

# Employee health in Australia: Are we on track?

Many workplaces have health & wellbeing strategies in place with the goal to support their employees wherever they are on the health continuum. These programs often span multiple areas of health and offer programs to improve physical health, mental health, financial health, social health, and so on. Researchers regularly attempt to quantify the return on investment of such programs, whilst simultaneously acknowledging the difficulty of scrutinising any single component of health in isolation.

Health means very different things to different people. Some people are quite advanced with their health journey while others don't give health a second thought as they go about their daily activities. The Australian Bureau of Statistics reports that [56% of Australians](#) aged 15 years and over considered themselves to be in excellent or very good health, but is this an accurate self-assessment? What does the research say about the health of our working population, and how do we compare to the rest of the world?

This paper focusses primarily on the physical health of employees within Australia, collating trends from current research and identifying key focus areas for improvement moving forward.

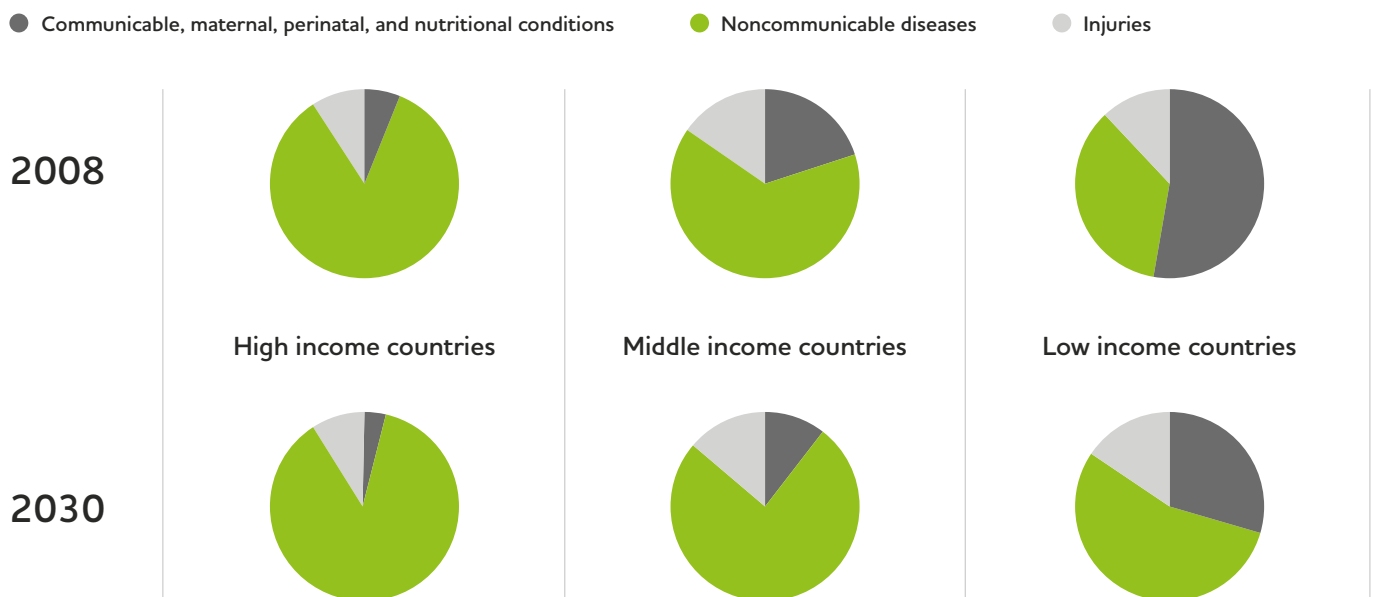
## The Global Perspective

The Global Wellness Institute's report [Move to be Well: The Global Economy of Physical Activity](#) looks at the physical activity levels, participation rates, spending habits and trends across the fitness industry globally. It notes that whilst physical activity is intrinsic to wellness, it has been significantly declining in the past few decades and highlights the conundrum that

**“alongside the growth of the fitness industry, physical inactivity, obesity, and chronic disease have all continued to rise”.**

Globally, there is a shift in the burden of disease as various public health projects take effect and overall standards of living improve. However, this change in living standard and modern lifestyle can also have some negative consequences, ultimately shifting the [global burden of disease in our ageing population](#) from communicable to non-communicable diseases such as heart disease, stroke, diabetes and cancer. This is relevant across every region globally, not just in highly developed countries as demonstrated in the image below.

## The increasing burden of chronic noncommunicable diseases: 2008 & 2030



Source: World Health Organization, [Projections of Mortality and Burden of Disease, 2004-2030](#)

Physical activity is a pillar of a healthy lifestyle. The World Health Organisation (WHO) recommends [150 minutes of moderate intensity activity](#), or 75 minutes of vigorous intensity activity each week, in addition to muscle strengthening work twice weekly. Incidental exercise is also fundamentally important to offset the effects of a sedentary lifestyle.

Reversing the global trend of physical inactivity is a huge task that will require concerted efforts by the public and non-profit sectors, in addition to private enterprises, to improve access and remove barriers to physical activity for all. [The Global Wellness Institute](#) reviewed over 75 studies and survey across 60 countries and identified the **top barriers to physical activity globally**.

For adults these are:

- 1. Lack of time**
- 2. Lack of interest**
- 3. Physical or health conditions**
- 4. Lack of motivation or habit**

In some countries personal safety and being uncomfortable in a gym environment were also mentioned, particularly where gender and social norms discouraged female participation. A solution to engage and improve the physical health of the adult population would need to consider these barriers carefully if it is going to be an effective health strategy.

## The Australian working population has risk factors

In recent years much attention has been given to public health campaigns in Australia with good effect. [The Public Health Association of Australia](#) outlines the Top 10 Public Health Successes over the last 20 years, which includes life-saving improvements to Australia's levels of smoking, skin cancer awareness, and road safety amongst other excellent initiatives. As a result, Australia's life expectancy and levels of daily smoking rank in the best third compared to the 35 member countries of the Organisation for Economic Co-operation and Development (OECD).

However it is [highly concerning to see](#) that **Australia's obesity levels rate in the worst third** for these same OECD countries.

As a result of our current work and lifestyle choices, [50% of Australians](#) are estimated to have at least one of the following chronic conditions: arthritis, asthma, back pain, cancer, cardiovascular disease (such as coronary heart disease and stroke), chronic obstructive pulmonary disease (COPD), diabetes or mental health conditions (such as depression).

### **Chronic disease is the leading cause of illness, disability and death in Australia,**

and the [emerging evidence](#) now consistently identifies the profound prevalence, socio-economic impact and burden of disease imposed by [chronic musculoskeletal conditions](#).

## An unhealthy workforce is expensive

The World Health Organisation defines a [healthy workplace](#) as one that "...provides all members of the workforce with physical, psychological, social and organisational conditions that protect and promote health and safety. It enables managers and workers to increase control over their own health and to improve it, and to become more energetic, positive and contented."

Health & Wellbeing initiatives will ultimately strive to meet this definition however the current working arrangements of many organisations make it difficult to achieve. We are [increasingly sedentary](#), and it's challenging to provide all members of the workforce with ideal physical conditions when staff members often work flexibly or remotely rather than from a central office location. Company health initiatives which used to work well such as onsite physiotherapy or ergonomic assessments can become less accessible, or hard to standardise across many corporate locations.

An [Australian study](#) investigated the impact of health on job performance using sickness absence data (absenteeism) and self-reported productivity loss (presenteeism). The prevalence of health risks and medical conditions was used to classify employees into low, medium or high-risk categories. Results indicated a 19% loss of productivity due to presenteeism and 12.8% loss due to absenteeism, with the conclusion that a health promotion program would be potentially beneficial for improving employee health and minimising health-related productivity loss for the organisation.

A [Medibank study](#) has further supported a difference in productivity, stating that

### **healthy employees are nearly three times more productive than unhealthy employees**

(approximately 143 hours/month compared to approximately 49 hours/month). Medibank also found that unhealthy employees take up to nine times more sick leave than their healthy colleagues.

# The outlook for employee health is concerning

[CSIRO recently produced a report](#) which considers the impact of six megatrends on Workplace Health & Safety and workers' compensation over the next 20 years. Three of these megatrends are of particular concern to employee health:

## 1. Rising screen time, sedentary behaviour and chronic illness

*The amount of daily screen time has grown for both adults and children and there is a continued drift away from manual jobs towards sedentary jobs. Rates of obesity, cardiovascular disease, type 2 diabetes, and other chronic illnesses continue to rise.*

The Australian Bureau of Statistics (ABS) figures suggest adults currently engage in sedentary activities for [39 hours per week](#) on average, including both work and leisure, and [Medibank estimates](#) that

**Australians are sedentary for 77 percent of the working day.**

In affluent populations many adults are spending [70% or more of their waking hours sitting](#).

The Australian Government's Department of Health notes that [sedentary behaviour along with lack of physical activity](#) generally has been associated with increased risk of obesity, diabetes, musculoskeletal problems, heart and cardiovascular disease, some cancers, and poor mental health. Similarly, increased time looking at a screen is an independent risk factor linked to a [higher risk of metabolic syndrome](#) in adolescents, even if the adolescent is also physically active. Daily screen time needs to be actively managed across all ages.

It is worth noting that sedentary behaviour and physical activity are listed as separate, independent risk factors which means that breaking up periods of sedentary work and engaging in regular physical activity are both important.

[Lonergan Research](#) found that Australians spent an average of 9.4 hours in front of a screen on a daily basis, and this increased to 11.4 hours for office workers. The reality of this is

**most Australians spend more time on the screen than they do sleeping**

([7 hours](#)). Screen time can also have significant effects on [postural habits and musculoskeletal health](#).

## 2. Blurring the boundaries between work and home

*An increasingly large share of Australian workers are entering into work arrangements that enable them to work from home or other locations, blurring the boundaries between work and home life.*

Flexible Working is increasingly recognised as a valuable way to attract and retain employees. A recent [McCrindle Research](#) study found 80 percent of people surveyed stated that they would be more likely to remain with an employer if their jobs provided flexibility or remote working. Approximately half of those surveyed would even forego a percentage of their pay in exchange for greater flexibility.

The [Workplace Gender Equality Agency](#) reports that **the number of Australian private sector organisations with flexible working strategies is currently over 70%.**

The public sector is also pushing strongly for flexible working with initiatives from organisations such as NSW Government committing to making [all roles flexible](#).

With this flexibility comes increased risk factors for employee health. From a physical perspective, the safety of the environment in which the employee is working needs to be considered and appropriate procedures put in place regarding this. Landmark cases such as [Hargreaves vs Telstra](#) are a reminder of this consideration.

From an ergonomics perspective, employee postures may be considerably compromised if consideration has not been provided in this area. [Increased neck pain](#) has been associated with forward head postures such as those adopted by laptop users, with

**the load on neck muscles 3-5 times greater when directly using a laptop**

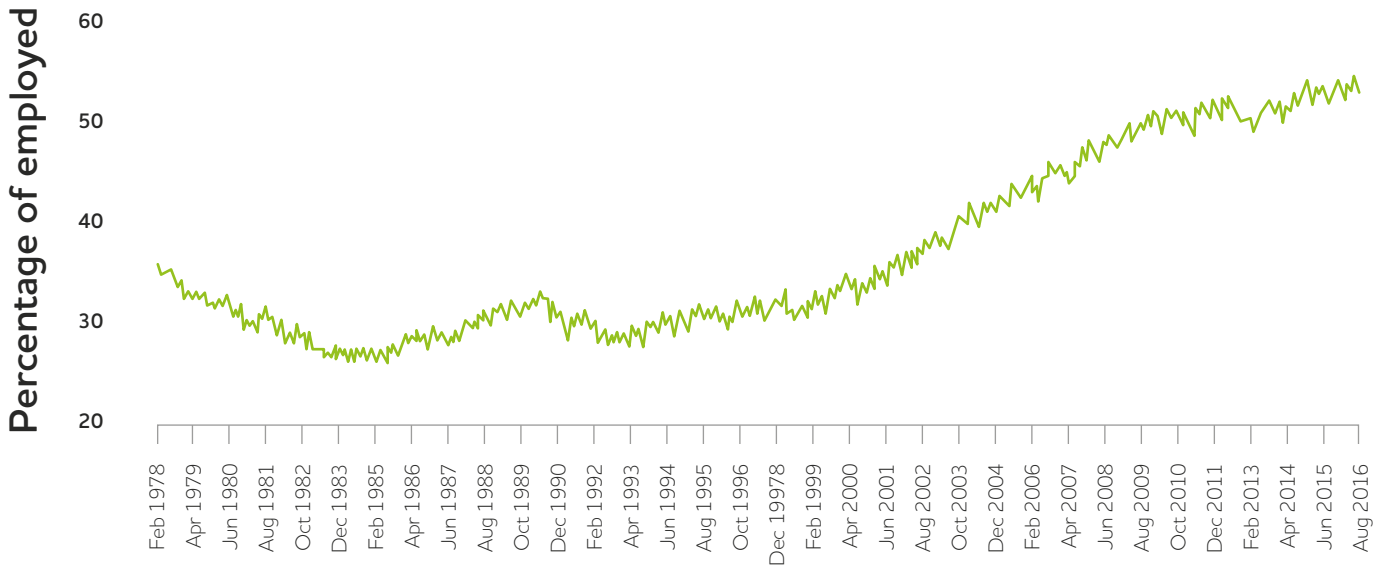
compared to a traditional office working posture.

For those people who find it difficult to 'switch off' there are negative sides to a hyper-connected lifestyle without the clear boundaries of a traditional office environment. Difficulty focussing on one thing at a time, stress, and interference with family/personal life are reported as disadvantages to an always-on work culture. In this study [20% of people reported mental exhaustion](#), and 28% said that they couldn't switch off mentally.

## 3. An ageing workforce

*The average age of Australia's workforce is increasing along with the ageing of the population as a whole and older Australians are having to stay in the workforce longer.*

The graph below from the ABS shows the employment rate of Australians aged 60-64 years, with a significant spike in percentage of people employed in this age bracket over the last 20 years. Whilst this brings a wealth of knowledge and experience, the [key issue surrounding this trend is health](#). If older workers' health problems are not addressed, their health may undermine their participation and productivity, in turn affecting the sustainability of the nation's economy, tax base, and the provision of health care services.



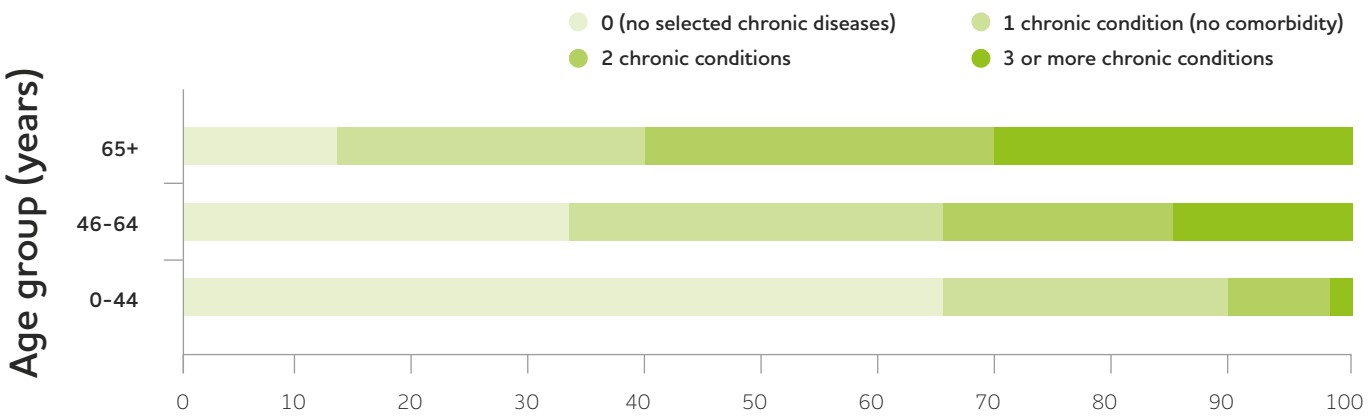
**An older workforce is more susceptible to being overweight or obese.**

Recent ABS data indicates that almost [four out of five adults](#) (78.2%) aged 65-74 were classified as overweight or obese, compared with less than half (46%) of people aged 18-24.

The prevalence of musculoskeletal conditions also increases with age, from 1% among people aged 0-14 to [72% among people aged 75-84](#). The most common musculoskeletal conditions reported were back pain, osteoarthritis, and other forms of arthritis.

[One in four Australians](#) have two or more coexisting chronic conditions, particularly if they are aged 65 or over. These people with comorbidities have a higher risk of hospitalisations, adverse drug events, poorer functional status and increased mortality compared to people without comorbidities.

Over a quarter (29%) of people aged 65 and over reported having 3 or more chronic conditions, compared with just 2.4% for those aged under 45. The comorbidity of selected chronic conditions by age is presented as a graphic below:



Note: The selected chronic conditions are arthritis, asthma, back pain and problems, cancer, cardiovascular disease, chronic obstructive pulmonary disease, diabetes, and mental health conditions. Sources: ABS 2015; Table 19.1

**Australia needs to proactively prepare for the future**

A consistent, underlying risk factor when it comes to chronic disease is obesity. In 2017-18 [two out of three](#) Australians were overweight or obese.

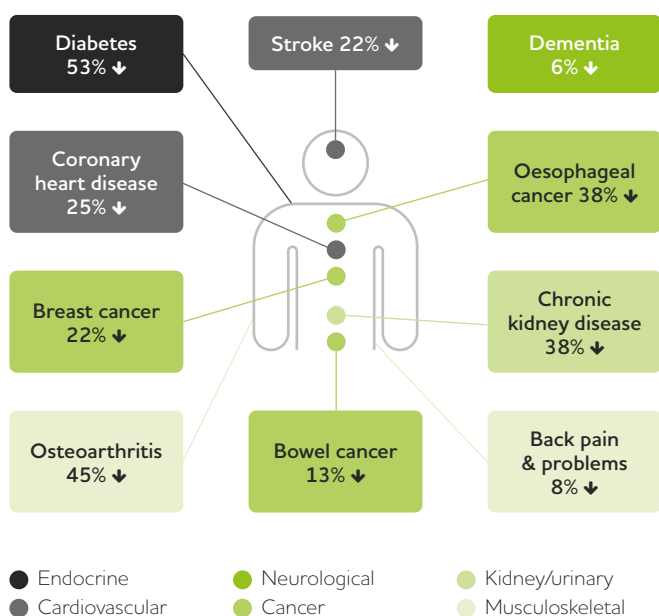
There is also significant evidence that workers who are overweight are at [higher risk of sustaining workplace injuries](#), particularly musculoskeletal disorders. Furthermore, claims can be twice as prevalent, seven times more costly and result in [13 times more lost work days](#) in those with high BMI's.

[Small, proactive lifestyle changes](#) could bring big health gains when it comes to addressing the risk factors of chronic conditions. For example

**an extra 15 minutes of brisk walking by each person 5 days a week could cut Australia's disease burden due to insufficient physical activity by about 14%.**

To further illustrate the impact of proactive measures, the Australian Institute of Health and Welfare (AIHW) have modelled the effect of improved weight range on disease burden for the Australian population in the image below:

## If everyone was in the normal weight range, disease burden in Australia would be reduced



[Physical activity levels have been declining](#) in the last few decades, to the point where the impact on weight gain and other health risk factors represents a major threat to global health. In response to this trend, [WHO created an action plan](#) for preventing and controlling noncommunicable diseases such as heart disease, stroke, diabetes and some forms of cancer.

A key strategy of this action plan is a target of 10% reduction in physical inactivity by 2025. Without intervention, Australia is unlikely to achieve this target based on current trends and modelling.

## Physical health improves mental health too

Improving the physical health of employees is good business, and encouragingly it has significant positive effects on mental health as well. [An international study](#) of more than a quarter of a million people found that regardless of your age or where you live,

**people who are more active are less likely to develop depression in the future.**

Furthermore, The Black Dog Institute led a [study](#) that found

**12% of cases of depression could have been prevented by just one hour of physical activity a week.**

With [one in seven](#) Australians experiencing depression in their lifetime, this can have a huge impact on an organisation and society in general.

## The rise of the social enterprise

The [2018 Deloitte Global Human Capital Trends report](#) identified a profound shift facing business leaders worldwide – the rapid rise of the social enterprise.

**A social enterprise is an organisation whose mission combines revenue growth and profitmaking with the need to respect and support its environment and stakeholder network.**

This includes listening to, investing in, and actively managing the trends that are shaping today's world. It is an organisation that shoulders its responsibility to be a good citizen (both inside and outside the organisation), serving as a role model for its peers and promoting a high degree of collaboration at every level of the organisation.

Being a social enterprise also means investing in the broader social ecosystem, starting with an organisation's own employees. It means treating all workers in a fair, transparent, and unbiased way. Leaders should seek to provide a work environment that promotes longevity and well-being, not only in an individual's career, but also in the physical, mental, and financial spheres. By doing this an organisation invests both in its own workforce and in the workforce ecosystem, benefitting both the organisation and society at large.

Tackling some of the chronic health issues that are manifesting in today's working population fits well with this enhanced social responsibility, and actively demonstrates a culture of support for employees at the same time.

## Tech solutions are the way forward

The way that workplaces engage, educate and motivate healthier behaviours within their people is evolving. While more traditional work health methods (seminars, screening programs, onsite professionals, etc) are still used, many workplaces are looking to take advantage of developments in technology which increase the scale, accessibility and affordability of programs. This is particularly relevant to organisations with high percentages of staff who work outside of the main office locations, and for those with flexible working policies.

Bupa stated in their [2015 Benchmark Survey report](#) that they expected digital health platforms to increase in use amongst work health strategies. [CSIRO](#) also stated that digital technologies (including interactive apps) can mitigate the risk of one of their identified megatrends of sedentary lifestyles and extended screen time.

Deloitte have noted in their [2017 Mobile Consumer Survey](#) that

***“smartphones are growing in importance as workplace tools – and there is opportunity for workers and businesses to take advantage of devices across a wide range of uses.”***

With [91% of Australians in ownership of a smartphone](#), there is high potential for a mobile-health (mHealth) application to engage the working population.

The [2018 Deloitte Global Human Capital Trends report](#) is optimistic that technological advances can open up new opportunities for businesses to have a positive impact on society. It states that 87% of C-level executives say that the combination of digital and physical technologies will lead to more equality and stability, and 74% say business will have more influence than governments or other organisations to shape this future.

## Online health information should be approached with caution

A survey of over 1500 Australians revealed 54% of people habitually turn to [‘Doctor Google’](#) at least once a week for medical questions and symptoms, even though only 21% of people perceive Google as a trustworthy source of health information.

An Australian study into [search engine self-diagnosis](#) found that

***search engines were providing irrelevant information that could lead to incorrect self-diagnosis, self-treatment and ultimately possible harm.***

Whilst many musculoskeletal conditions are effectively treated without a face-to-face consultation with a health professional, the quality and safety of advice provided without direct health professional consultation is paramount.

Low back pain (LBP) is the [most common musculoskeletal condition](#) affecting Australians and is estimated to affect [70-90%](#) of people at some point in their lives. [Clinical guidelines](#) for managing episodes of LBP from the National Institute for Health and Care Excellence recommend self-management advice and exercise prescription as the primary interventions, with manual therapy and pharmacological interventions considered secondary. This is further evidenced by an overview of [occupational interventions for the prevention of LBP](#) which found that exercise alone or in combination with education was the only approach that could consistently be shown to be effective, and it lead to a reduction in lost time and disability associated with back pain.

As artificial intelligence continues to develop within the health sector,

***there is opportunity for an evidence-based solution to provide health intervention for problems such as LBP safely and effectively as a digital solution,***

avoiding the potential harm of unregulated self-diagnosis or treatment.

## Are we on track?

A review of the evidence suggests that Australians are either unaware of the risk factors for poor health, unwilling to act on the risk factors, or unable to do so. Risk factors such as obesity are ticking time bombs for noncommunicable chronic disease, and the outlook for the next 20 years is far from positive.

Australians are already too sedentary, with screen time predicted to rise further. Work habits are changing to be more flexible making it more challenging for traditional health & wellbeing initiatives to be effective. And as an ageing population the effect of coexisting chronic conditions for those aged 65 onwards is a potential concern. The impact of our current work and lifestyle choices will be felt not only by the individuals concerned, but also by the national health systems (public and private) treating the illnesses, the families who support those who are sick, and the organisations who bear the financial impact of an unhealthy workforce.

Through their roles as social enterprises, organisations can spearhead a response to this issue. An appropriate intervention needs to overcome the barriers identified by providing an interesting, time-efficient, motivating health solution that can also safely guide those with existing physical conditions to an improved state of health. To meet the needs of a modern workforce this will likely need to include a mHealth solution utilising innovations in technology to create a trustworthy, evidence-based digital platform for health.

Encouragingly, modelling suggests that

***small changes to lifestyle and exercise-based interventions are effective to mitigate the risk factors for chronic health conditions.***

As a society, we simply need a nudge to get us back on track.

Prepared by Ergoworks

