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Labor Day, September, 2018 Part II What are the health benefits of work?

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If work is healthy, does the lack of work harm our health? In this discussion, we will affirm that worklessness is a health risk equivalent to smoking ten packs of cigarettes a day. The Australian medical literature, states, “For the working age population, not being at work is a progressively increasing health risk factor. Indeed, not working for six months or more has been found to be an equivalent health risk factor to smoking 10 packets of cigarettes each day. Accordingly, long-term worklessness is now considered to be one of the most significant public health risk factors. When a person is off work for 20 days, the prospects of them successfully returning to work are 70 percent; when they are off work for 45 days, the chances of getting back to work are 50 percent. However, when a person is off work for 70 days, the chances of successfully resuming work decline to 35 per cent. Thus, the overarching theme of the *Australian Position Statement* is that, generally, work is good for health.”

Australian Consensus Statement on the Health Benefits of Work

The statement acknowledges the following fundamental principles about the relationship between health and work.

1. “Work is generally good for health and well-being.
2. “Long term work absence, work disability and unemployment have a negative impact on health and well-being.
3. “Work must be safe, so far as is reasonably practicable.
4. “Work is an effective means of reducing poverty and social exclusion, including that faced by indigenous populations and other currently disadvantaged groups. With appropriate support, many of those who have the potential to work, but are not currently working because of economic or social inequalities, illness or acquired or congenital disability, can access the benefits of work.
5. “Work practices, workplace culture, work-life balance, injury management programs and relationships within workplaces are key determinates, not only of whether people feel valued and supported in their work roles, but also of individual health, wellbeing and productivity.

6. “Individuals seeking to enter the workforce for the first time, seeking reemployment or attempting to return to work after a period of injury or illness, face a complex situation with many variables. Good outcomes are more likely when individuals understand the health benefits of work, and are empowered to take responsibility for their own situation.
7. “Health professionals exert a significant influence on work absence and work disability, particularly in relation to medical sickness certification practices. This influence provides health professionals with many opportunities for patient advocacy, which includes, but is not limited to, recognition of the health benefits of work.
8. “Government, employers, unions, insurance companies, legal practitioners, advocacy groups, and the medical, nursing and allied health professions all have a role to play in promoting the health benefits of work.”

A major British study and subsequent statement concluded: There are economic, social and moral arguments that work is the most effective way to improve the well-being of individuals, their families and their communities. There is also growing awareness that (long-term) worklessness is harmful to physical and mental health.”

Conclusions

It is probable that the positive health benefit of work is not a surprise to anyone. Work is healthy: mentally and physically, and even spiritually. The corollary is equally important and equally not surprising: worklessness is harmful to health. Nevertheless, these are two different questions and each required research to establish that work is healthy and that not working is unhealthy.

As we celebrate Labor Day next week, those who have jobs must know that they are fortunate. But, the above reports demonstrate that we need a different attitude toward worklessness. We need to recognize worklessness not just as an economic hazard for the individual and the country, but also as a health hazard for both. Remember, “Not working for six months or more has been found to be an equivalent health risk factor to smoking 10 packets of cigarettes each day.”

The health hazard of worklessness compounds the economic effect of unemployment. Not only is a large segment of the population not being productive and not being self-supporting, they are also not paying taxes and not contributing to the general national well-being. They are also increasingly utilizing healthcare resources because of the deterioration of health which is associated with worklessness.

Worklessness as a Public Health Concern

19% of the United States population is categorized as disabled. That is over 50,000,000 people. Almost half of those categorized as disabled still work, albeit with limitations imposed by their disability. These would not be categorized as “workless,” and where they are employed at jobs which provide personal satisfaction, their work promotes their health. Many of those who receive disability payments can work. To promote working among the disabled, the Social Security Administration has programs which allow beneficiaries to continue to receive payments while testing their ability to perform a job over a nine-month period.

If worklessness either because of bad economic times, personal disability, lack of job skills, or any other reason are viewed as a health problem, the dynamic of helping a person get back to work changes. Getting them back to work is no longer an issue of getting people off the public welfare or disability system; it is getting them back to work to promote their own health, well-being and longevity. Worklessness is no longer approached only as a public policy or economic issue; it is now approached from the vantage point of promoting the individual's health.

Health and Labor

Labor Day is an opportune time to think about the value of work and of health and of their relationship. It also challenges us to look at the issues of public policy which affect both. On the one hand, we have Hubert Humphrey's November 4, 1977 statement, "the moral test of government is how that government treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in the shadows of life—the sick, the needy, and the handicapped." Since I first read this statement in a speech given by Dr. Don Berwick, I have been haunted by it. I agree with it. I embrace it. It addresses the health side of the worklessness equation.

On the other hand, we have concern for people to be self-sufficient, to be self-reliant, to accept responsibility for their own lives and not to expect others always to take care of them. We recognize this as a need of public policy as well.

On this Labor Day, we recognize ourselves as our brother's keepers, and as brothers, we recognized our need not to be "kept." The solution to our health and labor issues is for the left hand to be interdigitated with the right, and for the right to grasp the left. It is then that a solution, which is good for all, can be found.