



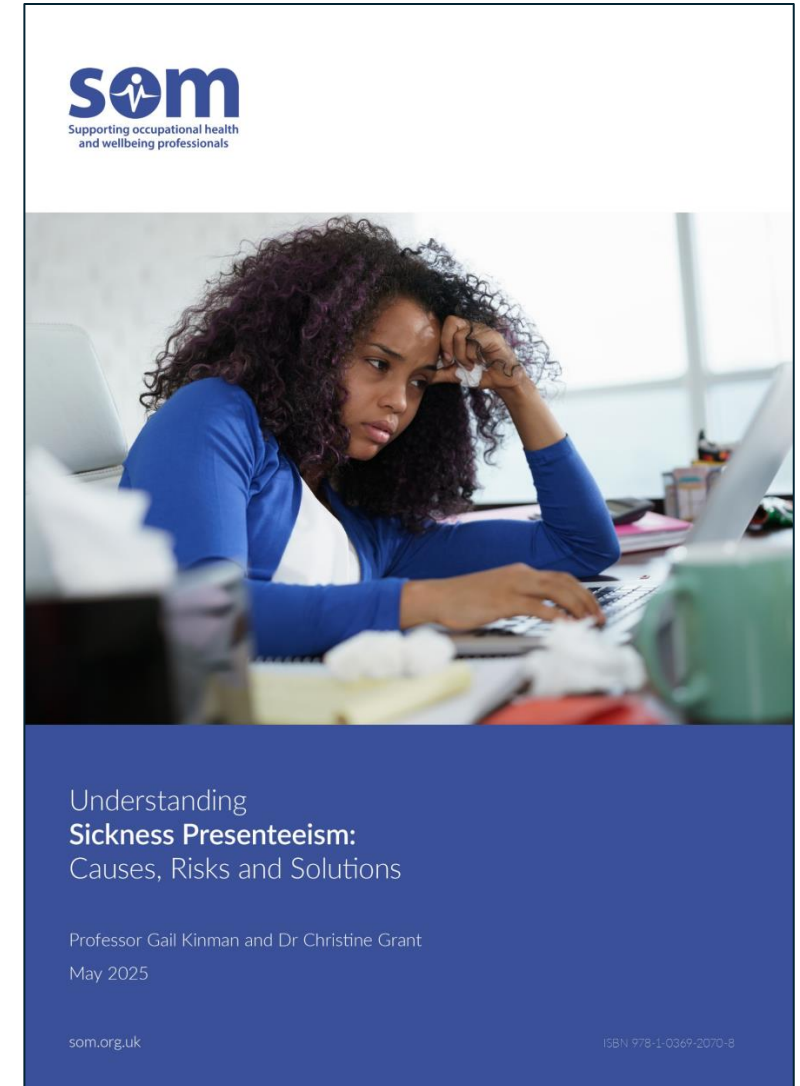
# Understanding Sickness Presenteeism: Causes, Risks and Solutions

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# Understanding sickness presenteeism

- What is presenteeism and how prevalent is it?
- Why do people work when they are sick?
- What are the causes of presenteeism?
- What is the impact?
- What can be done?



# What is sickness presenteeism?

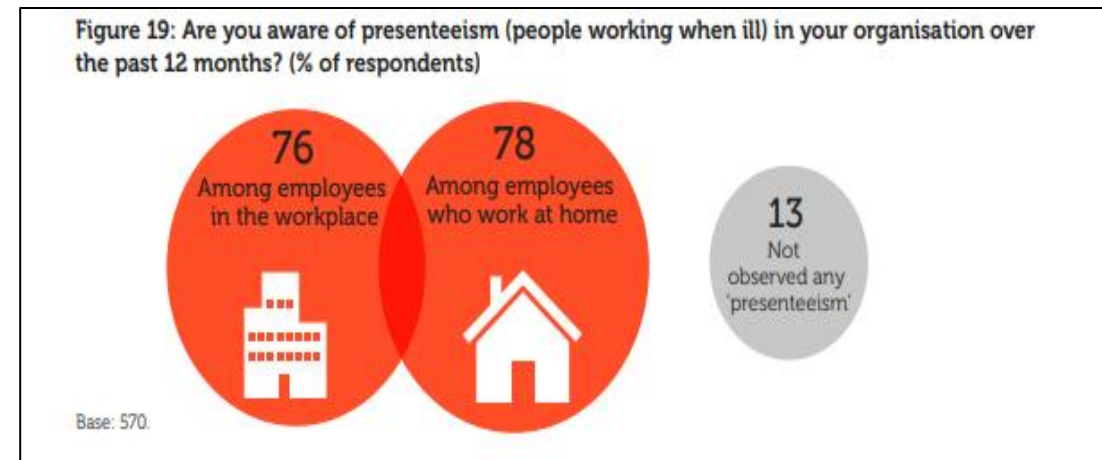
*Attending work while unwell, when one's health condition would reasonably justify taking sick leave.*

- Not just feeling slightly 'under the weather'.
- Often considered the sign of an 'ideal employee' who is showing loyalty and commitment.
- **But is that really the case?**
- Increasingly recognised as a potentially self-endangering behaviour and a public health concern.



# Prevalence of sickness presenteeism

- CIPD (2023) – survey of over 1,000 HR professionals.
- Evidence that presenteeism is increasing – 37% of businesses reported concerns (21% in 2022).
- Particularly pronounced for mental health issues.
- ‘Sicknote culture’? UK workers less likely to take sick days than other OECD/European countries.
- An average of 44 days productivity lost per worker to presenteeism each year.



CIPD (2023)  
Wishart et al. (2023)  
IPPR (2024)

# Measuring sickness presenteeism

- More common (and more costly) than sickness absence.
- But how can presenteeism be recorded accurately?
- Sickness absence is visible, measurable and formally recorded.
- Presenteeism often goes unnoticed and unrecorded.
- It may also be encouraged, either directly or indirectly.



# Presenteeism: most common health problems

Mental health issues

Musculoskeletal  
disorders

Gastrointestinal  
symptoms

Respiratory problems

Long-term conditions

Headaches and  
migraines

Fatigue and  
exhaustion

# Why do people work while sick?

## The health performance framework



### Therapeutic

*“It will take my mind off things and help my recovery”*

### Functional

*“I can do some work without taxing my health”*

### Overachieving

*“I must maintain my standard of performance no matter how ill I am”*

### Dysfunctional

*“A downward spiral, impairing future health and productivity”*

Distinguishing between functional and dysfunctional presenteeism can be Challenging

# Dysfunctional presenteeism: risks for organisations and individuals

## *Health impairment*

Slower recovery, increased risk of future health problems and longer sickness absence

## *Mental strain*

Increases stress, emotional exhaustion and burnout

## *Job performance*

Impaired cognitive and physical abilities; relationships with colleagues

## *Risks to others*

Errors, accidents and injuries; spreading of contagious disease

## *'Anti-sickness' culture*

Increases attendance pressure; normalises unhealthy work habits

## *Costs to organisations*

Lost productivity; lower customer/patient satisfaction, less engagement; increased turnover



# Why do people work while sick? Individual

## *Medical factors and additional needs*

Health status; type of illness; long-term conditions; disability; sickness record; neurodiversity

## *Demographic factors*

Age, gender, caring responsibilities, financial concerns; personal circumstances

## *Attitudes/orientations to work*

Feeling indispensable; fear of letting people down/burdening others; strong work ethic; escaping from personal problems, job engagement/satisfaction

## *Health beliefs and awareness*

Under-estimating the impact on performance/overestimating their abilities; lacking awareness of the risks

# Why do people work while sick? Occupational

## *Occupation or job type*

Helping professions; high stress environment; cultural expectations/sense of duty; other occupational risks such as job demand, short-staffing

## *Mode of employment*

Self-employment; Job insecurity - temporary, precarious gig work

## *Role in organisation*

Management responsibilities; expectations to model 'desired' behaviours

## *Work location*

Home-based work (digital sickness presenteeism); difficulty disconnecting/availability pressure; less visible in a remote setting

# Why do people work while sick? Organisational

## *Job demands*

Workload pressure; short-staffing; pressure from managers; lack of cover for specialised work; role overload; 'fixed' deadlines

## *Sickness absence procedures*

Little entitlement to sick pay; 'punitive' trigger systems or back to work policies and procedures

## *Leadership and management*

Lack of compassionate, inclusive leadership; lack of trust; unrealistic expectations

## *Quality of working relationships*

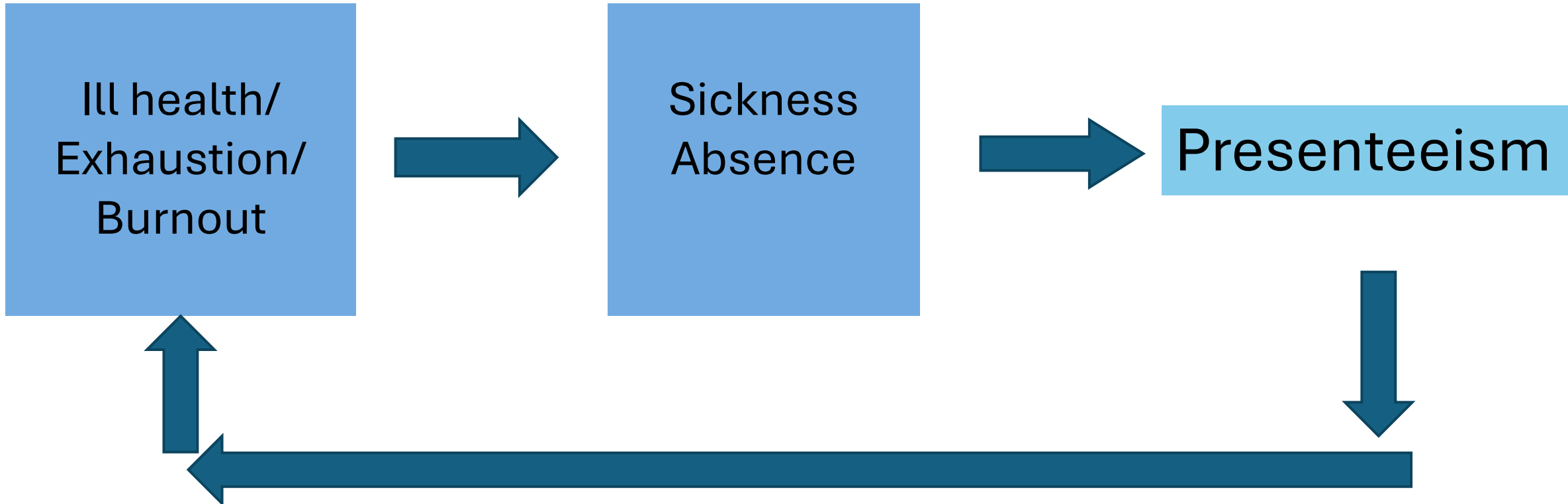
Bullying/harassment; lack of support; positive relationships with colleagues

## *Workplace cultures and resources*

Long hours culture; stigmatisation of sick leave; limited access to OH or EAPS

# Presenteeism: a vicious cycle

Organisational, occupational and individual factors



# Interacting factors

Individual, occupational and organisational factors combine to influence the likelihood of people working while unwell

A personalised approach is needed.



**Individual:** Early career doctor with strong sense of responsibility and financial motivation to keep working.

**Occupational:** Working in a high-pressure, patient-facing environment

**Organisational:** The organisation's culture and expectations discourage taking sick leave. Short-Staffing and high levels of staff sickness cause fears of placing colleagues under additional strain

# Sickness absence stigma

People are often reluctant to take time off sick because they are concerned about the negative reactions of others. A recent study of presenteeism<sup>13</sup> asked employees the following question: 'How would you be perceived by others if you were to take time off for a short-term illness?' The percentage agreeing was:

| Perception      | % agree | Perception           | % agree |
|-----------------|---------|----------------------|---------|
| <i>Weak</i>     | 19      | <i>Inconsiderate</i> | 15      |
| <i>Sensible</i> | 17      | <i>Practical</i>     | 14      |
| <i>Genuine</i>  | 17      | <i>Undedicated</i>   | 14      |
| <i>Lazy</i>     | 17      | <i>Considerate</i>   | 13      |
| <i>Honest</i>   | 15      | <i>Dishonest</i>     | 7       |

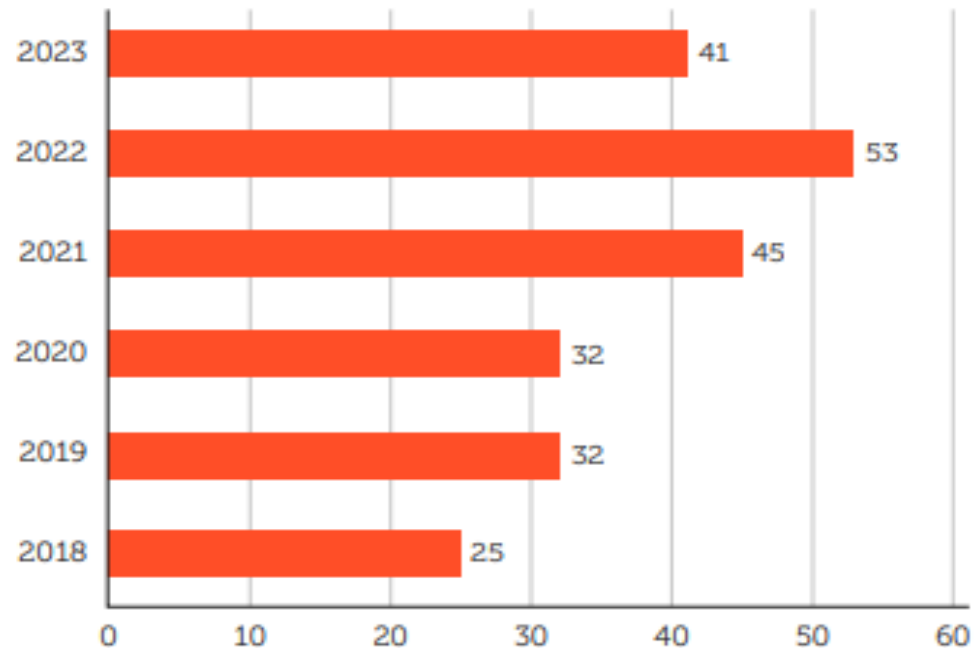
# Presenteeism among doctors (MPS, 2025)

- A survey of >1000 UK doctors examined the scale of presenteeism in the profession and the driving factors.
- 73% had continued to work despite not feeling mentally well enough.
- 89% felt that working while sick had led to burnout and exhaustion
- *Reasons for presenteeism*: feelings of guilt (60%), staff shortages (50%), what is expected in the profession (47%), because patients rely on them (42%), pressure to clear waiting lists (27%).
- *Impact of presenteeism*: lack of empathy with patients (63%), loss of concentration (63%), fear of making mistakes (59%), reduced standard of patient care (46%).



# Discouraging sickness presenteeism

**Figure 21: Organisations that have taken steps to discourage presenteeism over the last 12 months (% of those experiencing presenteeism)**



Base: 498 (2023); 493 (2022); 389 (2021); 661 (2020); 558 (2019); 557 (2018).





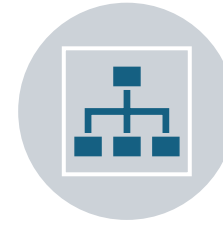
# How can we tackle presenteeism? 1



Assess the **RISKS** and **IDENTIFY** the problem to inform tailored strategies.



**RECOGNISE** the true costs of presenteeism.



**REVIEW** absence management policies and practices.



**ENSURE** the organisational culture values and promotes employee health.



**ESTABLISH** a healthy sickness absence culture **and TACKLE** any stigma surrounding taking sick leave.



**CONSULT** employees about their experiences and **INVOLVE** them in decisions about how to manage it.



**MONITOR** their workload and working hours to ensure they are not overloaded.

# How can we tackle presenteeism? 2



**DEMONSTRATE**  
compassionate  
leadership



**IDENTIFY** the  
support required



**PROVIDE** training  
for supervisors and  
managers



**ENCOURAGE and  
ENABLE** employees  
to take sick leave  
when required



**IMPLEMENT** an  
employee wellness  
programme to  
emphasise the  
importance of self-  
care

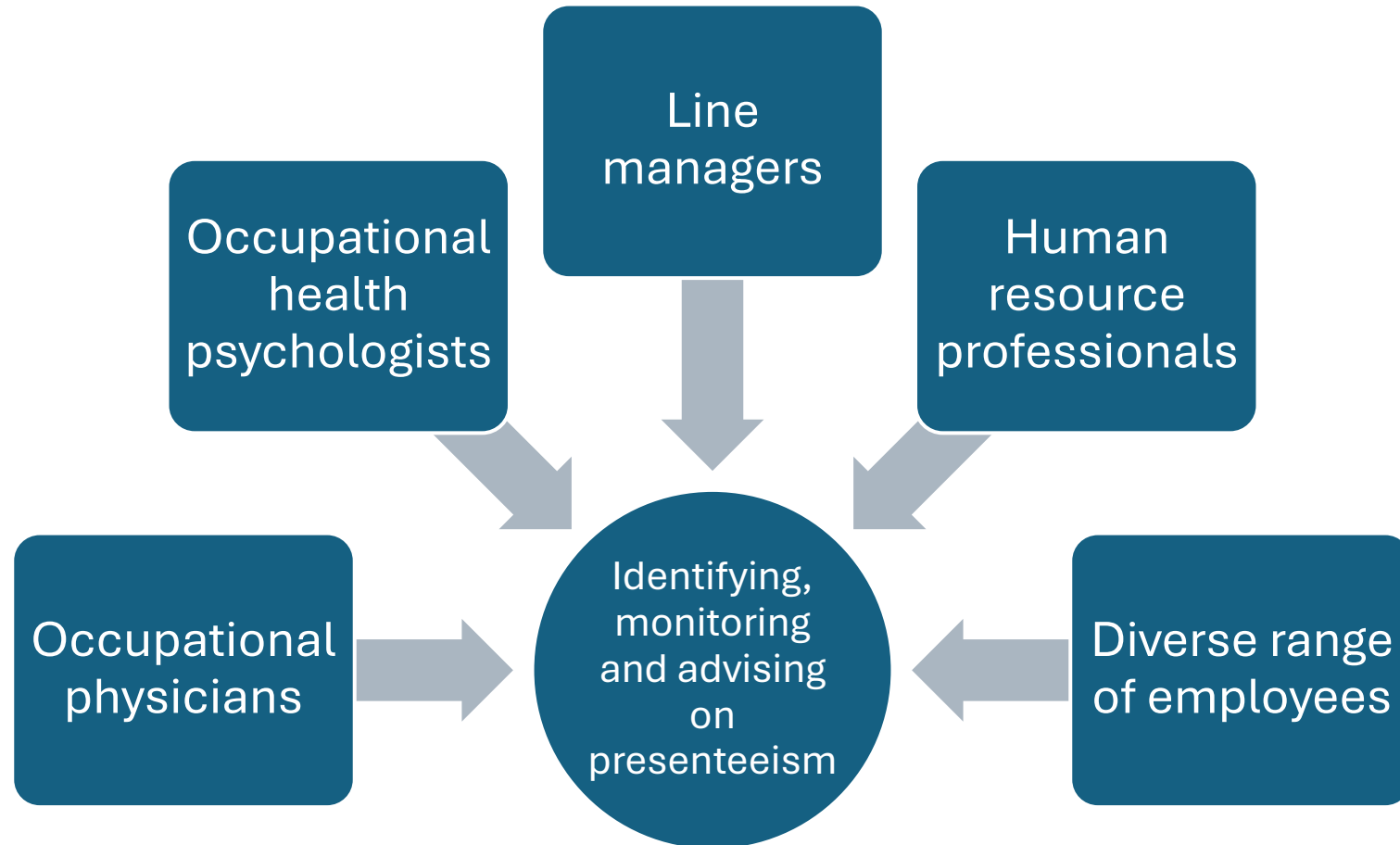


**CONSIDER** the  
needs of remote  
workers and be  
aware that  
presenteeism can  
be hard to detect



**ENSURE** policies  
and practices are  
inclusive and  
consider the diverse  
needs of the  
workforce

# The importance of an integrated approach to reducing the risk and managing presenteeism



# A critical role for occupational health



Raising awareness of the signs and impact of presenteeism



Advising on education and training for employees and management



Helping distinguish between therapeutic and harmful presenteeism



Including a brief presenteeism module in workplace health assessments



Providing person centred guidance



Supporting return to work via reasonable adjustments



Monitoring the effectiveness of presenteeism management policies and practices



The guide is available here

[Understanding\\_Sickness\\_Presenteeism\\_May2025.pdf](#)



Understanding  
**Sickness Presenteeism:**  
Causes, Risks and Solutions

Professor Gail Kinman and Dr Christine Grant  
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