihood of future labour market position                    |  |      |
|  |  |      |
| <b>Contact with (health) services and professionals</b>        |  |      |
| Contact with services & helpfulness: 11 items                  |  |      |
| Contact with professionals & helpfulness: 13 items             |  |      |
| Contact between professionals                                  |  |      |
| Contact manager and professionals                              |  |      |
| Contact with work organisation/OHS in first month: 4 items     |  |      |
| Contact with work organisation/OHS after first month: 4 items  |  |      |
| Return to work co-ordinator                                    |  |      |
| Job position held open   |  |      |
| How long job position open                                     |  |      |
|  |  |      |
| <b>Interventions</b>   |  |      |
| Medical interventions & helpfulness: 7 items                   |  |      |
| Interventions offered by employer before absence: 11 items     |  |      |
| Interventions offered by employer after absence: 11 items      |  |      |
| Were offered interventions helpful: 11 items                   |  |      |
| Which interventions would help: 11 items                       |  |      |
|  |  |      |
| <b>TIME 2</b>  |  |      |
|  |  |      |
| <b>Demographics</b>  |  |      |
| Marital status   |  |      |
| Number of adults in household                                  |  |      |
| Number of children in household                                |  |      |
| Number of people working in household                          |  |      |
| Personal monthly income  |  |      |
| Household monthly income                                       |  |      |
| Main sources of household income                               |  |      |
|  |  |      |
| <b>Job characteristics (for people that have resumed only)</b> |  |      |
| Job title  |  |      |
| Current job same as before absence                             |  |      |
| Job type   |  |      |
| Private/public sector  |  |      |
| Work sector specification                                      |  |      |
| Size of workplace  |  |      |
|  |  |      |
| <b>Return to work (for people that have resumed only)</b>      |  |      |
| Have you returned to work (for all respondents)                |  |      |
| How many hours do you work                                     |  |      |
| How many weeks since you have returned                         |  |      |
| What date did you return                                       |  |      |
| Relapse to absence   |  |      |
| Factors that influenced return to work                         |  |      |
| Arrangements offered by employer: 5 items                      |  |      |

|   |  |      |
|---|--|------|
| <b>Return to work (for people who are still absent)</b>   |  |      |
| When do you expect to return to work  |  |      |
| To what job do you expect to return   |  |      |
| Factors preventing your return to work  |  |      |
| Contact with work organisation/OHS in past 3 months: 4 items                                    |  |      |
| Arrangements offered by employer & helpfulness: 5 items   |  |      |
| Ability to make living without returning to work  |  |      |
| Likelihood of future labour market position   |  |      |
| <b>Psychosocial work characteristics</b>  |  |      |
| QPSNordic-General Questionnaire for Psychological and Social factors at work (modified version) | Lindström et al., 2000                 | 0.77 |
| Work Centrality index: 2 items  |  |      |
| <b>Lifestyle</b>  |  |      |
| Amount of exercise last month: 3 items  |  |      |
| PSQI-Pittsburgh Sleep Quality Index: 11 items (modified version)                                | Buysee et al., 2000                    | 0.68 |
| Sleeping problems: 4 items  |  |      |
| Life-style changes: 9 items   |  |      |
| <b>Personality &amp; health characteristics</b>   |  |      |
| Stressfull life-events: 11 items  |  |      |
| GSE-Generalized Self-Efficacy scale: 10 items (full version)                                    | Schwarzer & Jerusalem, 1995            | 0.92 |
| Hopkins Symptoms Checklist: 26 items (modified version)   |  |      |
| Somatization: 12 items  | Derogatis et al., 1974                 | 0.87 |
| Anxiety: 6 items  |  | 0.89 |
| Obsessive compulsive: 8 items   |  | 0.92 |
| General health status: 1 item   |  |      |
| CESD-Depression scale: 10 items (short version)   | Radloff, 1977<br>Andresen et al., 1994 | 0.87 |
| Work ability index (modified version)   |  |      |
| Medical condition (diagnosis): 16 items   |  |      |
| General work ability: 1 item  | Tuomi et al., 1998                     |      |
| Physical work ability: 1 item   |  |      |
| Mental work ability: 1 item   |  |      |
| Stress-definition: 1 item   | Elo et al., 2003                       |      |
| Health change   |  |      |
| <b>Contact with (health) services and professionals</b>   |  |      |
| Contact with services & helpfulness: 11 items   |  |      |
| Contact with professionals & helpfulness: 12 items  |  |      |
| Contact between professionals   |  |      |
| Contact manager and professionals   |  |      |
| <b>Interventions &amp; absence experience</b>   |  |      |
| Medical/vocational interventions & helpfulness: 6 items   |  |      |
| Experience of absence   |  |      |
| Detached from: 5 items  | Kivistö & Joensuu, 2001                | 0.81 |
| Attached to work: 4 items   |  | 0.73 |

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## Appendix B: Operationalization of the "stress" concept

One of the most relevant topics of the survey was the measurement of wellbeing or strain, as an outcome of stressful situations. This study has initially focused on its nature and operationalization, setting up a model which built on both current and traditional literature as well as the experience of the research group.

In the original model developed stress is explained as a composite construct mediating between individual and environmental factors. Central issues of this model are the individual's perception and appraisal of the situation as well as their coping abilities and strategies.

From a theoretical point of view stress/strain emerges from the combination of the self appraised mental health (depression) and personality, or the self-appraised self-efficacy experienced at work or for work-related matters; a third factor is the feeling of emotional exhaustion deriving from the job.

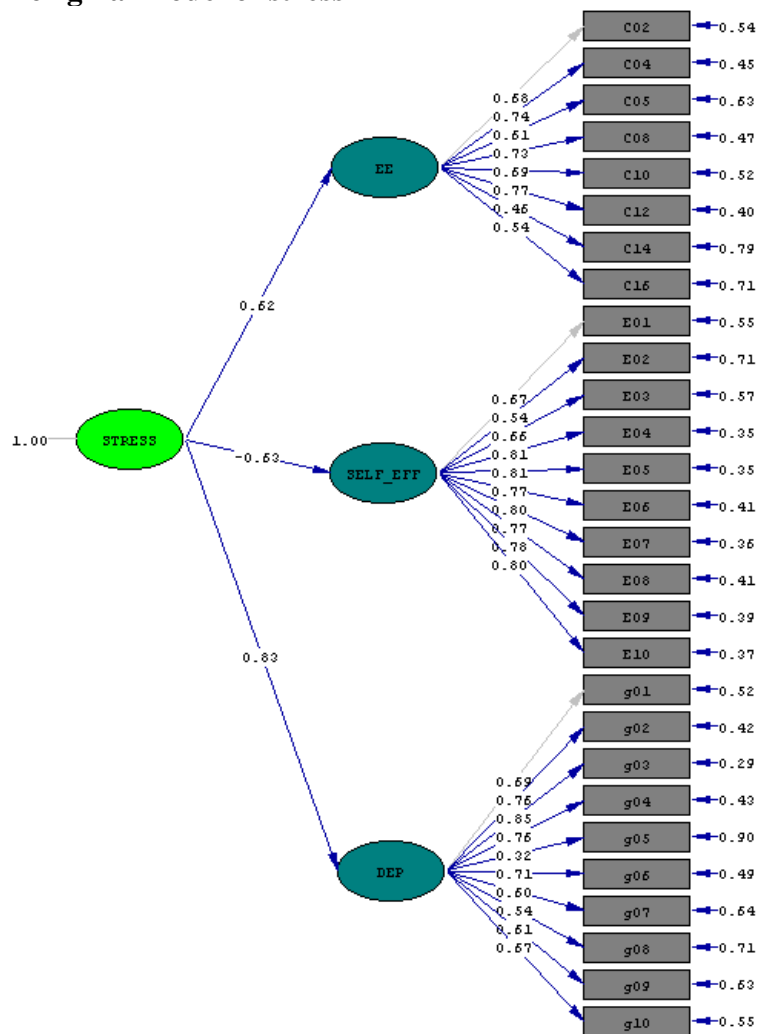
The scientific literature has widely recognized Depression and Emotional Exhaustion as part of the work stress process and outcomes (Duquette, Kerouac, Sandhu & Bedauet, 1994; Rahim & Psenicka, 1996; Rout, Cooper & Rout, 1996 ; Corrigan, Williams & McCracken, 1998; Vilhjalmsson, 1998 ; Vinokur, Pierce & Buck, 1999; Ito, Kurita & Shiiya, 1999; O'Connor, O'Connor, White & Bundred, 2000a; O'Connor, O'Connor, White & Bundred, 2000b; Mackie, Holdhan & Gottlieb, 2001; Tummers, Janssen, Landeweerd & Houkes, 2001).

Only a few studies have seriously considered Self-Efficacy when studying occupational stress. Self-efficacy refers to the confidence in one's ability to behave in a way to produce desirable outcomes; perceived self-efficacy affects how people feel, think and behave (Bandura, 1977). In the case of setbacks, it has been found that people with higher levels of self-efficacy recover quickly and maintain commitments to their goals (Schwarzer, 1992). Although there is scant research on the social determinants of self-efficacy, it has been shown that this concept has an a significant effect in active coping and work-stress models (Gerin, Litt, Deich & Pickering, 1995) and thus may be an integral part of the coping process. In the present model, following Gerin et al, (1995) suggestion, Self-Efficacy has been assessed in terms of a specific situation

A tri-factorial model of stress has been empirically assessed and confirmed using Confirmatory Factor Analysis (CFA) (Joreskog & Sorbom, 1993) (fig. 3.1) and the population of the present study (total sample N= 1994 – Austria = 364; Finland = 492, Ireland = 366, The Netherlands = 405; UK = 367; Italy = 0).

The weights of the general model have been used for the analysis in this present research because they are more stable and therefore reliable.

## An original model of stress



Chi-Square=2379.82, df=347, P-value=0.00000, RMSEA=0.058

## From organizational factors to organizational outcomes: further goodness of Fit indexes.

| $\chi^2/df$ | RMSEA | RMR   | SRMR  | GFI  | AGFI | CFI  | NNFI | CN     |
|-------------|-------|-------|-------|------|------|------|------|--------|
| 2379.82/347 | 0.058 | 0.036 | 0.047 | 0.91 | 0.90 | 0.92 | 0.91 | 320.42 |

The model fits the data both in the combined sample and in the country-specific sample. It can be concluded that the three selected variables – depression, emotional exhaustion and self-efficacy – are part of a latent factor explaining their variance.

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## Appendix C: Breakdown tables for 1) main reason absence, 2) stress and 3) return to work

|                |   | Netherlands             |          |      |       |  |      |        |              |       |     |      |               |      |       |     |        |
|----------------|---|-------------------------|----------|------|-------|--|------|--------|--------------|-------|-----|------|---------------|------|-------|-----|--------|
|                |   | Main reason for absence |          |      |       | Stress (Weighted standardized combination) |      |        | T2. Resumed? |       |     |      | All countries |      |       |     |        |
|                |   | Mental                  | Physical | Both | Total | N  | Low  | Medium | High         | Total | N   | No   | Partial       | Full | Total | N   | N      |
| Demographics   |   |                         |          |      |       |  |      |        |              |       |     |      |               |      |       |     |        |
| Gender         | 1 Male  | 49%                     | 53%      | 48%  | 51%   | 403  | 52%  | 48%    | 58%          | 51%   | 386 | 56%  | 44%           | 51%  | 51%   | 342 | 49%    |
|                | 2 Female  | 51%                     | 47%      | 52%  | 49%   |  | 48%  | 52%    | 42%          | 49%   |     | 44%  | 56%           | 49%  | 49%   |     | 51%    |
| N              |   | -                       | -        | -    | -     |  | -    | -      | -            | -     |     | -    | -             | -    | -     |     | -1.984 |
| Age            | 1 <=35  | 20%                     | 15%      | 15%  | 16%   | 395  | 17%  | 12%    | 20%          | 16%   | 379 | 13%  | 15%           | 15%  | 14%   | 336 | 14%    |
|                | 2 36-45   | 40%▲                    | 27%      | 24%  | 29%   |  | 24%▼ | 36%▲   | 32%          | 29%   |     | 22%  | 31%           | 31%  | 29%   |     | 23%    |
|                | 3 46-55   | 24%▼                    | 41%      | 45%  | 38%   |  | 43%▲ | 31%    | 36%          | 38%   |     | 50%▲ | 36%           | 37%  | 39%   |     | 35%    |
|                | 4 >55   | 16%                     | 17%      | 16%  | 16%   |  | 16%  | 20%    | 13%          | 17%   |     | 15%  | 18%           | 17%  | 17%   |     | 27%    |
| N              |   | -                       | -        | -    | -     |  | -    | -      | -            | -     |     | -    | -             | -    | -     |     | -1.952 |
| Education      | 1 Up to lower professional education              | 18%▼                    | 33%      | 31%  | 29%   | 403  | 25%  | 33%    | 30%          | 28%   | 385 | 46%▲ | 30%           | 24%▼ | 29%   | 342 | 33%    |
|                | 2 Intermediate general and professional education | 26%                     | 36%▲     | 26%  | 31%   |  | 33%  | 28%    | 23%          | 30%   |     | 24%  | 28%           | 30%  | 29%   |     | 32%    |
|                | 3 Completed highschool                            | 12%                     | 8%       | 7%   | 8%    |  | 9%   | 8%     | 7%           | 9%    |     | 3%   | 4%            | 11%▲ | 8%    |     | 10%    |
|                | 4 Higher professional education                   | 27%                     | 19%▼     | 30%  | 24%   |  | 24%  | 22%    | 32%          | 25%   |     | 23%  | 31%           | 25%  | 26%   |     | 17%    |
|                | 5 Academic education and higher                   | 18%▲                    | 5%▼      | 7%   | 8%    |  | 8%   | 9%     | 7%           | 8%    |     | 4%   | 7%            | 9%   | 8%    |     | 7%     |
| N              |   | -                       | -        | -    | -     |  | -    | -      | -            | -     |     | -    | -             | -    | -     |     | -1.983 |
| Marital status | 1 Married   | 62%                     | 74%▲     | 63%  | 68%   | 402  | 69%  | 73%    | 53%▼         | 68%   | 385 | 69%  | 71%           | 71%  | 70%   | 341 | 59%    |
|                | 2 Cohabiting                                      | 11%                     | 11%      | 5%   | 9%    |  | 9%   | 7%     | 12%          | 9%    |     | 7%   | 11%           | 9%   | 9%    |     | 9%     |
|                | 3 Single  | 9%                      | 13%      | 16%  | 13%   |  | 14%  | 8%▼    | 23%▲         | 13%   |     | 11%  | 11%           | 11%  | 11%   |     | 15%    |
|                | 4 Divorced  | 14%                     | 3%▼      | 15%▲ | 9%    |  | 6%   | 11%    | 11%          | 9%    |     | 11%  | 5%            | 7%   | 8%    |     | 14%    |
|                | 5 Widowed   | 4%▲                     | 0%▼      | 2%   | 1%    |  | 2%   | 0%     | 2%           | 1%    |     | 1%   | 2%            | 1%   | 1%    |     | 2%     |
| N              |   | -                       | -        | -    | -     |  | -    | -      | -            | -     |     | -    | -             | -    | -     |     | -1.981 |



|  |   |      |      |      |     |     |     |      |     |      |     |      |     |     |        |
|--|---|------|------|------|-----|-----|-----|------|-----|------|-----|------|-----|-----|--------|
| How many adults, including yourself, live in your household? | 0 One   | 23%  | 9%▼  | 26%▲ | 17% | 16% | 14% | 28%▲ | 17% | 19%  | 10% | 16%  | 16% | 24% |        |
|  | 1 More than one                                     | 77%  | 91%▲ | 74%▼ | 83% | 84% | 86% | 72%▼ | 83% | 81%  | 90% | 84%  | 84% | 76% |        |
| N  |   | -    | -    | -    | -   | 393 | -   | -    | -   | 376  | -   | -    | -   | 335 | -1.950 |
| Children?  | 0 No  | 51%  | 56%  | 64%  | 57% | 55% | 58% | 63%  | 57% | 62%  | 56% | 56%  | 57% | 69% |        |
|  | 1 Yes   | 49%  | 44%  | 36%  | 43% | 45% | 42% | 37%  | 43% | 38%  | 44% | 44%  | 43% | 31% |        |
| N  |   | -    | -    | -    | -   | 395 | -   | -    | -   | 378  | -   | -    | -   | 337 | -1.957 |
| Multiple income?   | 0 No  | 34%  | 19%▼ | 45%▲ | 30% | 27% | 29% | 42%▲ | 30% | 36%  | 30% | 26%  | 29% | 40% |        |
|  | 1 Yes   | 66%  | 81%▲ | 55%▼ | 70% | 73% | 71% | 58%▼ | 70% | 64%  | 70% | 74%  | 71% | 60% |        |
| N  |   | -    | -    | -    | -   | 386 | -   | -    | -   | 369  | -   | -    | -   | 329 | -1.878 |
| Personal average monthly income                              | 1 Less than 899 Euro                                | 7%   | 14%  | 18%  | 14% | 11% | 17% | 13%  | 14% | 22%▲ | 6%  | 11%  | 12% | 33% |        |
|  | 2 900 - 1799 Euro                                   | 59%  | 59%  | 60%  | 59% | 60% | 55% | 65%  | 59% | 57%  | 65% | 59%  | 60% | 51% |        |
|  | 3 1800 Euro or more                                 | 33%  | 27%  | 22%  | 27% | 29% | 28% | 21%  | 27% | 21%  | 29% | 31%  | 28% | 17% |        |
| N  |   | -    | -    | -    | -   | 367 | -   | -    | -   | 353  | -   | -    | -   | 312 | -1.875 |
| Household average monthly income                             | 1 Less than 899 Euro                                | 0%   | 1%   | 6%▲  | 2%  | 1%  | 2%  | 8%▲  | 2%  | 5%   | 0%  | 2%   | 2%  | 16% |        |
|  | 2 900 - 1799 Euro                                   | 28%  | 25%  | 26%  | 26% | 26% | 25% | 27%  | 26% | 26%  | 22% | 25%  | 25% | 29% |        |
|  | 3 1800 Euro or more                                 | 73%  | 74%  | 68%  | 72% | 73% | 73% | 65%  | 72% | 69%  | 78% | 73%  | 73% | 55% |        |
| N  |   | -    | -    | -    | -   | 346 | -   | -    | -   | 336  | -   | -    | -   | 293 | -1.774 |
| Could you make a living without returning to work?           | 0 No  | 86%  | 82%  | 81%  | 83% | 81% | 84% | 89%  | 83% | 83%  | 85% | 82%  | 83% | 66% |        |
|  | 1 Yes   | 14%  | 18%  | 19%  | 17% | 19% | 16% | 11%  | 17% | 17%  | 15% | 18%  | 17% | 34% |        |
| N  |   | -    | -    | -    | -   | 396 | -   | -    | -   | 381  | -   | -    | -   | 337 | -1.896 |
| Care for elderly/disabled?                                   | 0 No  | 94%  | 92%  | 93%  | 93% | 92% | 93% | 94%  | 92% | 90%  | 92% | 92%  | 92% | 89% |        |
|  | 1 Yes   | 6%   | 8%   | 7%   | 7%  | 8%  | 7%  | 6%   | 8%  | 10%  | 8%  | 8%   | 8%  | 11% |        |
| N  |   | -    | -    | -    | -   | 394 | -   | -    | -   | 378  | -   | -    | -   | 336 | -1.959 |
| Job title  | 1 Legislators, senior officials and managers        | 12%  | 12%  | 13%  | 12% | 15% | 6%▼ | 14%  | 12% | 14%  | 15% | 12%  | 13% | 8%  |        |
|  | 2 Professionals                                     | 36%▲ | 19%▼ | 25%  | 24% | 25% | 24% | 26%  | 25% | 14%▼ | 33% | 28%  | 26% | 13% |        |
|  | 3 Technicians and associate professionals           | 8%   | 11%  | 8%   | 10% | 9%  | 15% | 4%   | 10% | 4%   | 5%  | 11%▲ | 9%  | 9%  |        |
|  | 4 Clerks  | 11%  | 11%  | 13%  | 11% | 10% | 10% | 14%  | 11% | 11%  | 9%  | 11%  | 11% | 14% |        |
|  | 5 Service workers and shop and market sales workers | 11%  | 13%  | 11%  | 12% | 10% | 12% | 16%  | 12% | 14%  | 15% | 10%  | 11% | 17% |        |
|  | 6 Skilled agricultural and fishery workers          | 1%   | 1%   | 1%   | 1%  | 1%  | 1%  | 0%   | 1%  | 1%   | 0%  | 0%   | 1%  | 1%  |        |

|                              |  |       |       |     |     |     |     |     |      |     |     |       |     |       |     |     |        |        |
|------------------------------|--|-------|-------|-----|-----|-----|-----|-----|------|-----|-----|-------|-----|-------|-----|-----|--------|--------|
| N                            | 7 Craft and related trades workers           | 12%   | 11%   | 12% | 11% |     | 8%  | 15% | 12%  | 11% |     | 18% ▲ | 15% | 7% ▼  | 11% |     | 14%    |        |
|                              | 8 Plant and machine operators and assemblers | 6%    | 15%   | 10% | 11% |     | 14% | 13% | 4% ▼ | 12% |     | 10%   | 5%  | 14%   | 12% |     | 12%    |        |
|                              | 9 Elementary occupations                     | 4%    | 9%    | 7%  | 7%  |     | 6%  | 4%  | 11%  | 6%  |     | 14% ▲ | 4%  | 6%    | 7%  |     | 12%    |        |
| Contract work hours per week |  |       |       |     | 402 |     |     |     |      |     | 384 |       |     |       |     | 341 | -1.927 |        |
| N                            | 1 35 or less                                 | 47%   | 46%   | 48% | 47% |     | 46% | 46% | 47%  | 46% |     | 52%   | 53% | 44%   | 47% |     | 32%    |        |
|                              | 2 36-40                                      | 52%   | 53%   | 50% | 52% |     | 53% | 54% | 51%  | 53% |     | 48%   | 47% | 54%   | 51% |     | 56%    |        |
|                              | 3 Over 40                                    | 1%    | 1%    | 2%  | 1%  |     | 1%  | 1%  | 2%   | 1%  |     | 0%    | 0%  | 2%    | 1%  |     | 11%    |        |
| Extra hours per week         |  |       |       |     | 402 |     |     |     |      |     | 384 |       |     |       |     | 342 | -1.918 |        |
| N                            | 1 3 or less                                  | 75%   | 71%   | 71% | 72% |     | 68% | 75% | 79%  | 72% |     | 81% ▲ | 64% | 68%   | 70% |     | 74%    |        |
|                              | 2 Over 3                                     | 25%   | 29%   | 29% | 28% |     | 32% | 25% | 21%  | 28% |     | 19% ▼ | 36% | 32%   | 30% |     | 26%    |        |
| Job tenure in categories     |  |       |       |     |     |     |     |     |      |     |     |       |     |       |     |     |        |        |
| N                            | 1 0 to 20                                    | 46%   | 41%   | 38% | 41% |     | 41% | 41% | 43%  | 41% |     | 31%   | 38% | 41%   | 39% |     | 34%    |        |
|                              | 2 21 to 30                                   | 36%   | 24% ▼ | 32% | 29% |     | 31% | 26% | 29%  | 29% |     | 34%   | 31% | 30%   | 31% |     | 28%    |        |
|                              | 3 31 and higher                              | 18% ▼ | 35% ▲ | 29% | 30% |     | 29% | 33% | 29%  | 30% |     | 34%   | 31% | 29%   | 31% |     | 39%    |        |
| Job type                     |  |       |       |     | 395 |     |     |     |      |     | 379 |       |     |       |     | 334 | -1.931 |        |
| N                            | 1 Permanent                                  | 94%   | 93%   | 93% | 93% |     | 94% | 93% | 93%  | 93% |     | 91%   | 93% | 95%   | 94% |     | 88%    |        |
|                              | 2 Temporary                                  | 6%    | 7%    | 7%  | 7%  |     | 6%  | 7%  | 7%   | 7%  |     | 9%    | 7%  | 5%    | 6%  |     | 12%    |        |
|                              | Private/public sector                        |       |       |     |     | 399 |     |     |      |     |     | 384   |     |       |     |     | 340    | -1.845 |
| N                            | 1 Private                                    | 40%   | 49%   | 43% | 45% |     | 44% | 46% | 46%  | 45% |     | 47%   | 48% | 40%   | 42% |     | 65%    |        |
|                              | 2 Public                                     | 37%   | 30%   | 41% | 35% |     | 33% | 37% | 31%  | 34% |     | 36%   | 35% | 36%   | 36% |     | 28%    |        |
|                              | 3 Non-profit                                 | 23%   | 22%   | 17% | 21% |     | 24% | 16% | 23%  | 21% |     | 17%   | 17% | 24%   | 22% |     | 7%     |        |
| Work sector                  |  |       |       |     | 350 |     |     |     |      |     | 339 |       |     |       |     | 299 | -1.831 |        |
| N                            | 1 Agriculture                                | 2%    | 1%    | 3%  | 2%  |     | 2%  | 2%  | 0%   | 2%  |     | 4%    | 2%  | 1%    | 2%  |     | 3%     |        |
|                              | 2 Manufacturing                              | 13%   | 16%   | 9%  | 13% |     | 11% | 14% | 19%  | 13% |     | 14%   | 11% | 12%   | 12% |     | 17%    |        |
|                              | 3 Building                                   | 8%    | 9%    | 11% | 9%  |     | 9%  | 9%  | 9%   | 9%  |     | 14%   | 11% | 7%    | 9%  |     | 10%    |        |
|                              | 4 Trade                                      | 2%    | 9%    | 9%  | 7%  |     | 6%  | 8%  | 11%  | 7%  |     | 11%   | 11% | 6%    | 8%  |     | 13%    |        |
|                              | 5 Hotels & restaurants                       | 1%    | 3%    | 2%  | 2%  |     | 1%  | 1%  | 5% ▲ | 2%  |     | 1%    | 2%  | 0%    | 1%  |     | 6%     |        |
|                              | 6 Transport                                  | 6%    | 11%   | 10% | 9%  |     | 10% | 13% | 2% ▼ | 10% |     | 8%    | 5%  | 13%   | 11% |     | 10%    |        |
|                              | 7 Banking                                    | 9%    | 10%   | 8%  | 9%  |     | 11% | 6%  | 7%   | 9%  |     | 7%    | 9%  | 10%   | 9%  |     | 4%     |        |
|                              | 8 Public administration                      | 19%   | 11%   | 12% | 13% |     | 11% | 15% | 14%  | 13% |     | 8%    | 5%  | 17% ▲ | 13% |     | 6%     |        |
|                              | 9 Education                                  | 21%   | 16% ▼ | 26% | 20% |     | 19% | 21% | 21%  | 20% |     | 21%   | 29% | 19%   | 21% |     | 7%     |        |
|                              | 10 Health                                    | 18%   | 15%   | 8%  | 13% |     | 17% | 10% | 11%  | 13% |     | 10%   | 11% | 14%   | 13% |     | 14%    |        |
|                              | 11 Other community                           | 0%    | 0%    | 0%  | 0%  |     | 0%  | 0%  | 0%   | 0%  |     | 0%    | 0%  | 0%    | 0%  |     | 6%     |        |
|                              | 12 Recreational                              | 0%    | 2%    | 2%  | 1%  |     | 2%  | 1%  | 2%   | 2%  |     | 0%    | 4%  | 2%    | 2%  |     | 2%     |        |
|                              |  |       |       |     | 404 |     |     |     |      |     | 387 |       |     |       |     | 344 | -1.932 |        |

|                                  |          |       |       |       |     |     |       |       |       |     |     |       |       |       |     |     |        |  |
|----------------------------------|----------|-------|-------|-------|-----|-----|-------|-------|-------|-----|-----|-------|-------|-------|-----|-----|--------|--|
| Size of workplace                | 1 1-10   | 10%   | 10%   | 11%   | 10% |     | 10%   | 9%    | 9%    | 10% |     | 15%   | 15%   | 7% ▼  | 10% |     | 27%    |  |
|                                  | 2 11-50  | 24%   | 22%   | 17%   | 21% |     | 20%   | 24%   | 18%   | 21% |     | 26%   | 20%   | 21%   | 22% |     | 31%    |  |
|                                  | 3 >50    | 67%   | 68%   | 72%   | 69% |     | 69%   | 67%   | 73%   | 69% |     | 59%   | 65%   | 72%   | 68% |     | 42%    |  |
| N                                |          | -     | -     | -     | -   | 393 | -     | -     | -     | -   | 379 | -     | -     | -     | -   | 336 | -1.912 |  |
| <b>Psychosocial work factors</b> |          |       |       |       |     |     |       |       |       |     |     |       |       |       |     |     |        |  |
| Demands; 4 items                 | 1 Low    | 35% ▼ | 59% ▲ | 48%   | 50% |     | 59% ▲ | 41% ▼ | 35% ▼ | 50% |     | 50%   | 44%   | 51%   | 50% |     | 40%    |  |
|                                  | 2 Medium | 33%   | 26%   | 17% ▼ | 24% |     | 23%   | 28%   | 23%   | 24% |     | 23%   | 22%   | 25%   | 24% |     | 28%    |  |
|                                  | 3 High   | 33%   | 16% ▼ | 36% ▲ | 25% |     | 18% ▼ | 31%   | 42% ▲ | 26% |     | 27%   | 33%   | 24%   | 26% |     | 31%    |  |
| N                                |          | -     | -     | -     | -   | 396 | -     | -     | -     | -   | 384 | -     | -     | -     | -   | 335 | -1.948 |  |
| Control; 7 items                 | 1 Low    | 16%   | 22%   | 18%   | 19% |     | 13% ▼ | 21%   | 35% ▲ | 19% |     | 24%   | 11%   | 20%   | 20% |     | 35%    |  |
|                                  | 2 Medium | 36%   | 37%   | 42%   | 38% |     | 37%   | 45%   | 30%   | 38% |     | 46%   | 51%   | 34% ▼ | 39% |     | 34%    |  |
|                                  | 3 High   | 48%   | 41%   | 41%   | 42% |     | 50% ▲ | 33% ▼ | 35%   | 43% |     | 30% ▼ | 38%   | 46% ▲ | 41% |     | 31%    |  |
| N                                |          | -     | -     | -     | -   | 396 | -     | -     | -     | -   | 382 | -     | -     | -     | -   | 336 | -1.941 |  |
| Co-worker support; 4 items       | 1 Low    | 38%   | 26% ▼ | 38%   | 32% |     | 27% ▼ | 36%   | 46% ▲ | 32% |     | 41%   | 28%   | 31%   | 32% |     | 40%    |  |
|                                  | 2 Medium | 33% ▼ | 57% ▲ | 41%   | 47% |     | 52% ▲ | 42%   | 37%   | 47% |     | 37% ▼ | 50%   | 52%   | 48% |     | 36%    |  |
|                                  | 3 High   | 29% ▲ | 17%   | 21%   | 21% |     | 21%   | 23%   | 18%   | 21% |     | 22%   | 22%   | 18%   | 19% |     | 24%    |  |
| N                                |          | -     | -     | -     | -   | 395 | -     | -     | -     | -   | 380 | -     | -     | -     | -   | 335 | -1.935 |  |
| Supervisor support; 4 items      | 1 Low    | 32%   | 22% ▼ | 35% ▲ | 28% |     | 21% ▼ | 31%   | 49% ▲ | 28% |     | 26%   | 31%   | 26%   | 27% |     | 35%    |  |
|                                  | 2 Medium | 56%   | 63%   | 53%   | 59% |     | 64% ▲ | 55%   | 46% ▼ | 58% |     | 57%   | 54%   | 62%   | 59% |     | 51%    |  |
|                                  | 3 High   | 12%   | 15%   | 12%   | 13% |     | 15%   | 15%   | 5%    | 13% |     | 17%   | 15%   | 12%   | 14% |     | 13%    |  |
| N                                |          | -     | -     | -     | -   | 395 | -     | -     | -     | -   | 383 | -     | -     | -     | -   | 335 | -1.912 |  |
| Overcommitment; 6 items          | 1 Low    | 26% ▼ | 56% ▲ | 32% ▼ | 42% |     | 57% ▲ | 31% ▼ | 14% ▼ | 42% |     | 44%   | 33%   | 42%   | 41% |     | 33%    |  |
|                                  | 2 Medium | 25%   | 23%   | 31%   | 26% |     | 25%   | 29%   | 19%   | 26% |     | 19%   | 39% ▲ | 25%   | 26% |     | 27%    |  |
|                                  | 3 High   | 49% ▲ | 21% ▼ | 38%   | 32% |     | 18% ▼ | 40% ▲ | 67% ▲ | 32% |     | 37%   | 28%   | 33%   | 33% |     | 40%    |  |
| N                                |          | -     | -     | -     | -   | 398 | -     | -     | -     | -   | 385 | -     | -     | -     | -   | 337 | -1.943 |  |
| Reward; 8 items                  | 1 Low    | 18%   | 19%   | 28% ▲ | 22% |     | 13% ▼ | 27%   | 41% ▲ | 22% |     | 36% ▲ | 11% ▼ | 19%   | 21% |     | 33%    |  |
|                                  | 2 Medium | 50%   | 51%   | 48%   | 50% |     | 48%   | 54%   | 43%   | 49% |     | 42%   | 50%   | 51%   | 49% |     | 43%    |  |
|                                  | 3 High   | 32%   | 30%   | 24%   | 29% |     | 39% ▲ | 19% ▼ | 16% ▼ | 29% |     | 22%   | 39%   | 30%   | 30% |     | 23%    |  |
| N                                |          | -     | -     | -     | -   | 398 | -     | -     | -     | -   | 383 | -     | -     | -     | -   | 337 | -1.938 |  |
| Job insecurity (one item)        | 0 Low    | 72%   | 70%   | 58% ▼ | 67% |     | 80% ▲ | 56% ▼ | 51% ▼ | 68% |     | 46% ▼ | 72%   | 75% ▲ | 68% |     | 57%    |  |
|                                  | 1 High   | 28%   | 30%   | 42% ▲ | 33% |     | 20% ▼ | 44% ▲ | 49% ▲ | 32% |     | 54% ▲ | 28%   | 25% ▼ | 32% |     | 43%    |  |
| N                                |          | -     | -     | -     | -   | 396 | -     | -     | -     | -   | 382 | -     | -     | -     | -   | 335 | -1.934 |  |
| Physical demands; 3 items        | 1 Low    | 71% ▲ | 45% ▼ | 55%   | 54% |     | 57%   | 47%   | 59%   | 54% |     | 43% ▼ | 51%   | 59% ▲ | 54% |     | 35%    |  |
|                                  | 2 Medium | 23% ▼ | 42% ▲ | 39%   | 37% |     | 36%   | 43%   | 30%   | 37% |     | 43%   | 45%   | 33% ▼ | 37% |     | 40%    |  |
|                                  | 3 High   | 6%    | 12% ▲ | 6%    | 9%  |     | 7%    | 11%   | 11%   | 9%  |     | 15%   | 4%    | 8%    | 9%  |     | 25%    |  |
| N                                |          | -     | -     | -     | -   | 396 | -     | -     | -     | -   | 382 | -     | -     | -     | -   | 336 | -1.933 |  |

|   |                           |       |      |      |     |      |      |      |      |      |      |     |     |     |     |        |
|---|---------------------------|-------|------|------|-----|------|------|------|------|------|------|-----|-----|-----|-----|--------|
| Emotional demands; 4 items                                      | 1 Low                     | 39%   | 54%▲ | 39%  | 46% | 47%  | 45%  | 38%  | 45%  | 54%  | 26%▼ | 47% | 45% | 39% |     |        |
|   | 2 Medium                  | 38%   | 32%  | 33%  | 33% | 36%  | 35%  | 27%  | 34%  | 29%  | 46%  | 34% | 35% | 39% |     |        |
|   | 3 High                    | 24%   | 14%▼ | 28%▲ | 20% | 17%  | 20%  | 36%▲ | 21%  | 17%  | 28%  | 19% | 20% | 22% |     |        |
|   | N                         | -     | -    | -    | -   | 401  | -    | -    | -    | -    | 385  | -   | -   | -   | 340 | -1.926 |
| Cognitive demands; 3 items                                      | 1 Low                     | 55%   | 53%  | 45%  | 51% | 54%  | 46%  | 48%  | 51%  | 52%  | 48%  | 53% | 52% | 41% |     |        |
|   | 2 Medium                  | 24%   | 21%  | 25%  | 23% | 23%  | 24%  | 16%  | 23%  | 20%  | 28%  | 23% | 23% | 30% |     |        |
|   | 3 High                    | 21%   | 26%  | 30%  | 26% | 22%▼ | 30%  | 36%  | 27%  | 28%  | 24%  | 25% | 25% | 29% |     |        |
|   | N                         | -     | -    | -    | -   | 401  | -    | -    | -    | -    | 385  | -   | -   | -   | 340 | -1.960 |
| Job satisfaction; 2 items                                       | 1 Low                     | 27%   | 17%▼ | 27%  | 22% | 11%▼ | 29%▲ | 48%▲ | 22%  | 30%▲ | 16%  | 19% | 21% | 44% |     |        |
|   | 2 Medium                  | 59%   | 59%  | 52%  | 57% | 60%  | 55%  | 46%  | 57%  | 48%▼ | 67%  | 60% | 59% | 38% |     |        |
|   | 3 High                    | 14%   | 24%  | 21%  | 21% | 28%▲ | 16%  | 5%▼  | 21%  | 22%  | 16%  | 21% | 20% | 18% |     |        |
|   | N                         | -     | -    | -    | -   | 402  | -    | -    | -    | -    | 385  | -   | -   | -   | 341 | -1.964 |
| Work-family balance; 3 items                                    | 1 Low                     | 18%   | 5%▼  | 23%▲ | 13% | 6%▼  | 16%  | 30%▲ | 13%  | 16%  | 15%  | 11% | 13% | 24% |     |        |
|   | 2 Medium                  | 55%▲  | 36%  | 36%  | 40% | 36%▼ | 48%▲ | 42%  | 41%  | 37%  | 42%  | 42% | 41% | 32% |     |        |
|   | 3 High                    | 27%▼  | 60%▲ | 42%  | 48% | 57%▲ | 35%▼ | 28%▼ | 46%  | 47%  | 44%  | 46% | 46% | 44% |     |        |
|   | N                         | -     | -    | -    | -   | 402  | -    | -    | -    | -    | 385  | -   | -   | -   | 343 | -1.967 |
| Family-work balance; 2 items                                    | 1 Low                     | 66%   | 65%  | 66%  | 66% | 57%▼ | 77%▲ | 66%  | 65%  | 60%  | 69%  | 69% | 68% | 46% |     |        |
|   | 2 Medium                  | 34%   | 35%  | 34%  | 34% | 43%▲ | 23%▼ | 34%  | 35%  | 40%  | 31%  | 31% | 32% | 54% |     |        |
|   | N                         | -     | -    | -    | -   | 395  | -    | -    | -    | -    | 379  | -   | -   | -   | 336 | -1.918 |
|   | Work centrality; 2 items  | 1 Low | 34%  | 42%▲ | 31% | 37%  | 39%  | 34%  | 34%  | 37%  | 43%  | 36% | 36% | 37% | 37% |        |
| N   | 2 Medium                  | 49%   | 46%  | 52%  | 49% | 48%  | 51%  | 48%  | 49%  | 42%  | 49%  | 49% | 47% | 41% |     |        |
|   | 3 High                    | 17%   | 12%  | 17%  | 14% | 13%  | 16%  | 18%  | 14%  | 15%  | 15%  | 15% | 15% | 21% |     |        |
|   | N                         | -     | -    | -    | -   | 395  | -    | -    | -    | -    | 381  | -   | -   | -   | 335 | -1.955 |
| <b>Policies</b>   |                           |       |      |      |     |      |      |      |      |      |      |     |     |     |     |        |
| Are there organizational policies? ...health and safety policy? | 0 No                      | 61%   | 61%  | 66%  | 63% | 61%  | 63%  | 61%  | 62%  | 70%  | 60%  | 61% | 63% | 31% |     |        |
|   | 1 Yes                     | 39%   | 39%  | 34%  | 37% | 39%  | 37%  | 39%  | 38%  | 30%  | 40%  | 39% | 37% | 69% |     |        |
|   | N                         | -     | -    | -    | -   | 403  | -    | -    | -    | -    | 386  | -   | -   | -   | 343 | -1.980 |
|   | ...return to work policy? | 0 No  | 45%  | 51%  | 45% | 48%  | 41%▼ | 49%  | 63%▲ | 47%  | 57%▲ | 38% | 44% | 45% | 73% |        |
| 1 Yes   |                           | 55%   | 49%  | 55%  | 52% | 59%▲ | 51%  | 37%▼ | 53%  | 43%▼ | 62%  | 56% | 55% | 27% |     |        |
| N   |                           | -     | -    | -    | -   | 403  | -    | -    | -    | -    | 386  | -   | -   | -   | 343 | -1.980 |
| ...sickness absence policy?                                     | 0 No                      | 54%   | 49%  | 54%  | 52% | 47%  | 51%  | 61%  | 51%  | 63%▲ | 49%  | 47% | 51% | 63% |     |        |
|   | 1 Yes                     | 46%   | 51%  | 46%  | 48% | 53%  | 49%  | 39%  | 49%  | 37%▼ | 51%  | 53% | 49% | 37% |     |        |
|   | N                         | -     | -    | -    | -   | 403  | -    | -    | -    | -    | 386  | -   | -   | -   | 343 | -1.980 |

|  |       |      |      |       |      |      |      |      |      |      |      |      |      |     |        |
|--|-------|------|------|-------|------|------|------|------|------|------|------|------|------|-----|--------|
| ...health promotion policy?                                    | 0 No  | 89%  | 90%  | 91%   | 90%  | 89%  | 92%  | 96%  | 91%  | 94%  | 91%  | 88%  | 90%  | 82% |        |
|  | 1 Yes | 11%  | 10%  | 9%    | 10%  | 11%  | 8%   | 4%   | 9%   | 6%   | 9%   | 12%  | 10%  | 18% |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...disability management policy?                               | 0 No  | 100% | 100% | 100%  | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 88% |        |
|  | 1 Yes | 0%   | 0%   | 0%    | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 12% |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...work-life balance policy?                                   | 0 No  | 100% | 100% | 100%  | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 94% |        |
|  | 1 Yes | 0%   | 0%   | 0%    | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 6%  |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...other policies?   | 0 No  | 94%  | 96%  | 97%   | 96%  | 96%  | 97%  | 95%  | 96%  | 93%  | 95%  | 98%▲ | 97%  | 97% |        |
|  | 1 Yes | 6%   | 4%   | 3%    | 4%   | 4%   | 3%   | 5%   | 4%   | 7%   | 5%   | 2%▼  | 3%   | 3%  |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| Did you participate in... periodic health screening all staff? | 0 No  | 80%  | 80%  | 88%   | 82%  | 82%  | 81%  | 86%  | 82%  | 83%  | 87%  | 81%  | 83%  | 66% |        |
|  | 1 Yes | 20%  | 20%  | 12%   | 18%  | 18%  | 19%  | 14%  | 18%  | 17%  | 13%  | 19%  | 17%  | 34% |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...periodic health screening at-risk staff?                    | 0 No  | 96%  | 96%  | 100%▲ | 97%  | 98%  | 97%  | 96%  | 97%  | 99%  | 98%  | 97%  | 98%  | 92% |        |
|  | 1 Yes | 4%   | 4%   | 0%▼   | 3%   | 2%   | 3%   | 4%   | 3%   | 1%   | 2%   | 3%   | 2%   | 8%  |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...staff counselling support?                                  | 0 No  | 84%  | 94%▲ | 86%   | 89%  | 90%  | 88%  | 88%  | 89%  | 87%  | 89%  | 89%  | 89%  | 89% |        |
|  | 1 Yes | 16%  | 6%▼  | 14%   | 11%  | 10%  | 12%  | 12%  | 11%  | 13%  | 11%  | 11%  | 11%  | 11% |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...stress control or prevention programmes?                    | 0 No  | 94%  | 94%  | 90%   | 93%  | 93%  | 92%  | 93%  | 93%  | 96%  | 96%  | 90%  | 92%  | 95% |        |
|  | 1 Yes | 6%   | 6%   | 10%   | 7%   | 7%   | 8%   | 7%   | 7%   | 4%   | 4%   | 10%  | 8%   | 5%  |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...flexible work arrangements?                                 | 0 No  | 85%  | 87%  | 92%   | 88%  | 86%  | 90%  | 91%  | 88%  | 89%  | 93%  | 90%  | 90%  | 85% |        |
|  | 1 Yes | 15%  | 13%  | 8%    | 12%  | 14%  | 10%  | 9%   | 12%  | 11%  | 7%   | 10%  | 10%  | 15% |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| ...company sponsored exercise?                                 | 0 No  | 96%  | 93%  | 96%   | 95%  | 93%  | 96%  | 98%  | 95%  | 99%  | 96%  | 92%▼ | 94%  | 88% |        |
|  | 1 Yes | 4%   | 7%   | 4%    | 5%   | 7%   | 4%   | 2%   | 5%   | 1%   | 4%   | 8%▲  | 6%   | 12% |        |
| N  |       | -    | -    | -     | -    | 403  | -    | -    | -    | 386  | -    | -    | -    | 343 | -1.980 |
| <b>Life-style</b>  |       |      |      |       |      |      |      |      |      |      |      |      |      |     |        |

|  |                  |      |      |      |     |      |     |      |     |      |      |      |     |     |     |
|--|------------------|------|------|------|-----|------|-----|------|-----|------|------|------|-----|-----|-----|
| Since my absence... the working hours of my spouse/partner have... | 1 Decreased      | 9%   | 7%   | 7%   | 7%  | 7%   | 7%  | 9%   | 7%  | 7%   | 8%   | 7%   | 7%  | 8%  |     |
|  | 2 Not changed    | 46%  | 57%▲ | 37%▼ | 49% | 55%▲ | 42% | 38%  | 48% | 35%▼ | 56%  | 55%  | 51% | 57% |     |
|  | 3 Increased      | 2%   | 6%   | 3%   | 4%  | 3%   | 5%  | 5%   | 4%  | 8%   | 4%   | 3%   | 4%  | 10% |     |
|  | 4 Not applicable | 42%  | 31%▼ | 53%▲ | 40% | 35%▼ | 46% | 47%  | 40% | 49%▲ | 33%  | 35%  | 38% | 25% |     |
|  | N                | -    | -    | -    | -   | 399  | -   | -    | -   | -    | 382  | -    | -   | -   | 339 |
| ...my household duties have...                                     | 1 Decreased      | 11%▼ | 35%▲ | 25%  | 27% | 27%  | 29% | 25%  | 27% | 30%  | 34%  | 24%  | 26% | 33% |     |
|  | 2 Not changed    | 57%  | 47%  | 45%  | 49% | 52%  | 47% | 39%  | 49% | 32%▼ | 47%  | 54%▲ | 49% | 41% |     |
|  | 3 Increased      | 24%▲ | 7%▼  | 13%  | 12% | 9%▼  | 15% | 20%  | 13% | 20%▲ | 11%  | 11%  | 13% | 23% |     |
|  | 4 Not applicable | 8%   | 11%  | 17%  | 12% | 11%  | 10% | 16%  | 11% | 18%  | 8%   | 12%  | 12% | 4%  |     |
|  | N                | -    | -    | -    | -   | 401  | -   | -    | -   | -    | 384  | -    | -   | -   | 341 |
| ...my social/leisure activities have...                            | 1 Decreased      | 29%▼ | 46%  | 48%  | 43% | 37%▼ | 46% | 61%▲ | 43% | 54%▲ | 43%  | 36%▼ | 41% | 55% |     |
|  | 2 Not changed    | 42%  | 39%  | 29%▼ | 37% | 43%▲ | 37% | 16%▼ | 37% | 30%  | 28%  | 43%▲ | 38% | 27% |     |
|  | 3 Increased      | 25%▲ | 8%▼  | 14%  | 13% | 15%  | 12% | 14%  | 14% | 7%▼  | 25%▲ | 15%  | 15% | 16% |     |
|  | 4 Not applicable | 4%   | 7%   | 8%   | 6%  | 6%   | 6%  | 9%   | 6%  | 10%  | 4%   | 6%   | 7%  | 2%  |     |
|  | N                | -    | -    | -    | -   | 401  | -   | -    | -   | -    | 384  | -    | -   | -   | 341 |
| ...my alcohol consumption has...                                   | 1 Decreased      | 8%   | 13%  | 18%  | 13% | 16%  | 9%  | 14%  | 14% | 7%   | 26%▲ | 11%  | 13% | 29% |     |
|  | 2 Not changed    | 48%  | 47%  | 37%  | 44% | 46%  | 49% | 30%▼ | 45% | 34%▼ | 37%  | 54%▲ | 47% | 45% |     |
|  | 3 Increased      | 13%▲ | 2%▼  | 4%   | 5%  | 4%   | 2%  | 14%▲ | 5%  | 11%▲ | 6%   | 3%▼  | 5%  | 9%  |     |
|  | 4 Not applicable | 31%  | 39%  | 41%  | 38% | 33%  | 40% | 41%  | 37% | 47%▲ | 31%  | 32%  | 35% | 17% |     |
|  | N                | -    | -    | -    | -   | 401  | -   | -    | -   | -    | 383  | -    | -   | -   | 340 |
| ...my smoking has...   | 1 Decreased      | 2%▼  | 11%▲ | 7%   | 8%  | 9%   | 8%  | 4%   | 8%  | 7%   | 9%   | 7%   | 7%  | 16% |     |
|  | 2 Not changed    | 17%  | 22%  | 26%  | 22% | 20%  | 27% | 16%  | 22% | 10%▼ | 17%  | 27%▲ | 22% | 30% |     |
|  | 3 Increased      | 13%▲ | 3%▼  | 9%   | 7%  | 4%▼  | 8%  | 16%▲ | 7%  | 17%▲ | 9%   | 2%▼  | 7%  | 16% |     |
|  | 4 Not applicable | 67%  | 65%  | 58%  | 63% | 67%  | 57% | 64%  | 63% | 65%  | 65%  | 64%  | 64% | 39% |     |
|  | N                | -    | -    | -    | -   | 398  | -   | -    | -   | -    | 381  | -    | -   | -   | 338 |
| ...my eating has...  | 1 Decreased      | 15%  | 14%  | 24%▲ | 17% | 15%  | 15% | 31%▲ | 17% | 24%▲ | 21%  | 12%▼ | 16% | 26% |     |
|  | 2 Not changed    | 64%  | 63%  | 55%  | 61% | 64%  | 65% | 41%▼ | 61% | 38%▼ | 57%  | 71%▲ | 62% | 52% |     |
|  | 3 Increased      | 19%  | 11%  | 15%  | 14% | 10%▼ | 16% | 26%▲ | 14% | 25%▲ | 19%  | 10%▼ | 15% | 20% |     |
|  | 4 Not applicable | 1%▼  | 12%▲ | 6%   | 8%  | 12%▲ | 3%▼ | 2%   | 8%  | 13%  | 4%   | 7%   | 8%  | 2%  |     |
|  | N                | -    | -    | -    | -   | 401  | -   | -    | -   | -    | 383  | -    | -   | -   | 341 |
| ...contacts with extended family and friends have...               | 1 Decreased      | 16%  | 7%▼  | 22%▲ | 13% | 7%▼  | 11% | 44%▲ | 14% | 17%  | 17%  | 11%  | 13% | 24% |     |
|  | 2 Not changed    | 58%  | 75%▲ | 58%▼ | 66% | 71%▲ | 72% | 33%▼ | 66% | 56%▼ | 67%  | 70%  | 67% | 52% |     |
|  | 3 Increased      | 25%  | 14%▼ | 19%  | 18% | 18%  | 15% | 21%  | 17% | 23%  | 17%  | 15%  | 17% | 23% |     |
|  | 4 Not applicable | 1%   | 5%▲  | 2%   | 3%  | 4%   | 2%  | 2%   | 3%  | 4%   | 0%   | 4%   | 3%  | 1%  |     |
|  | N                | -    | -    | -    | -   | -    | -   | -    | -   | -    | -    | -    | -   | -   | -   |

|                         |  |              |      |      |      |      |      |      |      |      |      |      |      |      |     |     |        |
|-------------------------|--|--------------|------|------|------|------|------|------|------|------|------|------|------|------|-----|-----|--------|
| N                       | ...the quality of social relationships within the house has... | -            | -    | -    | -    | 403  | -    | -    | -    | -    | 386  | -    | -    | -    | -   | 342 | -1.936 |
|                         | 1 Decreased  | 14%          | 7%▼  | 17%▲ | 12%  |      | 7%▼  | 11%  | 28%▲ | 12%  |      | 19%▲ | 19%  | 8%▼  | 12% |     | 16%    |
|                         | 2 Not changed  | 47%▼         | 77%▲ | 55%▼ | 64%  |      | 71%▲ | 63%  | 39%▼ | 64%  |      | 52%▼ | 63%  | 70%▲ | 65% |     | 57%    |
|                         | 3 Increased  | 31%▲         | 7%▼  | 18%  | 16%  |      | 14%  | 19%  | 14%  | 16%  |      | 16%  | 17%  | 14%  | 15% |     | 20%    |
|                         | 4 Not applicable   | 8%           | 9%   | 10%  | 9%   |      | 8%   | 7%   | 19%▲ | 9%   |      | 13%  | 2%   | 7%   | 8%  |     | 7%     |
| N                       | ...my involvement in charity/voluntary work has...             | -            | -    | -    | -    | 400  | -    | -    | -    | -    | 384  | -    | -    | -    | -   | 339 | -1.849 |
|                         | 1 Decreased  | 14%          | 11%  | 13%  | 12%  |      | 9%▼  | 13%  | 23%▲ | 13%  |      | 10%  | 22%▲ | 10%  | 12% |     | 21%    |
|                         | 2 Not changed  | 25%          | 28%  | 21%  | 25%  |      | 30%▲ | 20%  | 21%  | 25%  |      | 16%▼ | 16%  | 31%▲ | 26% |     | 41%    |
|                         | 3 Increased  | 8%▲          | 3%   | 1%   | 3%   |      | 3%   | 5%   | 0%   | 3%   |      | 3%   | 2%   | 3%   | 3%  |     | 6%     |
|                         | 4 Not applicable   | 53%          | 58%  | 66%  | 59%  |      | 57%  | 63%  | 56%  | 59%  |      | 71%▲ | 60%  | 55%  | 59% |     | 32%    |
| N                       | Exercise before absence; 3 items                               | -            | -    | -    | -    | 402  | -    | -    | -    | -    | 384  | -    | -    | -    | -   | 341 | -1.549 |
|                         | 1 Low  | 15%          | 16%  | 28%▲ | 20%  |      | 14%▼ | 23%  | 29%  | 19%  |      | 36%▲ | 13%  | 14%▼ | 19% |     | 38%    |
|                         | 2 Medium   | 32%          | 38%  | 29%  | 34%  |      | 37%  | 27%  | 38%  | 34%  |      | 29%  | 31%  | 37%  | 34% |     | 35%    |
|                         | 3 High   | 53%          | 46%  | 44%  | 47%  |      | 49%  | 49%  | 34%▼ | 47%  |      | 36%▼ | 56%  | 49%  | 47% |     | 27%    |
| N                       | Exercise after absence; 3 items                                | -            | -    | -    | -    | 400  | -    | -    | -    | -    | 385  | -    | -    | -    | -   | 340 | -1.969 |
|                         | 1 Low  | 12%          | 15%  | 29%▲ | 19%  |      | 14%▼ | 19%  | 30%▲ | 18%  |      | 31%▲ | 11%  | 13%▼ | 16% |     | 40%    |
|                         | 2 Medium   | 16%          | 23%  | 22%  | 21%  |      | 21%  | 23%  | 18%  | 22%  |      | 21%  | 24%  | 20%  | 21% |     | 28%    |
|                         | 3 High   | 72%▲         | 62%  | 49%▼ | 60%  |      | 64%  | 58%  | 52%  | 61%  |      | 47%▼ | 65%  | 67%▲ | 63% |     | 32%    |
| N                       | Sleeping problems; 4 items                                     | -            | -    | -    | -    | 400  | -    | -    | -    | -    | 385  | -    | -    | -    | -   | 340 | -1.968 |
|                         | 1 Low  | 52%          | 45%  | 40%  | 45%  |      | 56%▲ | 37%▼ | 21%▼ | 45%  |      | 27%▼ | 43%  | 52%▲ | 45% |     | 30%    |
|                         | 2 Medium   | 36%          | 36%  | 33%  | 35%  |      | 32%  | 41%  | 40%  | 36%  |      | 42%  | 35%  | 33%  | 35% |     | 30%    |
|                         | 3 High   | 12%▼         | 18%  | 27%▲ | 20%  |      | 13%▼ | 22%  | 39%▲ | 19%  |      | 31%▲ | 22%  | 16%▼ | 20% |     | 40%    |
| N                       |  | -            | -    | -    | -    | 402  | -    | -    | -    | -    | 387  | -    | -    | -    | -   | 342 | -1.929 |
| <b>Health condition</b> |  |              |      |      |      |      |      |      |      |      |      |      |      |      |     |     |        |
| N                       | In general my health is...                                     | 0 (Very) bad | 42%  | 36%▼ | 59%▲ | 44%  | 37%▼ | 44%  | 70%▲ | 44%  | 62%▲ | 52%  | 34%▼ | 43%  | 68% |     |        |
|                         | 1 Good or even splendid  | 58%          | 64%▲ | 41%▼ | 56%  | 63%▲ | 56%  | 30%▼ | 56%  | 38%▼ | 48%  | 66%▲ | 57%  | 32%  |     |     |        |
| N                       | Current disease: injury from accident?                         | 0 No         | -    | -    | -    | 404  | -    | -    | -    | -    | 386  | -    | -    | -    | -   | 343 | -1.931 |
|                         | 1 Yes, physicians's opinion                                    | 95%          | 87%  | 91%  | 90%  | 90%  | 89%  | 91%  | 90%  | 92%  | 91%  | 89%  | 90%  | 82%  |     |     |        |
| N                       |  | 5%           | 13%  | 9%   | 10%  | 10%  | 11%  | 9%   | 10%  | 8%   | 9%   | 11%  | 10%  | 18%  |     |     |        |
| N                       |  | -            | -    | -    | -    | 405  | -    | -    | -    | -    | 387  | -    | -    | -    | -   | 344 | -1.989 |

|  |                             |      |      |      |     |      |      |      |     |      |      |      |     |     |        |
|--|-----------------------------|------|------|------|-----|------|------|------|-----|------|------|------|-----|-----|--------|
| ...back pain problems?                       | 0 No                        | 95%▲ | 75%▼ | 88%  | 83% | 80%▼ | 85%  | 96%▲ | 84% | 83%  | 89%  | 82%  | 83% | 65% |        |
|  | 1 Yes, physicians's opinion | 5%▼  | 25%▲ | 12%  | 17% | 20%▲ | 15%  | 4%▼  | 16% | 17%  | 11%  | 18%  | 17% | 35% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...neck, shoulder and arm/hand problems?     | 0 No                        | 98%▲ | 77%▼ | 91%▲ | 85% | 85%  | 84%  | 95%▲ | 86% | 75%▼ | 89%  | 87%  | 85% | 66% |        |
|  | 1 Yes, physicians's opinion | 2%▼  | 23%▲ | 9%▼  | 15% | 15%  | 16%  | 5%▼  | 14% | 25%▲ | 11%  | 13%  | 15% | 34% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...problems at the lower extremities (legs)? | 0 No                        | 94%▲ | 79%▼ | 93%▲ | 87% | 83%▼ | 89%  | 95%  | 87% | 85%  | 91%  | 85%  | 86% | 68% |        |
|  | 1 Yes, physicians's opinion | 6%▼  | 21%▲ | 7%▼  | 13% | 17%▲ | 11%  | 5%   | 13% | 15%  | 9%   | 15%  | 14% | 32% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.988 |
| ...cardiovascular disease?                   | 0 No                        | 98%▲ | 92%  | 88%  | 92% | 90%  | 95%  | 93%  | 92% | 87%▼ | 93%  | 94%  | 93% | 82% |        |
|  | 1 Yes, physicians's opinion | 2%▼  | 8%   | 12%  | 8%  | 10%  | 5%   | 7%   | 8%  | 13%▲ | 7%   | 6%   | 7%  | 18% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.988 |
| ...respiratory disease?                      | 0 No                        | 99%  | 98%  | 98%  | 99% | 99%  | 98%  | 100% | 99% | 97%  | 100% | 99%  | 99% | 88% |        |
|  | 1 Yes, physicians's opinion | 1%   | 2%   | 2%   | 1%  | 1%   | 2%   | 0%   | 1%  | 3%   | 0%   | 1%   | 1%  | 12% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...mental disorder?                          | 0 No                        | 25%▼ | 95%▲ | 51%▼ | 67% | 81%▲ | 57%▼ | 32%▼ | 66% | 69%  | 65%  | 67%  | 67% | 71% |        |
|  | 1 Yes, physicians's opinion | 75%▲ | 5%▼  | 49%▲ | 33% | 19%▼ | 43%▲ | 68%▲ | 34% | 31%  | 35%  | 33%  | 33% | 29% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...neurological or sensory disease?          | 0 No                        | 96%  | 94%  | 87%▼ | 92% | 94%  | 91%  | 86%  | 92% | 86%▼ | 95%  | 94%  | 92% | 89% |        |
|  | 1 Yes, physicians's opinion | 4%   | 6%   | 13%▲ | 8%  | 6%   | 9%   | 14%  | 8%  | 14%▲ | 5%   | 6%   | 8%  | 11% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...digestive disease?                        | 0 No                        | 100% | 98%  | 98%  | 99% | 99%  | 99%  | 98%  | 99% | 97%  | 98%  | 100% | 99% | 90% |        |
|  | 1 Yes, physicians's opinion | 0%   | 2%   | 2%   | 1%  | 1%   | 1%   | 2%   | 1%  | 3%   | 2%   | 0%   | 1%  | 10% |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...genitourinary disease?                    | 0 No                        | 100% | 97%  | 98%  | 98% | 98%  | 98%  | 96%  | 98% | 99%  | 100% | 96%  | 97% | 94% |        |
|  | 1 Yes, physicians's opinion | 0%   | 3%   | 2%   | 2%  | 2%   | 2%   | 4%   | 2%  | 1%   | 0%   | 4%   | 3%  | 6%  |        |
| N  |                             | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.989 |
| ...skin disease?                             | 0 No                        | 99%  | 98%  | 99%  | 99% | 99%  | 100% | 96%  | 99% | 99%  | 100% | 99%  | 99% | 93% |        |



|   |                             |      |      |      |     |     |      |      |      |     |     |      |      |      |     |     |        |
|---|-----------------------------|------|------|------|-----|-----|------|------|------|-----|-----|------|------|------|-----|-----|--------|
| N | 1 Yes, physicians's opinion | 1%   | 2%   | 1%   | 1%  | 405 | 1%   | 0%   | 4%   | 1%  | 387 | 1%   | 0%   | 1%   | 1%  | 7%  | -1.988 |
|   | 0 No                        | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -      |
| N | 1 Yes, physicians's opinion | 99%  | 94%  | 93%  | 95% | 405 | 94%  | 94%  | 98%  | 95% | 387 | 99%  | 87%▼ | 96%  | 95% | 91% | -1.988 |
|   | 0 No                        | 1%   | 6%   | 7%   | 5%  | -   | 6%   | 6%   | 2%   | 5%  | -   | 1%   | 13%▲ | 4%   | 5%  | 9%  | -1.988 |
| N | 1 Yes, physicians's opinion | -    | -    | -    | -   | 405 | -    | -    | -    | -   | 387 | -    | -    | -    | -   | -   | -      |
|   | 0 No                        | 100% | 97%  | 97%  | 98% | -   | 98%  | 100% | 95%  | 98% | -   | 97%  | 98%  | 98%  | 98% | 92% | -1.989 |
| N | 1 Yes, physicians's opinion | 0%   | 3%   | 3%   | 2%  | 405 | 2%   | 0%   | 5%   | 2%  | 387 | 3%   | 2%   | 2%   | 2%  | 8%  | -1.989 |
|   | 0 No                        | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -      |
| N | 1 Yes, physicians's opinion | 99%  | 98%  | 99%  | 99% | 405 | 99%  | 98%  | 98%  | 98% | 387 | 99%  | 96%  | 100% | 99% | 96% | -1.989 |
|   | 0 No                        | 1%   | 2%   | 1%   | 1%  | -   | 1%   | 2%   | 2%   | 2%  | -   | 1%   | 4%   | 0%   | 1%  | 4%  | -1.989 |
| N | 1 Yes, physicians's opinion | -    | -    | -    | -   | 405 | -    | -    | -    | -   | 387 | -    | -    | -    | -   | -   | -      |
|   | 0 No                        | 100% | 99%  | 98%  | 99% | -   | 99%  | 99%  | 100% | 99% | -   | 100% | 98%  | 99%  | 99% | 97% | -1.989 |
| N | 1 Yes, physicians's opinion | 0%   | 1%   | 2%   | 1%  | 405 | 1%   | 1%   | 0%   | 1%  | 387 | 0%   | 2%   | 1%   | 1%  | 3%  | -1.989 |
|   | 0 No                        | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -      |
| N | 1 Yes, physicians's opinion | 98%  | 96%  | 89%▼ | 94% | 405 | 96%  | 92%  | 96%  | 95% | 387 | 96%  | 98%  | 93%  | 94% | 87% | -1.989 |
|   | 0 No                        | 2%   | 4%   | 11%▲ | 6%  | -   | 4%   | 8%   | 4%   | 5%  | -   | 4%   | 2%   | 7%   | 6%  | 13% | -1.989 |
| N | 1 Yes, physicians's opinion | -    | -    | -    | -   | 405 | -    | -    | -    | -   | 387 | -    | -    | -    | -   | -   | -      |
|   | 0 No (not at all)           | 69%  | 70%  | 77%  | 72% | 367 | 78%▲ | 67%  | 62%  | 72% | 353 | 64%  | 79%  | 70%  | 70% | 61% | -1.865 |
| N | 1 Yes (entirely)            | 31%  | 30%  | 23%  | 28% | -   | 22%▼ | 33%  | 38%  | 28% | -   | 36%  | 21%  | 30%  | 30% | 39% | -1.865 |
|   | 0 No                        | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -      |
| N | 1 Low                       | 41%▼ | 66%▲ | 39%▼ | 53% | 400 | 84%▲ | 24%▼ | 0%▼  | 52% | 387 | 31%▼ | 36%▼ | 64%▲ | 53% | 35% | -1.941 |
|   | 2 Medium                    | 35%  | 24%▼ | 35%  | 30% | -   | 15%▼ | 60%▲ | 16%▼ | 30% | -   | 34%  | 42%▲ | 25%▼ | 30% | 33% | -1.941 |
| N | 3 High                      | 24%  | 10%▼ | 26%▲ | 18% | -   | 1%▼  | 15%  | 84%▲ | 18% | -   | 34%▲ | 23%  | 10%▼ | 17% | 32% | -1.941 |
|   | 1 Low                       | -    | -    | -    | -   | 400 | -    | -    | -    | -   | 387 | -    | -    | -    | -   | -   | -      |
| N | 2 Medium                    | 37%▼ | 62%▲ | 35%▼ | 48% | 397 | 75%▲ | 22%▼ | 5%▼  | 48% | 387 | 35%▼ | 43%  | 55%▲ | 49% | 37% | -1.955 |
|   | 3 High                      | 32%  | 29%  | 41%▲ | 33% | -   | 22%▼ | 52%▲ | 33%  | 33% | -   | 34%  | 39%  | 30%  | 32% | 33% | -1.955 |
| N | 1 Low                       | 31%▲ | 10%▼ | 25%  | 19% | -   | 3%▼  | 27%▲ | 61%▲ | 19% | -   | 31%▲ | 19%  | 14%▼ | 18% | 30% | -1.955 |
|   | 2 Medium                    | -    | -    | -    | -   | 397 | -    | -    | -    | -   | 387 | -    | -    | -    | -   | -   | -      |
| N | 3 High                      | 40%▼ | 58%  | 54%  | 53% | -   | 70%▲ | 37%▼ | 21%▼ | 52% | -   | 47%  | 56%  | 53%  | 52% | 41% | -1.954 |
|   | 1 Low                       | 33%  | 23%  | 25%  | 26% | 399 | 19%▼ | 33%▲ | 32%  | 26% | 387 | 24%  | 33%  | 25%  | 26% | 29% | -1.954 |
| N | 2 Medium                    | 27%  | 19%  | 21%  | 22% | -   | 11%▼ | 30%▲ | 47%▲ | 22% | -   | 29%  | 11%▼ | 22%  | 22% | 30% | -1.954 |
|   | 3 High                      | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -    | -    | -    | -   | -   | -      |

|   |                                      |      |      |      |     |      |      |      |     |      |      |      |     |     |        |
|---|--------------------------------------|------|------|------|-----|------|------|------|-----|------|------|------|-----|-----|--------|
| General self-efficacy; 10 items             | 1 Low                                | 27%  | 15%▼ | 32%▲ | 23% | 5%▼  | 29%▲ | 68%▲ | 22% | 39%▲ | 19%  | 17%▼ | 22% | 35% |        |
|   | 2 Medium                             | 24%  | 38%▲ | 26%  | 31% | 30%  | 40%▲ | 21%  | 32% | 29%  | 26%  | 34%  | 32% | 34% |        |
|   | 3 High                               | 49%  | 47%  | 41%  | 46% | 65%▲ | 31%▼ | 11%▼ | 46% | 33%▼ | 55%  | 49%  | 46% | 30% |        |
| N   |                                      | -    | -    | -    | -   | 398  | -    | -    | -   | 387  | -    | -    | -   | 338 | -1.964 |
| Stress (Weighted standardized combination)  | 1 Low                                | 39%▼ | 67%▲ | 42%▼ | 53% | 100% | 0%▼  | 0%▼  | 53% | 38%▼ | 42%  | 63%▲ | 55% | 33% |        |
|   | 2 Medium                             | 39%  | 27%▼ | 36%  | 32% | 0%▼  | 100% | 0%▼  | 32% | 29%  | 44%▲ | 29%  | 31% | 35% |        |
|   | 3 High                               | 23%▲ | 6%▼  | 23%▲ | 15% | 0%▼  | 0%▼  | 100% | 15% | 33%▲ | 13%  | 8%▼  | 14% | 32% |        |
| N   |                                      | -    | -    | -    | -   | 387  | -    | -    | -   | 387  | -    | -    | -   | 328 | -1.908 |
| Work ability                                | 1 Incapable (<=3)                    | 33%  | 32%▼ | 51%▲ | 38% | 31%▼ | 43%  | 56%▲ | 38% | 62%▲ | 48%  | 26%▼ | 37% | 49% |        |
|   | 2 Average (4-5)                      | 31%  | 28%  | 25%  | 27% | 25%  | 29%  | 28%  | 27% | 25%  | 30%  | 28%  | 27% | 24% |        |
|   | 3 Optimal (>=6)                      | 36%  | 41%▲ | 25%▼ | 35% | 44%▲ | 29%  | 16%▼ | 35% | 13%▼ | 22%▼ | 47%▲ | 36% | 27% |        |
| N   |                                      | -    | -    | -    | -   | 361  | -    | -    | -   | 347  | -    | -    | -   | 304 | -1.917 |
| Physical work ability                       | 0 Low (4,5 at the original scale)    | 17%▼ | 44%  | 50%▲ | 40% | 35%  | 43%  | 50%  | 40% | 60%▲ | 45%  | 27%▼ | 37% | 62% |        |
|   | 1 High (1,2,3 at the original scale) | 83%▲ | 56%  | 50%▼ | 60% | 65%  | 57%  | 50%  | 60% | 40%▼ | 55%  | 73%▲ | 63% | 38% |        |
| N   |                                      | -    | -    | -    | -   | 362  | -    | -    | -   | 347  | -    | -    | -   | 305 | -1.925 |
| Mental work ability                         | 0 Low (4,5 at the original scale)    | 54%▲ | 17%▼ | 53%▲ | 36% | 23%▼ | 43%  | 71%▲ | 36% | 57%▲ | 45%  | 26%▼ | 35% | 42% |        |
|   | 1 High (1,2,3 at the original scale) | 46%▼ | 83%▲ | 47%▼ | 64% | 77%▲ | 57%  | 29%▼ | 64% | 43%▼ | 55%  | 74%▲ | 65% | 58% |        |
| N   |                                      | -    | -    | -    | -   | 362  | -    | -    | -   | 347  | -    | -    | -   | 304 | -1.923 |
| <b>Absence</b>                              |                                      |      |      |      |     |      |      |      |     |      |      |      |     |     |        |
| Number of previous absences (previous year) | 0 Never-two times                    | 82%  | 82%  | 84%  | 83% | 86%  | 86%  | 68%▼ | 84% | 79%  | 76%  | 87%▲ | 83% | 71% |        |
|   | 1 Three times and more               | 18%  | 18%  | 16%  | 18% | 14%  | 14%  | 32%▲ | 16% | 21%  | 24%  | 13%▼ | 17% | 29% |        |
|   | N                                    |      | -    | -    | -   | -    | 400  | -    | -   | -    | 384  | -    | -   | -   | 340    |
| Time of previous absences (weeks)           | 1 Less than 2 weeks                  | 73%▲ | 59%  | 57%  | 61% | 65%  | 57%  | 62%  | 62% | 52%  | 62%  | 64%  | 61% | 50% |        |
|   | 2 2-4 weeks                          | 6%   | 14%  | 20%  | 14% | 13%  | 16%  | 14%  | 14% | 23%▲ | 11%  | 10%  | 13% | 17% |        |
|   | 3 Over 4 weeks                       | 21%  | 28%  | 23%  | 25% | 22%  | 27%  | 24%  | 24% | 25%  | 27%  | 26%  | 26% | 33% |        |
| N   |                                      | -    | -    | -    | -   | 295  | -    | -    | -   | 284  | -    | -    | -   | 249 | -1.503 |
| Length of current absence                   | 1 0 to 24 weeks                      | 29%  | 32%▲ | 17%▼ | 27% | 35%▲ | 21%▼ | 16%▼ | 28% | 14%▼ | 11%▼ | 37%▲ | 28% | 33% |        |
|   | 2 25-34 weeks                        | 69%  | 66%  | 79%▲ | 70% | 62%▼ | 77%▲ | 81%▲ | 69% | 85%▲ | 84%▲ | 60%▼ | 69% | 37% |        |
|   | 3 35 weeks or more                   | 1%   | 3%   | 4%   | 3%  | 3%   | 2%   | 4%   | 3%  | 1%   | 5%   | 3%   | 3%  | 31% |        |
| N   |                                      | -    | -    | -    | -   | 404  | -    | -    | -   | 386  | -    | -    | -   | 343 | -1.918 |

|   |   |                                |      |      |      |      |      |      |      |      |      |      |      |      |        |
|---|---|--------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|--------|
| Main reason for absence                   | 1 | Mental                         | 100% | 0%▼  | 0%▼  | 21%  | 16%▼ | 26%  | 33%▲ | 21%  | 14%  | 22%  | 23%  | 21%  | 16%    |
|   | 2 | Physical                       | 0%▼  | 100% | 0%▼  | 49%  | 61%▲ | 40%▼ | 19%▼ | 48%  | 46%  | 45%  | 52%  | 50%  | 63%    |
|   | 3 | Both                           | 0%▼  | 0%▼  | 100% | 30%  | 24%▼ | 34%  | 47%▲ | 30%  | 39%▲ | 33%  | 25%▼ | 29%  | 20%    |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.986 |
| Particular event or gradual process?      | 1 | Particular event               | 22%▼ | 44%▲ | 28%  | 35%  | 43%▲ | 27%▼ | 20%▼ | 34%  | 20%▼ | 33%  | 36%▲ | 33%  | 29%    |
|   | 2 | Gradual process                | 78%▲ | 56%▼ | 72%  | 65%  | 57%▼ | 73%▲ | 80%▲ | 66%  | 80%▲ | 67%  | 64%▼ | 67%  | 71%    |
| N   |   |                                | -    | -    | -    | -    | 400  | -    | -    | -    | -    | -    | -    | 341  | -1.898 |
| Unexpected event?                         | 1 | Unexpected event               | 38%▼ | 61%▲ | 53%  | 54%  | 56%  | 52%  | 44%  | 53%  | 51%  | 58%  | 52%  | 53%  | 50%    |
|   | 2 | Something you could see coming | 62%▲ | 39%▼ | 47%  | 46%  | 44%  | 48%  | 56%  | 47%  | 49%  | 42%  | 48%  | 47%  | 50%    |
| N   |   |                                | -    | -    | -    | -    | 399  | -    | -    | -    | -    | -    | -    | 339  | -1.947 |
| Source of income: salary/wage             | 0 | No                             | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 58%    |
|   | 1 | Yes                            | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 42%    |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...social security benefit                | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 46%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 54%    |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...tax credits                            | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 97%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 3%     |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...insurance                              | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 96%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 4%     |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...loans (financial institution/ friends) | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 95%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 5%     |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...benefits                               | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 81%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 19%    |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...savings                                | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 82%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 18%    |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...spouse/partners income                 | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 63%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 37%    |
| N   |   |                                | -    | -    | -    | -    | 405  | -    | -    | -    | -    | -    | -    | 344  | -1.975 |
| ...children's income                      | 0 | No                             | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 96%    |
|   | 1 | Yes                            | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 4%     |

|   |                           |      |      |      |      |     |      |      |      |      |     |      |      |      |      |     |        |
|---|---------------------------|------|------|------|------|-----|------|------|------|------|-----|------|------|------|------|-----|--------|
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.975 |
| ...other source of income   | 0 No                      | 100% | 100% | 100% | 100% |     | 100% | 100% | 100% | 100% |     | 100% | 100% | 100% | 100% |     | 92%    |
|   | 1 Yes                     | 0%   | 0%   | 0%   | 0%   |     | 0%   | 0%   | 0%   | 0%   |     | 0%   | 0%   | 0%   | 0%   |     | 8%     |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.975 |
| Job position held open?   | 1 No                      | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -    | -    | -    | -    |     | 36%    |
|   | 2 Yes, less than 6 months | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -    | -    | -    | -    |     | 5%     |
|   | 3 Yes, more than 6 months | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -    | -    | -    | -    |     | 41%    |
|   | 4 Don't know              | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -    | -    | -    | -    |     | 18%    |
| N   |                           | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -1.397 |
| During absence period had contact with...                             | 0 No                      | 18%  | 12%  | 10%  | 12%  |     | 14%  | 13%  | 7%   | 12%  |     | 11%  | 7%   | 15%  | 13%  |     | 13%    |
| general practitioner  | 1 Yes                     | 82%  | 88%  | 90%  | 88%  |     | 86%  | 87%  | 93%  | 88%  |     | 89%  | 93%  | 85%  | 87%  |     | 87%    |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.986 |
| ...occupational health physician and/or nurse                         | 0 No                      | 11%  | 18%  | 17%  | 16%  |     | 17%  | 14%  | 11%  | 15%  |     | 21%  | 18%  | 13%  | 16%  |     | 57%    |
|   | 1 Yes                     | 89%  | 82%  | 83%  | 84%  |     | 83%  | 86%  | 89%  | 85%  |     | 79%  | 82%  | 87%  | 84%  |     | 43%    |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.986 |
| ...rehabilitation advisor/case manager and/or social security officer | 0 No                      | 92%  | 86%  | 84%  | 87%  |     | 87%  | 85%  | 89%  | 87%  |     | 82%  | 80%  | 90%▲ | 87%  |     | 67%    |
|   | 1 Yes                     | 8%   | 14%  | 16%  | 13%  |     | 13%  | 15%  | 11%  | 13%  |     | 18%  | 20%  | 10%▼ | 13%  |     | 33%    |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.986 |
| ...psychiatrist and/or psychologist                                   | 0 No                      | 54%▼ | 94%▲ | 62%▼ | 76%  |     | 87%▲ | 71%  | 40%▼ | 75%  |     | 66%▼ | 76%  | 80%  | 76%  |     | 75%    |
|   | 1 Yes                     | 46%▲ | 6%▼  | 38%▲ | 24%  |     | 13%▼ | 29%  | 60%▲ | 25%  |     | 34%▲ | 24%  | 20%  | 24%  |     | 25%    |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.986 |
| ...physiotherapist and/or sports physician                            | 0 No                      | 72%▲ | 35%▼ | 55%  | 48%  |     | 43%▼ | 53%  | 61%▲ | 49%  |     | 54%  | 51%  | 47%  | 49%  |     | 63%    |
|   | 1 Yes                     | 28%▼ | 65%▲ | 45%  | 52%  |     | 57%▲ | 47%  | 39%▼ | 51%  |     | 46%  | 49%  | 53%  | 51%  |     | 37%    |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.986 |
| ...alternative health practitioner and/or other professional          | 0 No                      | 58%▼ | 79%▲ | 60%▼ | 69%  |     | 75%▲ | 66%  | 51%▼ | 69%  |     | 63%  | 67%  | 69%  | 67%  |     | 81%    |
|   | 1 Yes                     | 42%▲ | 21%▼ | 40%▲ | 31%  |     | 25%▼ | 34%  | 49%▲ | 31%  |     | 37%  | 33%  | 31%  | 33%  |     | 19%    |
| N   |                           | -    | -    | -    | -    | 405 | -    | -    | -    | -    | 387 | -    | -    | -    | -    | 344 | -1.986 |
| Contact between professionals?  | 1 No contact              | -    | -    | -    | -    |     | -    | -    | -    | -    |     | -    | -    | -    | -    |     | 14%    |

|  |                          |      |      |      |     |      |      |      |     |      |      |      |     |     |        |
|--|--------------------------|------|------|------|-----|------|------|------|-----|------|------|------|-----|-----|--------|
| (not available in Dutch questionnaire)   | 2 Yes, there was contact | -    | -    | -    | -   | -    | -    | -    | -   | -    | -    | -    | -   | 56% | -      |
|  | 3 Do not know            | -    | -    | -    | -   | -    | -    | -    | -   | -    | -    | -    | -   | 29% | -      |
| N  |                          | -    | -    | -    | -   | -    | -    | -    | -   | -    | -    | -    | -   | -   | -1.543 |
| Contact manager and professionals?   | 1 No contact             | 48%  | 60%▲ | 44%▼ | 53% | 59%▲ | 45%▼ | 52%  | 53% | 52%  | 57%  | 51%  | 53% | 51% | -      |
|  | 2 Yes, there was contact | 38%  | 24%▼ | 40%▲ | 32% | 28%  | 38%  | 31%  | 32% | 20%▼ | 31%  | 34%  | 31% | 20% | -      |
|  | 3 Do not know            | 14%  | 15%  | 16%  | 15% | 13%  | 17%  | 17%  | 15% | 28%▲ | 11%  | 14%  | 16% | 30% | -      |
| N  |                          | -    | -    | -    | -   | 395  | -    | -    | -   | 379  | -    | -    | -   | 335 | -1.899 |
| Contact with organisaton during sickness period: manager/supervisor?   | 0 No                     | 14%  | 17%  | 23%  | 18% | 16%  | 16%  | 30%▲ | 18% | 20%  | 16%  | 15%  | 16% | 41% | -      |
|  | 1 Yes                    | 86%  | 83%  | 77%  | 82% | 84%  | 84%  | 70%▼ | 82% | 80%  | 84%  | 85%  | 84% | 59% | -      |
| N  |                          | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.982 |
| ...colleagues?   | 0 No                     | 33%  | 26%  | 36%  | 31% | 25%▼ | 33%  | 44%▲ | 30% | 45%▲ | 25%  | 27%  | 30% | 36% | -      |
|  | 1 Yes                    | 67%  | 74%  | 64%  | 69% | 75%▲ | 67%  | 56%▼ | 70% | 55%▼ | 75%  | 73%  | 70% | 64% | -      |
| N  |                          | -    | -    | -    | -   | 405  | -    | -    | -   | 387  | -    | -    | -   | 344 | -1.982 |
| Is there a specific person in your organisation who is responsible for the coordination of your work-resumption? | 1 Yes                    | 63%  | 61%  | 71%  | 64% | 63%  | 68%  | 67%  | 65% | 62%  | 79%▲ | 63%  | 65% | 36% | -      |
|  | 2 No                     | 13%  | 18%  | 14%  | 16% | 18%  | 11%  | 21%  | 16% | 19%  | 15%  | 15%  | 16% | 37% | -      |
|  | 3 Do not know            | 24%  | 21%  | 14%  | 20% | 19%  | 21%  | 12%  | 19% | 19%  | 6%▼  | 23%▲ | 19% | 28% | -      |
| N  |                          | -    | -    | -    | -   | 394  | -    | -    | -   | 377  | -    | -    | -   | 334 | -1.876 |
| Absence experience: attached to work   | 1 Low                    | 36%  | 42%  | 38%  | 40% | 46%▲ | 34%  | 28%  | 39% | 36%  | 31%  | 41%  | 38% | 40% | -      |
|  | 2 Medium                 | 39%  | 34%  | 24%▼ | 32% | 31%  | 39%  | 25%  | 32% | 31%  | 28%  | 34%  | 32% | 28% | -      |
|  | 3 High                   | 25%  | 23%▼ | 38%▲ | 28% | 24%▼ | 27%  | 47%▲ | 28% | 33%  | 41%▲ | 25%▼ | 29% | 32% | -      |
| N  |                          | -    | -    | -    | -   | 399  | -    | -    | -   | 383  | -    | -    | -   | 339 | -1.937 |
| Absence experience: detached from work   | 1 Low                    | 29%▼ | 57%▲ | 45%  | 47% | 52%▲ | 41%  | 41%  | 47% | 53%  | 42%  | 47%  | 47% | 33% | -      |
|  | 2 Medium                 | 39%  | 31%  | 29%  | 32% | 29%  | 37%  | 34%  | 32% | 24%  | 26%  | 35%  | 32% | 34% | -      |
|  | 3 High                   | 33%▲ | 12%▼ | 26%  | 20% | 18%  | 22%  | 25%  | 20% | 23%  | 32%▲ | 18%▼ | 21% | 33% | -      |
| N  |                          | -    | -    | -    | -   | 398  | -    | -    | -   | 382  | -    | -    | -   | 338 | -1.923 |
| <b>Interventions &amp; work resumption</b>   |                          |      |      |      |     |      |      |      |     |      |      |      |     |     |        |

|  |                                   |      |     |     |     |     |     |     |     |      |      |      |     |     |        |
|--|-----------------------------------|------|-----|-----|-----|-----|-----|-----|-----|------|------|------|-----|-----|--------|
| Interventions before...<br>work arrangements in<br>general? (a and/or b) | 0 No                              | 79%  | 77% | 80% | 78% | 77% | 78% | 80% | 78% | 76%  | 72%  | 80%  | 78% | 69% |        |
|  | 1 Yes                             | 21%  | 23% | 20% | 22% | 23% | 22% | 20% | 22% | 24%  | 28%  | 20%  | 22% | 31% |        |
| N  |                                   | -    | -   | -   | -   | 363 | -   | -   | -   | 350  | -    | -    | -   | 314 | -1.299 |
| ... vocational<br>rehabilitation in general?<br>(c, d, e, h, i and/or j) | 0 No                              | 87%  | 82% | 83% | 83% | 85% | 80% | 82% | 83% | 80%  | 83%  | 84%  | 83% | 74% |        |
|  | 1 Yes                             | 13%  | 18% | 17% | 17% | 15% | 20% | 18% | 17% | 20%  | 17%  | 16%  | 17% | 26% |        |
| N  |                                   | -    | -   | -   | -   | 363 | -   | -   | -   | 350  | -    | -    | -   | 314 | -1.299 |
| ... medical and/or<br>psychological<br>intervention? (f and/or g)        | 0 No                              | 95%  | 92% | 93% | 93% | 94% | 92% | 93% | 93% | 91%  | 98%  | 93%  | 93% | 87% |        |
|  | 1 Yes                             | 5%   | 8%  | 7%  | 7%  | 6%  | 8%  | 7%  | 7%  | 9%   | 2%   | 7%   | 7%  | 13% |        |
| N  |                                   | -    | -   | -   | -   | 363 | -   | -   | -   | 350  | -    | -    | -   | 314 | -1.299 |
| Interventions after... work<br>arrangements in general?<br>(a and/or b)  | 0 No                              | 62%  | 65% | 60% | 63% | 63% | 57% | 69% | 62% | 76%▲ | 51%  | 62%  | 62% | 78% |        |
|  | 1 Yes                             | 38%  | 35% | 40% | 37% | 37% | 43% | 31% | 38% | 24%▼ | 49%  | 38%  | 38% | 22% |        |
| N  |                                   | -    | -   | -   | -   | 363 | -   | -   | -   | 350  | -    | -    | -   | 314 | -1.299 |
| ... vocational<br>rehabilitation in general?<br>(c, d, e, h, i and/or j) | 0 No                              | 56%▼ | 70% | 68% | 66% | 68% | 65% | 64% | 67% | 78%▲ | 64%  | 62%  | 65% | 79% |        |
|  | 1 Yes                             | 44%▲ | 30% | 32% | 34% | 32% | 35% | 36% | 33% | 22%▼ | 36%  | 38%  | 35% | 21% |        |
| N  |                                   | -    | -   | -   | -   | 363 | -   | -   | -   | 350  | -    | -    | -   | 314 | -1.299 |
| ... medical and/or<br>psychological<br>intervention? (f and/or g)        | 0 No                              | 86%  | 91% | 87% | 88% | 90% | 89% | 84% | 89% | 91%  | 79%▼ | 90%  | 89% | 90% |        |
|  | 1 Yes                             | 14%  | 9%  | 13% | 12% | 10% | 11% | 16% | 11% | 9%   | 21%▲ | 10%  | 11% | 10% |        |
| N  |                                   | -    | -   | -   | -   | 363 | -   | -   | -   | 350  | -    | -    | -   | 314 | -1.299 |
| Expect to return to work?  | 1 Yes, within 6<br>months         | 63%  | 68% | 57% | 63% | 69% | 67% | 53% | 65% | 37%▼ | 69%  | 87%▲ | 65% | 38% |        |
|  | 2 Yes, but not within<br>6 months | 23%  | 12% | 21% | 17% | 16% | 19% | 22% | 18% | 29%▲ | 19%  | 7%▼  | 18% | 22% |        |
|  | 3 No                              | 13%  | 21% | 21% | 20% | 15% | 15% | 25% | 17% | 33%▲ | 11%  | 5%▼  | 17% | 40% |        |
| N  |                                   | -    | -   | -   | -   | 163 | -   | -   | -   | 154  | -    | -    | -   | 142 | -1.492 |

|  |                     |     |      |      |     |     |      |      |      |     |     |      |      |      |     |        |
|--|---------------------|-----|------|------|-----|-----|------|------|------|-----|-----|------|------|------|-----|--------|
| What do you expect<br>jobwise: same job same<br>employer?        | 0 No                | 51% | 50%  | 51%  | 50% |     | 44%  | 55%  | 55%  | 50% |     | 55%  | 48%  | 42%  | 47% | 65%    |
|  | 1 Yes               | 49% | 50%  | 49%  | 50% |     | 56%  | 45%  | 45%  | 50% |     | 45%  | 52%  | 58%  | 53% | 35%    |
| N  |                     | -   | -    | -    | -   | 234 | -    | -    | -    | -   | 221 | -    | -    | -    | 198 | -1.596 |
| ...same job different<br>employer?                               | 0 No                | 96% | 97%  | 97%  | 97% |     | 98%  | 98%  | 93%  | 97% |     | 96%  | 100% | 97%  | 97% | 93%    |
|  | 1 Yes               | 4%  | 3%   | 3%   | 3%  |     | 2%   | 2%   | 7%   | 3%  |     | 4%   | 0%   | 3%   | 3%  | 7%     |
| N  |                     | -   | -    | -    | -   | 234 | -    | -    | -    | -   | 221 | -    | -    | -    | 198 | -1.595 |
| ...different job same<br>employer?                               | 0 No                | 87% | 85%  | 87%  | 86% |     | 85%  | 85%  | 86%  | 86% |     | 82%  | 78%  | 92%▲ | 86% | 90%    |
|  | 1 Yes               | 13% | 15%  | 13%  | 14% |     | 15%  | 15%  | 14%  | 14% |     | 18%  | 22%  | 8%▼  | 14% | 10%    |
| N  |                     | -   | -    | -    | -   | 234 | -    | -    | -    | -   | 221 | -    | -    | -    | 198 | -1.595 |
| ...different job different<br>employer?                          | 0 No                | 87% | 90%  | 90%  | 89% |     | 97%▲ | 84%▼ | 84%  | 90% |     | 75%▼ | 88%  | 97%▲ | 88% | 77%    |
|  | 1 Yes               | 13% | 10%  | 10%  | 11% |     | 3%▼  | 16%▲ | 16%  | 10% |     | 25%▲ | 12%  | 3%▼  | 12% | 23%    |
| N  |                     | -   | -    | -    | -   | 234 | -    | -    | -    | -   | 221 | -    | -    | -    | 198 | -1.595 |
| ...none of the above<br>return options                           | 0 No                | 96% | 93%  | 91%  | 93% |     | 94%  | 96%  | 91%  | 94% |     | 88%▼ | 96%  | 98%  | 94% | 69%    |
|  | 1 Yes               | 4%  | 7%   | 9%   | 7%  |     | 6%   | 4%   | 9%   | 6%  |     | 13%▲ | 4%   | 2%   | 6%  | 31%    |
| N  |                     | -   | -    | -    | -   | 234 | -    | -    | -    | -   | 221 | -    | -    | -    | 198 | -1.595 |
| <b>Time 2</b>  |                     |     |      |      |     |     |      |      |      |     |     |      |      |      |     |        |
| T2. Returned to work?  | 1 Yes, completely   | 69% | 66%  | 54%▼ | 63% |     | 74%▲ | 59%  | 37%▼ | 64% |     | 0%▼  | 0%▼  | 100% | 63% | 30%    |
|  | 2 Yes, partially    | 17% | 15%  | 18%  | 16% |     | 12%  | 22%▲ | 15%  | 16% |     | 0%▼  | 100% | 0%▼  | 16% | 10%    |
|  | 3 No, still ill     | 14% | 19%  | 28%▲ | 21% |     | 14%▼ | 18%  | 48%▲ | 20% |     | 100% | 0%▼  | 0%▼  | 21% | 61%    |
| N  |                     | -   | -    | -    | -   | 344 | -    | -    | -    | -   | 328 | -    | -    | -    | 344 | -1.557 |
| T2. Is this the same job<br>as before your absence?              | 1 Same job          | 78% | 89%▲ | 77%  | 83% |     | 85%  | 79%  | 83%  | 82% |     | 100% | 77%  | 84%  | 83% | 73%    |
|  | 2 Other kind of job | 22% | 11%▼ | 23%  | 17% |     | 15%  | 21%  | 17%  | 18% |     | 0%   | 23%  | 16%  | 17% | 27%    |
| N  |                     | -   | -    | -    | -   | 260 | -    | -    | -    | -   | 251 | -    | -    | -    | 256 | 638    |
| T2. Influenced decision to<br>resume work? ... total<br>recovery | 0 No                | 53% | 55%  | 67%  | 58% |     | 49%▼ | 71%▲ | 67%  | 58% |     | 77%  | 98%▲ | 46%▼ | 57% | 68%    |
|  | 1 Yes               | 47% | 45%  | 33%  | 42% |     | 51%▲ | 29%▼ | 33%  | 42% |     | 23%  | 2%▼  | 54%▲ | 43% | 32%    |
| N  |                     | -   | -    | -    | -   | 259 | -    | -    | -    | -   | 250 | -    | -    | -    | 255 | 624    |
| ... partial recovery   | 0 No                | 58% | 60%  | 67%  | 61% |     | 70%▲ | 50%▼ | 54%  | 62% |     | 69%  | 40%▼ | 66%▲ | 62% | 60%    |
|  | 1 Yes               | 42% | 40%  | 33%  | 39% |     | 30%▼ | 50%▲ | 46%  | 38% |     | 31%  | 60%▲ | 34%▼ | 38% | 40%    |
| N  |                     | -   | -    | -    | -   | 259 | -    | -    | -    | -   | 250 | -    | -    | -    | 255 | 624    |
| ... financial situation  | 0 No                | 93% | 96%▲ | 87%▼ | 93% |     | 96%  | 88%▼ | 96%  | 93% |     | 85%  | 94%  | 93%  | 93% | 80%    |
|  | 1 Yes               | 7%  | 4%▼  | 13%▲ | 7%  |     | 4%   | 12%▲ | 4%   | 7%  |     | 15%  | 6%   | 7%   | 7%  | 20%    |
| N  |                     | -   | -    | -    | -   | 259 | -    | -    | -    | -   | 250 | -    | -    | -    | 255 | 624    |

|                                      |                                      |      |      |      |      |      |      |      |      |      |      |      |      |     |       |
|--------------------------------------|--------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|-----|-------|
| ... sick leave benefit ran out       | 0 No                                 | 90%  | 85%  | 84%  | 86%  | 94%▲ | 77%▼ | 71%▼ | 86%  | 77%  | 87%  | 87%  | 86%  | 76% |       |
|                                      | 1 Yes                                | 10%  | 15%  | 16%  | 14%  | 6%▼  | 23%▲ | 29%▲ | 14%  | 23%  | 13%  | 13%  | 14%  | 24% |       |
| N                                    |                                      | -    | -    | -    | -    | 259  | -    | -    | -    | 250  | -    | -    | -    | 255 | 624   |
| ... the need to work                 | 0 No                                 | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 83% |       |
|                                      | 1 Yes                                | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 0%   | 17% |       |
| N                                    |                                      | -    | -    | -    | -    | 259  | -    | -    | -    | 250  | -    | -    | -    | 255 | 624   |
| ... something else                   | 0 No                                 | 95%  | 94%  | 94%  | 94%  | 95%  | 93%  | 92%  | 94%  | 100% | 85%▼ | 96%▲ | 95%  | 90% |       |
|                                      | 1 Yes                                | 5%   | 6%   | 6%   | 6%   | 5%   | 7%   | 8%   | 6%   | 0%   | 15%▲ | 4%▼  | 5%   | 10% |       |
| N                                    |                                      | -    | -    | -    | -    | 259  | -    | -    | -    | 250  | -    | -    | -    | 255 | 624   |
| T2. Personal average monthly income  | 1 Less than 899 Euro                 | 7%   | 12%  | 15%  | 12%  | 9%   | 16%  | 8%   | 11%  | 24%▲ | 0%▼  | 10%  | 11%  | 53% |       |
|                                      | 2 900 - 1799 Euro                    | 54%  | 62%  | 61%  | 60%  | 60%  | 56%  | 72%  | 60%  | 60%  | 70%  | 58%  | 60%  | 37% |       |
|                                      | 3 1800 Euro or more                  | 39%▲ | 26%  | 24%  | 28%  | 31%  | 28%  | 21%  | 28%  | 16%▼ | 30%  | 32%  | 29%  | 10% |       |
| N                                    |                                      | -    | -    | -    | -    | 282  | -    | -    | -    | 274  | -    | -    | -    | 277 | 1.367 |
| T2. Household average monthly income | 1 Less than 899 Euro                 | 0%   | 1%   | 4%▲  | 2%   | 1%   | 1%   | 3%   | 2%   | 6%▲  | 0%   | 1%   | 2%   | 44% |       |
|                                      | 2 900 - 1799 Euro                    | 27%  | 24%  | 26%  | 25%  | 21%  | 28%  | 32%  | 25%  | 33%  | 26%  | 23%  | 25%  | 16% |       |
|                                      | 3 1800 Euro or more                  | 73%  | 75%  | 70%  | 73%  | 78%  | 71%  | 65%  | 74%  | 62%▼ | 74%  | 77%  | 73%  | 40% |       |
| N                                    |                                      | -    | -    | -    | -    | 263  | -    | -    | -    | 255  | -    | -    | -    | 258 | 1.234 |
| T2. Work centrality; 2 items         | 1 Low                                | 38%  | 34%  | 32%  | 34%  | 37%  | 33%  | 30%  | 35%  | 40%  | 33%  | 33%  | 34%  | 43% |       |
|                                      | 2 Medium                             | 46%  | 50%  | 49%  | 49%  | 49%  | 49%  | 50%  | 49%  | 48%  | 51%  | 49%  | 49%  | 35% |       |
|                                      | 3 High                               | 16%  | 15%  | 19%  | 17%  | 14%  | 18%  | 20%  | 16%  | 12%  | 16%  | 18%  | 17%  | 22% |       |
| N                                    |                                      | -    | -    | -    | -    | 320  | -    | -    | -    | 310  | -    | -    | -    | 314 | 1.504 |
| T2. General self-efficacy; 10 items  | 1 Low                                | 27%  | 15%▼ | 29%▲ | 22%  | 8%▼  | 28%  | 55%▲ | 21%  | 46%▲ | 14%  | 15%▼ | 22%  | 34% |       |
|                                      | 2 Medium                             | 17%▼ | 34%  | 34%  | 30%  | 27%  | 37%  | 30%  | 31%  | 22%  | 26%  | 34%  | 31%  | 37% |       |
|                                      | 3 High                               | 56%  | 51%  | 37%▼ | 48%  | 64%▲ | 35%▼ | 16%▼ | 48%  | 31%▼ | 60%  | 50%  | 48%  | 30% |       |
| N                                    |                                      | -    | -    | -    | -    | 324  | -    | -    | -    | 314  | -    | -    | -    | 318 | 1.521 |
| T2. CES-D; 10 items                  | 1 Low                                | 67%  | 75%▲ | 57%▼ | 68%  | 85%▲ | 58%▼ | 27%▼ | 68%  | 38%▼ | 59%  | 81%▲ | 68%  | 49% |       |
|                                      | 2 Medium                             | 22%  | 20%  | 25%  | 22%  | 14%▼ | 32%▲ | 29%  | 22%  | 35%▲ | 31%  | 15%▼ | 22%  | 29% |       |
|                                      | 3 High                               | 12%  | 5%▼  | 18%▲ | 10%  | 1%▼  | 10%  | 44%▲ | 10%  | 27%▲ | 10%  | 5%▼  | 10%  | 23% |       |
| N                                    |                                      | -    | -    | -    | -    | 322  | -    | -    | -    | 312  | -    | -    | -    | 316 | 1.507 |
| T2. Work ability                     | 1 Incapable (<=3)                    | 10%  | 14%  | 22%▲ | 15%  | 10%▼ | 17%  | 30%▲ | 15%  | 55%▲ | 15%  | 2%▼  | 15%  | 39% |       |
|                                      | 2 Average (4-5)                      | 14%  | 16%  | 21%  | 17%  | 11%▼ | 26%▲ | 18%  | 17%  | 27%▲ | 37%▲ | 8%▼  | 17%  | 21% |       |
|                                      | 3 Optimal (>=6)                      | 75%  | 70%  | 57%▼ | 67%  | 78%▲ | 57%▼ | 52%▼ | 68%  | 18%▼ | 48%▼ | 90%▲ | 68%  | 40% |       |
| N                                    |                                      | -    | -    | -    | -    | 326  | -    | -    | -    | 314  | -    | -    | -    | 320 | 1.529 |
| T2. Physical work ability            | 0 Low (4,5 at the original scale)    | 8%▼  | 24%  | 32%▲ | 23%  | 18%▼ | 24%  | 40%▲ | 23%  | 68%▲ | 24%  | 8%▼  | 23%  | 52% |       |
|                                      | 1 High (1,2,3 at the original scale) | 92%▲ | 76%  | 68%▼ | 77%  | 82%▲ | 76%  | 60%▼ | 77%  | 32%▼ | 76%  | 92%▲ | 77%  | 48% |       |



|  |                                      |      |      |      |     |     |      |      |      |     |     |      |     |      |     |     |        |
|--|--------------------------------------|------|------|------|-----|-----|------|------|------|-----|-----|------|-----|------|-----|-----|--------|
| N  |                                      | -    | -    | -    | -   | 321 | -    | -    | -    | -   | 310 | -    | -   | -    | -   | 315 | -1.518 |
| T2. Mental work ability                    | 0 Low (4,5 at the original scale)    | 24%  | 10%▼ | 33%▲ | 19% |     | 10%▼ | 24%  | 40%▲ | 19% |     | 55%▲ | 18% | 8%▼  | 19% |     | 32%    |
|  | 1 High (1,2,3 at the original scale) | 76%  | 90%▲ | 67%▼ | 81% |     | 90%▲ | 76%  | 60%▼ | 81% |     | 45%▼ | 82% | 92%▲ | 81% |     | 68%    |
| N  |                                      | -    | -    | -    | -   | 322 | -    | -    | -    | -   | 311 | -    | -   | -    | -   | 316 | -1.516 |
| T2. Absence experience: attached to work   | 1 Low                                | 40%  | 48%  | 46%  | 46% |     | 53%▲ | 37%▼ | 36%  | 45% |     | 29%▼ | 38% | 53%▲ | 46% |     | 44%    |
|  | 2 Medium                             | 29%  | 22%  | 33%  | 27% |     | 23%  | 34%  | 29%  | 27% |     | 32%  | 28% | 24%  | 26% |     | 26%    |
|  | 3 High                               | 31%  | 29%  | 21%  | 28% |     | 24%  | 29%  | 36%  | 27% |     | 40%▲ | 34% | 22%▼ | 28% |     | 30%    |
| N  |                                      | -    | -    | -    | -   | 316 | -    | -    | -    | -   | 306 | -    | -   | -    | -   | 310 | -1.494 |
| T2. Absence experience: detached from work | 1 Low                                | 29%▼ | 54%▲ | 43%  | 46% |     | 47%  | 47%  | 36%  | 45% |     | 55%  | 43% | 43%  | 46% |     | 33%    |
|  | 2 Medium                             | 31%  | 29%  | 33%  | 30% |     | 29%  | 28%  | 39%  | 30% |     | 20%▼ | 29% | 34%  | 30% |     | 30%    |
|  | 3 High                               | 40%▲ | 17%▼ | 24%  | 24% |     | 24%  | 25%  | 25%  | 24% |     | 26%  | 29% | 23%  | 24% |     | 37%    |
| N  |                                      | -    | -    | -    | -   | 319 | -    | -    | -    | -   | 308 | -    | -   | -    | -   | 313 | -1.484 |

Note. Every marked group is significantly different from the other and/or the comparison group(s). All comparisons are made 'horizontally', i.e., per row.

▲:  $p < 0,05$  for significantly high 'scoring' groups; ▼ for significantly low 'scoring' groups.

Take care: Differences are only marked as being 'significant', when the effect size, recalculated as the corresponding Pearson product-moment correlation coefficient, is AT LEAST 0,10. In effect, '▲' implies:  $p < 0,05$  AND  $r \geq 0,10$ . Correlation coefficients of at least 0,10 are considered to be at least 'small' (but larger than no correlation at all, Cohen, 1977). P-values are highly dependent on sample size; effect sizes like  $r$  are not dependent on sample size.

Cohen, J. (1977). Statistical power analysis for the behavioral sciences. New York: Academic Press.