

HEALTHY WORKPLACE IRELAND:

A Survey of Mental Health & Well-being Promotion in Irish Firms

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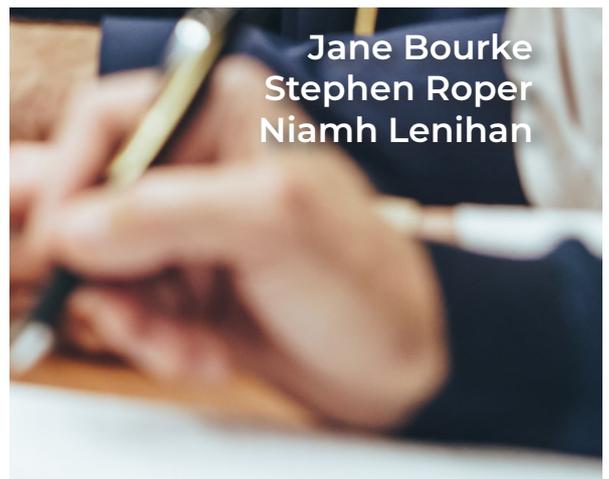




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March 2023



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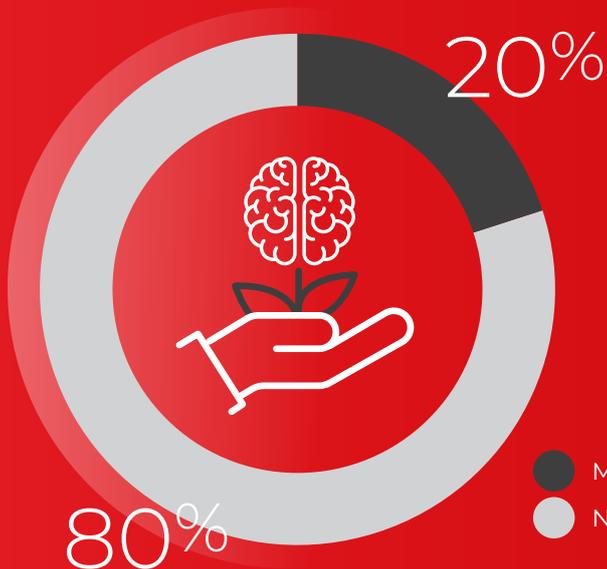
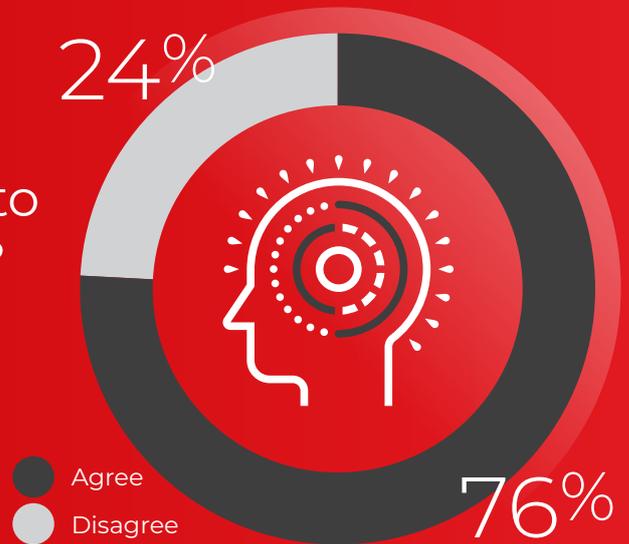
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HEALTHY WORKPLACE IRELAND: AT A GLANCE

Do Irish employers agree they have a responsibility to Workplace Mental Health?

76% of employers in Ireland recognise their responsibility in supporting employee mental health.



Are Irish employers investing in workplace mental health?

One in five employers have a dedicated mental health budget.

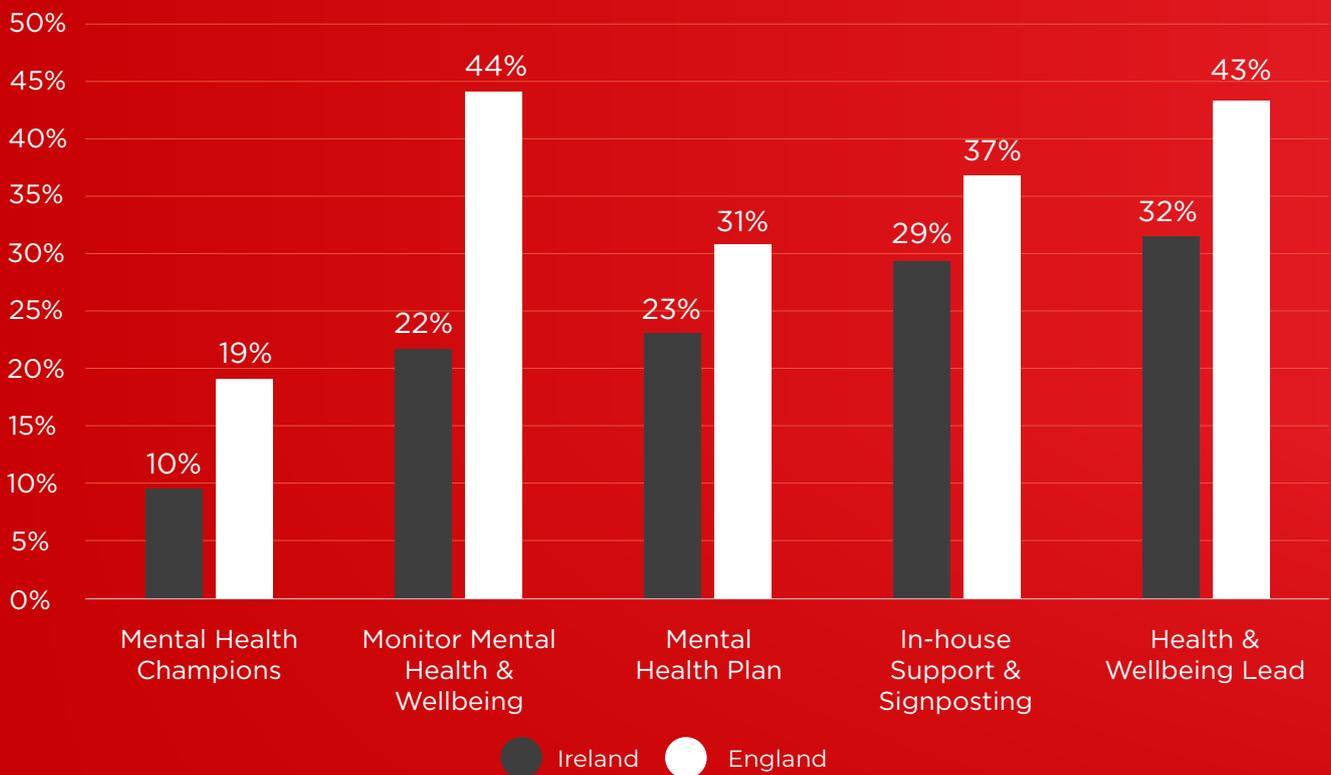




WORKPLACE MENTAL HEALTH & WELL-BEING SUPPORTS

32% of Irish employers have a health and well-being lead at board level; **23%** have a mental health plan; **10%** have employee mental health champions.

Irish employers are **less likely** to provide these supports than their English counterparts.



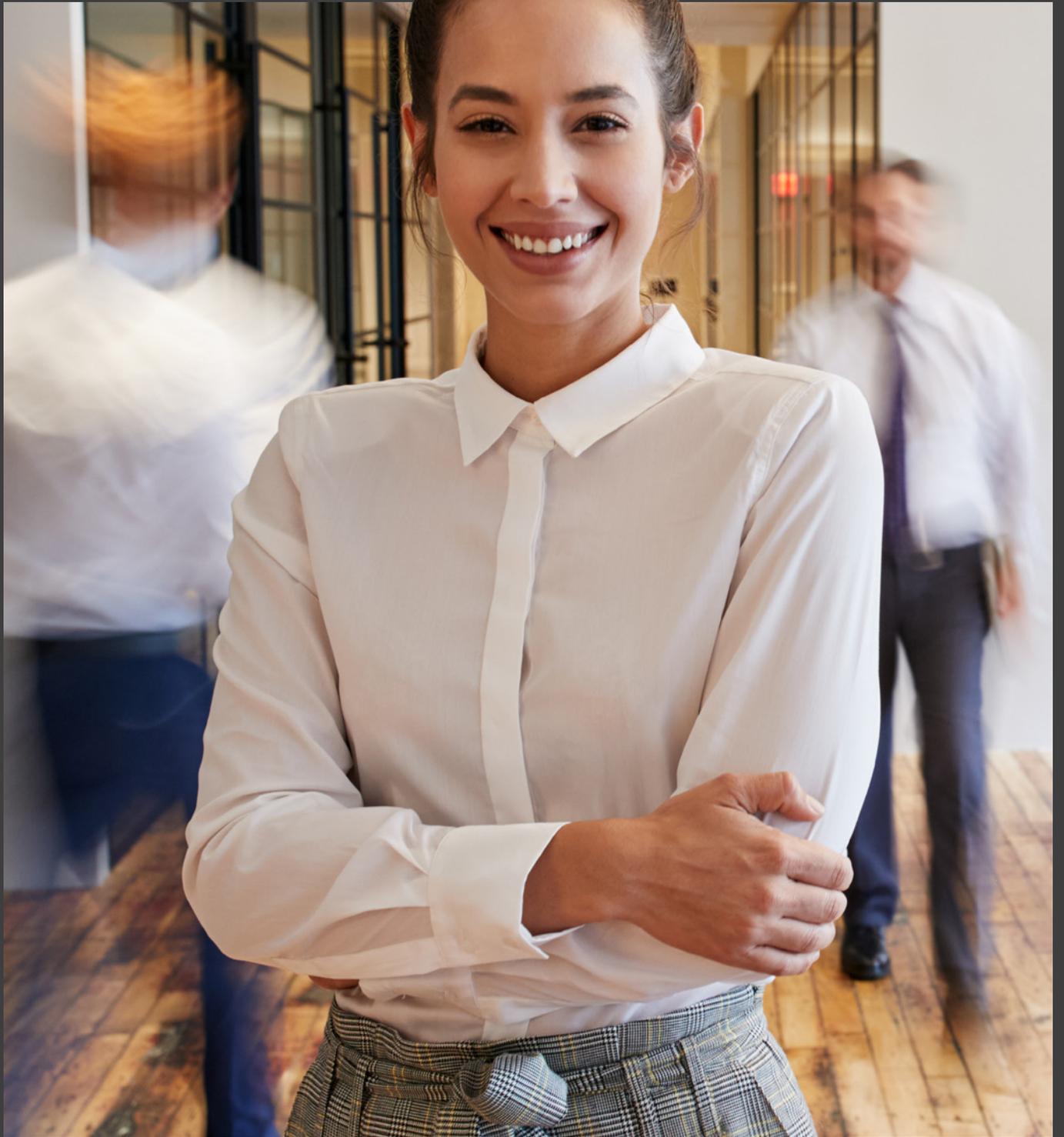
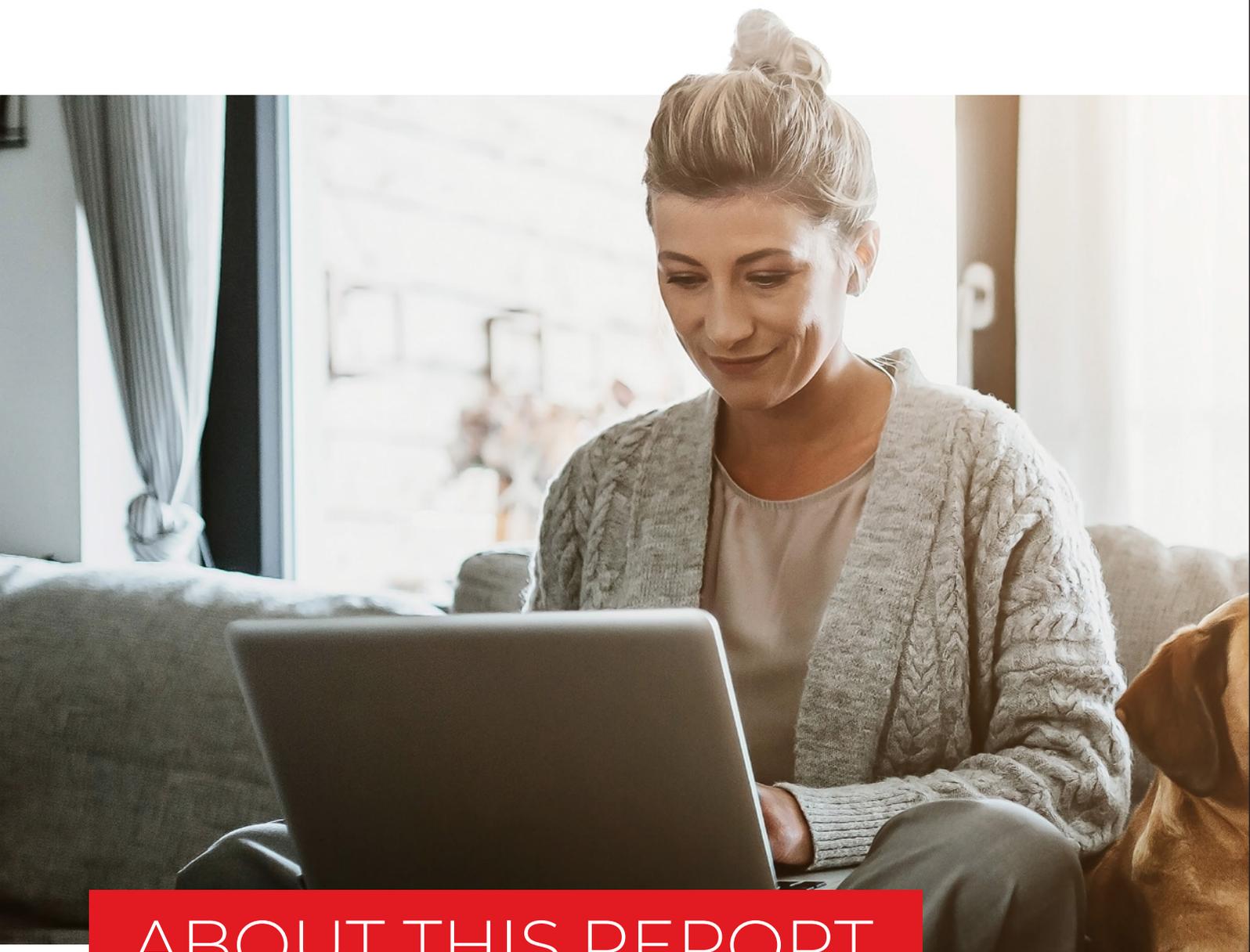


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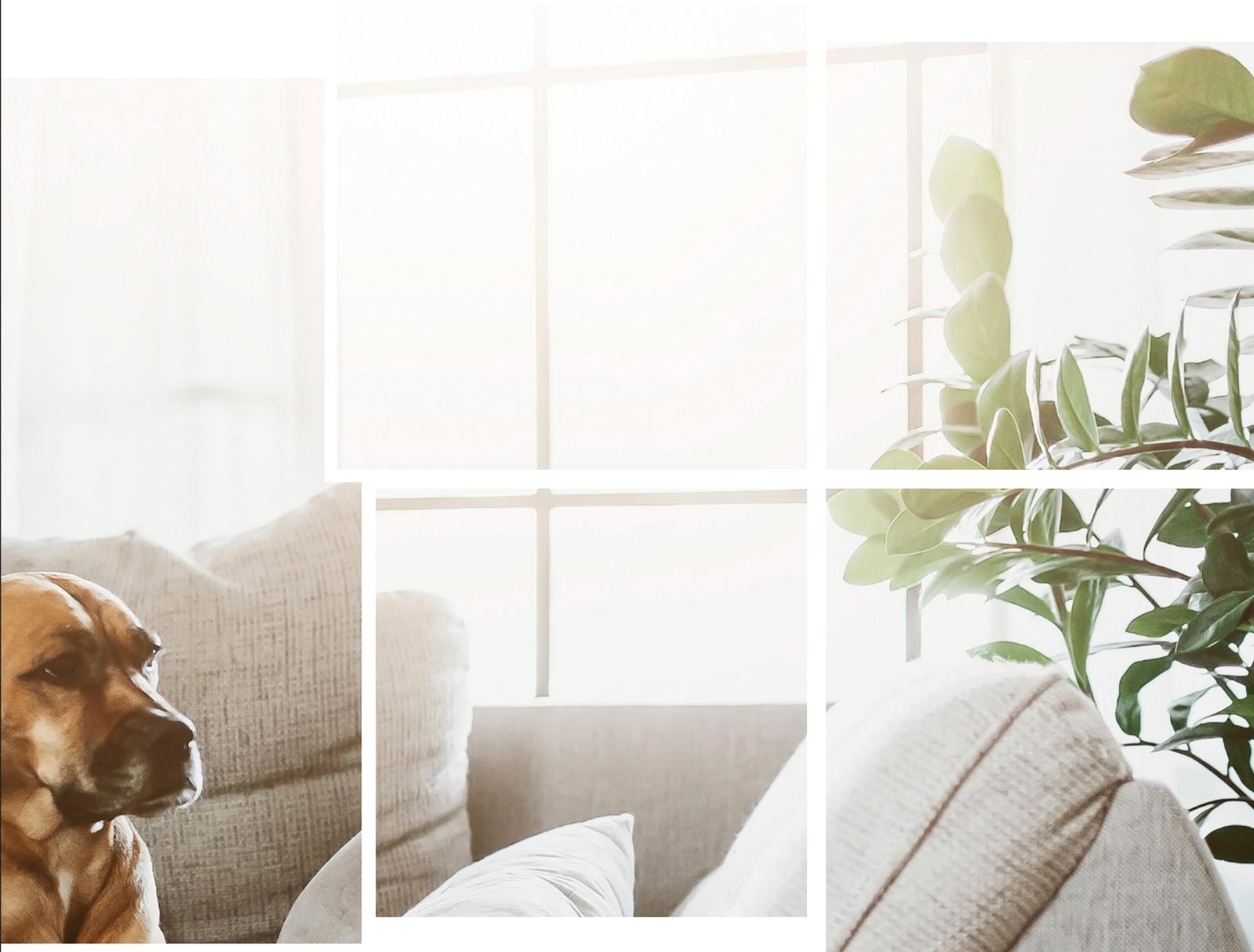
ABOUT THIS REPORT

This report is part of the international study: **Mental health and well-being practices, outcomes and productivity: A causal analysis**. This ground-breaking project is being funded by the UK's Economic and Social Research Council (ESRC) as part of an £11 million research investment exploring different aspects of the productivity puzzle.

The study addresses the link between employee mental health and well-being and productivity outcomes. It is focusing on the causal processes by which employers can support better mental health and well-being and at the same time boost productivity. It will identify the practices firms should adopt to support good mental health and well-being and ensure productivity improvement, directly informing policy and practice. The project is taking an interdisciplinary approach which brings together researchers from economics, management studies and occupational psychology.

The research involves following firms, work groups and related individuals over time. It uses a mix of econometric, statistical and qualitative methods and draws comparisons between the UK, Ireland and Sweden. The project started in April 2022 and will run for three years.

The project team comprises Prof. Stephen Roper (Principal Investigator), Dr. Maria Wishart & Dr. Vicki Belt at the Enterprise Research Centre (ERC) at Warwick Business School; Prof. Holly Blake & Prof. Louise Thomson at the Centre for Organisational Health and Development, University of Nottingham, Dr. Jane Bourke, Cork University Business School, University College Cork; Prof. Stravroula Leka, Centre for Organizational Health & Well-being, University of Lancaster; and Dr. Juliet Hassard, Queens University Belfast.

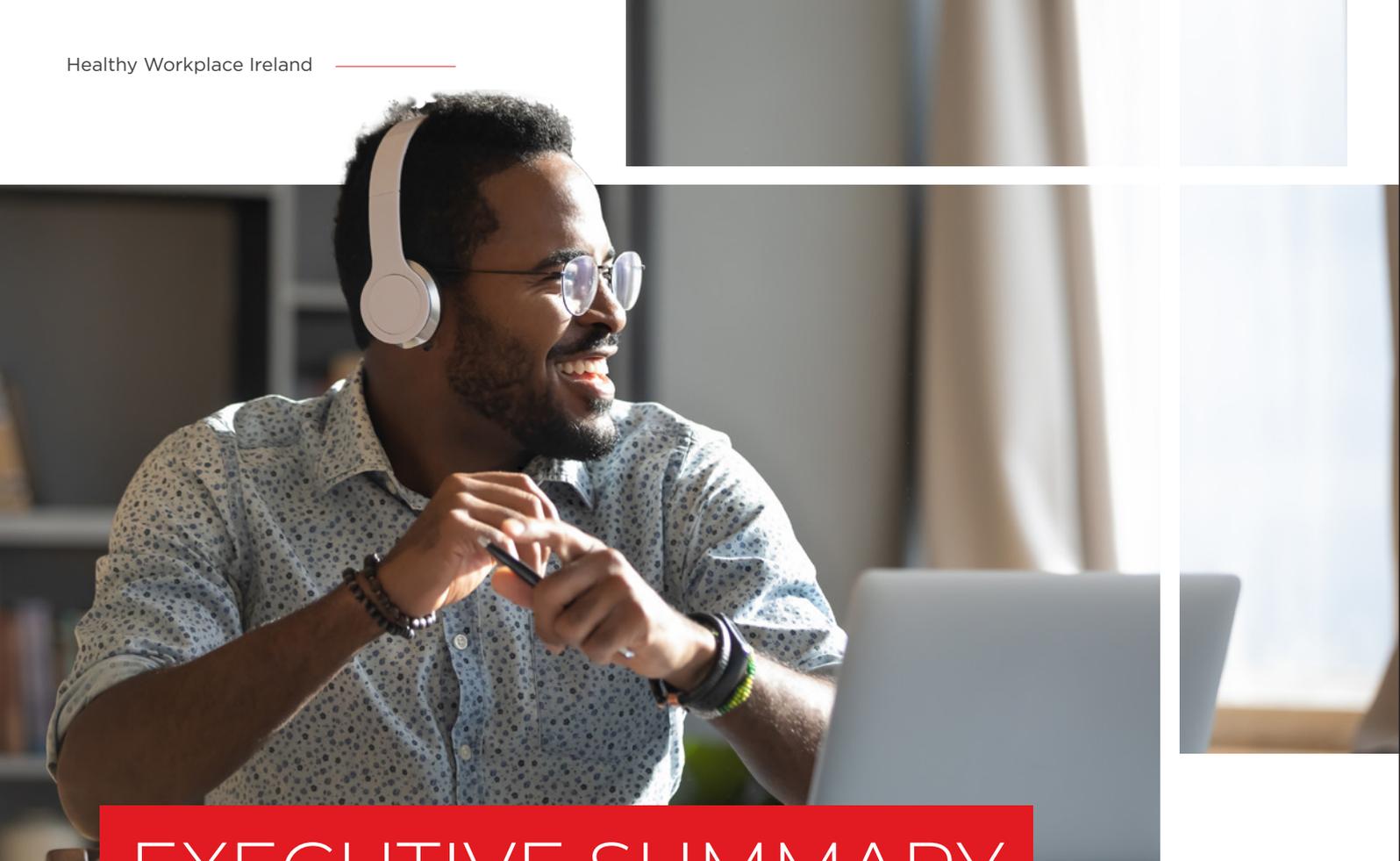


Spatial And Regional Economics Research Centre

The Spatial and Regional Economics Research Centre (SRERC) was launched in 2018 and arises from the extensive experience and research expertise in regional science developed by a cluster of staff in the Department of Economics, University College Cork. The Centre operates on the philosophy of research excellence and policy relevance. The Centre focuses on three central themes: Spatial Economic Analysis; Innovation Systems; and Urban and Regional Economics. Members of the SRERC have been engaged in consultancy and research funded by the European Commission, Environmental Planning Agency, the UK Economic and Social Research Council, Science Foundation Ireland, the Irish Research Council, Forfás, Enterprise Ireland, Irish Regional Assemblies and city and county councils, among others.

Enterprise Research Centre

The Enterprise Research Centre is an independent research centre which focusses on SME growth and productivity (www.enterpriseresearch.ac.uk). ERC is a partnership between Warwick Business School, Aston Business School, Queen's University School of Management, Leeds University Business School and University College Cork. The Centre is funded by the Economic and Social Research Council (ESRC); Department for Business, Energy & Industrial Strategy (BEIS); Innovate UK, the British Business Bank, and the UK Intellectual Property Office.



EXECUTIVE SUMMARY

Mental health issues are challenging for both the individuals affected and employers alike. This study, using a new and unique survey of Irish workplaces, highlights the challenges Irish employers face in relation to employee mental ill health and the organisational response to such challenges.

For the first time, we provide large-scale evidence of health and well-being promotion in Irish workplaces, as well as data on absenteeism for physical and mental ill-health reasons, presenteeism and their impact on business performance. 1,501 Irish employers took part in the *Workplace Mental Health & Well-being in Ireland* survey between September and December 2022. Telephone interviews were conducted with private sector employers with 10 or more employees, across all sectors and regions in Ireland.

This study, part of a broader international study, also compares the prevalence of mental ill health, absenteeism and presenteeism in Irish and English workplaces, as well as differences in how employers are responding to these challenges.

This report identifies five key findings:

1. Most employers in Ireland recognise their responsibility in supporting employee mental health, however they are less likely to provide mental health & well-being supports.

76 per cent of employers recognise that they have responsibilities toward employees' mental health. In larger firms (50+ employees), this figure increases to 81 per cent.

However, on average one-third of employers have an organisational response to this issue. The most widely adopted initiative is having a health and well-being lead at board level (32 per cent), followed by in-house mental health support & signposting of services (29 per cent), having a mental health plan (23 per cent) and monitoring employee health and well-being (22 per cent). Only 1 in 10 employers have employee mental health champions.

Larger businesses (50+ employees) are more likely to implement mental health and well-being initiatives, with 57 per cent of larger firms having in-house mental health support and signposting of services compared to 20 per cent of smaller firms (10-19 employees).

2. Employers in Ireland are not investing in workplace mental health

80 per cent of employers do not have a dedicated budget for mental health and well-being. This suggests a disparity in employers' recognition of their responsibilities to and investment in workplace mental health and well-being. It also suggests that employers are more likely to implement mental health and well-being initiatives that do not involve a financial outlay.

Larger firms are more likely to have a budget for mental health initiatives. 42 per cent of firms with 50+ employees have a mental health budget compared to 13 per cent of smaller firms (10-19 employees).

Employers in the business and non-business services sector are more likely to have a mental health budget (29 per cent) compared to employers in wholesale/retail (11 per cent) and construction (12 per cent). From a regional perspective, employers in Dublin are most likely to have a mental health budget.

3. Post-pandemic, mental health-related sickness absence has increased

Sickness absence is a considerable challenge for Irish employers, with 64 per cent of employers stating that absenteeism – physical and mental health related - adversely impacts business performance.

Mental health-related sickness absence is a growing challenge for Irish employers, as more than half of employers report that the proportion of absenteeism due to mental ill-health has increased in the last 12 months.

At present, 18 per cent of firms experience employee absenteeism due to mental health reasons. This figure increases as firm size increases. For firms with 50+ employees, 40 per cent report mental health-related sickness absence.

4. Employers in Ireland are less likely to support workplace health promotion than in England

The incidence of workplace mental health and well-being issues differs between Irish and English employers. For instance, the proportion of Irish firms reporting incidents of mental health sickness absence (18 per cent) was lower than that in England (26 per cent), a pattern repeated across sectors and firm size bands.

In contrast, presenteeism – working when ill - is higher in Irish businesses (27 per cent) compared to businesses in England (21 per cent), a pattern which is consistent across sectors and firm size bands. The most commonly cited reasons for presenteeism by Irish employers is the need to meet deadlines and client demand.

However, Irish employers are less likely to implement measures to support employee mental health than their English counterparts. For example, Irish firms were notably less likely to have a mental health plan (31 vs. 23 per cent), mental health lead at board level (43 vs. 32 per cent) and are significantly less likely to monitor employee well-being (44 vs. 22 per cent) than their English counterparts. Interestingly, English employers are slightly less likely to have a mental health budget (17 vs. 20 per cent).

5. Workplaces are changing as more employers allow staff to work from home (WFH)

Since the COVID-19 pandemic, the number of employers that allow employees to WFH has increased three-fold, with almost one in three firms with employees that WFH. Larger firms and those in the business services are more likely to have employees who WFH.

Most employers view remote/hybrid working positively. There are benefits with respect to employee happiness and productivity, although it can be challenging for teamwork. More than 60 per cent of Irish employers encourage their WFH employees to maintain a clear distinction between work and leisure time.



SECTION 1

INTRODUCTION

While all firms recognise the importance of skills and training for business growth and productivity less attention has often been placed on the mental health and well-being of employees. However, the business costs of poor employee mental health and well-being can be substantial both for employers and their employees. Mental ill health is estimated to cost the Irish economy approximately €11 billion each year, largely due to lost productivity.¹ The COVID-19 pandemic has also raised significant concerns about deteriorating mental health, particularly among vulnerable groups adding to longer-term concerns linked to an ageing workforce and job insecurity in the gig economy. The Healthy Workplace Framework outlines the roadmap for promoting worker health and well-being within all workplaces in Ireland. However, there is currently no database of workplaces engaged in health and well-being programmes in Ireland.²

This landmark study, part of a broader international project, surveyed 1,501 Irish firms to provide the first comprehensive profile of mental health and well-being in Irish workplaces post-Covid. How have levels of sickness absence related to mental health changed? We focus too on how Irish employers in different sectors, regions and of varying sizes are supporting employee mental health and well-being. Which firms have mental health and well-being champions? How are Irish firms supporting their employees? How are the challenges of supporting employee mental health and well-being changing as working from home and hybrid working become more common?

Overall, we find that almost one in five Irish firms have experienced mental health related issues in the past year, with over half of firms reporting an increase in mental health related issues in the last year. Around a third of firms have taken steps to support employee mental health and well-being, and around a fifth of firms are investing in their employees' mental health and well-being. These proportions vary somewhat between sectors, but more significant differences are evident between larger and smaller firms – smaller firms are much less likely to be providing support for employee mental health and well-being than larger firms.

Comparisons with comparable survey data for English firms provide further insights. Irish firms are less likely than their English counterparts to experience mental health sickness and less likely to be working to support employee mental health and well-being. However, levels of presenteeism – i.e., working while unwell – are higher in Ireland attributed by firms to a need to meet deadlines or client demands.

The remainder of the report is organised as follows:

- **SECTION 2** describes employers' attitudes to employee mental health and the support employers are providing for their employees.
- **SECTION 3** identifies the scale of the mental health and well-being challenge faced by firms measured by sickness absence, presenteeism and their impact on business performance.
- **SECTION 4** provides some initial comparisons between workplace mental health and well-being in Ireland and England.
- **SECTION 5** outlines the changing nature of the workplace in post-pandemic Ireland.
- **SECTION 6** summarises our key findings and concludes this report.

Details of the Workplace Mental Health & Well-being in Ireland survey itself and a profile of the participating firms are included in Annexes.

12 ¹Government of Ireland (2006) A Vision for Change: Report of the expert group on mental health policy.

²Government of Ireland (2021) Healthy Ireland at Work. A National Framework for Healthy Workplaces in Ireland 2021–2025.



SECTION 2

MENTAL HEALTH AND WELL-BEING SUPPORT IN IRISH WORKPLACES

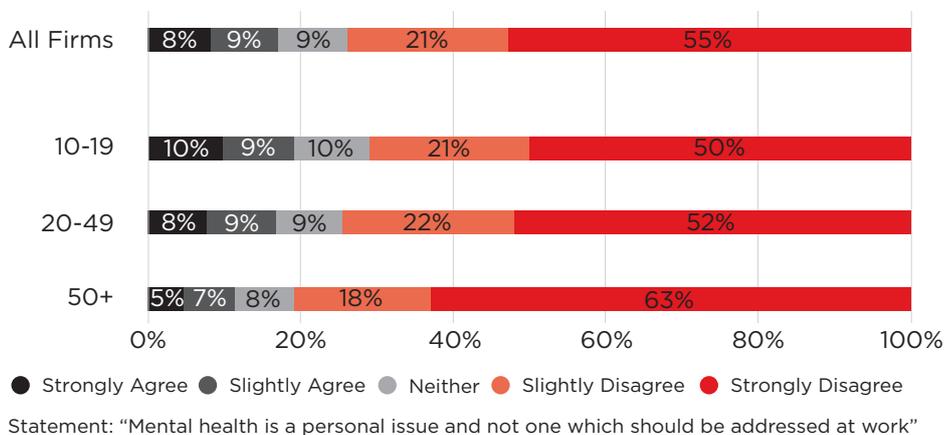
2.1 Introduction

Workplace mental health issues are widespread and have implications for individual employees and employers alike. In this section, we consider Irish employers' perception of their responsibilities regarding employee mental health and well-being, as well as an overview of employers' approaches to the provision of workplace mental health support activities.

2.2 Is employee mental health an employer's responsibility?

In our discussions with firms, we wanted to understand if employers perceive employee mental health as their responsibility. Respondents were asked to what extent they agree or disagree with the following statement: "Mental health is a personal issue and not one which should be addressed at work". 55 per cent of firms strongly disagree with this statement (see Figure 2.1). A further 21 per cent of firms slightly disagree with this view. In other words, the majority of employers (76 per cent) perceive that they have responsibilities in relation to their employees' mental health.

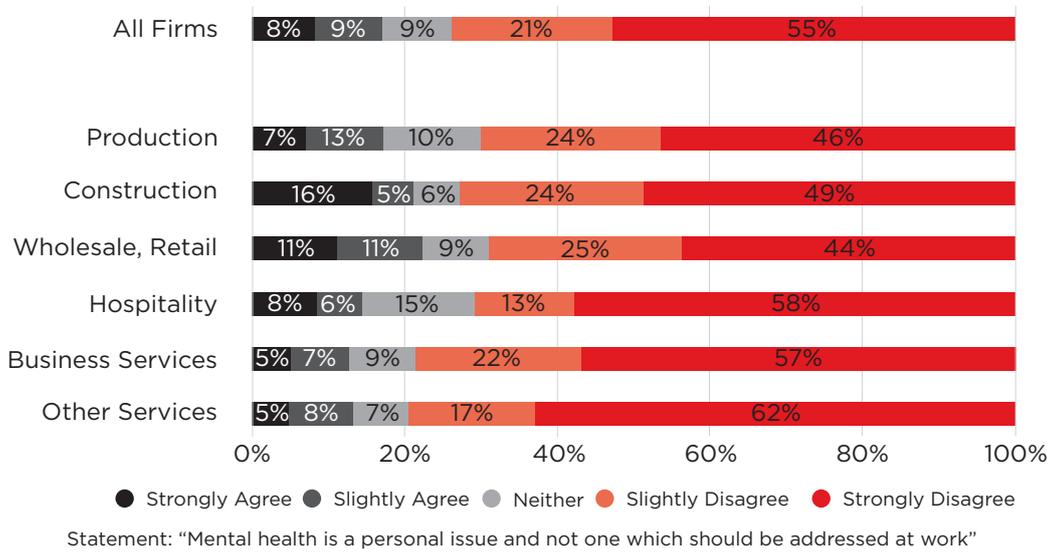
Figure 2.1: Employee Mental Health is not an Employer's Responsibility, by firm size



A higher proportion of larger firms (50+ employees) are likely to view employee mental health as an employer's responsibility as 81 per cent of these businesses disagreed with this statement compared with 71 per cent of smaller businesses (10-19 employees).

We also see some attitudinal differences across sectors. The proportion of firms that strongly disagree that mental health is a personal issue was highest among those in the non-business services, hospitality, and business services (see Figure 2.2). In contrast, the proportion of businesses that strongly agreed with this statement was highest among those in the construction (16 per cent) and wholesale and retail sectors (11 per cent), suggesting these firms are less likely to perceive a responsibility to employee mental health.

Figure 2.2: Employee Mental Health is not an Employer’s Responsibility, by Sector

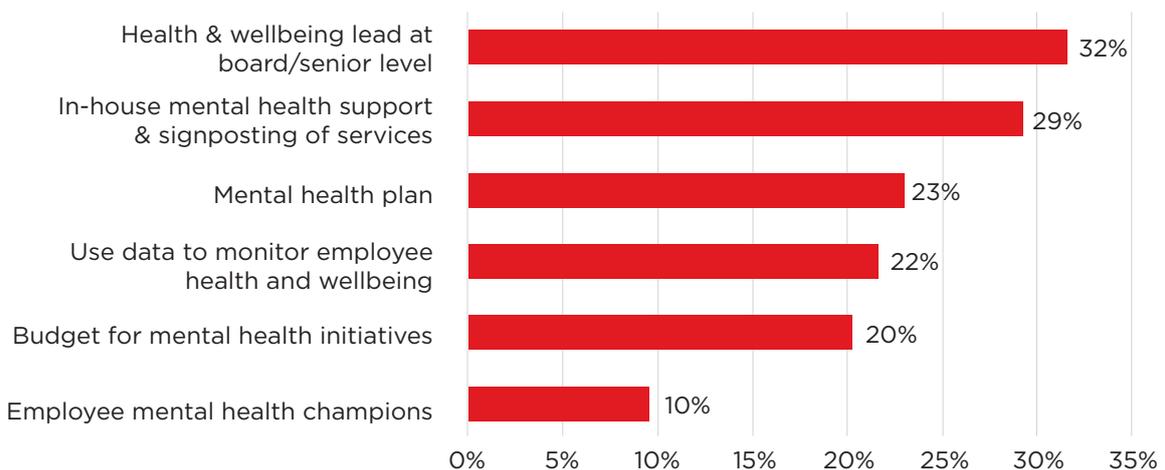


2.3 Mental Health & Well-being Promotion in Irish Workplaces

In this subsection, we explore various mental health and well-being practices adopted by Irish employers. We consider organisation-level activities aimed at improving employee mental health and well-being. In the survey, employers were asked whether they have the following workplace health practices: a mental health plan, a mental health lead at the board/senior level, using data to monitor employee health and well-being, providing in house support and signposting of services, a mental health budget, and employing a mental health champion.³

The most widely adopted initiative by businesses was to have a health and well-being lead at board/senior level (32 per cent), followed by support of employees in-house, including signposting of available services (29 per cent), as seen in Figure 2.3. However, this implies that nearly 70 per cent of businesses do not have a mental health lead at senior level. Only one in ten firms have employee mental health champions. Furthermore, we observe that only one-fifth of firms have a dedicated budget for mental health and well-being activities.

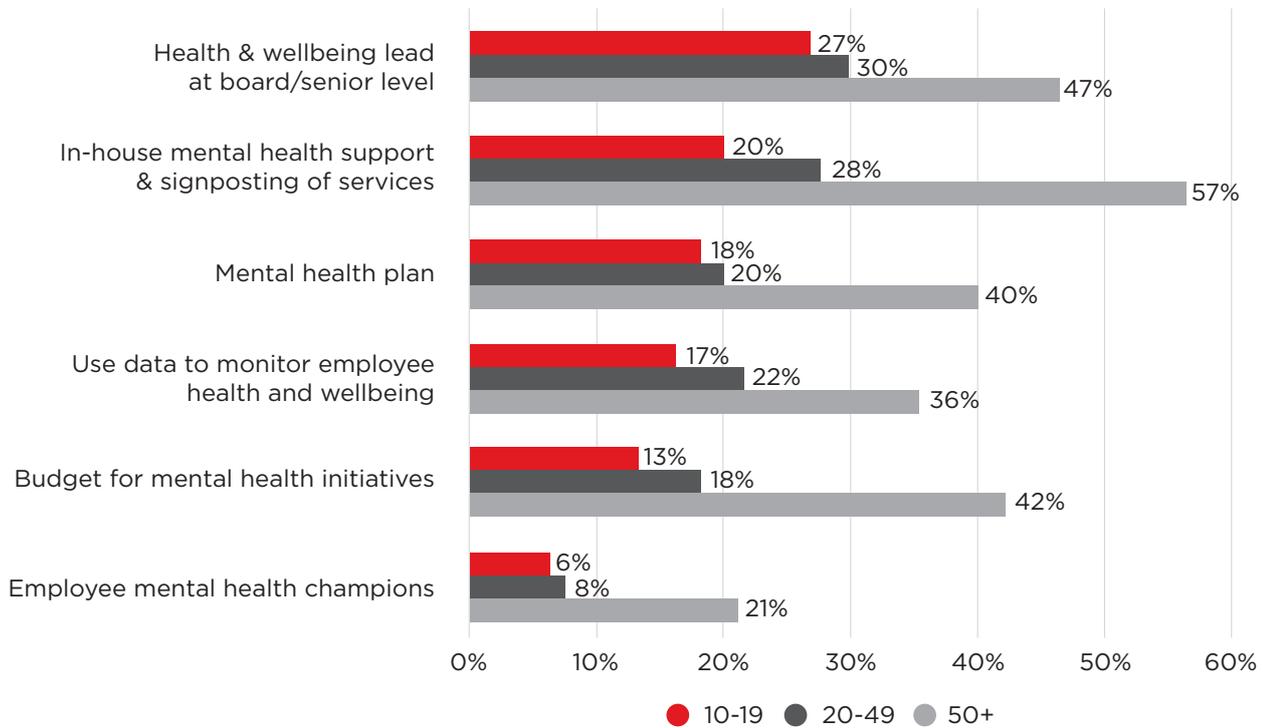
Figure 2.3: Mental Health & Well-being Practices in Irish Firms



14 ³Nielsen & Abildgaard (2013) define workplace health practices as ‘planned, behavioural, theory-based actions that aim to improve employee health and well-being through changing the way work is designed, organised, and managed’ (p. 278).

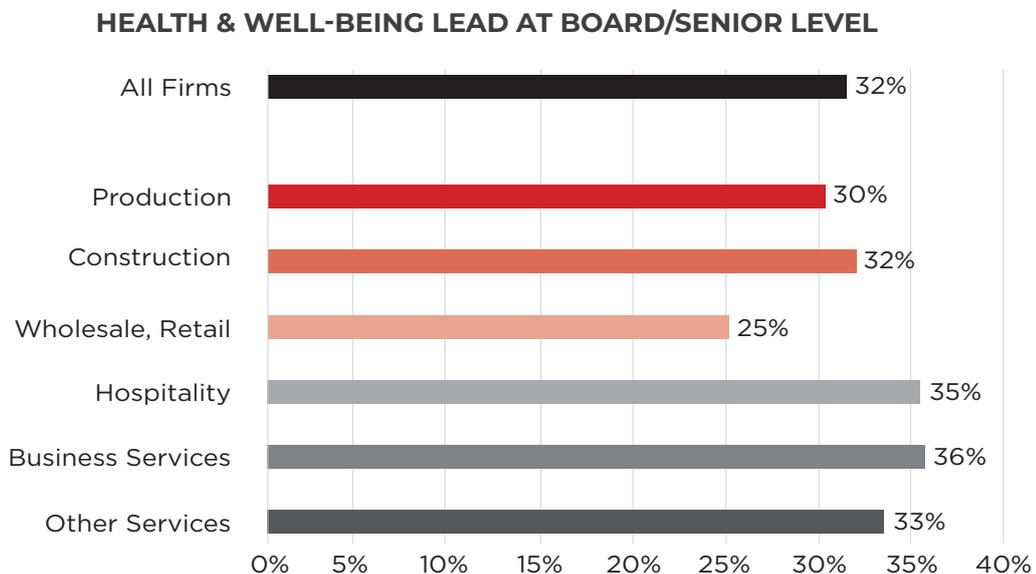
A common pattern emerges in relation to firm size, with larger employers more likely to adopt mental health and well-being activities (see Figure 2.4). Of the most widely adopted practice, we observe that 57 per cent of larger firms implement in-house mental support and signposting of services compared to 28 and 20 per cent of smaller firms with 20-49 and 10-19 employees.

Figure 2.4: Mental Health & Well-being Practices by firm size

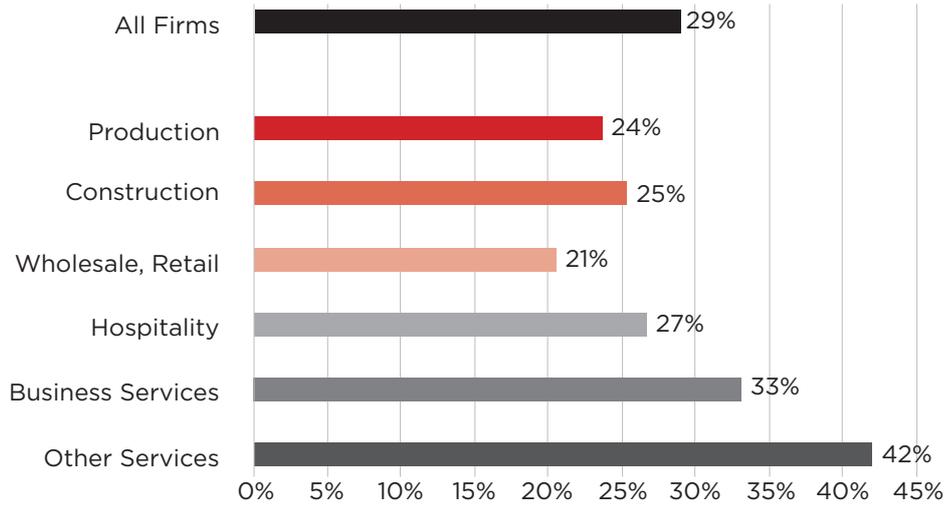


Engagement with workplace initiatives to support mental health and well-being activities also varies depending on the sector (see Figure 2.5). For example, the most widely adopted initiative was implementing a mental health and well-being lead at senior level which is highest among business in the business services (36 per cent) and hospitality sectors (35 per cent). Nearly 30 per cent of firms in the business and non-business services have a mental health budget. In general, firms in the wholesale/ retail sector are the least likely to adopt any one of the six mental health and well-being practices.

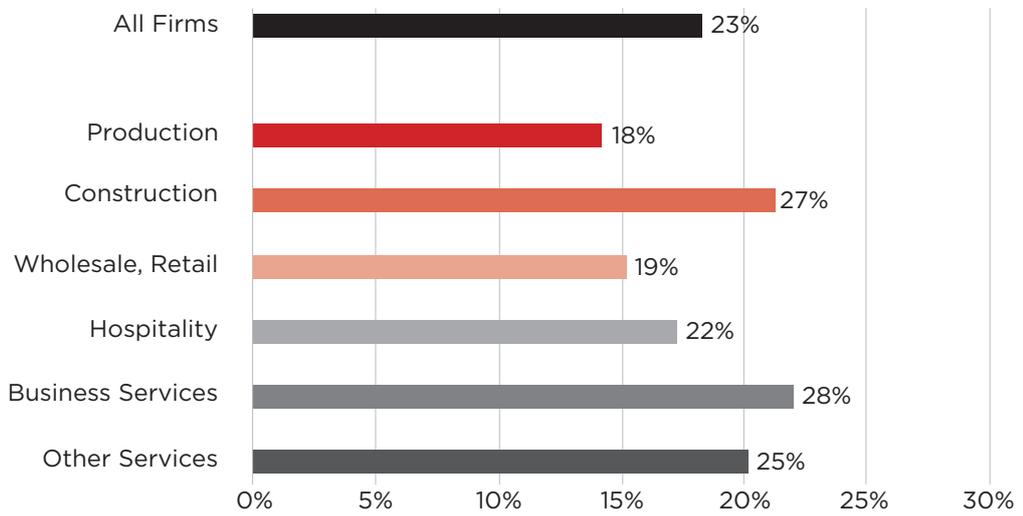
Figure 2.5: Mental Health & Well-being Practices by Sector



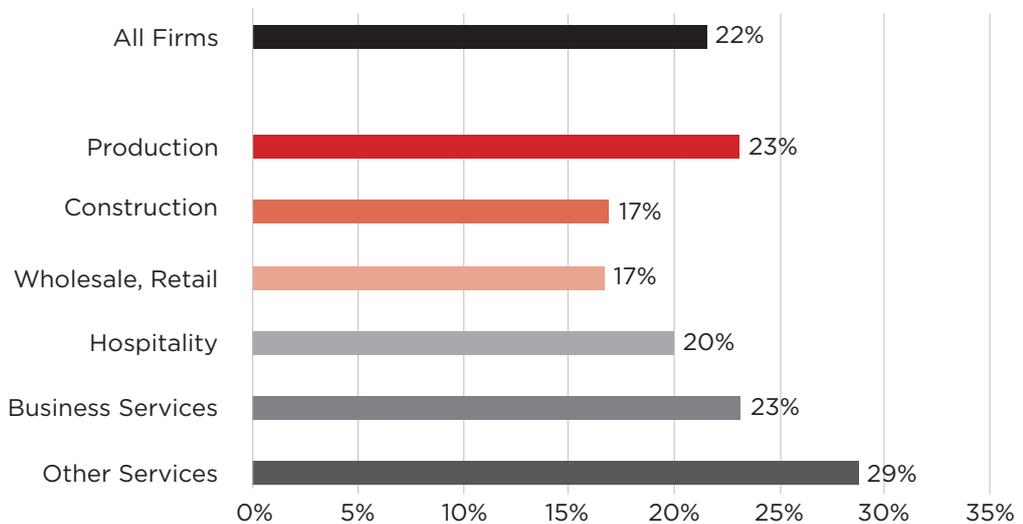
IN-HOUSE MENTAL HEALTH SUPPORT & SIGNPOSTING OF SERVICES



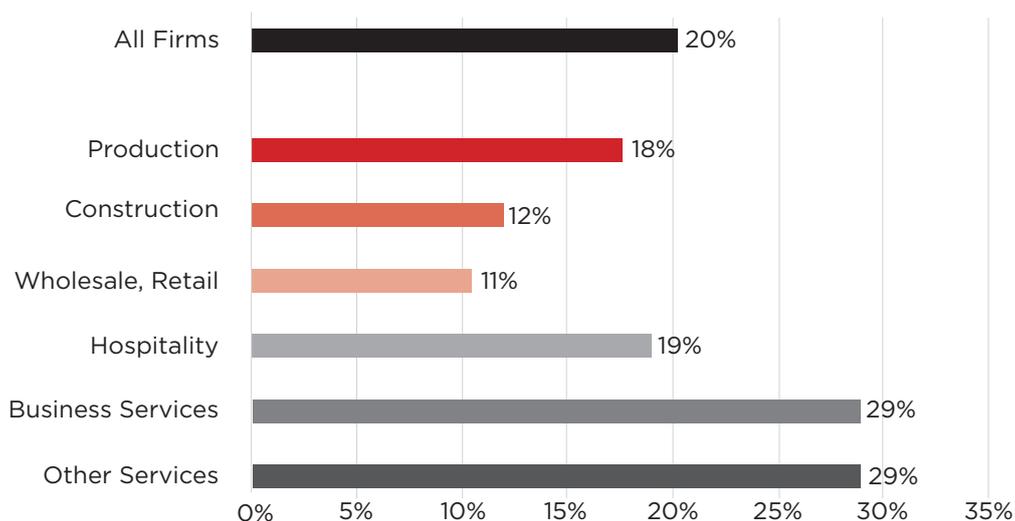
MENTAL HEALTH PLAN



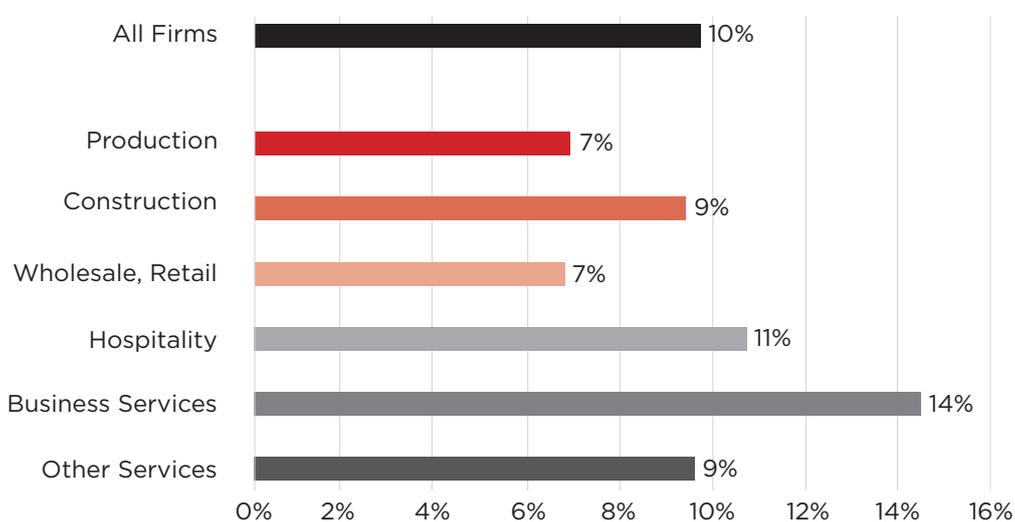
USE DATA TO MONITOR EMPLOYEE HEALTH AND WELL-BEING



BUDGET FOR MENTAL HEALTH INITIATIVES



EMPLOYEE MENTAL HEALTH CHAMPIONS



From a regional perspective, businesses in Dublin are most likely to adopt mental health and well-being practices, with the exception of health and well-being lead at board/senior level which has a slightly higher adoption by firms in the Mid-East region of Ireland, as seen in Table 2.1.

Table 2.1: Mental Health & Well-being Practices, by Region

	IRELAND	BORDER	WEST	MID-WEST	SOUTH-WEST	SOUTH-EAST	DUBLIN	MID-EAST	MID-LANDS
Health & well-being lead at board/senior level	32%	19%	29%	31%	30%	30%	37%	39%	27%
In-house mental health support & signposting of services	29%	21%	30%	24%	25%	28%	37%	32%	29%
Mental health plan	23%	17%	21%	17%	22%	23%	27%	26%	26%
Use data to monitor employee health and well-being	22%	18%	16%	21%	21%	21%	27%	22%	17%
Budget for mental health initiatives	20%	8%	20%	17%	15%	14%	22%	20%	20%
Employee mental health champions	10%	2%	9%	6%	11%	10%	13%	12%	8%

In summary, firms we surveyed recognise that they have a role to play in supporting their employees' mental health and well-being. However, only 20 per cent of firms in Ireland having a dedicated mental health budget, 23 per cent having a mental health plan and 32 per cent having a mental health lead at board/senior level. Engagement with workplace initiatives to support mental health and well-being activities is subject to size and sectoral differences. Next, we compare absenteeism and presenteeism and their business implications in Irish firms with their English counterparts, as well as uptake of supports for workplace mental health and well-being.



SECTION 3

EMPLOYEE MENTAL HEALTH & WELL-BEING IN IRISH WORKPLACES

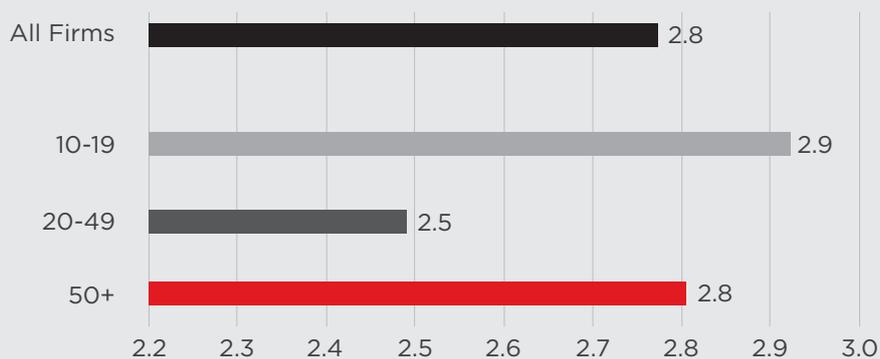
3.1 Introduction

Poor employee mental health and well-being is reflected in both sickness absence and presenteeism. Absenteeism imposes costs on employers, can cause disruption in a workplace, and may increase pressure on managers and work colleagues. Presenteeism – working while unwell – can have similar effects but is often more difficult to identify, manage and support. In this section we profile levels of absenteeism and presenteeism in different groups of Irish firms and consider their business impacts.

3.2 Sickness absence in firms in Ireland

On average, Irish firms report 2.8 sick days per employee each year (see Figure 3.1). The average number of sick days is lower in firms with 20-49 employees (2.5 sick days) compared to firms with 10-19 employees (2.9 sick days) and 50+ employees (2.8 sick days).

Figure 3.1: Sick Days per employee year, by firm size



Figures 3.2 and 3.3 compare sickness absence across sectors and regions respectively. The average number of sick days is higher in firms in the production sector (3.0 sick days) and lowest for firms in the business services sector (2.3 sick days). In terms of the regions, firms in Dublin experience an average 3.0 days sick leave per employee year whereas firms in the Mid -West region experience the fewest sick days with an average of 2.4 days per year (Figure 3.3).

Figure 3.2: Sick Days per employee, by Sector

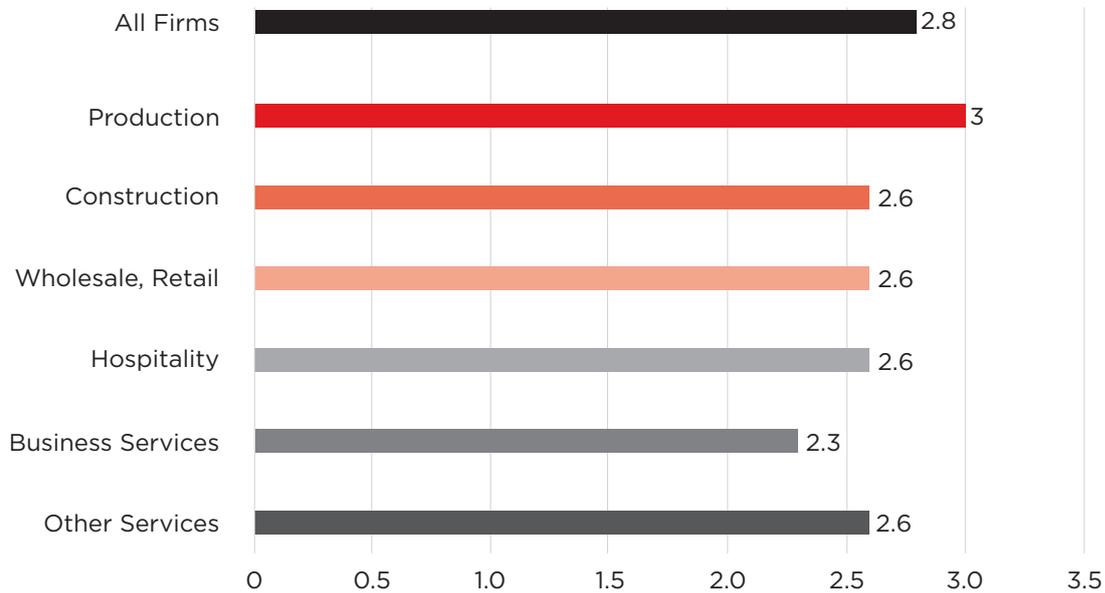
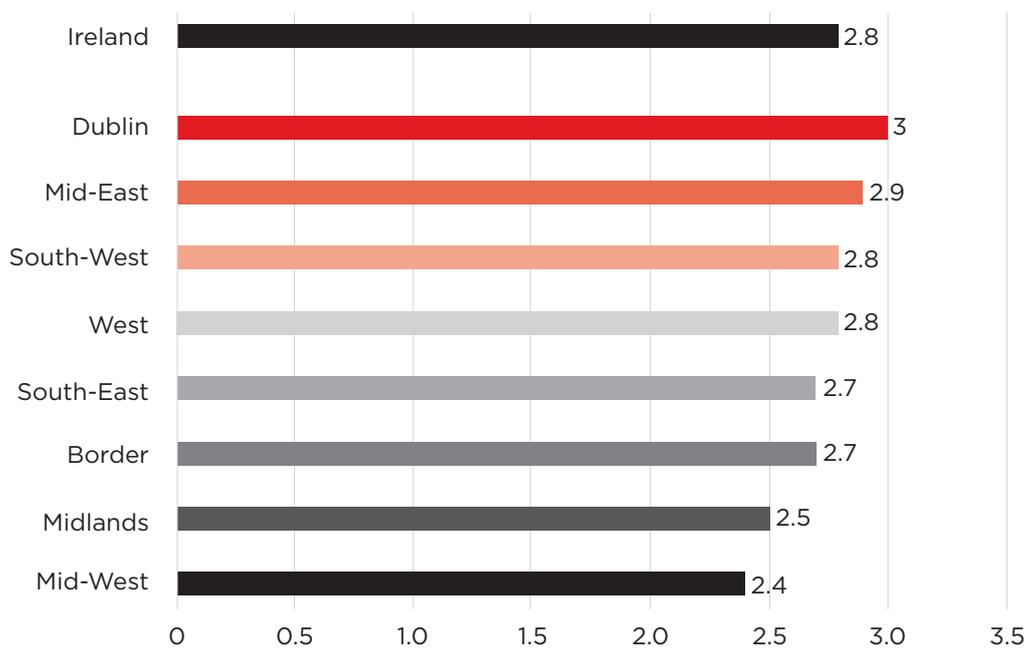


Figure 3.3: Sick Days per employee, by Region



3.3 Mental health absence

The proportion of firms that report that their employees have taken mental health related sickness absence over the last year is 18 per cent (see Figure 3.4). There are clear firm size differences, with 40 per cent of larger firms reporting that employees have taken mental health related sick leave. We also see considerable differences across sectors. The proportion of businesses reporting mental health related absence is lower in the construction sector (17 per cent) and highest among business service sectors (24 per cent) (Figure 3.5). The proportion of businesses that have experienced employee mental health related absences is also highest in Dublin (20 per cent) and lowest for firms located in the Border region (15 per cent) (Figure 3.6). These regional differences may reflect, at least in part, differences in sectoral composition between areas.

Figure 3.4: Proportion of Firms that experience Mental Health absenteeism, by firm size

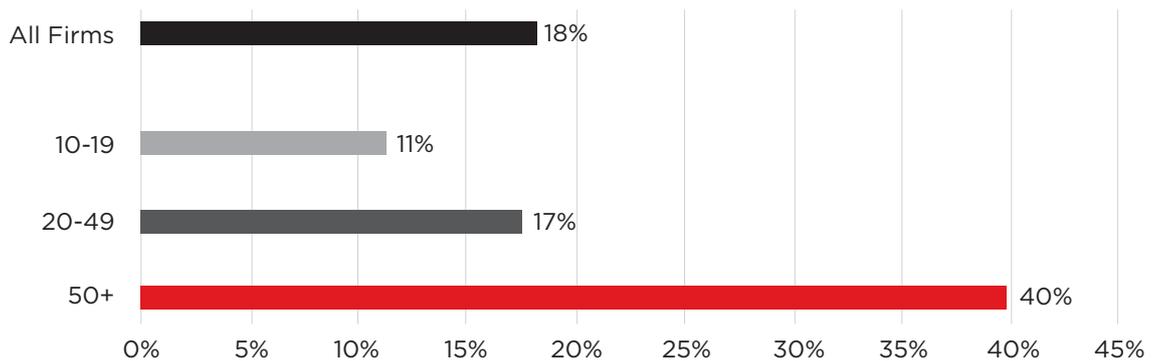


Figure 3.5: Proportion of firms experience Mental Health absenteeism, by Sector

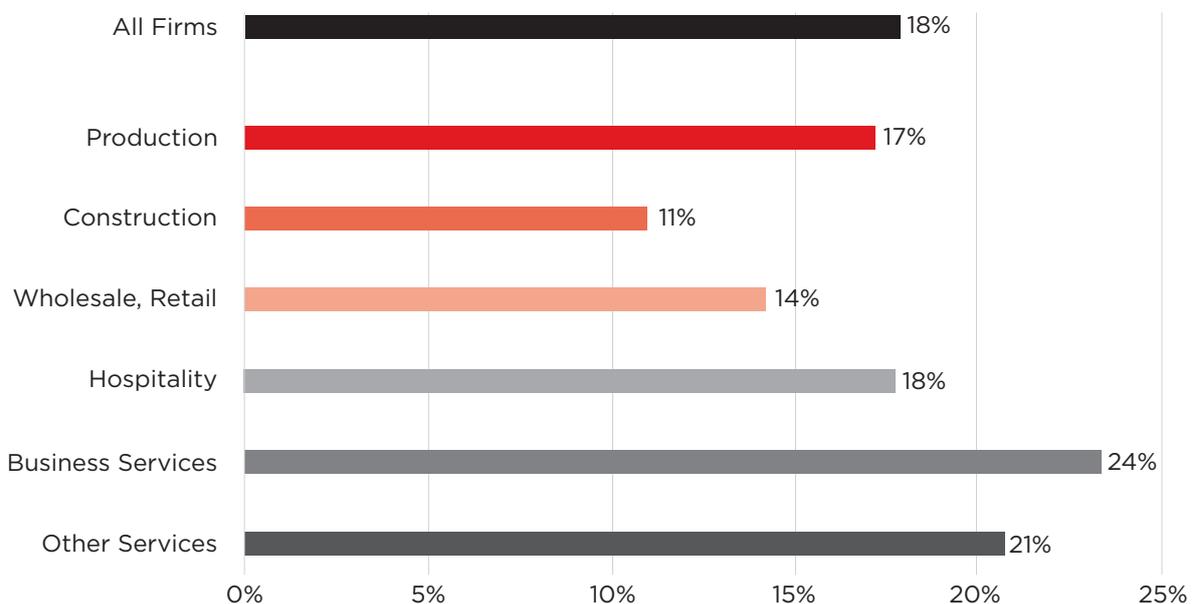
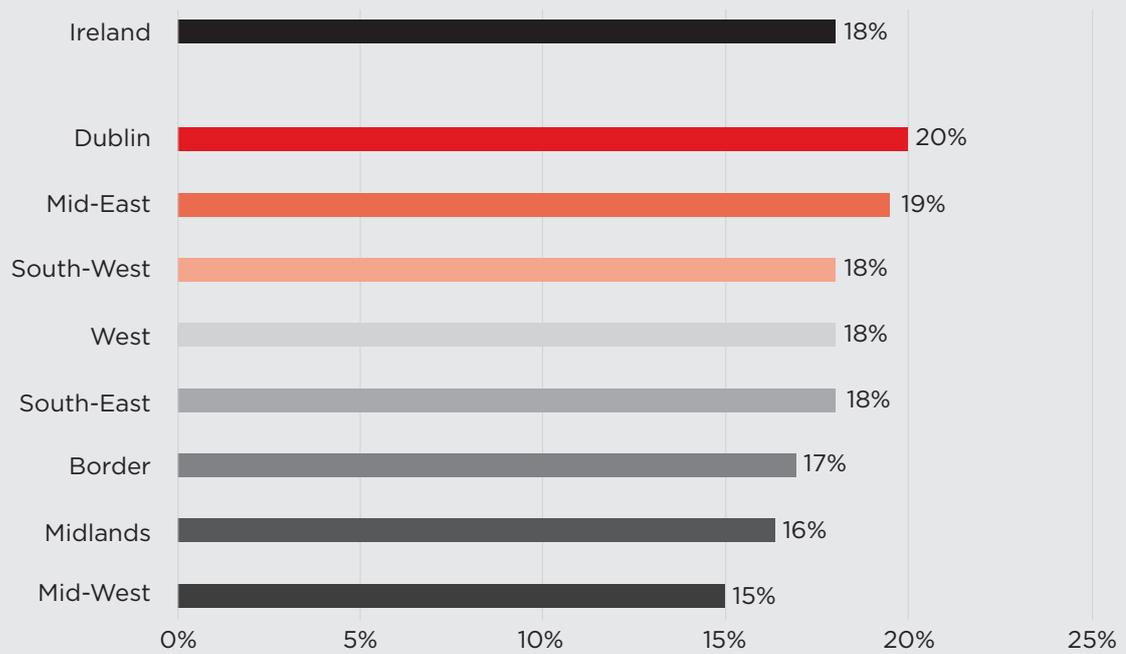
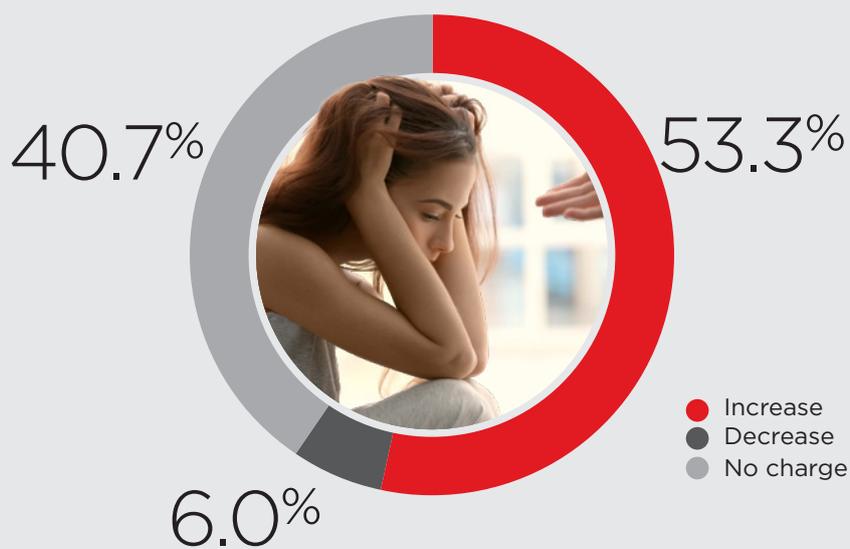


Figure 3.6: Proportion of firms that experience Mental Health absenteeism, by Region



The COVID-19 pandemic, and the shifts in working practices associated with it, have meant considerable changes in how businesses experience mental health related absence. In the last 12 months, since the worst of the COVID-19 pandemic, the proportion of businesses experiencing sickness absence due to mental health concerns has increased by over fifty per cent (see Figure 3.7).

Figure 3.7: Proportion of Sickness Absence due to Mental Health reasons in the last 12 months



3.4 Impact of absenteeism on business performance

64 per cent of firms report that sickness absence impacted the operation or performance of their business in the year before the survey, and this figure is similar across different firm sizes (see Figure 3.8). The proportion of firms where the impact of absenteeism is greatest is in non-business services firms (70 per cent) and lowest among business services firms (53 per cent) (see Figure 3.9). Focusing on firms that reported mental health related absences, almost half of these firms report mental health-related sickness absence impacts on the operation or performance of their business (see Figure 3.10).

Figure 3.8: Sickness absence impacts on Business Operations or Performance, by firm size

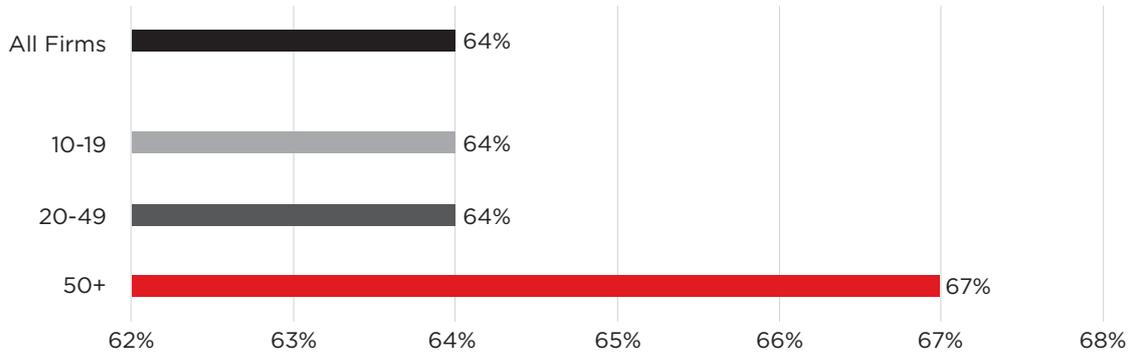


Figure 3.9: Sickness absence impacts on Business Operations or Performance, by Sector

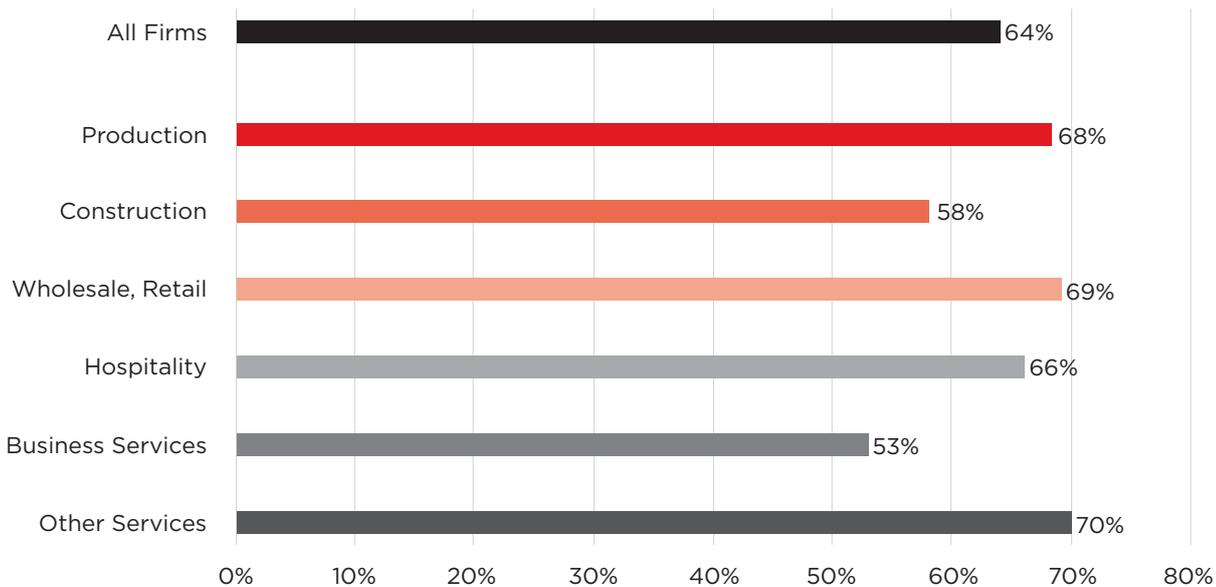
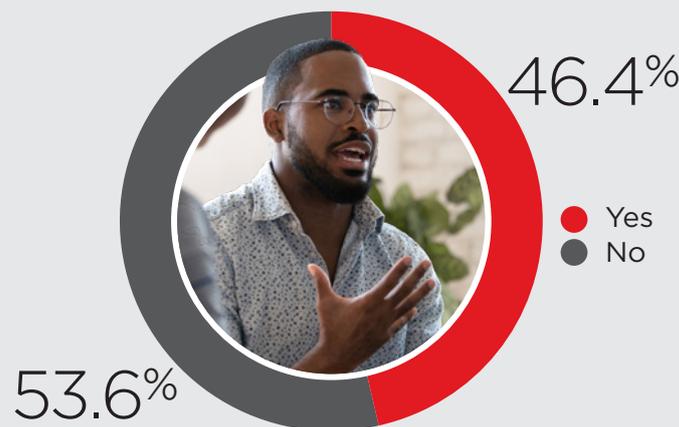


Figure 3.10: Mental Health-related Sickness absence impacts business operations or performance



n=291

Respondents were also asked how sickness absence impacts on the operation or performance of their business. They spoke about how absenteeism puts pressure on remaining staff, as well as intensifying time pressures to finish critical projects on schedule. When asked specifically about mental health sickness absenteeism, similar concerns were raised around staff shortages and productivity, as well as issues around interactions with colleagues and reduced interest in work tasks.

“ Ability to finish critical high standard projects on time.

A large (50+ employees) business services firm in the Mid-East

It puts more pressure on the remaining staff and the workload builds up to be picked up when they come back.

A small (10-19 employees) wholesale/retail firm in the Mid-East

“ A lack of interest in work, they get agitated, not getting along with colleagues, not completing tasks and very little work done at the end of the day.

A small (10-19 employees) production business in the Midlands.

“ Leaves us short staffed.

A small (20-49 employees) hospitality firm in the South-West.

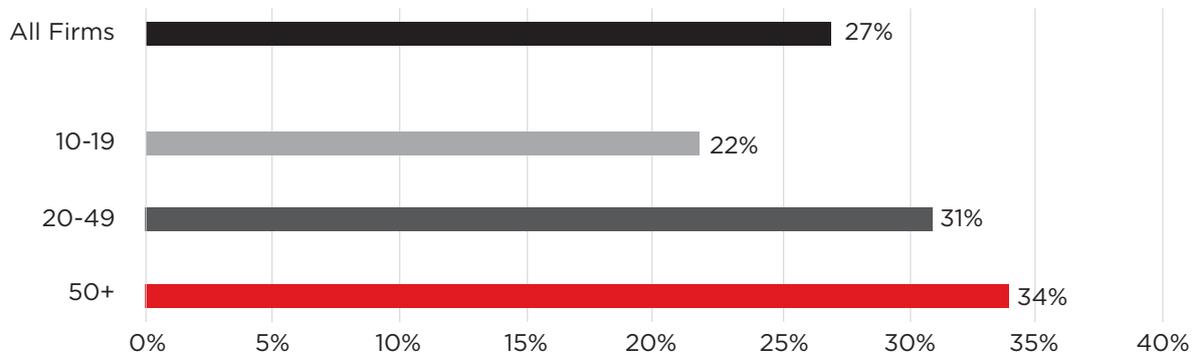
“ The cost of replacement staff, impact on customer service, lack off productivity.

A small (20-49 employees) services (non-business) firm in the Mid-West

3.5 Presenteeism

The term presenteeism describes a situation where employees report for work while they are ill, potentially affecting performance or lowering productivity. Also, it can imply that employees are working beyond their contracted hours. Stress and other mental health conditions, such as depression, anxiety, and emotional problems, are often linked to presenteeism.⁴

Figure 3.11: Proportion of firms that report presenteeism, by firm size



The proportion of businesses reporting presenteeism, where workers are present in the workplace but underperforming due to ill health or working beyond their contracted hours is 27 per cent. A slightly higher proportion of larger firms report presenteeism (Figure 3.11). Presenteeism is reported by 35 per cent of firms within the business service sector, and a further 32 per cent of businesses in the other services sector (Figure 3.12). The highest proportion of businesses reporting presenteeism is among those based in Dublin and the South- West regions of Ireland. The lowest proportion of firms reporting presenteeism is among those based in the West of Ireland and the Border region.

Figure 3.12: Proportion of firms that report presenteeism, by sector

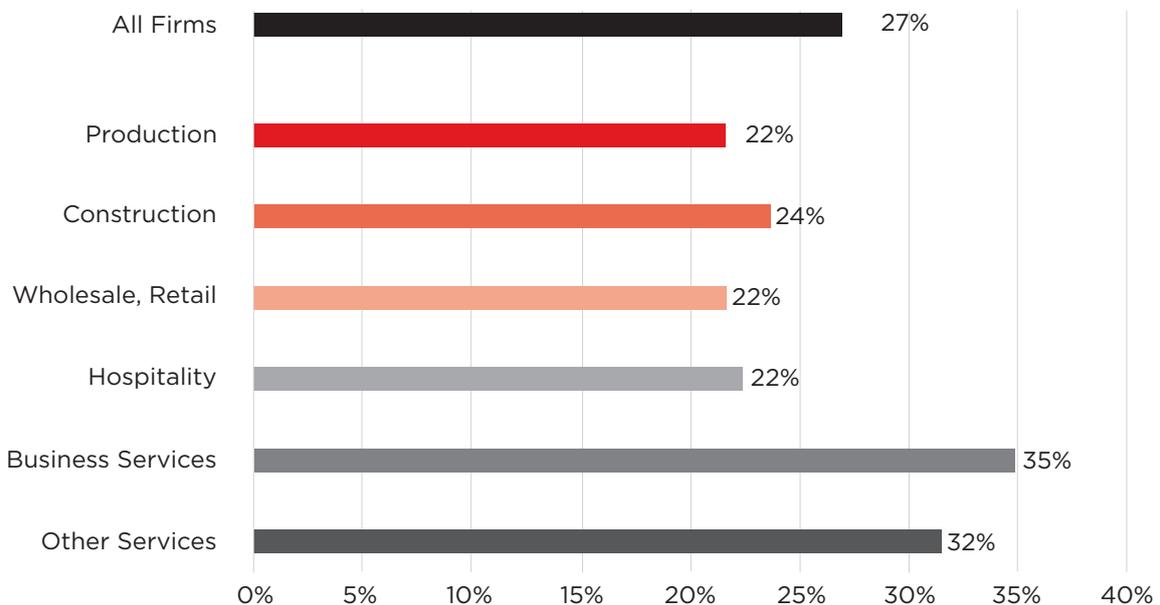
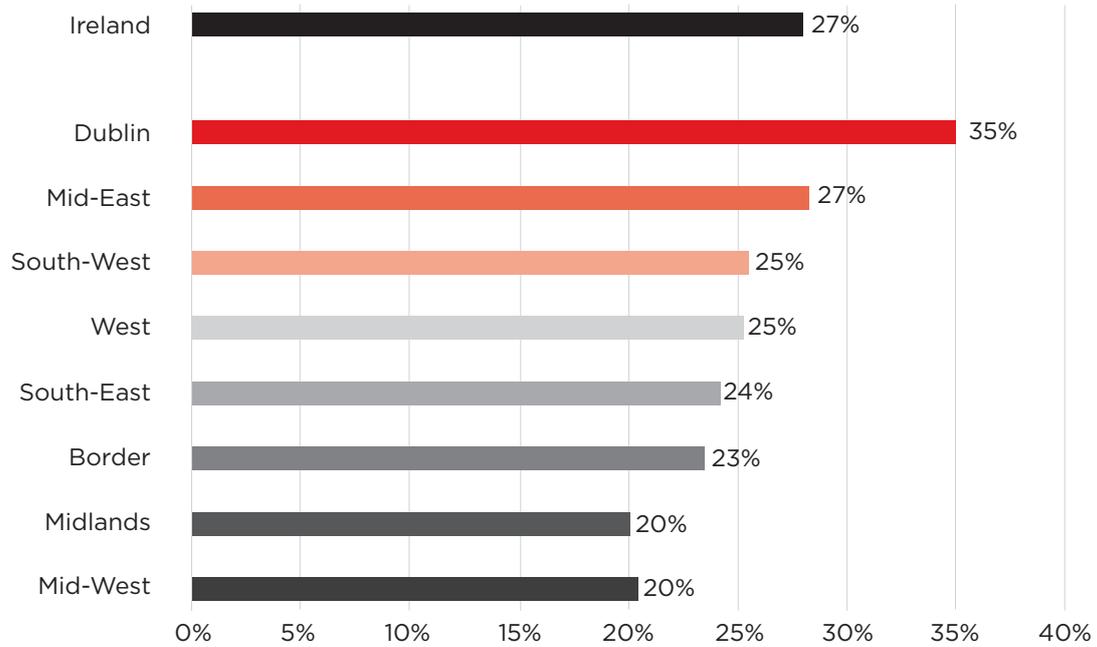


Figure 3.13: Proportion of firms that report presenteeism, by Region

In summary absenteeism and presenteeism affects business performance. 64 per cent of firms report that sickness absence impacts on the operation or performance of their business, and this figure is similar across different firm sizes. Since the pandemic, the proportion of sickness absence due to mental health reasons has increased. Therefore, in the next section, we consider the role that employers play in supporting mental health and well-being at the workplace.





SECTION 4

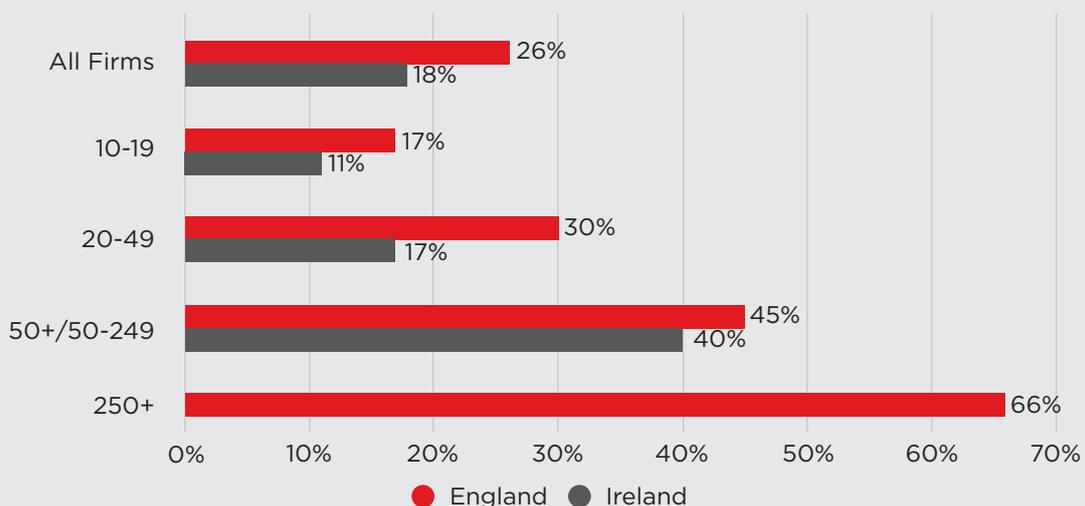
BENCHMARKING WORKPLACE MENTAL HEALTH AND WELL-BEING IN IRELAND

In this section, we compare the incidence of workplace mental health and well-being issues in Irish firms to that in firms in England. Data for around 1900 English firms across the East and West Midlands was collected in early 2022, a period during which the incidence of COVID-19 in England was still significant.⁵ The English survey closely followed the pattern of that undertaken in Ireland: the survey was conducted by telephone; respondents were the person in the company with responsibility for workplace mental health and well-being; and the survey provides representative coverage of firms with 10 or more employees.

4.1 Mental Health Absenteeism in England and Ireland

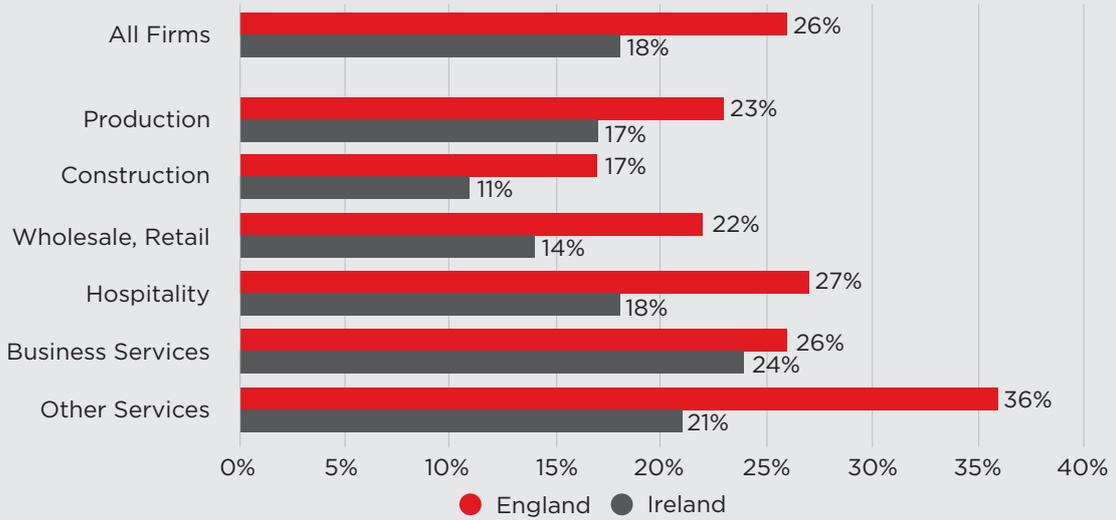
Overall, the proportion of Irish firms reporting incidents of mental health sickness absence (18 per cent) was lower than that in England (26 per cent), a pattern repeated across sectors and firm size bands (Figure 4.1 & Figure 4.2). The proportion of firms reporting mental health absence in larger English firms and those in the non-business services sector was notably higher than that in Ireland.

Figure 4.1: Firms reporting mental health sickness absence, by firm size



Note: In the English sample due to the larger sample size separate figures are available for firms with 50-249 and 250 plus employees.

Figure 4.2: Firms reporting mental health sickness absence, by sector



Perhaps reflecting the higher prevalence of mental health sickness absence in England, the proportion of firms in England reporting that sickness absence (due both to mental health and other issues) at 70 per cent was higher than that in Ireland at 64 per cent (Figure 4.3). Again, the same pattern is consistent across sectors and firm size bands with notably higher levels of performance issues reported by larger firms in England (Figure 4.3 & Figure 4.4).

Figure 4.3: Absenteeism impacting business operations and performance, by firm size

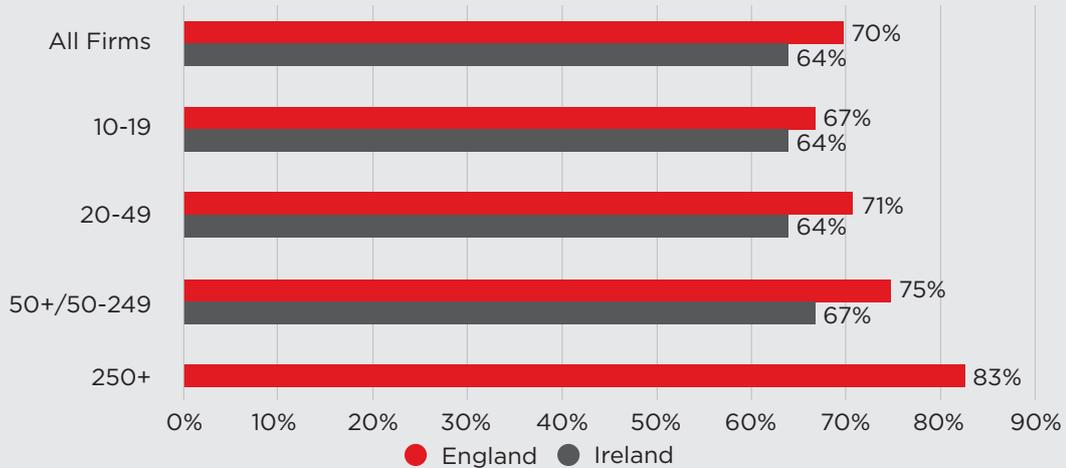
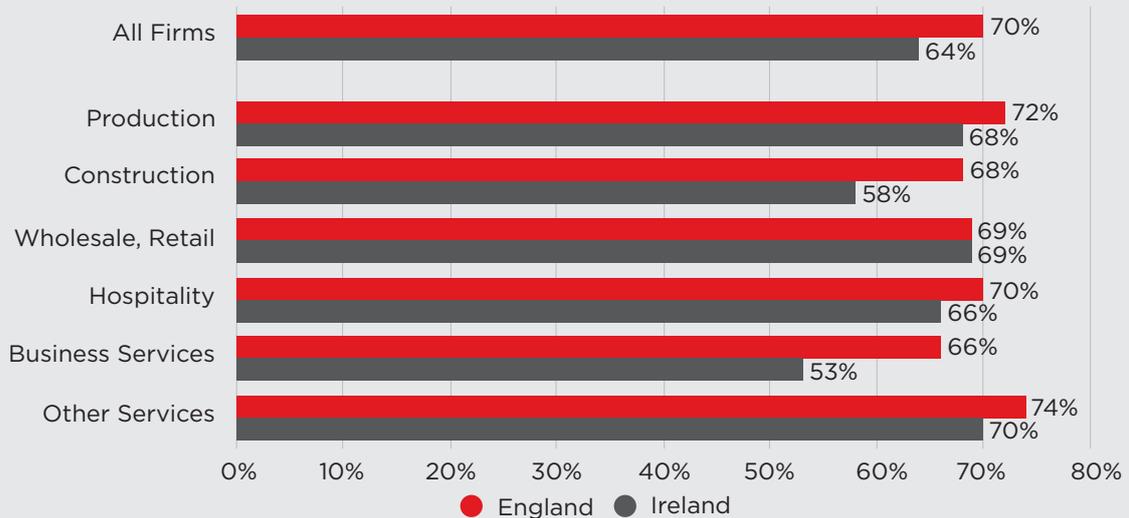


Figure 4.4: Absenteeism impacting business operations and performance, by sector



4.2 Presenteeism in England and Ireland

Conversely, presenteeism – working when ill - was reported by 27 per cent of Irish firms, higher than the 21 per cent reporting presenteeism in England (Figure 4.5), again a pattern which was consistent across sectors and firm size bands. Business services firms and other (non-business) services firms in Ireland were notably more likely to report presenteeism than their English counterparts (Figure 4.6).

Figure 4.5: Firms reporting presenteeism, by firm size

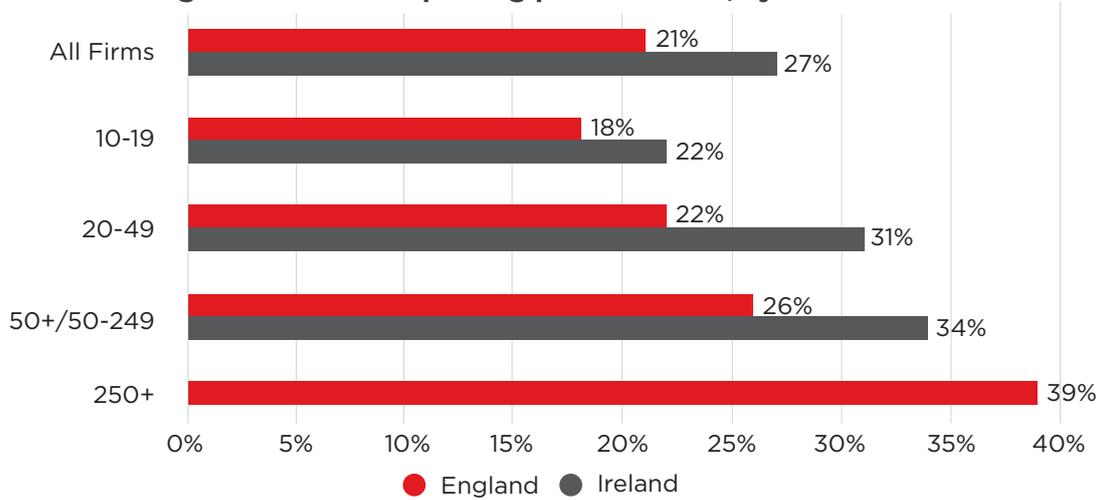


Figure 4.6: Firms reporting presenteeism, by sector

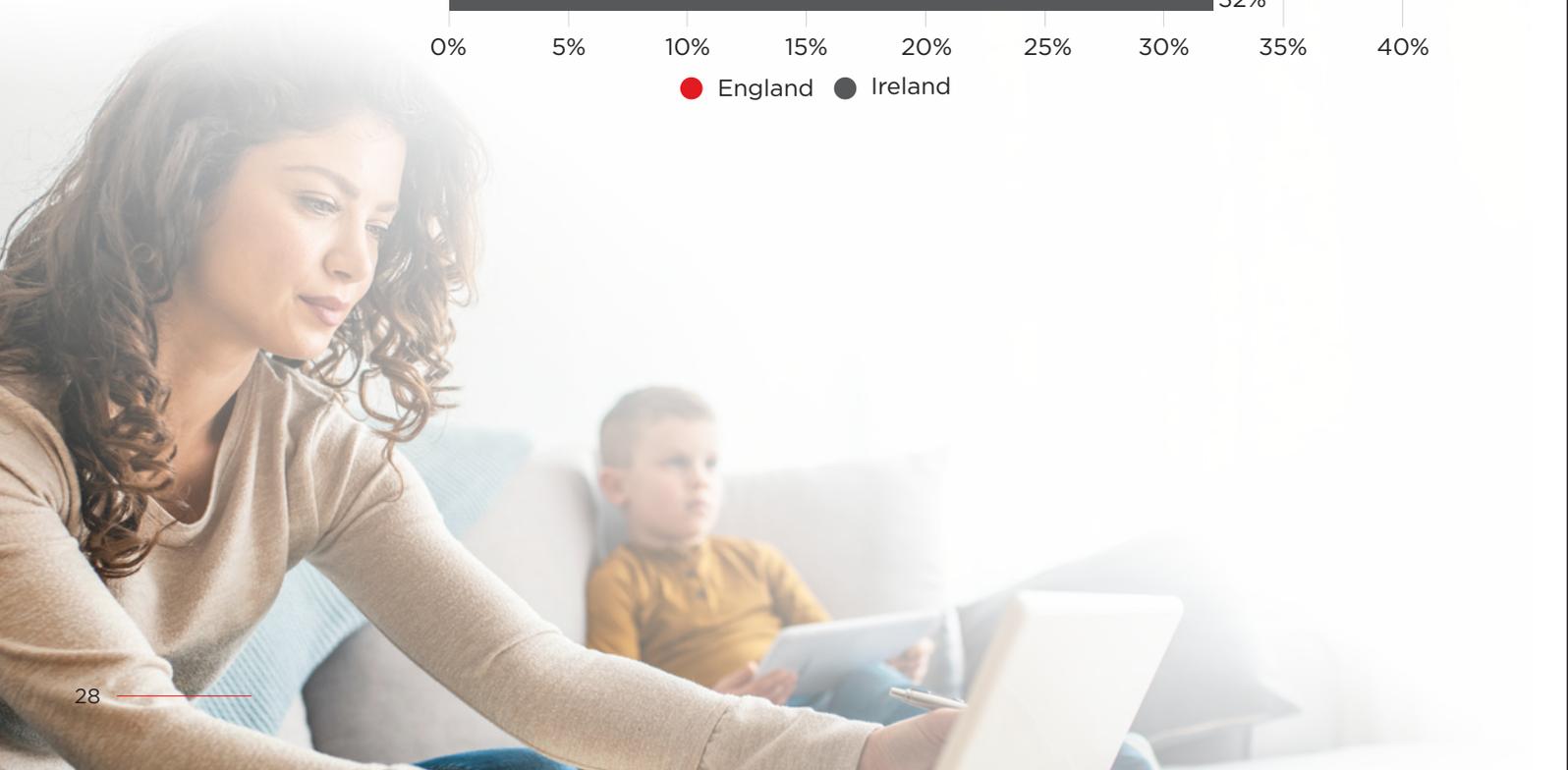
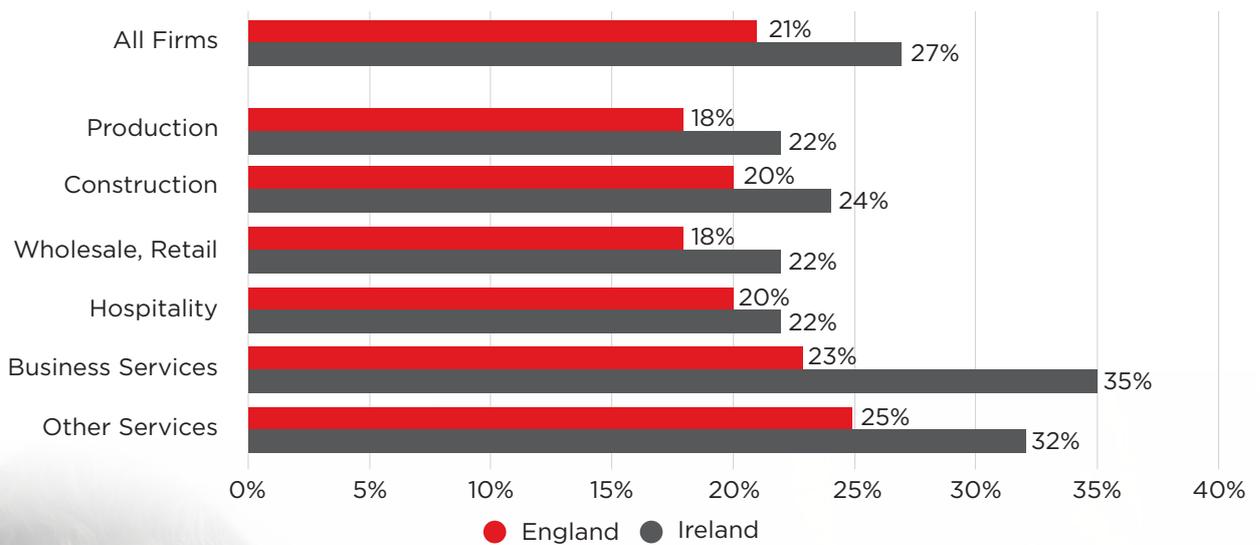


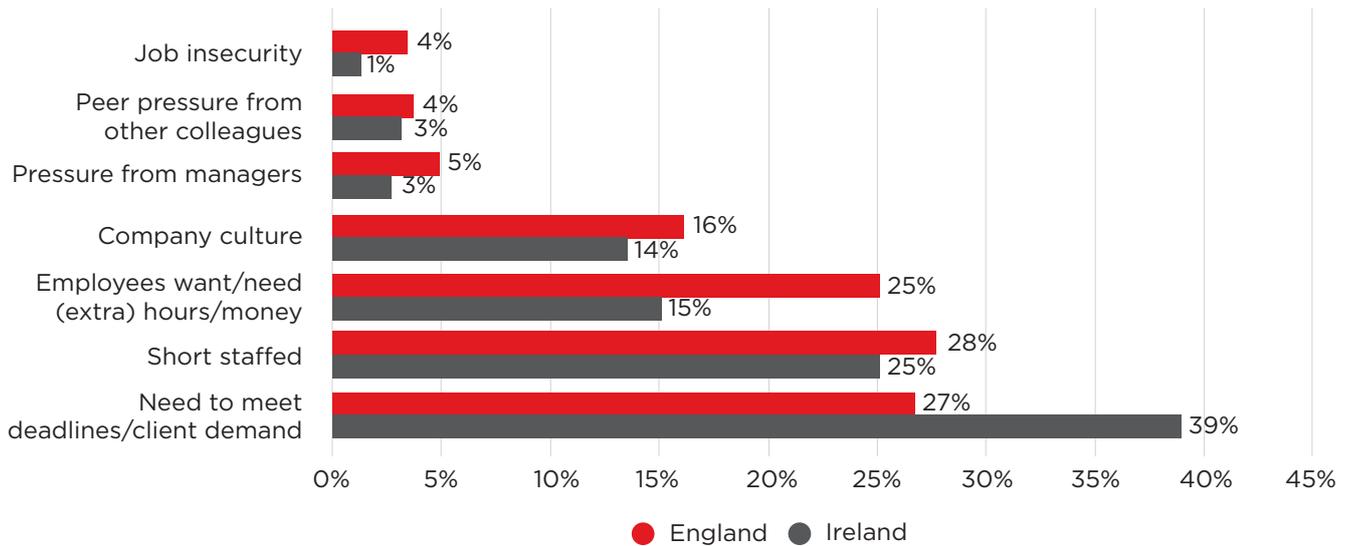
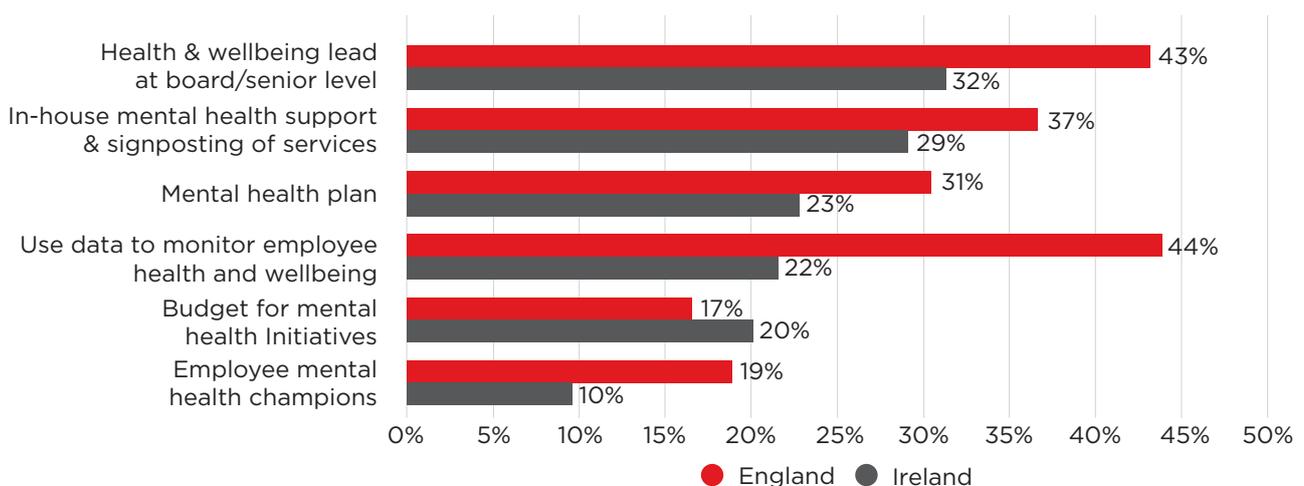
Figure 4.7: Reasons for Presenteeism in England & Ireland

Figure 4.7 shows the reasons for presenteeism reported by employers in England and Ireland. The most commonly cited reasons for presenteeism is due to the need to meet deadlines/client demand, staff shortages and employees want/need (extra) hours/money. A higher proportion of Irish firms reported the need to meet deadlines/client demand (39 per cent) in comparison to 27 per cent of business in England. Whereas a higher proportion of businesses in England (25 per cent) found that staff shortage and employees needing more money were reasons for presenteeism in comparison to firms in Ireland.

4.3 Mental Health & Well-being Workplace Supports in England and Ireland

While Irish firms report a lower incidence of mental health absence and performance impacts of sickness absence, they are also less likely to be implementing measures to support employee mental health than their English counterparts (Figure 4.8). Irish firms were notably less likely to have a mental health plan, a mental health lead at board level and are significantly less likely to monitor employee well-being than their English counterparts.

Figure 4.8: Proportion of firms reporting mental health practices

In summary, the incidence of workplace mental health and well-being issues differs between Irish and English firms. The proportion of Irish firms reporting incidents of mental health sickness absence is lower than that in England, irrespective of sector or firm size. Although, presenteeism tends to be more prevalent in Irish firms. We see fewer Irish employers engage in mental health and well-being initiatives, as they are notably less likely to have a mental health plan, a mental health lead at board level and are significantly less likely to monitor employee well-being than their English counterparts. In the next section, we report on the changing workplace in Ireland.



SECTION 5

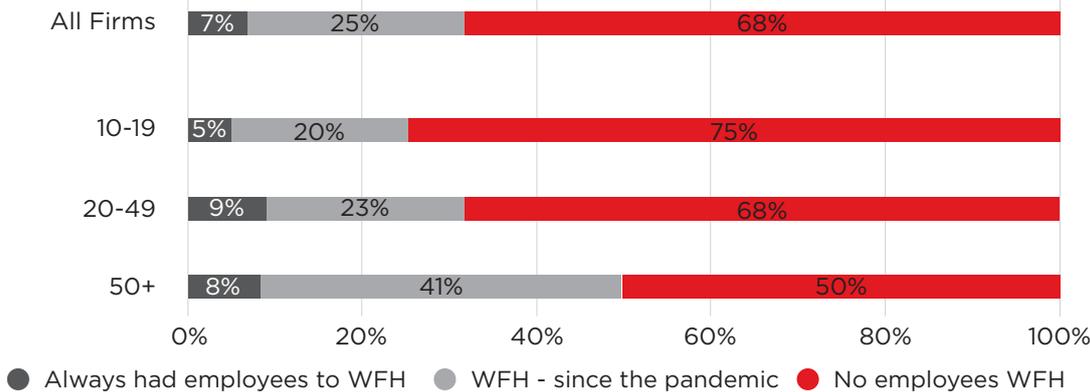
THE CHANGING NATURE OF IRISH WORKPLACES

The COVID-19 pandemic has transformed working practices, brought many challenges, and led to significant changes that will be long-lasting. According to the Centre for Economic Policy Research (CEPR), close to 18 per cent of workers work in occupations and live in countries with the infrastructure that would allow them to effectively perform their work from home; with this figure rising to 30 per cent for North American and Western European workers.⁶ Legislative changes in Ireland reflect these changes to the workplace. Ireland will shortly allow all workers the right to request remote work through the Work Life Balance Bill.⁷

5.1 Working from Home (WFH) in Ireland

Prior to the pandemic, approximately 7 per cent of firms in Ireland had employees who worked from home (see Figure 5.1). However, this figure has now increased to almost one in three firms with employees that work from home. More than two thirds of firms have no employees WFH. The proportion of smaller firms with no employees working remotely (75 per cent) is significantly higher than in larger firms. In fact, almost half of firms with 50+ employees have employees working remotely.

Figure 5.1: Changing patterns in Working from Home (WFH), by firm size



30 ⁶<https://cepr.org/voxeu/columns/working-home-estimating-worldwide-potential>
⁷<https://enterprise.gov.ie/en/news-and-events/department-news/2022/November/202211092.html>

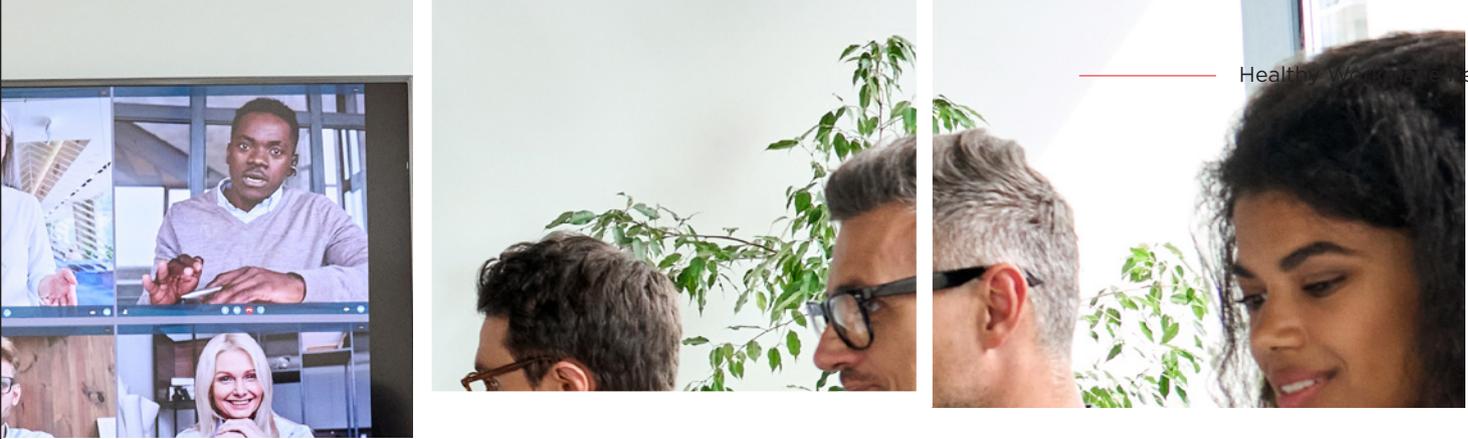
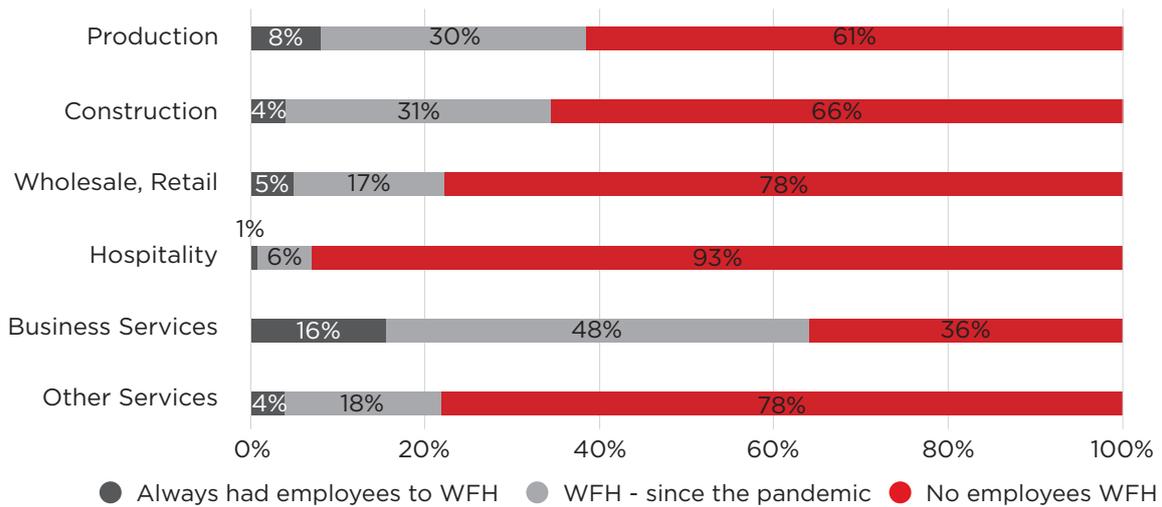


Figure 5.2: Changing patterns in Working from Home (WFH), by Sector



There are clear sectoral differences in WFH practices (see Figure 5.2). 16 per cent of business services firms always had employees working from home. Since the pandemic, the business service sector experienced the largest change in working patterns with a 48 per cent increase in the proportion of firms offering employees remote working. Opportunities to work from home are significantly fewer in hospitality firms (7 per cent), followed by wholesale and retail (22 per cent), and other (non-business) services firms (22 per cent). This is likely due to the nature of the work involved and the need for employees to work on site.

From a regional perspective, businesses in Dublin are more likely to have employees WFH (see Figure 5.3). Prior to the pandemic, 11 per cent of businesses in Dublin offered employees the flexibility to work remotely, with almost one in two Dublin firms now offering WFH to employees. The proportion of firms offering less flexibility with remote working are based in the Border (81 per cent), region, as well as in the South East (77 per cent) and Midlands (76 per cent).

Figure 5.3: Changing patterns in Working from Home (WFH), by Region

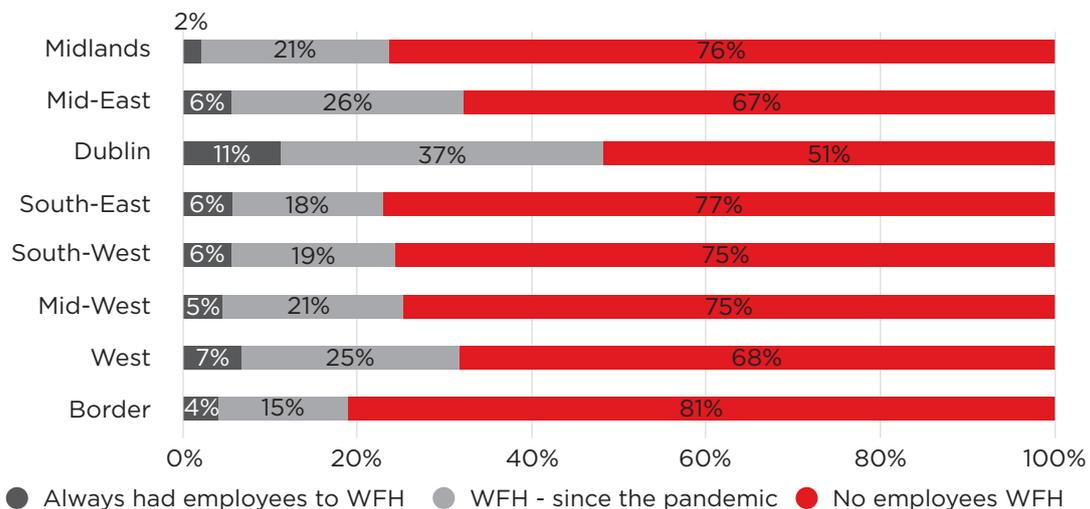
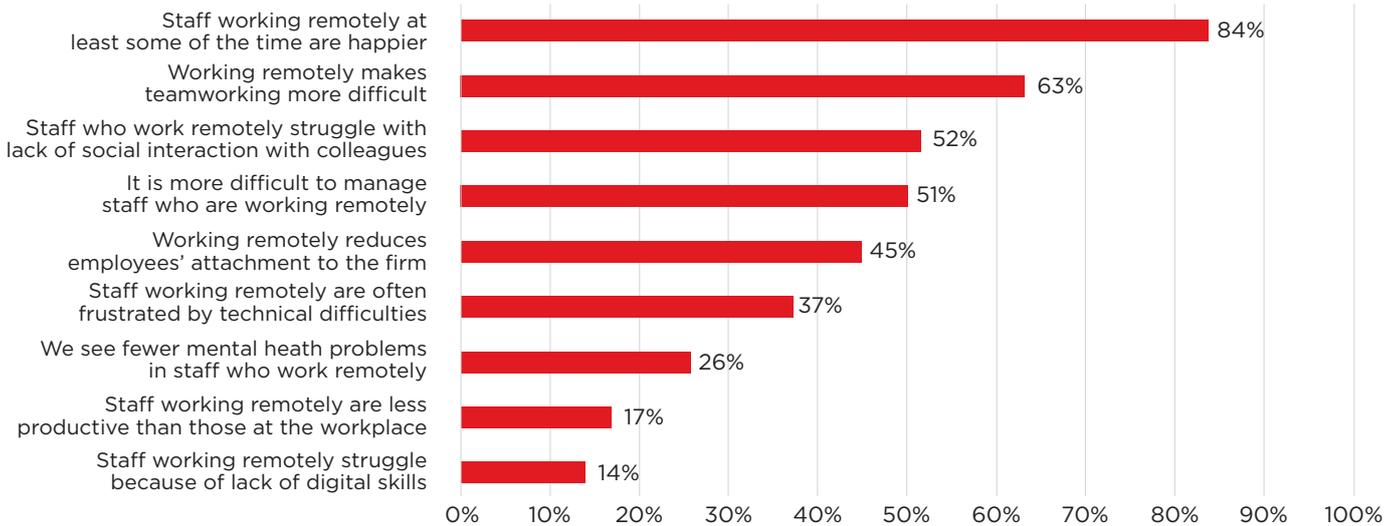


Figure 5.4: Firms experience of Remote & Hybrid working



Overall, employers view remote and hybrid working very positively. Most employers (84 per cent) agree that employees who work remotely tend to be happier at least some of the time. Less than 20 per cent of employers report that staff who work remotely are less productive than those at the workplace as seen in Figure 5.4. A drawback of remote and hybrid working is that 63 per cent of employers report that it makes team working more difficult.

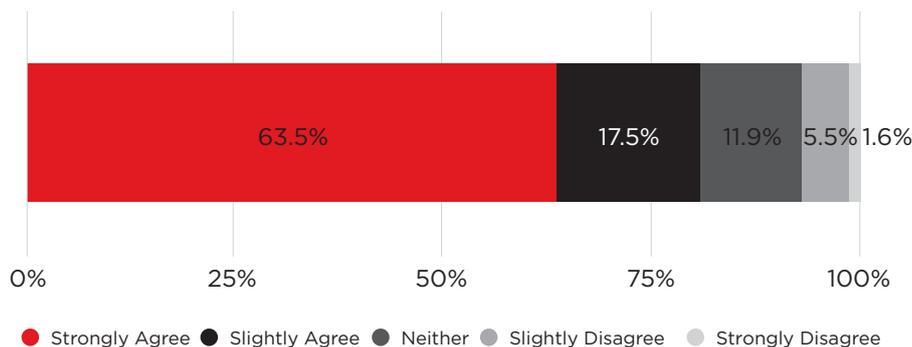
5.2 Work -Life Balance for WFH employees

Work-life balance is one of the most important components of a healthy work environment, and key to reducing stress and preventing burnout in the workplace. However, work-life balance means something a little different to everyone. While some employees see WFH as the freedom to undertake personal tasks and activities, studies show that remote workers often work more hours than people who report to an office.⁸

In Ireland, a new Code of Practice on the Right to Disconnect from work and have a better work-life balance while working remotely has been introduced.⁹ While a legal framework is yet to be proposed around employee requests, the aim is to create more flexible family-friendly working arrangements, including working from home and working more flexible hours. Depending on the nature of the business, some businesses will lend themselves easily to hybrid or blended model with a combination of remote and onsite work practices. This opportunity is also introduced to build on Ireland's Rural Future Plan, transforming rural Ireland by facilitating more people to work remotely and flexibly.

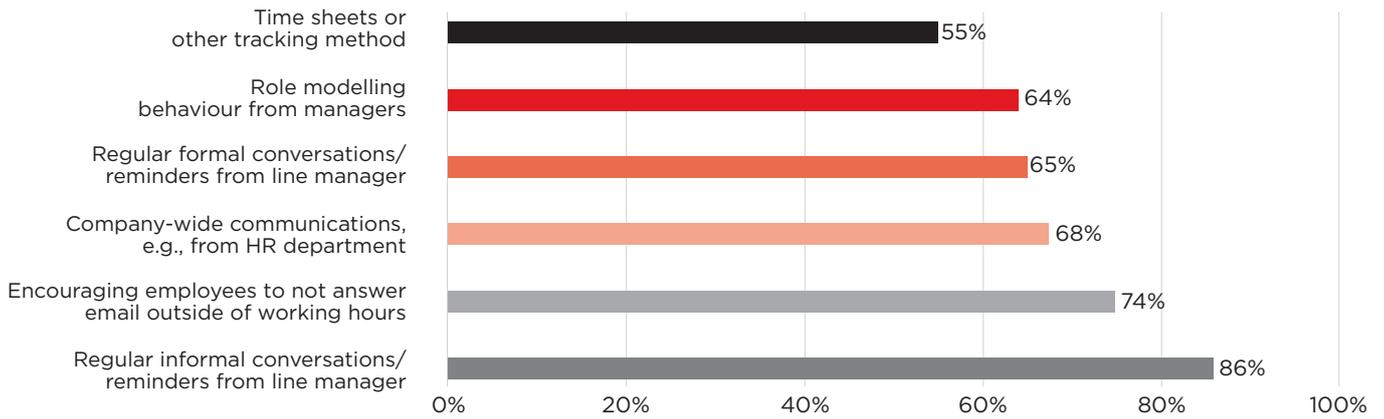
Over 60 per cent of firms who have employees WFH strongly agree that their company encourages these employees to maintain a clear distinction between work and leisure time. An additional 17.5 per cent of employees slightly agree with the statement (see Figure 5.5).

Figure 5.5: Proportion of firms that encourage WFH employees to maintain a clear distinction between work and leisure time



Note: n=507. Statement: And thinking about your employees who work from home to what extent do you agree or disagree that "your company encourages employees working at home to maintain a clear distinction between work and leisure time"?

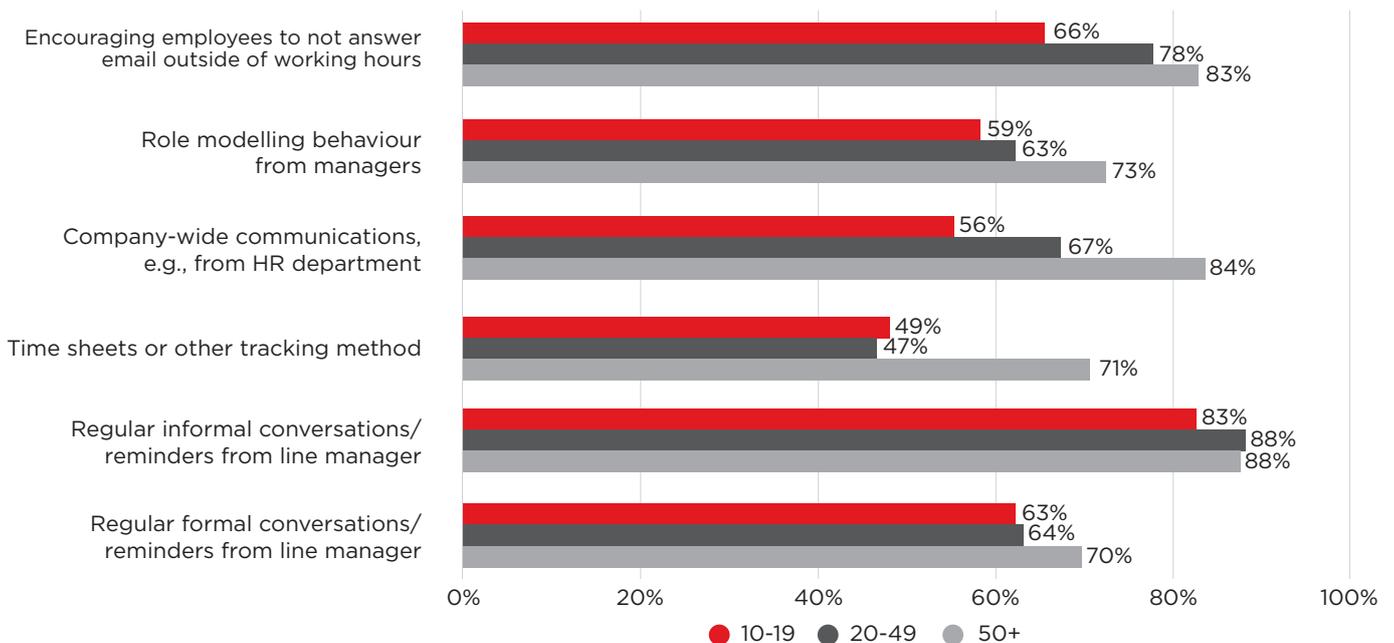
Figure 5.6: How firms encourage a clear distinction between work and leisure for those working remotely



While employers can't *give* their employees a work-life balance, they play an important role in supporting and encouraging employees to distinguish between work and leisure time when working remotely. Such supports can include regular formal and informal conversations, communication ways, role modelling behaviour and time sheets. Most firms offer regular informal conversations/reminders from line managers (86 per cent), and 74 per cent encourage employees not to answer emails outside of working hours (see Figure 5.6).

In Figure 5.7, we consider the relationship between firm size and work-life balance supports. Larger firms (with 50+ employees) are most likely to issue company wider communication e.g. from the HR department (84 per cent), role modelling behaviour from managers (73 per cent) and time sheets or other tracking method (71 per cent). In general, firms with between 10 and 19 employees are less likely to have these supports in place. This could be due to resource constraints, more informal practices within smaller businesses and perhaps the lack of a distinct HR function.

Figure 5.7: How firms encourage a clear distinction between work and leisure for those working remotely, by firm size



Respondents were also asked what other ways their company encourages a clear distinction between work and leisure for those working remotely. Responses ranged from providing training sessions specifically on the importance of switching off to encouraging workers to work flexibly and use time during the day for personal reasons if needed. One firm encourages employees to come into the office once a week to encourage team spirit, while another references their open-door policy for employees who wish to discuss some issue.

“
Through training sessions on the importance of switching off.

A large Dublin-based firm in the business services sector.

“
We encourage people to do flexible working so if they need time out through the day and then came back later to finish another hour.

A small wholesale/ retail firm in the SouthEast.

“
Advise workers to come into the office for a day to encourage team spirit and it's at their own discretion.

A small production firm in the SouthEast.

“
That my door is open always if any staff members would like to discuss anything.

A small West of Ireland firm in the production sector.

In summary, the number of employers with employees working from home has increased three-fold since the COVID-19 pandemic. Employers report positives from remote or hybrid work for employees and employers alike, while recognising the importance of encouraging a clear distinction between work and leisure for those working remotely.





CONCLUSION

Irish employers generally see employee mental health and well-being as their responsibility. However, only one-third have an organisational response to the issue and only one-fifth have a dedicated budget for mental health and well-being. This points to a substantial gap between employers' good intentions and their investment in workplace mental health and well-being.

76%

of employers see employee mental health and well-being as their responsibility

32%

of employers have an organisational response to Mental Health and Well-being

20%

of employers have a dedicated budget for Mental Health and Well-being

Irish firms are less likely to be implementing measures to support employee mental health than their English counterparts. Irish firms are less likely to have a mental health plan, a mental health lead at board level and are significantly less likely to monitor employee well-being than their English counterparts.

31% vs. 23%

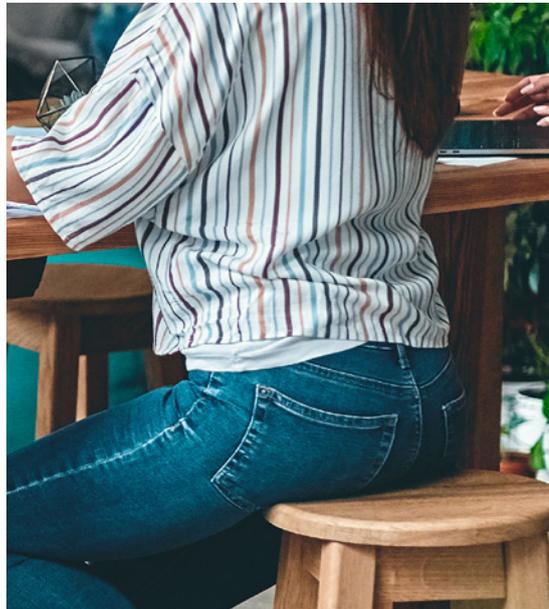
of English and Irish employers have a mental health plan

43% vs. 32%

of English and Irish employers have a Health & Well-being Lead at board/senior level

44% vs. 22%

of English and Irish employers monitor employee health and well-being



Mental health absenteeism is an increasing challenge for Irish employers, with business performance implications.

18%

of Irish employers report employee absenteeism due to mental health reasons; this figure rises to 40% for firms with 50+ employees

53%

of these employers report that mental health absenteeism is increasing

64%

of employers report that absenteeism adversely impacts business performance

26%

Mental health sickness absence is higher in English firms at 26 per cent

Presenteeism is reported by a quarter of Irish employers. Levels of presenteeism are higher in Irish firms compared to English firms, with Irish firms attributing presenteeism to deadlines or client demands.

27%

Presenteeism – i.e., working while unwell – is reported by 27 per cent of Irish employers.

21%

of English employers experience presenteeism

39%

of Irish employers report the need to meet deadlines or clients demand as a reason for presenteeism

Irish workplaces have changed significantly since the COVID-19 pandemic. The number of employers with employees working from home has increased three-fold. Employers generally view remote or hybrid working as a positive experience for employees and the business alike.



Internationally, the benefits of workplace health and well-being promotion are well documented. Employees report increased staff morale, satisfaction and motivation, as well as improvements to physical and mental well-being. Employers benefit in terms of reduced absenteeism and presenteeism, increased work performance and productivity, increased employee engagement and improved recruitment and retention of employees.¹⁰ Employers also report an improved return on training and development investment. For instance, an investment in manager mental health training programme was reported to lead to a significant reduction in work-related sickness absence, with an associated return on investment of £9.98 for each pound spent on such training.¹¹

Why are Irish employers, the majority of whom acknowledge their responsibilities, not investing in workplace mental health and well-being to a greater extent? It may be that the business case for investing in mental health and well-being is unclear to Irish businesses. In the international literature, the wealth of practices and interventions in use, and the lack of standardisation of approach, makes comparison of firm approaches challenging.¹² While results vary considerably, most studies report a positive return on investment in employee mental health and well-being.^{13, 14, 15}

Competing challenges may be prioritised. For instance, in our sample, over two-thirds of firms identified energy supply/costs and the cost-of-living crisis as currently major obstacles to their business success. More than half of firms surveyed said ‘finding the right skills’ is currently a major obstacle for their business.

This report is a first step to understanding workplace mental health and wellness promotion by Irish employers. Next steps involve investigating the link between employee mental health and well-being and productivity outcomes. We wish to understand the causal processes by which employers can support better mental health and well-being and at the same time boost productivity.



¹⁰Stevenson, D and Farmer, P. (2017) Thriving at work: The Stevenson / Farmer review of mental health and employers. London: HM Government
¹¹Milligan-Saville JS, Tan L, Gayed A, et al. (2017) Workplace mental health training for managers and its effect on sick leave in employees: a cluster randomised controlled trial. *The Lancet Psychiatry* 4: 850-858.
¹²Graveling R, Crawford JO, Cowie H, et al. (2008) A review of workplace interventions that promote mental well-being in the workplace. Edinburgh: Institute of Occupational Medicine.
¹³Unsal N, Weaver C, Bray J, et al. (2021) A Scoping Review of Economic Evaluations of Workplace Wellness Programs. *Public Health Reports* 136: 671-684.
¹⁴Hogg B, Medina JC, Gardoki-Souto I, et al. (2021) Workplace interventions to reduce depression and anxiety in small and medium-sized enterprises: A systematic review. *Journal of Affective Disorders* 290: 378-386.
¹⁵Although small-to-medium sized enterprises (SMEs) are often excluded from such studies.

APPENDIX 1

SURVEY SAMPLING & WEIGHTS

A structured approach was adopted to Workplace Mental Health & Well-being in Ireland survey to ensure adequate cell sizes among larger firms. This, and differential response between sectors and sizebands, necessitates weighting survey responses to provide nationally representative results. We weight responses to the relevant business population by sector and firm sizeband.

The survey targeted establishments (sites) with more than 10 employees. Data provided by the Central Statistical Office for 2020 (the most recent available at the time of the survey provides an overview of the number of firms by employment sizeband and sector (Table A1.1)). Note here we combine Divisions C and D manufacturing and utilities and public sector activities are omitted as these are not covered by the survey.

Table A1.1: Business Population data for Ireland: 2020

	EMPLOYMENT SIZEBAND				TOTAL
	10-19	20-49	50-249	250+	
Mining and quarrying (B)	28	0	6	0	34
Manufacturing and utilities (C, D)	852	680	560	170	2262
Water supply, sewerage, waste management and remediation activities (E)	71	49	36	5	161
Construction (F)	1265	626	196	24	2111
Wholesale and retail trade, repair of motor vehicles and motorcycles (G)	3319	1957	783	110	6169
Transportation and storage (H)	572	360	153	24	1109
Accommodation and food service activities (I)	2048	1010	430	34	3522
Information and communication (J)	488	418	286	59	1251
Financial and insurance activities excluding activities of holding companies (K-642)	338	217	151	64	770
Real estate activities (L)	169	73	42	9	293
Professional, scientific and technical activities (M)	1258	608	292	61	2219
Administrative and support service activities (N)	573	416	286	98	1373
Education (P)	684	284	90	44	1102
Human Health and Social Work Activities (Q)	1283	947	540	113	2883
Arts, Entertainment and Recreation (R)	373	189	62	8	632
Other Service Activities (S)	470	227	69	8	774
TOTAL	13791	8061	3982	831	26665

Source: Central Statistical Office Business Demography NACE Rev 2, Updated 14/07/2022

The sampling frame for the survey was obtained from a commercial list provider. This data also included sectoral indicators and these are used to profile sample response as in Table A1.2. Note the oversampling in the larger sizebands compared to the population distribution in Table A1.1. Note that the survey response includes a small number (23) observations in Agriculture and Forestry (A), a sector not included in the CSO business population figures.



Table A1.2: Survey responses by sector and sizeband

	EMPLOYMENT SIZEBAND				TOTAL
	10-19	20-49	50-249	250+	
Agriculture, Forestry (A)	9	6	7	1	23
Mining and quarrying (B)	3	3	1	0	7
Manufacturing and utilities (C, D)	77	76	58	12	223
Water supply, sewerage, waste management and remediation activities (E)	3	3	2	0	8
Construction (F)	38	31	29	3	101
Wholesale and retail trade, repair of motor vehicles and motorcycles (G)	106	101	37	6	250
Transportation and storage (H)	21	31	22	0	74
Accommodation and food service activities (I)	38	80	58	5	181
Information and communication (J)	20	18	15	1	54
Financial and insurance activities excluding activities of holding companies (K-642)	10	9	3	1	23
Real estate activities (L)	1	2	1	0	4
Professional, scientific and technical activities (M)	71	52	23	3	149
Administrative and support service activities (N)	23	19	20	1	63
Education (P)	36	32	9	0	77
Human Health and Social Work Activities (Q)	50	67	40	4	161
Arts, Entertainment and Recreation (R)	27	24	12	0	63
Other Service Activities (S)	20	7	11	0	38
TOTAL	553	563	348	37	1,501

Source: Central Statistical Office Business Demography NACE Rev 2, Updated 14/07/2022

Sampling weights are derived as the ratio of the business population to survey responses (Table A1.3). Average weight is 17.8, suggesting the survey covered around 5.6 per cent of firms in the target population. In constructing the weights, we amalgamate the 50-249 and 250 plus sizeband categories to avoid extreme weights. Some manual adjustments were made in other sectors to amalgamate sizeband cells within smaller sectors to avoid extreme weights. Survey observations in Agriculture and Forestry (A) are given the average survey weight.

Table A1.3: Sampling Weights

Nace Industry	EMPLOYMENT SIZEBAND			TOTAL
	10-19	20-49	50+	
Agriculture, Forestry (A)	17.8	17.8	17.8	17.8
Mining and quarrying (B)	9.3	0.0	6.0	4.9
Manufacturing and utilities (C, D)	11.1	8.9	10.4	10.1
Water supply, sewerage, waste management and remediation activities (E)	23.7	16.3	20.5	20.1
Construction (F)	33.3	20.2	6.9	20.9
Wholesale and retail trade, repair of motor vehicles and motorcycles (G)	31.3	19.4	20.8	24.7
Transportation and storage (H)	27.2	11.6	8.0	15.0
Accommodation and food service activities (I)	53.9	12.6	7.4	19.5
Information and communication (J)	24.4	23.2	21.6	23.2
Financial and insurance activities excluding activities of holding companies (K-642)	33.8	24.1	53.8	33.5
Real estate activities (L)	17.8	36.5	51.0	35.1
Professional, scientific and technical activities (M)	17.7	11.7	13.6	14.9
Administrative and support service activities (N)	24.9	21.9	18.3	21.8
Education (P)	19.0	8.9	14.9	37.4
Human Health and Social Work Activities (Q)	25.7	14.1	14.8	3.9
Arts, Entertainment and Recreation (R)	13.8	7.9	5.8	12.3
Other Service Activities (S)	23.5	32.4	7.0	0.0
TOTAL	24.9	14.3	12.5	17.8

Source: Central Statistical Office Business Demography NACE Rev 2, Updated 14/07/2022

APPENDIX 2

PROFILE OF FIRMS

We report on a new survey of 1,501 businesses in Ireland which was conducted in September – December 2022. The target population of firms were private sector employers with 10 or more employees. We sampled firms of all sizes above ten employees, and in all business sectors. We aimed to interview the most senior person with responsibility for the health and well-being of employees within each organisation. The survey was conducted using Computer Assisted Telephone Interviewing (CATI).

Table A2: Sample Statistics

Description	MEAN (AVERAGE)	STD. DEV.	MIN	MAX
FIRM SIZE				
10-19 employees	0.368	0.483	0	1
20-49 employees	0.375	0.484	0	1
50+ employees	0.256	0.437	0	1
MAIN SECTOR				
Production	0.174	0.379	0	1
Construction	0.067	0.251	0	1
Wholesale, Retail	0.216	0.412	0	1
Hospitality	0.121	0.326	0	1
Business Services	0.195	0.396	0	1
Other Services	0.227	0.419	0	1
REGIONS				
Border	0.094	0.292	0	1
West	0.097	0.296	0	1
MidWest	0.120	0.325	0	1
SouthEast	0.079	0.270	0	1
SouthWest	0.183	0.386	0	1
Dublin	0.264	0.441	0	1
MidEast	0.111	0.315	0	1
Midlands	0.051	0.221	0	1
	25.7	14.1	14.8	3.9
Age of the firm (years)	21.918	5.519	4	25
Family-owned business	0.668	0.471	0	1
Products or services sold primarily in the regional market	0.492	0.500	0	1
Growth in sales over the previous 12 months	0.490	0.500	0	1
Firm is part of a multi-plant company (subsidiary/headquarters)	0.416	0.493	0	1
% workforce with degree/ higher level qualification	38.783	31.640	0	100
% workforce with no formal qualifications	14.537	23.281	0	100
% workforce aged 50 or over	27.143	21.186	0	100
% workforce from ethnic minority groups	8.810	15.413	0	100
% workforce which are female	47.453	29.320	0	100
% workforce which have a disability	1.753	5.188	0	92



