TOUCH STONE

EXTRAS

In Sickness and in Health?

Good work – and how to achieve it

TUC

Contents

This report has been prepared by the TUC as a discussion paper for the trade union movement.

In Sickness and in Health?

The concept of 'good work' is not just about ensuring that jobs do not make people ill; it is about organising work in a way that actually promotes good physical and mental health. This is not a new idea, but in the UK there is no consensus about how exactly good work should be defined, let alone how to achieve it. This Touchstone Extra pamphlet makes a compelling case for re-examining the relationship between worker and organisation, arguing that the benefits to both workers and employers would be immense. It looks at the links between work and health, and the causes and consequences of sickness absence. It details the different elements that make up good work, contrasting these with those factors that result in bad work. It ends by looking at means of promoting and measuring good work, drawing on a wide range of employment-related research to make the case for a good work standard.

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1 Introduction

Pleasure in the job puts perfection in the work
– Aristotle

We spend a lot of our time at work. Typically around one-third of our waking hours are spent working. What we do helps define who we are, where and how well we live – even how long we live.

People not only want to work, they want to work in good jobs that they feel are rewarding. This is not just about decent pay and basic standards of employment. It is about a fulfilling working life, job satisfaction and achieving individual potential. Improving people's working lives not only improves personal well-being, it can also lead to better, more successful organisations.

The idea that we should ensure that people are not only free from injury and ill-health but actually in good physical and mental health is a positive one that puts people at the heart of any discussion of work. Accepting this principle means that we should see the role of both work and society as being not about production or accumulating wealth, but rather about the promotion of the well-being of the individual. As such it is at variance to the current approach of successive governments at both national and European level, which sees work solely in terms of the economic benefits and where economic growth is an end in itself.

The idea of such a thing as 'good work' also moves the debate on from how best to prevent illness to ways of promoting good physical and mental health.

The concept of good work was initially conceived in 1971 when the Swedish Trade Union Confederation called for a debate on working environments and democracy with both government and employers. This was part of a wider 'industrial democracy' movement, but by the 1980s it had been developed into a call for good work. This was led by the Swedish Metal Workers Union and will be expanded on later. More recently the German trade union confederation DGB published its own index of good work.

In the UK there is general agreement that good work is important, but no consensus about how it should be defined, let alone how to achieve it. Some see the argument in terms of ensuring work does not cause ill-health or how to promote good health through work; for others it is more about justice and equality in the workplace. Many commentators will link good work with health, others with well-being or happiness. Before considering what good work is, we have to define what we are talking about.

Good work is not just about ensuring that jobs do not make people ill (although in many cases that would be a big improvement in itself). It is about organising work in a way that actually promotes good physical and mental health. Often this is called well-being. Again this is not a new concept. In 1948 the World Health Organisation defined health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity".

More recently the government review, *Is work good for your health and well-being?*, answered the question by concluding that work was generally good for both physical and mental health and well-being. It said that work should be good work, which is healthy, safe and offers the individual some influence over how work is done and a sense of self-worth. At the same time a consensus statement by the leading professional bodies in healthcare said: "Good work also rewards the individual with a greater sense of self-worth and has beneficial effects on social functioning."

2 Work and health

The mind has great influence over the body, and maladies often have their origin there
– Moliere

Every year around 170 million working days are lost in Great Britain as a result of people being too ill to go to work. The best way of reducing that number is by trying to prevent them getting ill in the first place. Removing or reducing risks underpins the Government's occupational health strategy, and is the pillar of Britain's health and safety work. In part this has helped reduce the level of injury caused by work to one of the lowest levels ever. Unfortunately it has had little effect on the number of people who believe that their health has been damaged as a result of work. This has remained stubbornly high with around 1.2 million people who are currently at work suffering from ill-health which they think is work-related.[1]

This is in part because occupational illnesses are often caused over a long period of time, while employers' risk assessments have tended to focus on the kind of risks that cause immediate injury such as falls from height, and risks from chemicals. Also, while the main reasons for people being forced to take time off work are musculoskeletal disorders such as back pain and RSI, or stress-related conditions like anxiety and depression, agencies such as the HSE and local authorities have been more willing to take enforcement action against those employers that cause immediate physical injury than those who cause broader health problems.

While some musculoskeletal disorders are caused by a specific action or event, as are some stress-related conditions, there is a lot of evidence that the causes of ill-health at work are often much deeper and can involve a range of factors interacting with each other. It is therefore fair to say that, for many people, the danger to their health comes not from a specific hazard but from work itself – or at least the way their work is organised.

Work can also affect other health problems. These is a strong link between stress and the use of tobacco, recreational drugs and alcohol, while sedentary working or only having access to junk food during a 20 minute lunch break can lead to obesity.

3 The causes of sickness absence

I've been down so goddamn long, that it looks like up to me
– The Doors

Whether someone takes time off work when they feel ill is due to a number of things. Obviously the nature of the illness is a major factor. Few would attempt to go to work the day after a serious operation, but most people would be likely to come in with a mild sore throat if there were no other symptoms. However whether we take time off sick is also influenced by other factors, including how motivated we are, the culture of the organisation, relationships with work colleagues, the nature of the work, our commitment, advice given by health practitioners, past behaviour, job insecurity and even our general state of mind.

One thing that most people agree about is that more people go into work when sick than take time off when well. A recent TUC survey[2] found that more than half the workforce (57 per cent) claimed to have gone to work when too ill during the last year. Only one in eight (12 per cent) said they have not gone to work when they felt that they might have been well enough to do so. This means that large numbers of people may be at work, but suffering from an illness which makes them work far less effectively.

Generally organisations with lower levels of sickness absence have good absence management policies that do not see sick leave as intrinsically negative, but instead recognise that everyone gets ill sometimes and it is in both the worker's and the employer's interests that the worker stays at home and gets better. They will also have policies that provide for access to rehabilitation and supported return to work where needed.

Traditionally that is where it has been left. Good employers will have risk assessments in place to prevent workers being made ill or injured through work and sickness absence policies that support those who are ill. That is a good starting point, yet despite this sickness absence remains stubbornly high. The number of deaths caused at work has certainly fallen, by around 75 per cent in the past 35 years, but much of that is because far fewer people work in heavy manufacturing and other more dangerous jobs. Sickness absence has also fallen – by an average of a day and a half per person over the past 20 years.[3] However, it is a different story with work-related sickness absence where musculoskeletal disorders and stress-related conditions (which make up over 70 per cent of work-related absences and a very large proportion of long-term absences), are remaining at pretty static levels.

Making an impact on the high levels of occupational ill-health will not be easy, especially given the current economic climate. Many employers are subject to increasing pressure through intensified competition, developing technology and globalisation. As we come out of recession, how an organisation responds to these will have a major impact on the health and welfare of their employees.

The model of seeing workers as machines and trying to squeeze as much as possible from them through even greater command and control simply leads to less healthy and less productive workers, as well as sicker and less productive organisations. If we are going to make any further progress in reducing ill-health then perhaps we have to change our attitudes and priorities and look at the nature of work itself and how it affects our health.

4 The relationship between employment and health

Without work all life goes rotten but when work is soulless, life stifles and dies
– Camus

The relationship between work and health is very complex. On the one hand, work is responsible for an estimated 34 million days lost to ill-health each year. Of these, 28 million are due to work-related ill-health and 6 million due to workplace injury. Over half a million people report suffering from job-related stress, depression and anxiety. In addition there are the days lost because people feel a lack of motivation or just generally run-down. A significant amount of one- and two-day absences may be due to this. Many employers view these as workers throwing a 'sickie', but while there will be the odd person who takes time off unnecessarily, for the vast majority these absences may be as genuine as days that are taken off due to an injury, because if employees feel that they simply cannot bring themselves to come into work in the morning clearly there is a problem with the workplace rather than the worker. No-one has ever quantified the number of days lost in this way but it is likely to be in the region of tens of millions.

However when looking at work and health it would be a mistake to simply look at the number of days of sickness absence that are taken. Every year around 25,000 people are forced to give up employment because of work-related ill-health and even more die prematurely as a result. The actual number of people whose lives are cut short each year due to work-related hazards is unknown, but asbestos exposure is responsible for 4,000 deaths and other cancers for around 15–18,000 more. Other lung diseases kill roughly 4,000 people, while driving at work is responsible for 1,000 deaths annually. In addition there are the thousands of people who die prematurely from heart disease and other illnesses caused or aggravated by a lifetime of overwork. Clearly, for many people, work is a pretty unhealthy place to be.

On the other hand, not being in work can also have a devastating effect on your health. Unemployed people have much higher levels of both heart and lung disease.[4] They also have substantially higher rates of mental health disorders, alcoholism and suicide.[5] Overall unemployed people have around two–three times the ill-health rate of those in employment and 20 per cent more deaths. In fact it is estimated that being unemployed is a greater risk to health than working in one of the most dangerous occupations such as construction or offshore oil drilling.

This has been taken as evidence that being in work, however bad the conditions, is better than being unemployed. That is not necessarily the case. It is not simply whether someone is employed or unemployed that makes a difference to their health, it is also what they are doing. Those who are not working but have access to a reasonable income, are active through voluntary work or in the community and have a lot of social interaction with others, do not have increased health risks. Meanwhile those on low pay who work long hours or have no or little control can suffer the same health problems as those who are unemployed. Clearly the link between health and work is not as simple as we are often told by those who claim that work is good for you.

The last decade has seen growing concerns over the effect that work is having on health. Primarily this has been driven by the increasing awareness of high levels of anxiety and depression, much of which is work-related. It is unclear whether the actual number of cases of stress-related illnesses is increasing or whether increased awareness is leading to more people identifying their symptoms as 'stress-related', however there was a large increase in recorded levels of stress-related illness throughout the 1990s.

Another factor that determines how work affects health is status. People in lower status jobs tend to experience worse health and lower life expectancy than workers in higher status jobs.[6] Within the UK we are not only more status-conscious than many other parts of Europe, but the gap between the highest and lowest status workers is much greater than in many other western countries. This in part reflects the pay inequality between the highest and lowest earners which has grown considerably in recent years.

Workers with different amounts of control and autonomy display different rates of illness. Good social relationships in the workplace are also an important factor in determining the overall health of individuals.[7] Hence the importance of organisations like trade unions in helping to bring workers together as well as addressing issues such as status.

There is evidence of considerable dissatisfaction with work in the UK. The most recent Workplace Employment Relations Survey shows employee job satisfaction is relatively unchanged since 1998,[8] but almost half of workers say their job makes them feel worried some, most or all of the time. In addition there are indications that workers feel they now have less control over their working experience and are more insecure.

Organisational change, or more importantly how such change is managed, can have a significant effect on the physical and mental health of a workforce.[9] The trade union Prospect has done a pioneering guide to how the impact of change can be managed to protect the health and well-being of staff and shows that the most effective reorganisations (from the viewpoint of both employers and employees) are those where employees are engaged throughout.[10]

Much of the emphasis so far on good work has been on using work to create mental well-being. In fact, good work is just as much about physical well-being. There is a growing consensus that, in many cases, physical illness can cause mental illness and vice versa. This is called the bio-psychosocial model and it assumes that psychological and social factors must be included along with the biological in understanding a person's medical illness or disorder. Researchers are therefore concluding that many physical problems which manifest themselves as back pain or RSI have a psychological cause and are as much to do with work-related stress as bad manual handling or repetitive movements. This has led to some people concluding that it is more important to concentrate on psychosocial factors at work rather than physical ones.[11] Unfortunately some people have misinterpreted this as meaning that you should forget about improving the physical environment and instead try to prevent musculoskeletal disorders through preventing stress at work – a view that could have very dangerous consequences.

However the strong link between mental well-being and physical illness cannot be ignored. A lot of research shows that trying to remove musculoskeletal d feeisorders simply by risk-assessing the physical demands of a job is not enough and there needs to be more recognition of the effect that stress can have on making the effects of physical demands much worse.

5 Bad work

If we treated our professional footballers the same way as we treated our workers there would be no football played any Saturday
– Dr Ewan MacDonald

Both employers and workers often see work as simply an economic process where employees come to work to earn a wage. Work is far more than that. As well as providing an income, work provides considerable social contact for many people. It helps define our individual identities and can help drive us. In fact employment is one of the main factors in determining a person's general physical and mental well-being.

Work can therefore have a considerable effect on a person's health, life expectancy and quality of life. These effects can be both positive and negative. Good work can be rewarding, fulfilling and in balance with the rest of our lives. For employees it can improve overall well-being and performance. For employers it can increase productivity and attract and retain talent. 'Bad' work can lead to increased levels of ill-health, lower motivation, higher turnover and reduced levels of productivity.

Quite a lot of research has been done on what constitutes bad work or bad job quality, as well as the effect that bad work can have on health. In addition, the strong link between poverty and ill-health has been well documented, as has the link between working time and ill-health.

There is also a growing understanding of the importance of work organisation. A long-running research programme among civil servants in the 1980 and 90s was instrumental in showing the relationship between health and the wider issue of work organisation.[12]

In 2008 the Government Office for Science produced a very useful review of the future challenges on well-being and work.[13] It concentrated on mental well-being but identified a number of significant factors that were likely to pose a major challenge, including increasing demands for more flexibility at work, changing expectations and the continuing problems of bullying and harassment. A final report concluded: "a small increase in levels of well-being can produce a large decrease in mental health problems across people of all ages."

The Health and Safety Executive (HSE) has also helped define many of the factors that can be seen as leading to bad work in their stress management standards. Although these only looked at stress-related issues, the research the standards are based on identified those factors that, if managed properly, could reduce levels of stress-related illness in the workplace. This led to the six areas of key work design that underpin the standards.

Therefore there is general agreement about most of the factors that constitute bad work. These are relatively easy to identify and include a lack of control over your working environment, poverty pay, repetitive or monotonous work, a lack of respect, bad or incompetent line management, too much, or too little work, a lack of training, unsafe working conditions, long hours and bullying.

6 Good work

We all have responsibilities in life. You may think owning the Har-de-Har Joke Shop is all drudgery – unwrapping dribble glasses, checking doggie dew, inventory. But I wuv it. You'll see, work can be fun
– Wilber Turnblad, Hairspray 1988

Although we know what bad work is, good work is not just work without these negative factors. It is about recognising the relationship between an organisation and the physical and mental health of its workforce, and the effect that can have on the organisation as a whole. That means a completely different approach to work and workers from that of most employers.

If you ask them, many employers say they are already promoting 'well-being'. More than two-thirds of organisations (69 per cent) say they have a well-being policy, which encourages staff to lead healthier, happier lives.[14] However, in practice, this is often largely meaningless.

In fact promoting well-being through work has become a 'buzz-phrase' that covers everything from providing a gym or fresh fruit at work to regular health checks. Often these initiatives, like offering on-site back massages, are simply a (rather ineffectual) substitute for removing the causes of stress in the workplace, or using the workplace to promote general health. Almost all these initiatives are cosmetic because they fail to address the underlying problem, which is the relationship between an organisation and its workforce.

The only way that work can promote good health is by moving away from more patronising approaches to the workforce. If we are genuinely going to promote good work, we have to change the underlying ethos of our organisations, including how they are run and their relationships with their workers.

The Swedish trade unionists who looked at this in the 1980s recognised this only too well. They developed nine principles of good work. These were:

- job security

- a fair share of production earnings

- co-determination in the company

- a work organisation for co-operation

- professional know-how in all work

- training – a part of work

- working hours based on social demands

- equality at the workplace

- a working environment without risk to health and safety.

These principles came out of a debate that was already taking place in Swedish society about low productivity and the benefits of group working and worker involvement. The Swedish trade unionists wanted workers to be central to discussions on how Sweden could

be more productive, unlike in many other western countries where the emphasis was on management practices that did the opposite (total quality management, lean production etc). They wanted to look at how health was affected by the relationship between worker and employer, rather than just the health of individual workers.[15]

The wider issues of the economics of industrial democracy and the various models of industrial organisation are well beyond the score of this pamphlet but the argument that one of the most effective ways to improve public health would be to change how we work is one which seems to be backed up by the evidence.

In the UK a debate on good work may sound like a pipe-dream while 3.3 million people are working more than 48 hours a week and around half of employers have not even done a suitable risk assessment. There is also a danger that the idea of good work becomes a utopian fantasy that ignores that reality of the world of work. After all, employers and employees are not in an equal relationship and work will never be some kind of idyllic nirvana where there is no conflict and everyone goes home refreshed and happy. There are limits to what can be achieved through work and work cannot be divorced from more general societal structures, economic control and how we relate to each other.

In fact it could be argued that if we were to raise expectations of what personal achievement can be gained through work, this could lead to much disappointment and might actually increase stress and conflict.

However, that does not mean that we should not aim for a working environment that actually promotes good health and well-being. Is such a thing possible?

There is certainly agreement that good work is important. The recent report by Dame Carol Black, *Working for a healthier tomorrow*, called for the promotion of a working environment that offers employees a degree of responsibility and a sense of worth. It stated: "the concept of 'good work' is fundamental to the evidence on the positive effects of work on health for individuals, and to the productivity of business." The need for action was also recognised by the Government in their commitment to trade unions under the 'Warwick agreement' when they pledged themselves to work towards developing "good employment standards".

The call for good work has already been taken up by the British trade union movement. The Amicus section of the Union Unite published an agenda for good work in 2006,[16] while civil service unions have done considerable work in trying to get the issue on the agenda of government departments. It has also been debated at the annual Hazards conference. Unlike the debates within Government, the union agenda has focused on what practical steps can be taken to transform the workplace.

Good work is also linked to the collective bargaining agenda. In workplaces where there is a union presence and where negotiations take place collectively, the issues around good work are more likely to be raised with employers. Unions traditionally promote a more equal working relationship and help counter some of the imbalances that exist in the workplace. Through the promotion of concepts of equality, combating bullying and helping give workers greater job security, unionised workplaces which have collective bargaining arrangements are more likely to promote some of the characteristics of good work than those with no union presence.[17]

It is possible to protect workers from the excesses of bad work through legislation. The importance of regulation was recognised by the early Victorians who introduced legislation to protect against the excesses of long hours and unsafe working conditions. We now have

legislation that has created a minimum wage, risk assessments, maximum working hours (although there are several opt-outs) and minimum holiday entitlement. There are also laws to tackle bullying and harassment. These have all come about through trade union agitation. However, although workers can claim protection against some of the worst and most dangerous aspects of work, there is no law that says an employer has to promote health through work, and very few do.

This means that, despite excellent reports from various parts of central government and an acceptance by everyone that we need good work and that this will reduce sickness absence and improve productivity, in practice nothing is happening to force a fundamental review of how we work. Organisations like the Work Foundation have championed the concept of good work for many years[18] as have professional bodies such as the Chartered Institute for Personnel Development, but there is no evidence that employers are doing more than paying lip service to the concept. As mentioned earlier, promoting well-being rarely goes any deeper than supporting workers who may be experiencing stress-related problems or encouraging a 'healthy lifestyle' while refusing to address deeper issues or causes of stress such as long hours, bad management or poor pay.

So long as we see good work or well-being as a good idea rather than a basic human right, work will continue to make workers ill and as a result workers, and society, will continue to suffer. We need to challenge the traditional approach (that employers have only to NOT kill or injure their staff) to turn it on its head and argue that workers should have a right to a workplace that promotes good health and well-being.

However, in the absence of agreement on what a good work environment looks like, there is little possibility of any meaningful progress beyond addressing some of the specific issues that help create bad work. Even if there were to be agreement on what good work looked like, how would it be brought about?

7 Promoting good work and well-being

Hearts starve as well as bodies; give us bread, but give us roses!
– James Oppenheim

The first step must be to define what good work is and then measure it. That is probably not as difficult as it might seem. There are a considerable number of certifiable standards covering work activities showing how an organisation scores on a range of corporate responsibility indicators. The Investor in People standard also assesses the achievements of an organisation in relation to some aspects of the positive work agenda, particularly training. There are even some standards that have begun to look at aspects of work and health. The stress management standards, developed by the HSE, showed that you can assess how well an organisation manages stress levels among its workforce. In addition the HSE's Corporate Health and Safety Performance Index uses qualitative and quantitative data to measure the effectiveness of an organisation's internal controls over its own health and safety performance.

More globally the International Labour Organisation has begun to develop tools to measure 'decent work'. Although this is very different from the concept of good work covered here, there are similarities. The ILO work covers standards on rights at work, employment, social protection and social dialogue, although it is intended to make comparisons across nations rather than organisations.

The EU has also developed a set of indicators to measure employment quality (Laeken indicators). These comprise 10 dimensions of job quality – however, for some dimensions, not all indicators have yet been agreed or developed for lack of political consensus and they have been criticised for missing some issues such as wage inequality. In addition, like the ILO indicators, these are not intended to be used at an enterprise level but are simply a way of characterising the situation in different member states. The dimensions are:

1) intrinsic job quality

2) lifelong learning and career development

3) gender equality

4) health and safety at work

5) flexibility and security

6) inclusion and access to the labour market

7) work organisation and the work–life balance

8) social dialogue and workers' involvement

9) diversity and non-discrimination

10) overall economic performance and productivity.

In 2002 the European Foundation for the Improvement of Living and Working Conditions (Eurofound) devised a framework for addressing work and employment quality concerns built around four main dimensions:

1) career and employment security

2) health and well-being of workers

3) reconciliation of working and non-working life

4) skill development.

More recently (2007) the informal Employment, Social Policy, Health and Consumer Affairs Council put forward a number of principles for good work. These are very similar to those proposed by the European Foundation but include the issue of availability of work:

1) fair wages

2) protection against health risks at work

3) workers' rights to assert their interests and to participate

4) family-friendly working arrangements

5) enough jobs.

These principles are all well and good but, in reality are too broad to be meaningful and cannot be quantified.

By contrast an index has been developed in Germany by the trade union federation DGB, which focuses on work organisation and quality and which is measurable.[19] This breaks work organisation and good work into 15 dimensions which are drawn from three broad categories – resources, burdens and income security. Measurement is done through a questionnaire to workers. Respondents are asked how often an event occurs in their workplace (this can be anything from lifting something to how frequently they are offered training) and then this is followed by a question on the extent this is seen as a burden. The responses are scored and on the basis of a points system work is categorised as good, medium grade or bad. In 2008 13 per cent of employees were judged to have 'good' work; 55 per cent had 'medium grade'; and 29 per cent had 'bad' work. Not surprisingly there was much more bad work in workplaces where there was no union representation.

There is no reason why a similar index could not be developed in the UK. This would allow employers to ensure that they promote good work and make changes to those jobs that are scored as bad.

What then would constitute good work? Clearly it would have to be evidence-based and concentrate on these factors known to have an effect on health. Those factors that have a positive effect would be scored highly and those that have a negative effect would be given a low score. Models for this have been attempted with employee satisfaction surveys for many years. However having a nationally agreed index would allow employers, and employees, to make comparisons with other workplaces and help drive positive change.

It has been suggested that the HSE stress management standards could simply be extended and applied to all aspects of work but this is unlikely to lead to the creation of good work, as the HSE standards are about removing negative factors rather than promoting positive ones. In addition there is currently no evidence as to what effect these standards are having in reducing the causes of workplace stress so it would be premature to extend them into other areas.

8 A standard for good work

Are you bored with life? Then throw yourself into some work you believe in with all your heart, live for it, die for it, and you will find happiness that you had thought could never be yours.
– Audrey Hepburn

The main factors that determine whether a particular work environment not only does not damage health but actually promotes good health and well-being are now beginning to be more clearly understood. These are outlined in the research that underpinned the HSE stress management standards, the research done in Sweden, the German model and the research that has been done by Investors in People.

On the basis of what we already know about work organisation and the relationship between work and well-being, those factors that are likely to contribute towards promoting well-being at work (and so would contribute towards 'good work') are likely to be, broadly, the following:

- creativity
- control
- management quality
- hazards controls
- workplace culture and social climate
- fair treatment
- development/training opportunities
- hours of work and work intensity
- physical and emotional demands
- reward (financial and emotional)
- job security
- work–life balance
- workplace environment.

By ensuring that work is organised so that it promotes the positive factors such as creativity, control, work-life balance, good management and fairness, and reduces negative factors such as long hours, large pay differentials and exposure to workplace hazards, the way that a worker relates to their job could be transformed. None of this is new. These factors are all ones that academics and trade unionists have recognised for some time as being those that separate a 'good' employer from a 'bad' one. However what we still do not have is a way of measuring them.

If the good work agenda is to move beyond rhetoric, there has to be a consensus on how to judge whether a person's work activity is good or bad for their long-term physical and mental well-being. That means taking these factors and developing a standard based on

them, which can be measured based on the nature of the work and the way it is organised. Having an index would allow employers to look at work organisation and job design, along with effective channels for employee engagement, such as trade unions. It would hopefully encourage employers and employees to work together to ensure that work is no longer seen simply as a place where workers go to earn a wage.

Of course, being able to measure good work does not in itself ensure that all jobs are 'good' ones. There would still be jobs that would require more physical effort than others and ones where there would be elements of monotony, but by measuring this at least we would be able to adjust these jobs to make them better fitted to the workers that do them, and if not make them good, at least make them better.

The economic benefits would be enormous. The cost of sickness absence runs into tens of billions of pounds, and the cost to society of treating those millions of people with musculoskeletal disorders or mental health problems that would be prevented if people had a better relationship with their work is huge. But of even greater importance would be the benefits to those individuals who make up society as workers and former workers in leading more fulfilled and healthier lives.

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