

## **Application for Manchester Institute for Collaborative Research on Ageing (MICRA) Seedcorn Funding 2017-18 – Joint Award – Centre for Ageing Better/MICRA**

**Title of project:** Identifying barriers to return to work for older adults in Manchester: a scoping study

### **Introduction**

Increased life expectancy, a changing population age profile and an increasing dependency ratio are some of the factors driving a need to keep older workers in employment and encourage those who have left the workforce to return to paid employment<sup>i</sup>. Successive governments have introduced a number of policy measures in response to the economic problem of an ageing population<sup>ii</sup>, and as a result of these and others, the number of older workers in paid employment has reached a record high and currently accounts for around 30% of the total working population in the UK<sup>iii</sup>. Recent work undertaken by MICRA researchers<sup>iv</sup> found that a high proportion of individuals are undergoing ‘unretirement’ and returning to the workforce in later life. There is widespread agreement that ‘good’ safe work is beneficial for individuals<sup>v</sup> and for many older workers there are a number of positive benefits to returning to employment, (economic, physical, mental and social). However, for others, particularly those already suffering ill-health and in low paid manual occupations, remaining in or returning to work, may not have health benefits<sup>vivii</sup>. The relationship between ageing, work and health is complicated, and there may be more people with existing ill-health, who require additional support from employers and occupational health to remain in work into older age. On a national level, the redesigned ‘fit note’ introduced in 2010 has not been as successful as it was hoped in stemming the burden of absence from work<sup>viii</sup>. The latest Labour Force Survey statistics estimate 137.3million working days lost to sickness or injury in 2016, while short-term minor illnesses such as coughs and colds made up nearly one quarter of this figure, around a third were attributed to longer term problems such as musculoskeletal and mental ill-health<sup>ix</sup>. Locally, a number of initiatives have been put in place to try to address these issues - 2 schemes in particular, the ‘Manchester Fit for Work Service’ (which supports employed patients who are off work sick to return to work following a period of sickness absence, by addressing work and non-work related issues and providing early access to mental health support and/or physiotherapy/chiropractic treatment), and the ‘HEALTHY Manchester’ service (which supports unemployed working-age patients towards/into employment whilst managing/improving their health, addressing underlying social issues/barriers and providing early access to mental health support and/or physiotherapy/chiropractic treatment)<sup>x</sup>. There is early emerging evidence around the success of these initiatives in getting people back into work<sup>xi</sup>; however, less is known about any barriers that older people face when trying to remain in, or return to work, particularly after experiencing a period of sickness absence, or when managing co-morbidities in the workplace. Both schemes have a limited ‘soft-touch’ follow up after 6 months, but no detailed information is collected on the long-term success. The scoping project proposed here will build on this initial work via a small scale follow-up focussing on a group of older adults (>50 years), who have entered either of the two services during 2016/2017, and will determine whether they are currently in work, and identify any barriers they may have encountered getting back to, and remaining in work.

### **Aims of project**

1. To follow up a group of older people enrolled in either the Manchester Fit for Work or HEALTHY Manchester services to identify barriers to returning to and remaining in the labour market.
2. To explore the role of co-morbidities as a barrier to labour market participation among older adults.
3. To build a successful working relationship with Pathways CIC who deliver both services in Manchester for future research collaborations.

### **Methodology**

**Participants:** In collaboration with Pathways CIC, we will recruit a small group of older people from a sample (N=345) of over 50 year olds who have previously been enrolled in either service to take part in a semi-structured interview about their experiences of the barriers or facilitators to returning to work. It is anticipated that participants will include a mix

of older adults experiencing a range of ill-health problems including mental ill-health, musculoskeletal disorders and lung/breathing problems. Semi-structured interviews will be undertaken with the participants at a date, time and setting convenient to them. All interviews will be recorded and transcribed verbatim and the results of the interviews will be analysed using NVIVO and summarised to provide an overview of the main barriers that older adults face on returning to work.

## Outcomes

- 1) The findings will be presented at a National conference in 2018 (for example, Society for Social Medicine (SSM), Glasgow, September).
- 2) Findings written up for publication in a peer review journal.
- 3) Submission of an application to the Medical Research Council Public Health Intervention Development Scheme <sup>xii</sup>

## Research Team

Annemarie Money (PI), Occupational and Environmental Health (UoM), Martie Van Tongeren (Co-I) Professor of Occupational and Environmental Health (UoM), Tarani Chandola (Co-I), Professor of Medical Sociology, School of Social Sciences (UoM), Mark Franklin (General Manager), Alex Potts (Operations Manager) Pathways Community Interest Company (run the HEALTHY Manchester and Manchester Fit for Work services).

## Budget

Staff costs (inc. interviewing, transcribing)	£4000
Research costs inc. printing, recruitment, travel to interviews; thank you vouchers	£1225
Dissemination costs	£700
<b>Total</b>	<b>£5925</b>

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<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/july2017>

<sup>ii</sup> Phillipson, C (2005) Extending Working Life: A Review of the Research Literature. / Great Britain. Dept. for Work and Pensions, University of Keele.

<sup>iii</sup> [https://www.dorsetforyou.gov.uk/media/219569/ONS-Projection-of-the-UK-labour-force-to-2020---Labour-force-trends-Jan-2006/pdf/ONS\\_Projection\\_of\\_the\\_UK\\_labour\\_force\\_to\\_2020\\_-\\_Labour\\_force\\_trends\\_Jan\\_2006.pdf](https://www.dorsetforyou.gov.uk/media/219569/ONS-Projection-of-the-UK-labour-force-to-2020---Labour-force-trends-Jan-2006/pdf/ONS_Projection_of_the_UK_labour_force_to_2020_-_Labour_force_trends_Jan_2006.pdf)

<sup>iv</sup> Platts, L., Corna, L., Worts, D., McDonough, P., Price, D., & Glaser, K. (2017). Returns to work after retirement: A prospective study of unretirement in the United Kingdom. *Ageing and Society*, 1-26.

<sup>v</sup> Waddell G, Burton AK. Is work good for your health and well-being? London (UK): The Stationery Office; 2006.

<sup>vi</sup> Chandola, T & Zhang, N (2017), 'Re-employment, job quality, health and allostatic load biomarkers: Prospective evidence from the UK Household Longitudinal Study' *International Journal of Epidemiology*.

<sup>vii</sup> Tarani Chandola, Patrick Rouxel, Michael G. Marmot, Meena Kumari; (2017) Retirement and Socioeconomic Differences in Diurnal Cortisol: Longitudinal Evidence From a Cohort of British Civil Servants, *The Journals of Gerontology*:

<sup>viii</sup> Coole, C, Nouri, F et al (2015) Completion of fit notes by GPs: a mixed methods study, *Perspectives in Public Health*, Vol: 135 issue: 5, page(s): 233-242

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<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/labourproductivity/articles/sicknessabsenceinthelabourmarket/2016>

<sup>x</sup> <https://www.pathwayscic.co.uk/manchester-fit-for-work-service.html>

<sup>xi</sup> Unpublished research - personal communication with Greater Manchester Health and Social Care Partnership

<sup>xii</sup> <https://www.mrc.ac.uk/funding/browse/public-health-intervention-development-scheme/public-health-intervention-development-scheme-phind-july-2017/>