

Work Instability Scales: Latest research developments

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The concept of work instability is not new but clearly there is renewed interest in making attempts to quantify it in the context of reducing the risk of job loss. This was the research topic discussed at the recent National Employment and Health Innovations Network (NEHIN) meeting held in York earlier this month. Professor M. Anne Chamberlain from the Academic Unit of Musculoskeletal and Rehabilitation Medicine at the University of Leeds provided an overview of the development of the Work Instability Scales. In the first part of the presentation, the concept of work disability was discussed, noting that work disability is commonly preceded by a period of work instability. A definition of work disability was specified in terms of the impact on the person where they have to leave their job or when the person has been forced to work less hours.

Taking the example of rheumatoid arthritis as a health condition with potential work disability implications, Professor Chamberlain noted that early identification of those experiencing work instability is the key to early intervention aimed at job retention. Highlighting the fact that work disability rates remain high among people with rheumatoid arthritis, the case for recognising work instability at an earlier stage could help to reduce the risk of job separation.

So how useful could the work instability scales actually be? Intuitively, any attempt to recognise problems earlier that reduces the risk of job loss will help to stem the flow of people out of work because of health conditions that give rise to long term work disability. In recent years, and more widely acknowledged now is

that many health conditions can be managed in the workplace with the right support. The utility of the work instability concept could be useful to help individuals and their employers to identify problems early and put in place the necessary supports. In the current economic climate, the need to keep as many people in work is critical, so the availability of proactive approaches and measures forms an important component to enable as many people to remain working for as long as possible.

In terms where this work goes next, there are plans to develop work instability scales for other health conditions with a proposal the recent NEHIN meeting for a work instability scale for mental health conditions. Validation and evaluation work is also underway to establish the robustness of the psychometric properties of the scales. In the longer term it will be interesting to see from published studies if taking this approach to work disability by measuring work instability levels will predict job retention success and for which conditions.

Overall, this is potentially an exciting development here in the UK. Although the scales relate to specific health conditions, encouragingly they recognise the interaction effect between the individuals' situation, their coping abilities, job demands and the role of environmental factors. Perhaps as a final footnote, it is worth placing this development in the wider context of employment precariousness which has largely grown with the expansion of labour market flexibility and the need to recognise the health impact of broader work instability.

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