

Article

Sickness absence in the UK labour market: 2020

Sickness absence rates of workers in the UK labour market, including number of days lost and reasons for absence.

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Table of contents

1. [Main points](#)
2. [Measuring sickness absence during the pandemic](#)
3. [How has the sickness absence rate changed over time?](#)
4. [What are the reasons for sickness absence?](#)
5. [Which groups have the highest sickness absence rates?](#)
6. [Sickness absence data](#)
7. [Glossary](#)
8. [Data sources and quality](#)
9. [Related links](#)

1 . Main points

- The coronavirus (COVID-19) pandemic has affected the sickness absence data in a number of ways; while the virus may have led to additional sickness absence, measures such as furloughing, social distancing, shielding and increased homeworking appear to have helped reduce other causes of absence, allowing the general downward trend to continue.
- The UK sickness absence rate has fallen to 1.8% in 2020; this is the lowest recorded level since the data time series began in 1995.
- Minor illness is the main reason for sickness absence in 2020; this includes coughs and colds, which have been the main reason for sickness absence throughout the data time series.
- Since April 2020, the coronavirus accounted for 14.0% of all occurrences of sickness absence.

2 . Measuring sickness absence during the pandemic

The coronavirus (COVID-19) pandemic has affected the sickness absence data in a number of ways. While the virus may have led to additional sickness absence, measures such as furloughing, social distancing, shielding and increased homeworking appear to have helped reduce other causes of absence, allowing the general downward trend to continue.

A high number of people in employment were on furlough during 2020; this means they were temporarily away from employment that they expected to return to. Furloughed employments, as reported in [HM Revenue and Customs's Coronavirus retention scheme statistics](#) increased from the start of the scheme on 20 March to a peak of 8.9 million employments on 8 May 2020. The figures from 31 January 2020 show that the number of employments furloughed was 4.7 million.

Furloughing has impacted some of the measures used in this analysis. Individuals may have been asked to "shield" during the pandemic; we cannot quantify how many of these are employed and able to work from home, how many were furloughed or how many are otherwise classified. This group of people would normally have a higher sickness absence rate than the not shielding group; if fewer from this group are in work then they will be contributing less to the number taking days off because of sickness or injury and could be one explanation for the reduction in the sickness absence rate in 2020.

Homeworking became more prevalent in 2020, in April 2020, [nearly half \(47%\) of people in employment did at least some of their work from home](#). This, together with government asking people to social distance and self-isolate may have led to less exposure to germs and minimise some of the usual sickness absences. Homeworking could also allow people to work when they were a little unwell, they might not have travelled to a workplace to work but feel well enough to work from home.

The total number of days lost because of sickness or injury and the number of days lost per worker both saw a significant fall in 2020. The data that feed into the total number of days lost and days lost per worker include furloughed workers; therefore, some of this fall will be because fewer people are in work to be taking days off because of sickness or injury. In addition, those employed but on furlough are included in the denominator for the number of days lost per worker but would not be contributing to the numerator.

The sickness absence rate, on the other hand, will not be affected by furloughed workers in the same way. This is derived as the total hours lost as a proportion of total hours worked. While there will be less hours lost and less hours worked, those contributing to both totals are consistent, therefore this measure should still be comparable over time. Since this measure is least impacted by the pandemic measures, it is therefore the most appropriate measure to use for sickness absence analysis to ensure comparability over time.

3 . How has the sickness absence rate changed over time?

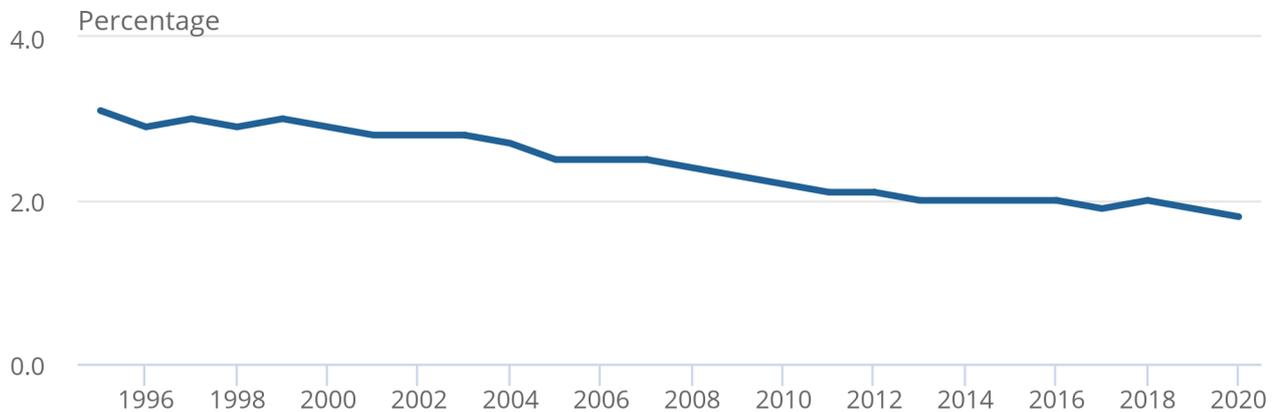
Labour Force Survey (LFS) responses are weighted to official population projections. As the current projections are 2018-based they are based on demographic trends that pre-date the coronavirus pandemic. We are analysing the population totals used in the weighting process and may make adjustments if appropriate. Rates published from the LFS remain robust; however, levels and changes in levels should be used with caution. This will particularly affect estimates for country of birth, nationality, ethnicity and disability.

Figure 1: The sickness absence rate has reached a record low

Sickness absence rate¹, for all people in employment aged 16 years and over, UK, 1995 to 2020

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Sickness absence rate¹, for all people in employment aged 16 years and over, UK, 1995 to 2020



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost due to sickness absence.

Figure 1 shows an overall fall in the sickness absence rate. From 2010 to 2018, there had been a relatively small change in the sickness absence rate. From 2018, the sickness absence rate continued to fall, reaching a record low since the data time series began in 1995. It fell to 1.8% in 2020, down from 3.1% in 1995. The Chartered Institute of Personnel and Development (CIPD) also reported 2020 [as the lowest-ever average sickness absence rate in the 20-year history of their survey](#) (PDF, 1.28MB).

While the coronavirus (COVID-19) may have led to additional sickness absence, measures such as furloughing, social distancing, shielding, self-isolation and increased homeworking appear to have helped reduce other causes of absence, allowing the general downward trend to continue.

Looking at the other measures of sickness absence, 118.6 million working days were lost because of sickness or injury in the UK in 2020, equating to 3.6 days lost per worker. These are the lowest levels since records began in 1995. Please note, these measures should be used with caution since they are affected by furloughed workers ([see Section 2](#)).

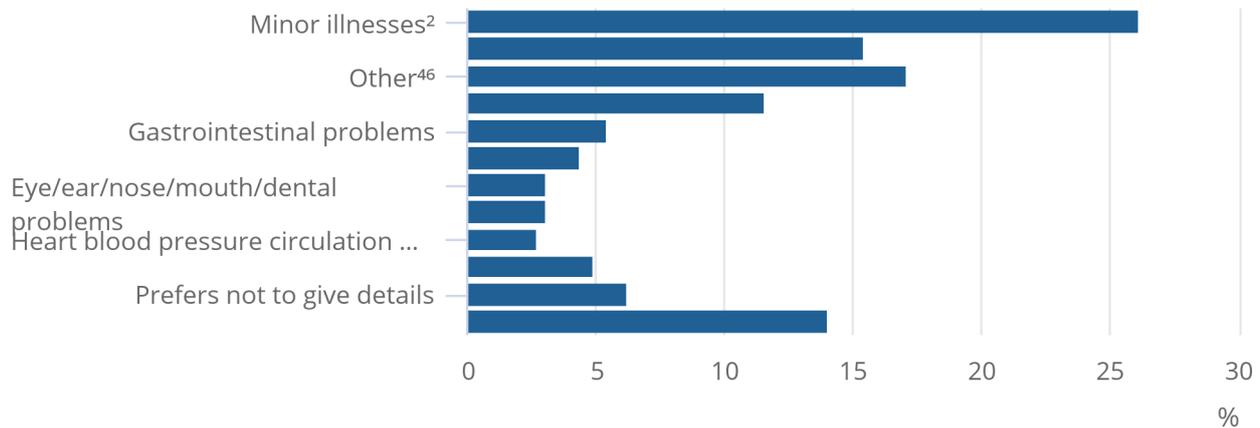
4 . What are the reasons for sickness absence?

Figure 2: "Minor illnesses" account for over a quarter of all occurrences of sickness absence in 2020

Percentage of occurrences¹ of sickness absence, by reason, 2020, UK

Figure 2: "Minor illnesses" account for over a quarter of all occurrences of sickness absence in 2020

Percentage of occurrences¹ of sickness absence, by reason, 2020, UK



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The percentage of occurrences is the percentage of times a specific reason was given for hours lost because of sickness.
2. "Minor Illnesses" includes coughs, colds and flu; sickness, nausea and diarrhoea.
3. "Musculoskeletal problems" includes back pain, neck and upper limb problems and other musculoskeletal problems.
4. "Other" includes accidents, poisonings, infectious diseases, skin disorders, diabetes and anything else not covered.
5. "Mental health conditions" include stress, depression, anxiety and serious mental health problems.
6. From April 2020, interviewers were advised to code any mention of Coronavirus as "Other", however it is believed people could self-report this in "Minor illnesses" or "Respiratory conditions".
7. From April 2020, if a respondent answered "Other", "Minor Illnesses" or "Respiratory conditions" they were asked a follow-up question about whether this sickness absence was due to Coronavirus.
8. As coronavirus estimates are derived from an additional variable, and fall under "Other", "Minor Illnesses" and "Respiratory conditions" totals won't sum to 100% if Coronavirus is included.
9. Because of rounding, numbers presented may not add to total.

There are four main reasons for sickness absence in the UK; these have shown the highest percentage of occurrences over most of the decade. The 2020 figures are:

- minor illnesses (26.1%)
- other conditions (17.1%)
- musculoskeletal problems (15.4%)
- mental health conditions (11.6%)

Minor illness includes coughs, colds and flu; sickness, nausea and diarrhoea, and was the biggest single reason for sickness absence over the decade. However, we saw a fall of 4.3 percentage points between 2019 and 2020; this could be because of the restrictions of the pandemic and less social contact resulting in less transmission of germs.

Musculoskeletal problems, which includes back pain, neck and upper limb problems and other musculoskeletal problems, were the second most common reason for sickness absence for most of the decade. However, in 2020, "other" problems have become the second most common reason for sickness absence. This includes accidents, poisonings, infectious diseases, skin disorders, diabetes and anything else not covered.

The "Other" category is the advised category for reporting coronavirus-related illnesses, which could be one reason for the increase. However, since the data are self-reported, coronavirus-related illnesses could also be reported elsewhere, such as under "Respiratory conditions" or "Minor illnesses". From April 2020, if a respondent answered any of these options, they were asked a follow-up question about whether this sickness absence was because of the coronavirus. Since April 2020, the coronavirus has accounted for 14.0% of all occurrences of sickness absence.

5 . Which groups have the highest sickness absence rates?

Figure 3: The sickness absence rate has generally been falling for both men and women since 2010

Sickness absence rate¹ by sex, for all people in employment aged 16 and over, UK, 2010 to 2020

Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.

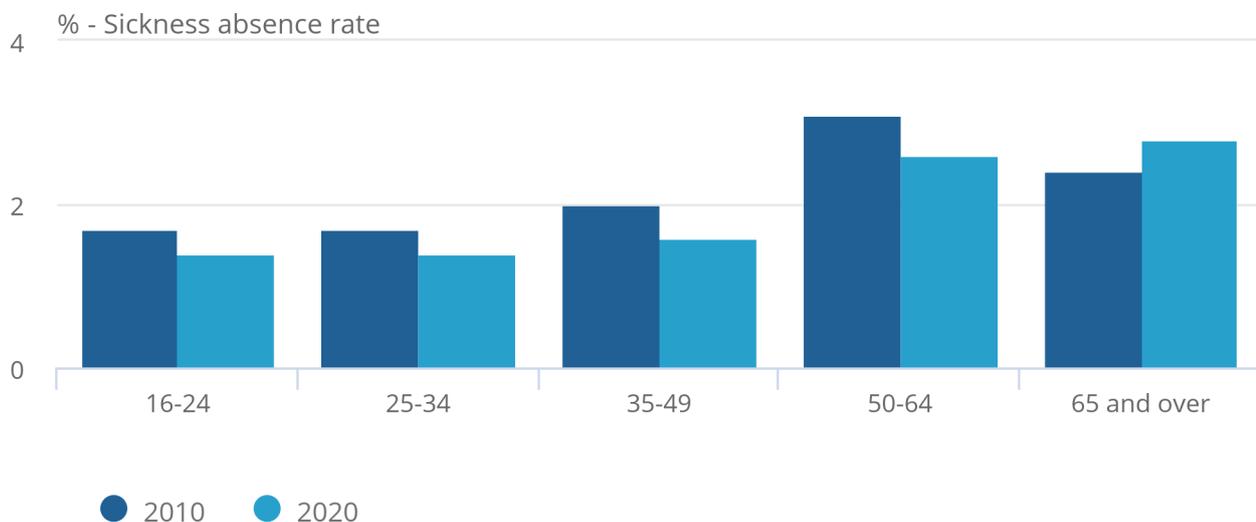
Sickness absence rates have fallen for both sexes and have been consistently lower for men than women. Women lost 2.3% of their working hours in 2020 as a result of sickness or injury, in comparison with 1.5% for men. Over the decade the sickness absence rate for women has been falling at a faster rate than men, 0.5 percentage points compared with 0.3 percentage points for men.

Figure 4: Those aged 65 years and over are the only group to see an increase in their sickness absence over the decade

Sickness absence rate¹, by age group, UK, 2010 and 2020

Figure 4: Those aged 65 years and over are the only group to see an increase in their sickness absence over the decade

Sickness absence rate¹, by age group, UK, 2010 and 2020



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.

The sickness absence rate has fallen for all age groups between 16 to 64 years in the last decade. The only age group to see an increase over the decade was those aged 65 years and over, increasing by 0.4 percentage points to 2.8% in 2020. Sickness absence rates are higher among older workers than younger workers as they are more likely to develop health problems. One recent example of this is the coronavirus, where research shows that [older people are more vulnerable to becoming seriously ill from contracting the virus](#).

Figure 5: London had the lowest sickness absence rate in 2020 at 0.4 percentage points less than the UK average

Sickness absence rate¹, by region, UK, 2020

Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.
2. Because of rounding, numbers presented may not add to UK, Great Britain or England totals.

The highest sickness absence rate in 2020 was seen in Wales, at 2.2%. This was 0.4 percentage points higher than the UK rate. London had the lowest sickness absence rate in 2020 at 1.4%, which was 0.4 percentage points lower than the UK rate.

These figures can be largely explained by the differing age profiles and occupations for workers in different parts of the UK.

Figure 6: The sickness absence rates for workers who report having a long-term health condition and those who do not are both falling

Sickness absence rates¹, by long-term health condition^{2,3} UK, 2010 to 2020

Figure 6: The sickness absence rates for workers who report having a long-term health condition and those who do not are both falling

Sickness absence rates¹, by long-term health condition^{2,3} UK, 2010 to 2020



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.
2. Long-term health condition is defined as lasting 12 months or longer.
3. The long-term health condition is not necessarily the reason for the sickness absence experienced.

Workers who report having a long-term health condition (that is, those that last 12 months or more) have a higher sickness absence rate than those who do not report having such a condition. The sickness absence rate for those with a long-term health condition was 3.9% in 2020, compared with 1.0% for those without such a condition.

Both workers with and without long-term health conditions have experienced a minor reduction in their sickness absence rates between 2010 and 2020. For workers with long-term health conditions, the rate has fallen by 0.5 percentage points, from 4.4% in 2010 to 3.9% in 2020. For workers without long-term health conditions, the rate has fallen by 0.4 percentage points, from 1.4% in 2010 to 1.0% in 2020.

The 2020 sickness absence rate may not show the true trend for those with long-term health conditions. Individuals with long-term health conditions may have been asked to "[shield](#)" during the pandemic; we cannot quantify how many of these are employed and able to work from home or how many are furloughed. This group of people normally have a higher sickness absence rate than the not shielding group. If fewer from this group are in work, then they will be contributing less to the number taking days off because of sickness or injury and could be one explanation for the reduction in the sickness absence rate in 2020.

Note

The long-term health condition is not necessarily the reason for the sickness absence experienced.

Figure 7: The sickness absence rate has been consistently higher for public sector employees over the decade

Sickness absence rate¹, by public and private sector, UK, 2010 to 2020

Figure 7: The sickness absence rate has been consistently higher for public sector employees over the decade

Sickness absence rate¹, by public and private sector, UK, 2010 to 2020



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.

Sickness absence rates for workers within the public and private sectors stood at 2.7% and 1.6% respectively in 2020. The sickness absence rate for public sector employees has been consistently higher than that for private sector employees. Both sectors have seen an overall decrease since 2010, although the sickness absence rate is falling at a faster rate for the public sector (0.4 percentage points) than the private sector (0.3 percentage points).

When comparing the reasons given for sickness absence in the public and private sectors, mental health conditions are given as the reason more frequently in the public sector. They accounted for 15.0% of absences in the public sector and 9.9% in the private sector in 2020.

There are several factors to consider when examining the differences between the public and private sectors, including:

- there are differences in the types of jobs between the sectors, and some jobs have higher likelihoods of sickness than other
- workers in the private sector are more likely not to be paid sickness absence than those in the public sector
- the analysis only counts someone as sick if they work fewer hours than they are contracted for and would exclude someone who makes up lost hours at a later point in the week; individuals in smaller workforces, which are more prominent in the private sector, may be under more pressure to make up any lost hours, but no data are collected on hours made up following sick absence

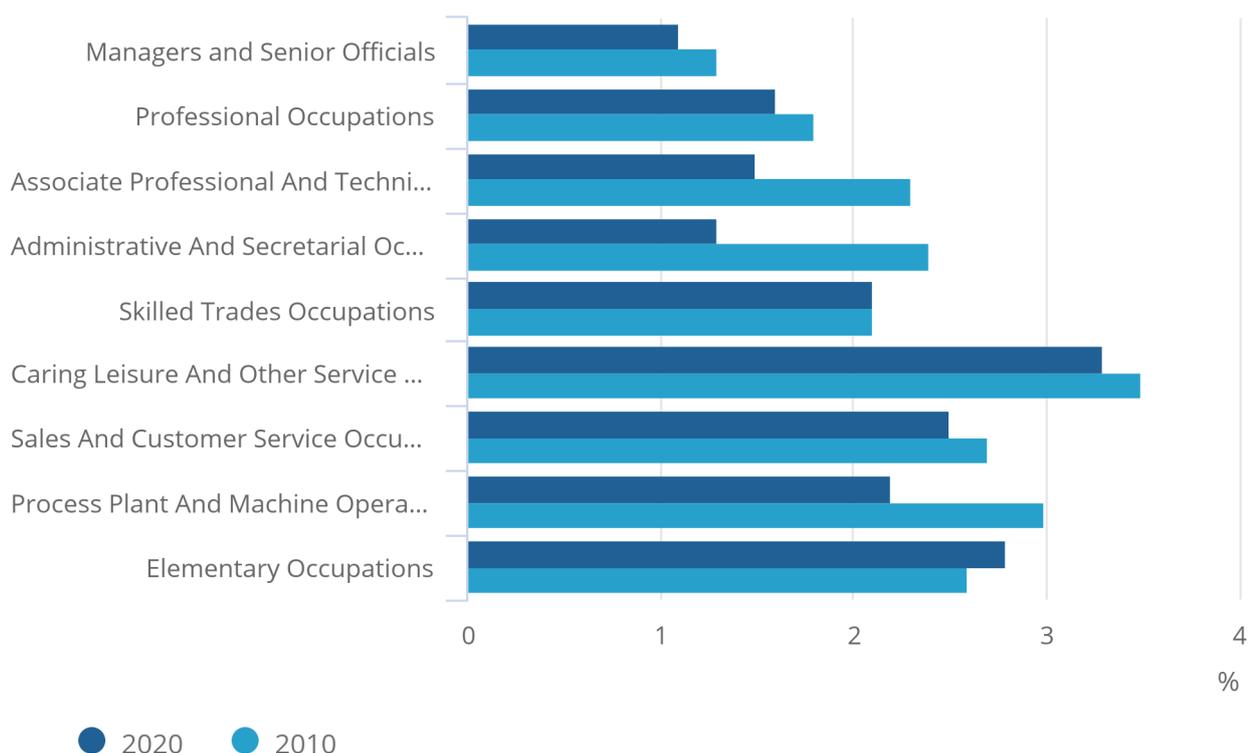
In terms of workforce size, workers in large organisations report higher rates of sickness than smaller organisations, those employing 50 to 499 or 500 and over people reported a sickness absence rate of 2.1% and 2.0% respectively, compared with a rate of 1.6% for workers in organisations that employ fewer than 25 people.

Figure 8: Elementary occupations are the only group seeing an increase in sickness absence over the decade

Sickness absence rate¹, by occupation group², UK, 2010 and 2020

Figure 8: Elementary occupations are the only group seeing an increase in sickness absence over the decade

Sickness absence rate¹, by occupation group², UK, 2010 and 2020



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.
2. Occupation group is based on the Standard Occupation Classification (SOC) 2010 major groups for 2010 to 2018, the Standard Occupation Classification (SOC) 2000 for 2000 to 2009 and the Standard Occupation Classification (SOC) 90 for 1995 to 1999.

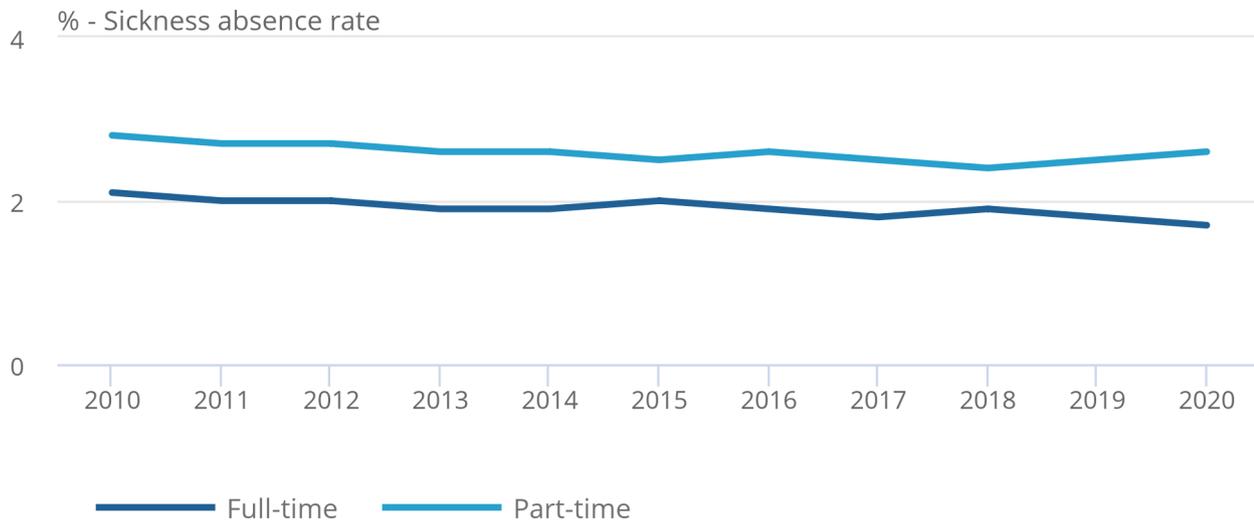
Workers in caring, leisure and other service occupations have the highest sickness absence rate in 2020, at 3.3%. In contrast, those working in managerial and senior roles (for example, chief executives and financial managers) have the lowest sickness absence rate, at 1.1% in 2020. This has been the case for most of the decade. Elementary occupations were the only occupation group that saw an increase in the sickness absence rate from 2010 to 2020. Occupational groups will have been affected differently by the pandemic, which might have an effect on their sickness absence rates, ability to work from home would be very different across these groups as can be seen in the article published in July on [who can work at home](#).

Figure 9: The gap between sickness absence for part-time and full-time workers has widened in 2020

Sickness absence rate¹, by part-time and full-time status, UK, 2010 to 2020

Figure 9: The gap between sickness absence for part-time and full-time workers has widened in 2020

Sickness absence rate¹, by part-time and full-time status, UK, 2010 to 2020



Source: Office for National Statistics – Labour Force Survey

Notes:

1. The sickness absence rate is the percentage of working hours that are lost because of sickness absence.

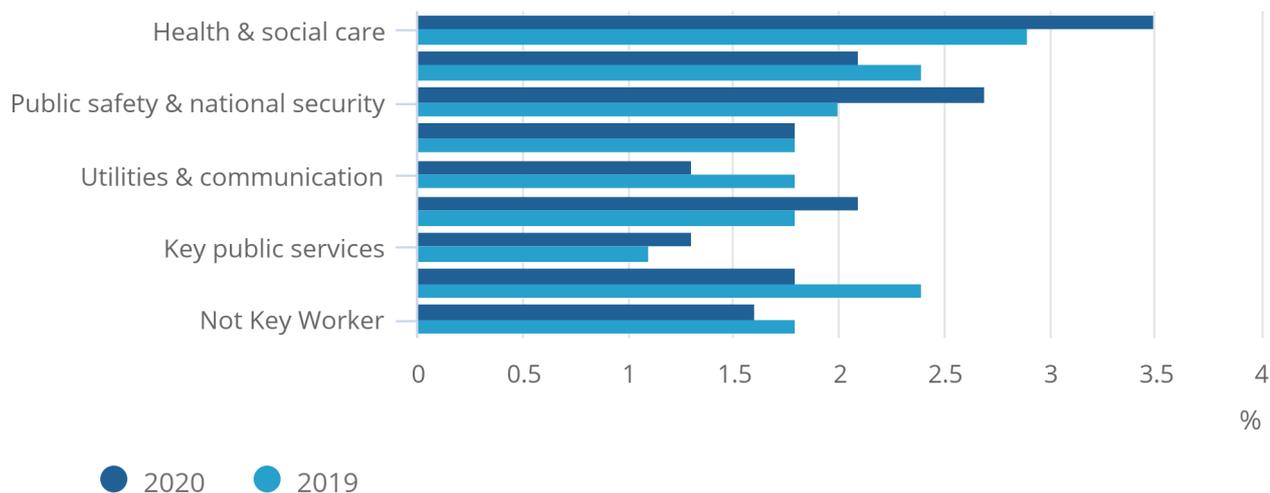
The sickness absence rate for part-time workers has been consistently higher than the rate for full-time workers for the entire data time series. This can be explained in part by higher numbers of women working part-time, and occupations that have a higher proportion of part-time workers, as they also tend to have higher rates of sickness absence. Overall, the sickness absence rates of both part-time and full-time workers declined across the data time series.

Figure 10: Key workers in health and social care have seen the largest sickness absence rate in 2019 and 2020

Sickness absence rate¹, by key worker² industry, 2019 to 2020, UK

Figure 10: Key workers in health and social care have seen the largest sickness absence rate in 2019 and 2020

Sickness absence rate¹, by key worker² industry, 2019 to 2020, UK



Source: Office for National Statistics – Labour Force Survey

Notes:

1. A day is defined as 7 hours and 30 minutes.
2. Key worker occupations are defined using a combination of 2010 Standard Occupational Classification (SOC) and the 2007 Standard Industrial Classification of Economic Activities (SIC) to the [UK government definition](#).

There are several ways to estimate the number of key workers. For this analysis, we matched a combination of the [2010 Standard Occupational Classifications](#) and [2007 Standard Industrial Classifications](#) to the [UK government definition](#). Individuals that fall within the category "health and social care" saw the biggest sickness absence rate in 2019 and 2020, this was 2.9% and 3.5% respectively.

"Public safety and national security" saw the largest rise in sickness absence, rising by 0.8 percentage points from 2019 to 2020. This was followed by the "health and social care" category, with a 0.5 percentage point rise from 2019 to 2020. These key worker categories include jobs that require public facing, therefore are at a higher risk of becoming sick. More information on the definitions of key workers can be seen in the Data sources and quality section.

Some other key worker industries saw a reduction in sickness absence over the year, with "national and local government" down 0.7 percentage points and "utilities and communication" down 0.5 percentage points. This may be because of the ability to work from home through the pandemic in those industries. More detail on this can be seen in the article published in July on [who can work at home](#).

6 . Sickness absence data

[Sickness absence in the UK labour market](#)

Dataset | Released 3 March 2021

Annual sickness absence rates of workers in the UK labour market.

7 . Glossary

COVID-19

The name used to refer to the disease caused by the SARS CoV-2 virus, which is a type of coronavirus. The Office for National Statistics (ONS) takes COVID-19 to mean presence of SARS-CoV-2 with or without symptoms.

Definitions of reason for sickness absence:

- "musculoskeletal problems" includes back pain, neck and upper limb problems, and other musculoskeletal problems
- "other" includes the total number of days lost to accidents, poisonings, infectious diseases, skin disorders, diabetes and anything else not covered
- "mental health conditions" include stress, depression, anxiety and serious mental health problems
- "minor illnesses" includes coughs, colds, flu, sickness, nausea and diarrhoea
- "disability status" is defined as whether a person meets the legal definition of being disabled according to the Equality Act 2010
- From April 2020, interviewers were advised to code any mention of Coronavirus as "Other", however, it is believed people could self-report this in 'Minor illnesses' or 'Respiratory conditions'.

Furlough

A temporary absence from work allowing workers to keep their job while the COVID-19 pandemic continues.

Number of days lost per worker

Defined as the proportion of days lost to number of persons in employment (see the formula in the following).

Sickness absence rate

Defined as the proportion of total hours lost as a result of sickness or injury to total hours worked (see the formula in the following).

$$\text{Sickness absence rate} = \frac{\text{Total hours lost due to sickness or injury}}{\text{Total hours}} \times 100$$

$$\text{Total hours} = \text{Total actual hours (for those with no sickness absence)} + \text{Total usual hours (for those with sickness absence)}$$

$$\text{Number of days lost} = \frac{\text{Hours lost due to sickness or injury} \times 52}{7.5}$$

$$\text{Number of days lost per worker} = \frac{\text{Number of days lost}}{\text{Number of persons in employment, aged 16 +}}$$

Working day

Defined as 7 hours and 30 minutes.

8 . Data sources and quality

The estimates included in this release have been produced using the Labour Force Survey (LFS). They relate to people aged 16 years and over in employment and are for the whole of the UK. Estimates are available from 1995 onwards for most breakdowns. Estimates calculated using the LFS are based on annual averages across quarters for each calendar year: taking an average of the January to March, April to June, July to September and October to December datasets within a calendar year.

The total number of days lost is presented in millions, unless otherwise stated.

The sickness absence rate is presented as a percentage throughout these analyses.

Quality and Methodology Information reports

The [Labour Force Survey \(LFS\) Quality and Methodology Information \(QMI\) reports](#) contain important information on:

- the strengths and limitations of the data and how it compares with released data
- the uses and users of the data
- how the output was created
- the quality of the output including the accuracy of the data

More information on the quality, methodology and history of the LFS can be found in the [Labour Force Survey -- user guidance](#).

Accuracy in estimates

Estimates of sickness absence at the UK level in 2020 were based on a sample size of approximately 700 averaged across the year. There is therefore a limit to how many breakdowns can be made of the data without significantly reducing quality or requiring an element of disclosure control.

The numbers quoted throughout this release are based on sample sizes of three or higher. Within the main tables, any estimate based on fewer than three people has been suppressed (denoted by an asterisk). In instances where secondary disclosure was present, the "Prefers not to say" category has also been suppressed. Any estimate based on a sample size of between 3 and 25 has been highlighted (with grey shading), to emphasise the potential quality limitation of the estimate. These have been applied as per [Measuring and reporting reliability of Labour Force Survey and Annual Population Survey Estimates](#).

Because of the coronavirus (COVID-19) pandemic a high number of people in employment were on furlough (away from work which they expect to return to) during 2020, which has impacted some of the measures of sickness absence; some of the falls seen in 2020 will be because there were fewer people in work, therefore fewer people taking days off because of sickness or injury.

Key workers

There are several ways to estimate the number of key workers. For this analysis, we matched a combination of the [2010 Standard Occupational Classifications](#) and [2007 Standard Industrial Classifications](#) to the [UK government definition](#). The occupation and industry groups in the Labour Force Survey (LFS) that were used as a basis for these estimates do not exactly match the occupation groups listed by the [UK government](#). The UK government guidance is intentionally broad, and it is for employers to decide who is a key worker. Some workers under this definition may be furloughed; this is not captured in this definition. The article [Coronavirus and key workers in the UK](#), published in May 2020 includes more details of this classification and other detailed analyses of this group.

Impact of the coronavirus on the Labour Force Survey

The LFS design is based on interviewing households over five consecutive quarters. Generally, the first of these interviews, called Wave 1, takes place face-to-face, with most subsequent interviews, for Waves 2 to 5, conducted by telephone. During March 2020, we stopped conducting face-to-face interviews, instead switching to using telephone interviewing exclusively for all waves. This initially caused a significant drop in response. New measures have been introduced to improve this, which have increased sample sizes, although they are still below normal LFS sample sizes.

Labour Force Survey (LFS) responses are weighted to official population projections. As the current projections are 2018-based they are based on demographic trends that pre-date the coronavirus pandemic. We are analysing the population totals used in the weighting process and may make adjustments if appropriate. Rates published from the LFS remain robust; however, levels and changes in levels should be used with caution. This will particularly affect estimates for country of birth, nationality, ethnicity and disability.

Because of the impact on data collection, different weeks throughout the quarter have different achieved sample sizes. To mitigate this impact on estimates the weighting methodology was enhanced to include weekly calibration to ensure that samples from each week had roughly equal representation within the overall three-month estimate. This meant that any impacts seen from changes in the labour market in those weeks would be fully represented within the estimates.

Because of the suspension of face-to-face interviewing in March 2020, we had to make operational changes to the LFS, particularly in the way that we contact households for initial interview, which moved to a "by telephone" approach. These changes have resulted in a response where certain characteristics have not been as well represented as previously. This is evidenced in a change in the balance of type of household that we are reaching. In particular, the proportion of households where people own their homes in the sample has increased and rented accommodation households has decreased.

To mitigate the impact of this non-response bias we have introduced housing tenure into the LFS weighting methodology for periods from January to March 2020 onwards. While not providing a perfect solution, this has redressed some of the issues that had previously been noted in the survey results. More information can be found in an article [Coronavirus and its impact on the Labour Force Survey](#).

9 . Related links

[Employment in the UK: February 2021](#)

Bulletin | Monthly

Estimates of employment, unemployment and economic inactivity for the UK.

[Which jobs can be done from home?](#)

Article | Released 21 July 2020

During the coronavirus (COVID-19) pandemic, government advice has said people in the UK should work from home if possible. This is easier for some workers than others, and jobs that pay more are more likely to be done remotely.

[Coronavirus and homeworking in the UK: April 2020](#)

Bulletin | Released 8 July 2020

Homeworking patterns in the UK, broken down by sex, age, region and ethnicity.