Work related Stress, Anxiety and Depression Statistics in Great Britain 2015

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Summary

Work-related stress, depression or anxiety is defined as a harmful reaction people have to undue pressures and demands placed on them at work.

The latest estimates from the Labour Force Survey show:

- The total number of cases of work related stress, depression or anxiety in 2014/15 was 440,000 cases, a prevalence rate of 1380 per 100,000 workers.
- The number of new cases was 234,000, an incidence rate of 740 per 100,000 workers. The estimated number and rate have remained broadly flat for more than a decade.
- The total number of working days lost due to this condition in 2014/15 was 9.9 million days. This equated to an average of 23 days lost per case.
- In 2014/15 stress accounted for 35% of all work related ill health cases and 43% of all working days lost due to ill health.
- Stress is more prevalent in public service industries, such as education; health and social care; and public administration and defence.
- By occupation, jobs that are common across public service industries (such as health; teaching; business, media and public service professionals) show higher levels of stress as compared to all jobs.
- The main work factors cited by respondents as causing work related stress, depression or anxiety (LFS, 2009/10-2011/12) were workload pressures, including tight deadlines and too much responsibility and a lack of managerial support.

Figure 1. Estimated prevalence and incidence rates of stress, depression or anxiety caused or made worse by work, for people working in the last 12 months.

www.hse.gov.uk/statistics/lfs/swit3w12.xlsx
**Background**

Work-related stress is defined as a harmful reaction that people have to undue pressures and demands placed on them at work. By its very nature, stress is difficult to measure and HSE has two different data sources from which to conduct analysis. The preferred data source used by HSE for calculating rates and estimates for stress, depression or anxiety (referred to as stress hereafter) is the Labour Force Survey (LFS).

The LFS is a household survey consisting of around 41,000 households each quarter across Great Britain which provides information about the labour market. HSE commissions a module of questions in the LFS to gain a view of work-related illness based on individuals’ perceptions.

The LFS provides national estimates and corresponding rates of the overall prevalence (total cases) of self-reported work-related illness during the previous 12 months, which includes long standing as well as new cases, of incidence (new cases) of work-related illness in the same period and of annual working days lost due to work-related illness. Estimates and rates relate to people working in the previous 12 months. Statistics presented in this document are based on the LFS data, unless otherwise specified.

In addition to the LFS, HSE also collects data on work-related stress through the Health and Occupation Research network for general practitioners (THOR-GP) across Great Britain. This network asks reporting general practitioners to assess whether new cases of mental ill health presented in their surgeries are work-related, and if so, what was the work-related cause of this disorder. The two data sources may reflect different perceptions of work related attribution to individual cases.

Longitudinal studies and systematic reviews have indicated that stress at work is driven largely by psychosocial factors and is associated common conditions such as heart disease and anxiety and depression and may play a role in some forms of musculoskeletal disorders.

During the 1990s there was a considerable rise in the number of people in the UK workforce reporting the experience of work-related stress.

Since 2001/02 there has been in general a flat trend albeit at a significantly lower rate than that seen in the 1990s.

**Figure 2. Estimated average days lost per case due to work related stress, depression or anxiety injury, for people working in the last 12 months, 2014/15**
Work related stress by industry group

The prevalence rate for work related stress in all industries was 1220 cases per 100,000 people employed averaged over the three year period 2011/12, 2013/14 and 2014/15. The broad industry category of public administration and defence; compulsory social security; education; human health and social work activities had a significantly higher rate at 1940 cases per 100,000 people employed over the same period. Other industry categories such as construction and manufacturing had statistically significantly lower rates at 640 cases and 820 cases respectively. The transport industry and communication, business and finance industries had no significant differences from the rate for all industries.

Figure 3. Prevalence rate for work related stress anxiety and depression by industry group, per 100,000 people employed in the last 12 months, averaged over the period 2011/12, 2013/14 and 2014/15

www.hse.gov.uk/statistics/lfs/strind2_3yr.xlsx

Looking more closely at public administration and defence which incorporates a large number of industrial activities, those areas with the highest rates of stress within this category are compulsory social security sector 2160 per 100,000 and the health and social work sectors 2070 per 100,000 cases.

Figure 4. Prevalence rates for work related stress, anxiety and depression, across public administration and defence industrial group, per 100,000 people employed in the last 12 months averaged over the period 2011/12, 2013/14 and 2014/15
Work related stress by occupational category

Those occupational groups with the highest prevalence rates of work related stress broadly reflect the types of occupations you would find in the industries mentioned above.

Figure 5. Prevalence rate of work related stress by broad occupational category, per 100,000 people employed in the last twelve months, averaged over the period 2011/12, 2013/14 and 2014/15

The professional occupations category has significantly higher rates of work related stress than the rate for all occupations. For the three year period averaged over 2011/12, 2013/14 and 2014/15, the professional occupations category had 1930 cases per 100,000 people employed, compared with 1220 cases averaged for all occupational groups, a statistically significantly higher rate. No other broad occupational category had a statistically significantly higher rate over this period. However, the broad category of skilled and elementary trades had significantly lower rates of work related stress at 560 and 640 cases per 100,000 respectively.

Looking more closely at the broad category of all professions we can assess which professions are driving the higher rates of work related stress. Health professional, teachers and nurses have the highest rates of stress within this category with rates of 2500, 2190 and 3000 cases per 100,000 people employed over this period.

Figure 6. Prevalence rate of work related stress within the category of all professions per 100,000 people employed averaged over the period 2011/12, 2013/14 and 2014/15.

It is worth noting that while the other occupational categories do not have statistically higher rates in general; within these broad groupings, some occupations have higher rates and reflect the observations in industrial groupings above, most notably, health and social care professionals, welfare and housing professionals (associate professionals category), administrative occupations in government, caring personal services and customer service occupations.

www.hse.gov.uk/statistics/lfs/strocc2_3yr.xlsx
Work related stress by age and gender

In the three year period 2011/12, 2013/14 and 2014/15 the prevalence rate for work related stress in males was 590 cases for males and 920 cases for females per 100,000 people employed. Females had a statistically higher rate than males in this period. Historically both males and females have statistically significantly lower rates than the ten years earlier in 2001/02, 2003/04, 2004/05, being 680 and 1050 cases respectively.

Figure 7. Prevalence rate of work related stress by age and gender per 100,000 people employed averaged over the period 2011/12, 2013/14 and 2014/15

Within the age ranges of all males, for the three year period 2011/12, 2013/14 and 2014/15, the 16-24, 35-44 and 55+ years had statistically significantly lower rates of work related stress than the average across all persons.

Within the age ranges over the same time period for females the 34-44 and 45-54 years ranges had significantly higher rates than the average across all persons.

Work related stress and company size

Over the three year period 2014/15, small enterprises with less than 50 employees had a prevalence rate of 910 cases per 100,000 people employed. The rate for medium enterprises with less than 250 employees was 1280 cases and for large enterprises the rate was 1550 cases.

In this period therefore larger enterprises had significantly higher rates of work related stress than small and medium enterprises. Small enterprises had statistically significantly lower rates than those averaged across all persons.

Historically these rates are not significantly lower than the same period ten years ago in 2004/05 being 980 cases for small, 1320 for medium and 1550 for large enterprises in 2004/05.

Figure 8. Prevalence rates of work related stress for small, medium and large enterprises per 100,000 people employed in 2014/15
Causes of workplace stress

The predominant cause of work related stress from the Labour Force Survey (2009/10-2011/12) was workload (tight deadlines, too much work/pressure/responsibility).

Other factors identified included a lack of managerial support, organisational changes at work, violence and role uncertainty (lack of clarity about job/uncertain what meant to do.)

Figure 9. Estimated prevalence rates of self-reported stress, depression or anxiety by attributed causation averaged 2009/10 - 2011/12

![Prevalence rate chart](www.hse.gov.uk/statistics/tables/thorgp16.xlsx)

The general practitioners network (THOR-GP 2012-2014) identified a breakdown of work related mental ill health cases by precipitating events and diagnosis. They concluded that workload pressures were the predominant factor, in agreement with the LFS, with interpersonal relationships at work and changes at work significant factors also.

Figure 10. Breakdown of mental ill-health cases reported to THOR-GP according to precipitating event THOR-GP, three-year aggregate total 2012 to 2014

![Percentage of cases chart](www.hse.gov.uk/statistics/tables/thorgp15.xlsx)

The THOR network of specialist physician's network offers some case study examples of work related stress and how these were dealt with.
Example of work related stress case presented to physician in the THOR scheme

Case of the Quarter – THOR

Work-related stress in a 43 year old male local authority employee

Earlier this year all of his department were advised that they had to reapply for their posts, and he was retained but on a temporary contract in a different location. Surgery for keratoconus in 1992 left him sensitive to bright light and with difficulties driving at night. In his previous post the workstation had been adapted to meet his visual requirements and the location had meant he had little night driving in winet ime. Requests to his new line manager for occupational health input in view of his medical condition were declined. Over a period of a few weeks he developed sleeping difficulties and felt exhausted. He found it difficult to concentrate at work and was noted to be increasingly irritable at home. When initially seen he had a tachycardia and raised blood pressure. He was signed off work and on review after two weeks was feeling much better and his pulse and BP had returned to normal. After a further two weeks he was able to return to work with occupational health input. A constructive meeting with senior management took place and it was arranged for him to return to his original location and duties under new line management, with all adjustments to be undertaken and checked before his return.

Job insecurity, insensitive management and low personal “control” are some of the factors involved in work related stress. A change in behaviour can often be the presenting symptom of stress. The abnormal physiological response associated with stress can be reversible on dealing with the background issues. He had always found his work to be enjoyable and is doing so once more.

Conclusion

Work related stress depression and anxiety continue to represent a significant ill health condition in the workforce of Great Britain. Work related stress accounts for 35% of work related ill health and 43% of days lost, in 2014/15. The occupations and industries reporting the highest rates of work related stress remain consistently in the health and public sectors of the economy. The reasons cited as causes of work related stress are also consistent over time with workload, lack of managerial support and organisational change as the primary causative factors.
National Statistics

National Statistics are produced to high professional standards set out in the National Statistics Code of Practice. They undergo regular quality assurance reviews to ensure that they meet customer needs. They are produced free from any political interference.

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For information regarding the quality guidelines used for statistics within HSE see www.hse.gov.uk/statistics/about/quality-guidelines.htm

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Additional data tables can be found at www.hse.gov.uk/statistics/tables/.

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