

November 2017

## **Arthritis Research UK submission to House of Commons Women and Equalities Committee inquiry on older people and employment**

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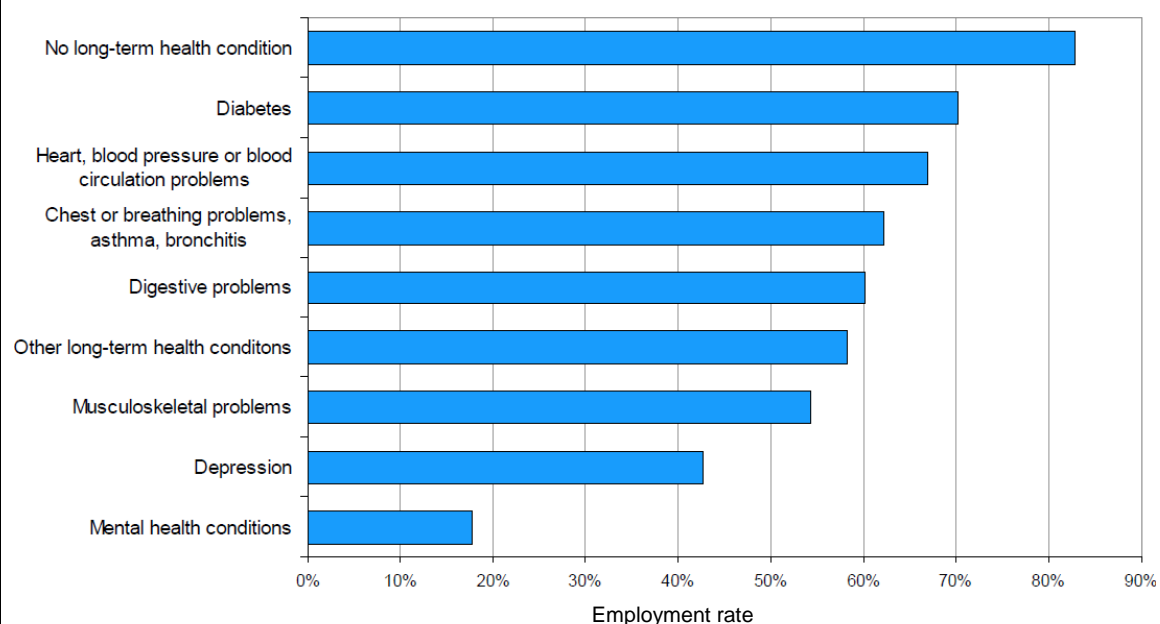
1. Arthritis Research UK welcomes the opportunity to respond to the Women and Equalities Committee inquiry on older people and employment.<sup>1</sup> We understand this is a continuation of the Committee's inquiry which was announced in March 2017. It is considering current Government policies to help people extend their working lives, and steps which could be taken to tackle issues including age discrimination.
2. Arthritis Research UK is the charity dedicated to stopping the devastating impact that arthritis has on people's lives. Everything that we do is focused on taking the pain away and keeping people active. Our remit covers all conditions which affect the joints, bones and muscles including osteoarthritis, rheumatoid arthritis, back pain and osteoporosis. Together, these conditions affect around ten million people across the UK and account for the third largest NHS programme budget spend of £4.7 billion in England.<sup>2</sup> We fund research into the cause, treatment and cure of arthritis, provide information on how to maintain healthy joints and bones and to live well with arthritis. We also champion the cause, influence policy change and work in partnership to achieve our aims. We depend on public support and the generosity of our donors to keep doing this vital work.
3. This brief response address two of the Committee's area of focus, in particular:
  - *Question 1: What further steps should the Government consider in order to reduce barriers to later-life working?*
  - *Question 7: Is the Government's approach addressing the different needs of women, carers, people with long-term health conditions and disabilities and BME groups among the older workforce?*We would be pleased to provide further information, or oral evidence, to the committee.
4. Summary points:
  - **There is a need to ensure that the increasing number of older people with musculoskeletal conditions are supported to remain in employment.**
  - **There is a need for continued action to develop interventions to specifically support older workers with long-term health conditions, including musculoskeletal conditions.**
  - **The National Centre of Excellence for Musculoskeletal Health and Work should be routinely consulted as a potential collaborator in new initiatives to develop interventions to address the needs of people with long-term health conditions and disabilities among the older workforce.**

### **Musculoskeletal conditions in the working age population: impact and trends**

5. Musculoskeletal conditions, including back pain, osteoarthritis and inflammatory conditions such as rheumatoid arthritis, are the most prevalent diseases in the UK working population.<sup>3</sup> Although many people with musculoskeletal conditions want to work, the pain and fatigue these conditions cause often makes working life hard:
  - Only 59.4% of people of working age with a musculoskeletal condition are in work (in comparison to without a long-term health condition or disability).<sup>4</sup>
  - Musculoskeletal conditions are one of the leading causes of sickness absence and accounted for 30.8 million working days lost in the UK in 2016.<sup>5</sup>

6. The UK's working population in ageing – estimates suggest that a third of the UK's labour force will be aged 50 or over by 2020.<sup>6</sup> While most health problems are associated with lower employment rates, musculoskeletal conditions (and mental health problems) have been recognised as particular problems among older workers (see chart).<sup>7</sup> Older workers who report depressive symptoms or impaired physical mobility, especially with lower limb pain and shortness of breath, are more likely to retire early.<sup>8</sup> **There is a need to ensure that the increasing number of older people with musculoskeletal conditions are supported to remain in employment.**

Employment rate by main long-term health condition in people aged between 50 and state pension age.<sup>9</sup>



*Rates of employment are lower in older people with musculoskeletal or mental health problems.*

7. The Government's strategy '*Fuller Working Lives: A partnership approach*' (May 2017) recognised that people with long-term health conditions and disabilities need more help to be in work and should be supported throughout working life.<sup>10</sup> It noted actions being undertaken in this area including:
- Consultation on the needs of people with disability and long-term health conditions through '*Improving Lives – The Work, Health and Disability Green Paper*'.<sup>11</sup>
  - Changes to eligibility criteria for people in the Employment and Support Allowance (ESA) Work-Related Activity Group, which would enable people to undertake more than 52 weeks of part-time work without it impacting on the provision of benefit.
  - The work of the Age Action Alliance in producing sector-based guidance for employers of older workers to promote good practice.<sup>12</sup>

**However, given the scale of the challenge, there is a need for continued action to develop interventions to specifically support older workers with long-term health conditions, including musculoskeletal conditions.**

### Working with arthritis: policy report

8. Arthritis Research UK's policy report '*Working with arthritis*' was published in June 2016.<sup>13</sup> This report describes the impact of musculoskeletal conditions on the UK

workforce and gives the perspectives of people with musculoskeletal conditions about working life.

9. Musculoskeletal conditions affect people's ability to work in different ways, and whether someone with a musculoskeletal condition can work will depend on the individual, the job they do and the support they have. Many people with musculoskeletal conditions work full-time, some choose to adapt their working hours or the kind of job they do, some have periods of sickness absence, and others leave work altogether. A change in duties, flexible arrangements which allow people to work in comfortable settings and pace activity, the ability to take emergency leave, special equipment, help with transport or improved workplace access are some of the factors that can help support people with musculoskeletal conditions to be in work.
10. The report included recommendations to address the needs of people with musculoskeletal conditions who want to work, although these are not focused specifically on older workers. These included:
  - Promotion of the **Access to Work** scheme to people with musculoskeletal conditions;
  - Introduction of **fiscal incentives** to encourage employers to provide workplace health and well-being initiatives targeting and promoting musculoskeletal health;
  - Provision of services appropriate for people with musculoskeletal conditions and complex co-morbidities through the future **Health and Work Programme**;
  - Use of the Joint Work and Health Unit's **Health and Work Innovation Fund** to pilot interventions to support people with musculoskeletal conditions to be in work.

#### **National Centre of Excellence for Musculoskeletal health and work; Health and Employment After Fifty (HEAF) Study**

11. Arthritis Research UK and the Medical Research Council established the National Centre of Excellence for Musculoskeletal Health and Work in October 2014.<sup>14</sup> The Centre's overarching aim is to minimise the substantial adverse impacts of musculoskeletal disorders in the workplace. One of its four broad themes of work is musculoskeletal health and work at older ages. It has a specific commitment to identify interventions to support the extended working lives of older workers, especially those with musculoskeletal disorders. **The National Centre of Excellence for Musculoskeletal Health and Work should be routinely consulted as a potential collaborator in new initiatives to develop interventions to address the needs of people with long-term health conditions and disabilities among the older workforce.**
12. The Health and Employment after Fifty (HEAF) study is led by the Southampton Hub of the Centre.<sup>15</sup> This is a unique, longitudinal cohort study of 8,000 adults aged 50-64 years recruited from GP practices across England. Participants complete annual questionnaires about their work and health and their responses are linked to their (anonymised) healthcare information, including diagnoses, consultations in primary/secondary care and prescribed medication. This approach is enabling the relationship between changes in employment and changes in health to be examined in older people.<sup>16</sup>
13. The key questions that the study seeks to address include:
  - What is the impact of common health problems on work capability and work participation at older ages?
  - What are the social, occupational, personal and medical co-factors which influence vocational outcomes among older people?
  - What is the impact of job loss (age-related or health-related) on subsequent physical and psychological health in people aged over 50 years?

Data collection is on-going and will initially run until 2018.

14. Initial outputs from the HEAF study include findings on:

- Levels of job dissatisfaction among older workers.<sup>17</sup> This study concluded that: 'Employment policies aimed at improving job satisfaction in older workers may benefit from focussing particularly on relationships in the workplace, fairness, job security and instilling a sense of achievement'.
- Sleep disturbance and older workers.<sup>18</sup> This study concluded that: 'Employment policies aimed at tackling insomnia among older workers may benefit from focusing particularly on job–person fit, job security and relationships in the workplace'.
- Frailty symptoms and employment outcomes.<sup>19</sup> This study concluded that: 'Frailty symptoms are not uncommon in mid-life and are strongly linked with economically important adverse employment outcomes. Frailty could represent an important target for prevention'.

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Arthritis Care and Arthritis Research UK have joined together so we can do more to help people with arthritis to live full and active lives. Read more about why at [arthritisresearchuk.org/merger](http://arthritisresearchuk.org/merger)

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## REFERENCES

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