

Through sickness and health? A qualitative investigation into the decision to work whilst sick and the consequences for employee well-being.

Broad Research Area: Organisational Behaviour

Theoretical Background

Presenteeism, the act of working whilst sick, is a global phenomenon of increasing interest to organisational scholars (Johns, 2010). This rise in interest stems from evidence of the detrimental consequences to mental and physical well-being (Skagen & Collins, 2016) and the significant impact of presenteeism on employee performance. Hemp (2004) described this as an ‘invisible drain’ on worker productivity - often overlooked and at great cost - presenteeism from mental ill-health alone is estimated to cost the UK economy £15.1bn per annum (Health at Work, 2016).

Due to COVID-19, presenteeism has become increasingly salient in the public domain. Here we see the tensions between an increasing need to keep sick people at home to curb occupational spread, but equally, the pressures on organisations to remain profitable means reducing the costs associated with sickness absence may become a priority (Kinman & Grant, 2020). As such, Kinman and Grant argue for a need for preventative action, better understanding, and awareness of the decision to work while sick and the consequences both during and beyond the pandemic.

There is a rich body of research exploring the antecedents and correlates of presenteeism. For example, in their meta-analytic review, Miraglia and Johns (2016) identified general ill health, constraints on absenteeism, high job demands, and positive attitudes towards the organisation as important correlates with working whilst sick. While these studies have contributed a wealth of insights, there is a lack of focus on intra-individual processes triggering the behaviour. Indeed, there is a growing call within the literature to recognise the

subjective and dynamic nature of working whilst unwell (Ruhle et al., 2020; Lohaus and Haberman, 2019) and to move away from treating presentees as a homogenous group (Ruhle et al., 2020; Karinika-Murray and Biron, 2020). Lohaus and Habermann (2019) argue that a comprehensive model that can explain why people decide to choose presenteeism is needed to establish how the correlates identified within the literature interact, acknowledging the complexity of both contextual and personal factors that contribute to the decision to work whilst sick.

Existing evidence on the consequences of presenteeism has also produced mixed findings (Skagen & Collins, 2016). While the inconsistencies in these findings are not yet fully understood, Skagen & Collins note that the majority of studies focus on negative health outcomes and do not consider potential benefits that workers, with, for example, chronic health conditions may experience by remaining in work. Recent work has proposed the concept of ‘functional presenteeism’ (Karanika-Murray & Biron, 2020) as a balanced behaviour that allows an individual to adjust performance in line with health capacities. To progress this line of inquiry, these authors highlight the advantages of longitudinal and diary studies as a means to learn more about the dynamic nature of presenteeism, and thereby understanding of when working whilst sick may be a sustainable choice.

In response to these theoretical gaps and increasing salience of presenteeism in the public domain, this research aims to address the following research questions:

RQ1. How do employees make the decision to engage in presenteeism?

RQ2. How does enacting presenteeism influence employees’ daily experiences and well-being?

Methodology

This study will employ a multi-method qualitative design to explore the decision-making processes driving presenteeism and its consequences for well-being. Specifically, the research will combine in-depth semi-structured interviews with qualitative diaries. This will enable rich and unique insight into the lived experiences of presenteeism but equally overcome the limitations of solely retrospective data, currently dominant in the literature. Two separate samples will be drawn upon to answer the research questions, in both cases utilising Purposive Sampling (Patton, 1990). The first sample, '*interview only*' will be comprised of individuals who have engaged in presenteeism within the last six months, whereas the second sample, will be comprised of individuals *actively* engaging in presenteeism and will thereby form the '*diary and interview*' sample.

Interviews for both samples will be semi-structured, using an event-based approach, e.g. Critical Incident Technique (Flanagan, 1954), to collect data on a specific significant incident, in this case, an act of presenteeism. The diaries, completed by participants actively engaging in presenteeism, will be interval-contingent, requiring participants to record once a day at a time that is convenient for a one-month period (Radcliffe, 2013). As diary studies require a high level of commitment, participants will be offered flexibility in diary format e.g. written, electronic, or audio recorded diary or use of a smartphone to ensure convenience (Radcliffe, 2013). This research will take a largely inductive approach and data will be analysed using thematic template analysis (King, 2012). This approach has been acknowledged as suitable for analysing data from different methodological sources due to its flexibility (Radcliffe, 2013) and has recently formed the foundations of specialised qualitative diary analysis methods (e.g. Spencer et al., 2020).

Theoretical & Practical Contributions

The largely deductive, quantitative approach to exploring presenteeism that continues to dominate the field has led not only to a lack of theory generation but an under appreciation for the complexity and context-dependant nature of the decision to work whilst unwell. For many with chronic illnesses, the decision of whether or not to attend work and the impact of this decision on both productivity and well-being changes on a daily basis. This study aims to obtain rich qualitative data that will address gaps in the current understanding of how absence-presence decisions are made, enabling the development of a framework outlining this complex decision-making process. By capturing lived experiences of presenteeism, this research will offer valuable insights into the effects on mental health and crucially how these outcomes can be managed, but equally, offer an enhanced understanding of how and when presenteeism can lead to beneficial outcomes. Research that captures the individual complexities underlying both the causes and the outcome of this behaviour is key to develop evidence-based practical advice that can be used to support organisations.

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