



Flexible working schedules

Supporting evidence and key findings for the
working-age population JSNA 2017

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1. Overview

This report focuses on different working schedules and looks at the factors that can influence the health and wellbeing of people employed on flexible and non-standard working patterns.

It complements the working-age population (WAP) joint strategic needs assessment (JSNA) final report, which provides analysis of the current and future needs for those aged 16-64 in Lancashire. It uses a wide range of data and resources that can be viewed on the publications section of the [Lancashire Insight](#) web pages.

Rather than take the form of a single document, the WAP JSNA should be regarded as a repository of health and wellbeing-related data and intelligence available for all partners.

Where possible, data and statistics are quoted for the 16-64 population, when this is not available, the age range is clearly identified. Please note, due to the unavailability of certain data, estimates may be used in some instances and not all data are provided at a district level.

The recommendations for the WAP are focused around three areas: healthy people, healthy spaces and healthy workplaces and full details can be found in the [WAP JSNA final report](#).

2. Background information

Having a long, healthy and productive working life will be a necessity due to changes in population demographics, which means fewer young people will be filling the skills gaps. Therefore incorporating flexible working schedules may help employers retain a skilled workforce for longer (see also the [working-age population 50+](#) report).

Flexible working, for the purpose of this report, relates to working patterns which support an individual to remain in work, whether that be in a workplace or other environment. These may incorporate agile working, home working and other arrangements such as reduced hours during school holidays, or voluntary reduced working time ('V' time). **Non-standard working** encompasses a wide range of schedules, including various types of shift work and zero hours contracts.

Non-standard working arrangements, and to a lesser extent flexible working patterns, are becoming more popular due to many factors including changes in the economy, globalisation, increased competition in markets, and technological development and advances. Good quality and satisfying employment (in whatever form) is linked to

positive health outcomes and other material benefits. Conversely poor quality employment and conditions are linked to a range of negative outcomes.^{1,2}

This report will focus on both non-standard and flexible working schedules and the health impacts of both.

3. Flexible working schedules

Flexible working allows an employee to work in a manner which best suits their lifestyle, needs and/or family commitments. It allows a more unstructured working environment, away from a typical '9am – 5pm in the office' working week, with individuals given more autonomy and control over managing their workloads.

Flexible working can have economic benefits for employers, with evidence showing lower sickness absence, increased productivity and more engagement from the workforce. It can also improve staff morale and commitment to the organisation, while attracting high quality recruits. Making adjustments to an employee's tasks and functions, while providing more opportunities for personal growth and control over the work environment often produces positive effects and decreases in health complaints. Low job control and no/little decision authority are key factors associated with sickness absence, disability retirement, unemployment and poorer mental health.³

People who have flexible work schedules are more likely to have higher levels of good health and wellbeing, primarily due to the factors outlined above and the impact of influences outside the workplace, such as easier access to health/care services, many of which are not open or available to working people employed on more traditional 9-5 schedules, or being able to care for a dependent for example.

Not all organisations are set up for flexible working schedules, particularly those which require customer-facing responsibilities, or require close team working. There may be issues within larger organisations where some sections are able to work more flexibly while others are not; this inconsistency may potentially cause resentment and discontent among employees. Conversely, with non-office based working, ensuring people do not become isolated is important to retain a sense of belonging and connectedness to other colleagues and the organisation.

There are no local data around flexible work schedules, particularly in larger organisations, so this may be an area for further investigation.

4. Non-standard working schedules

Non-standard working schedules can take many forms and can include temporary working, part time work, shifts, compressed working*, zero hours contracts and the 'gig' economy.

These can have an impact on health, employment duration, stability of work, earning power, career prospects, training and development opportunities and exposure to poverty. Non-standard working schedules differ across sex, age group and level of education and incorporate a broad range of economically active people.

4.1 Shift work

In the North West approximately 637,000 people (16+ years) work shift patterns, with almost a tenth of these employed exclusively on night shifts and 14.8% working a 'sometimes nights and sometimes days' pattern. The highest percentage was 'other type of shift work', which did not include the shift patterns described below (36.2%).

Table 1: People aged over 16 in employment who do shift work in the North West

	Number of workers in the North West	% of shift workers in the North West	UK total
Three-shift working	54,000	8.5%	486,000
Two-shift system early/late-double day	164,000	25.7%	1,350,000
Sometimes nights sometimes days	94,000	14.8%	778,000
Evening or twilight shifts	33,000	5.2%	298,000
Night shifts	61,000	9.6%	496,000
Other type of shift work	230,000	36.2%	1,939,000
Total employed in shift work	637,000	100.0%	5,346,000
All employed aged over 16	3,234,000	19.7%	30,608,000

Source: ONS Labour Force Survey June 2014

Data from the [health behaviours JSNA \(2015\)](#) show that in Lancashire-12, 8.4% of those aged 16+ worked night shifts. Those in the 25-34 age bracket are more likely to work night shifts (12.5%) compared to those aged 55-64 (6.7%).

At a district level Wyre has the highest percentage of 25-34-year-olds working overnight shifts (25.9%), with Lancaster having the lowest (3.6%). In the 55-64 age group Chorley had the highest percentage (16.4%), compared to Ribble Valley (2.7%). The table below shows the full district breakdown.

* Compressed hours can also be part of flexible working schedules, but for the purposes of this report it has been incorporated into non-standard work patterns.

Table 2: Breakdown of workers who work overnight shifts in Lancashire-12 by district of residence and age group

	Respondents who work and do overnight shifts ¹					
	16-24	25-34	35-44	45-54	55-64	All 16+
Burnley	*	15.5%	7.6%	12.7%	7.6%	9.7%
Chorley	*	7.8%	11.7%	7.6%	16.4%	9.3%
Fylde	0.0%	20.8%	5.9%	6.1%	8.1%	7.3%
Hyndburn	*	11.8%	8.9%	9.3%	6.8%	9.1%
Lancaster	*	3.6%	8.4%	7.3%	7.0%	5.4%
Pendle	*	8.0%	10.1%	14.5%	7.5%	10.9%
Preston	*	13.1%	8.7%	16.3%	2.8%	7.9%
Ribble Valley	*	11.8%	7.1%	4.7%	2.7%	7.4%
Rossendale	*	23.9%	10.5%	13.5%	6.4%	11.9%
South Ribble	*	14.4%	8.7%	8.4%	3.4%	8.9%
West Lancashire	*	6.1%	6.5%	9.1%	4.9%	4.4%
Wyre	*	25.9%	7.0%	4.4%	8.6%	8.3%
Lancashire-12	10.2%	12.5%	8.6%	9.7%	6.7%	8.4%

¹ Figures relate to residence of employee, not residence of business/employer.

* Numbers are too small to be reliable.

Source: health behaviours JSNA questionnaire data, 2015, (excluding Blackburn with Darwen and Blackpool).

4.2 Zero-hours contracts

The focus on zero-hours contracts (ZHC) has increased in recent years, with evidence looking at the experience of workers who are employed on these contracts. They can be advantageous and useful for those who do not need a fixed number of working hours/income to live or support dependents, or those who have flexibility and choice in how and when they work, for example semi-retired/retired individuals or students.

For those on ZHC there can be issues around managing household expenditure and family commitments, both of which can lead to increased stress and poorer health outcomes.⁴ From an employer perspective ZHC can have several benefits including being easier to adjust to variations in demand and better management of risk.

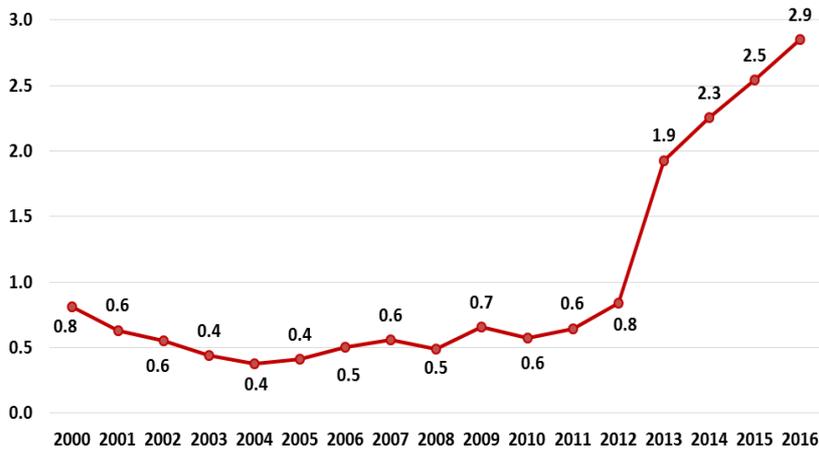
While ZHC are not a new way of working, their use has risen dramatically over the past decade, with 2.4% of males and 3.4% of females employed on a ZHC in the UK (16+).^{5,6} In the North West region it is estimated that 3.0% (102,000) of those in work (16+) are employed on a ZHC (UK 2.9%).

These contracts are utilised in a wide range of sectors including 24.7% across accommodation and food, 21.6% across health and social work and 10.0% across wholesale and retail. These contracts are also more likely in lower socioeconomic

Non-standard and flexible working schedules

positions: 22.9% of people in the 'caring, leisure and other service occupations' sector are on a ZHC, compared to 1.6% of 'managers, directors and senior officials'.⁷

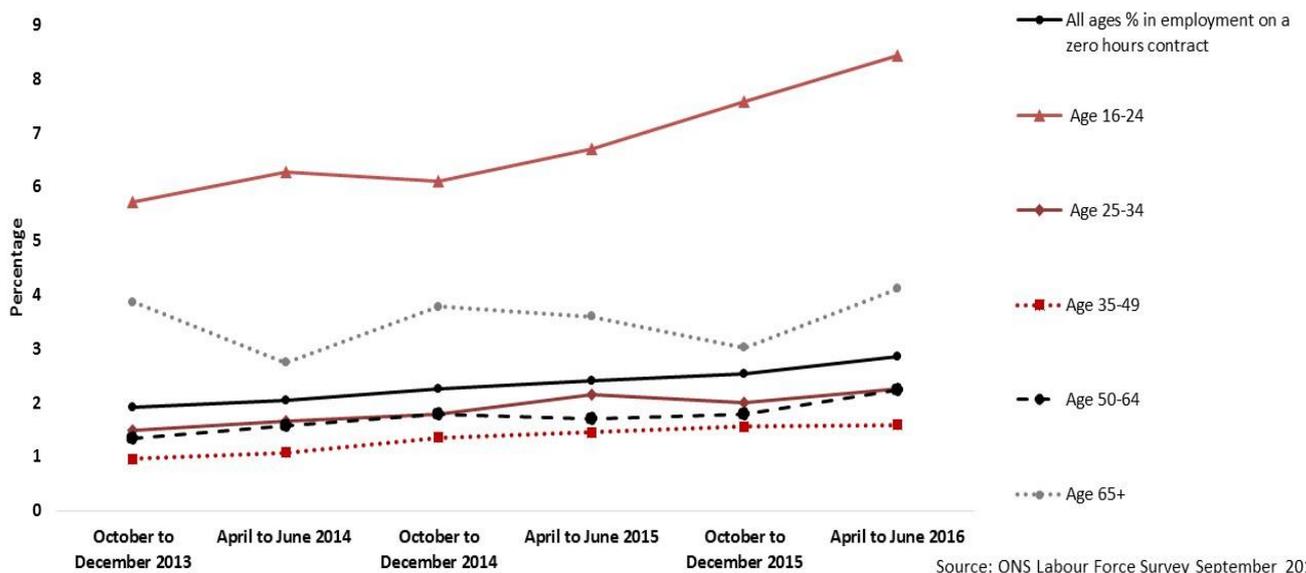
Figure 1: percentage of people 16+ in employment on a zero-hours contract in the UK (2016)



Source: ONS Labour Force Survey September 2016

Looking at the age breakdown across the UK (16+), those aged 16-24 are most likely to be employed on a ZHC (8.4%), followed by those aged 65 and over (4.1%), while those aged 35-49 are least likely (1.6%).

Figure 2: percentage of people on a zero-hours contract by age band in the UK, 2016



Source: ONS Labour Force Survey September 2016

4.3 Effects on health

Non-standard work patterns can have both positive and negative effects on health and wellbeing, depending on the perspective of the individual. Overwhelmingly the evidence suggests employees on shift or non-standard work schedules are significantly more likely to have lower levels of good self-reported health and wellbeing, compared to those on non-flexible schedules.⁸

Most of the evidence around non-standard working patterns focuses on shift work (primarily night shift work). It shows that shift work can raise the risk of cardiovascular disease (CVD), diabetes, obesity, gastrointestinal conditions, disrupted sleep patterns, depression, and increase the risk of accident and injury.

For those classed as long-term shift workers (over 10 years), the risk of CVD increases by 40%, with a raised risk of stroke for those who have worked shifts for 15+ years. Metabolic syndrome[†] is also a risk factor for CVD, and is up to three times more prevalent in night shift workers. In combination with other factors, such as obesity and insulin resistance, metabolic syndrome can also increase the risk of type two diabetes five-fold.⁹ Other evidence shows those on fixed-term contracts have more indicators for metabolic syndrome and CVD when compared to permanent workers.¹⁰

While some of these are associated with lifestyle factors, not all the risk can be explained through an individual's behaviour and is attributed to disruption to the circadian rhythm.[‡] The circadian rhythm affects many functions of the body, including the cardiovascular system, metabolism, digestion, the immune system and hormonal balance.¹¹ An example of this imbalance is obesity, where it has been established that shift workers have lower levels of leptin, which plays a key role in appetite regulation and overeating.

The psychological effects of shift work are also primarily influenced by the circadian rhythm. Depression, anxiety and mood disorders appear to be more prevalent in shift workers, with studies showing they have significantly lower levels of serotonin, which plays a key role in mood stability, sleep, sexual desire and function, memory and learning, and some social behaviours.¹²

Many shift workers also report feeling isolated, or disconnected from family and friends due to their working patterns, with an increase in work/family conflicts, all of which may have a negative psychological effect.¹³ A lack of leisure time and opportunities to connect can also impact on a sense of belonging. Work performance

[†] Metabolic syndrome is a cluster of biochemical and physiological abnormalities.

[‡] Circadian rhythms are physical, mental and behavioral changes that follow a roughly 24-hour cycle, responding primarily to light and darkness in an organism's environment.

and efficiency can also be reduced, while other studies have shown increased stress levels in shift workers and lower levels of job satisfaction, which can affect quality of life.¹⁴

While the majority of non-standard working schedules can offer well paid and secure employment, with real opportunities for flexibility and work/life balance, other working schedules may be poor quality, low paid and low skilled, be insecure, and lack progression opportunities. Many of these arrangements are often not self-chosen and evidence shows poorer health outcomes for many people who are working shifts or engaged in other forms of non-standard employment. In many circumstances though these can be preferable to other work arrangements and can be successful for many workers.

5. Conclusions

Non-standard and flexible working patterns can have several benefits for both employers and employees, but the impacts can vary greatly, if not managed effectively.

The project group and the wider stakeholders identified flexible working schedules as a potential way of improving the health and wellbeing of Lancashire's working-age population and one of the recommendations is:

Where appropriate and available, promote flexible work schedules, such as flexitime or voluntary reduced worktime ('v' time) to encourage a healthy work/life balance and help maintain or improve a person's physical and mental health.

This would need to be supported by robust policies to manage health and wellbeing in the workforce, and links in to several of the other recommendations. To see all the recommendations, please see the [working-age population JSNA final summary report](#). This JSNA has provided a strategic overview and partners will be instrumental in guiding the further actions required and potentially implementing these recommendations across the county.

6. References

Please note, due to difficulties in keeping links up to date in our documents, these references are not hyperlinked, apologies for any inconvenience this may cause.

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