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# Being Well in a Changing World

Driven by, and driving, change



**Being Well in a Changing World was a joint research project by British Safety Council and the Institute of Occupational Medicine. The project identified and examined current practices that employers are implementing to improve the wellbeing of their workforce.**

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# Introduction

The world is changing, and the nature and pace of change can often seem overwhelming, for employers and employees alike. While these changes may be no greater than those faced by previous generations, it is the call of each generation to respond to the changes and challenges put before them. Whether and indeed how employers support their employees through these changes and challenges is where wellbeing comes into play.

In the last 5 years alone, we have seen war return to Europe, armed conflict flare in the Middle East, the growth of economic and political instability, and a global pandemic that claimed the lives of an estimated 3 million<sup>1</sup> people and which changed the very fabric of how we live our lives.

In the UK, health outcomes now lag behind similar developed nations,<sup>2</sup> compounded by the impacts of the COVID-19 pandemic.<sup>3</sup> Those living in socio-economically disadvantaged areas were hit hardest,<sup>4</sup> as health inequality increased.<sup>5</sup> Economic growth has been, largely, stagnant<sup>6</sup> and levels of economic inactivity continue to rise both for those unable to work through ill health,<sup>7</sup> as well as those who can but are not – and do not plan – to search for work.<sup>8</sup>

With 'growth' and 'change' the political buzzwords of the moment, it's important for legislators and policymakers to understand that wellbeing – particularly improvement of wellbeing – can serve as:

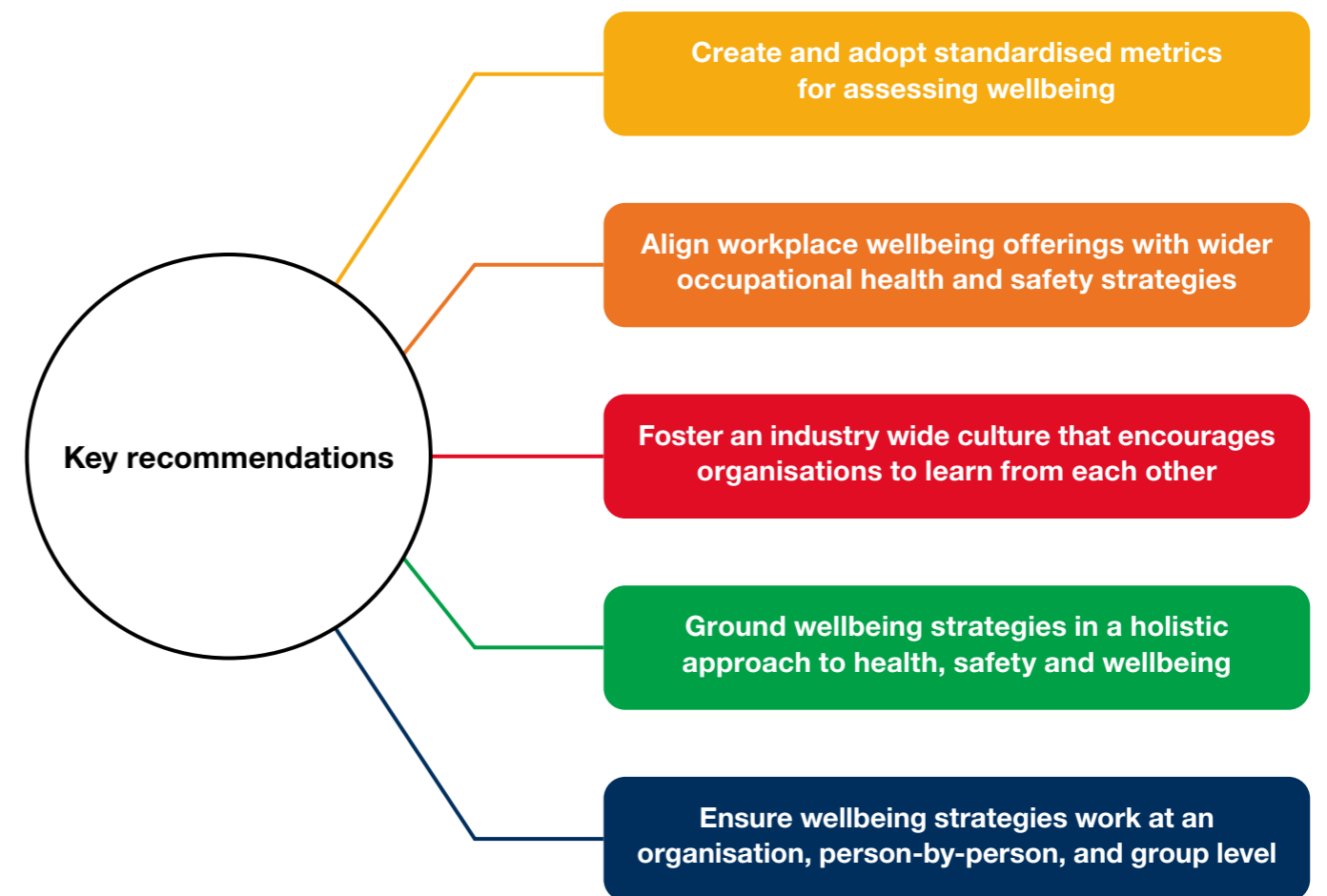
- A policy lever for productivity
- A driver of economic participation
- A contributing factor to local, regional, and national economic growth.

Amid (and perhaps because of) the social, political, and economic contexts outlined above, how employers approach worker wellbeing has grown in importance and appreciation in our post-pandemic world. We spend an estimated one-third of our lives at work<sup>9</sup>, and more and more we have come to recognise the potential that the working environment has to impact our wider physical, psychological, and emotional health; for better or worse, inside and outside of the workplace.

Being Well in a Changing World was a joint research project between British Safety Council and the Institute of Occupational Medicine (IOM) which set out to understand what employers were doing to support worker wellbeing, what is guiding and driving wellbeing support, and whether needs differ for different worker groups/demographics.

Findings from this research prompt 5 principal recommendations that we believe, both in isolation and conjunction, could create a better future in which worker wellbeing is made a priority: to the benefit of employers (through unlocked productivity and increased profits), employees (through improved psychological and physiological health), and the wider economy (through increased economic activity and growth).

## Key recommendations made in Being Well in a Changing World



### The five principal recommendations contained within this report are:

- 1 Better measurement for better understanding:** Create and adopt measures of wellbeing, through a set of standardised metrics, by which wellbeing can be assessed, allowing for consistency and comparability.
- 2 Health, safety, and wellbeing: a virtuous circle:** Align workplace wellbeing offerings with wider occupational health and safety strategies, understanding that healthier and happier workers are also safer workers.
- 3 Growing the good practice evidence-base:** Foster an industry wide culture that encourages organisations to learn from each other, through the sharing of wellbeing data, resources, and best practice; collectively raising wellbeing standards.
- 4 A holistic approach to wellbeing:** Ground wellbeing strategies in a holistic approach, integrating physical, financial, emotional, psychological needs to improve overall health and wellbeing; inside and outside of the workplace.
- 5 Designing for a diverse workforce:** Create wellbeing strategies that apply organisation-level solutions, targeted solutions on a person-by-person basis, and interventions for specific groups; in recognition of the fact that wellbeing needs differ between different people and groups.



### British Safety Council

As a health, safety, and wellbeing charity working in over 60 countries, British Safety Council has been dedicated to its vision that “No one should be injured or made ill through their work” since 1957. British Safety Council works to improve workplace health, safety, and wellbeing standards, by influencing policy, providing education and training, and sharing best practice.

[www.britsafe.org](http://www.britsafe.org)



### Institute for Organisational Medicine

The Institute of Occupational Medicine (IOM) is a trusted authority dedicated to enhancing health in workplaces and the broader environment. IOM is both a research and consultancy organisation with expertise across a range of occupational and environmental hazards. We provide comprehensive insights, identification, management, testing, and legal support.

[Institute of Occupational Medicine | IOM \(iom-world.org\)](http://Institute of Occupational Medicine | IOM (iom-world.org))



# Executive Summary

Being Well in a Changing World, explores the provision of workplace wellbeing strategies in the context of rapid global change. This joint research project between British Safety Council and the Institute of Occupational Medicine was conducted in three stages: a comprehensive literature review, in-person interviews, and an online survey. These stages provided a robust foundation for understanding current perspectives on wellbeing and identified recommendations for employers, employees, and policymakers.

## Highlights from the research conducted for Being Well in a Changing World



## Key Findings:

- **Lack of agreed definition:** There is no universally accepted definition of wellbeing, leading to inconsistencies in research, provision of wellbeing offering, and (applied) practice.
- **Measurement challenges:** The lack of measurement of wellbeing and an absence of a standardised metric for measuring wellbeing complicates the assessment and comparison of wellbeing across different organisations, sectors, industries, cultures, and nations.
- **Diverse perspectives:** Wellbeing priorities differ between different demographics and subgroups of worker populations, highlighting the need for a more inclusive and targeted approach.
- **Impact of change:** Rapid technological, environmental, and social change will define the next century. The changes and challenges of the future promise to reshape both the nature of work and how we interact with the work we do, leading to uncertainty and anxiety for employers and employees alike.
- **Policy and practice gaps:** There is a disconnect between academic wellbeing research and its practical application; both in government policy and within a workplace context, necessitating further research and integration.

## Principal Recommendations:

1. **Better measurement for better understanding:** Create and adopt measures of wellbeing, through a set of standardised metrics, by which wellbeing can be assessed, allowing for consistency and comparability.
2. **Health, safety, and wellbeing: a virtuous circle:** Align workplace wellbeing offerings with wider occupational health and safety strategies, understanding that healthier and happier workers are also safer workers.
3. **Growing the good practice evidence-base:** Foster an industry wide culture that encourages organisations to learn from each other, through the sharing of wellbeing data, resources, and best practice; collectively raising wellbeing standards.
4. **A holistic approach to wellbeing:** Ground wellbeing strategies in a holistic approach, integrating physical, financial, emotional, psychological needs to improve overall health and wellbeing; inside and outside of the workplace.
5. **Designing for a diverse workforce:** Create wellbeing strategies that apply organisation-level solutions, targeted solutions on a person-by-person basis, and interventions for specific groups; in recognition of the fact that wellbeing needs differ between different people and groups.

**Conclusion:** Being Well in a Changing World underscores the complexity faced by employers as to how they keep their employees well amid rapid social, ecological, technological, and economic change. By addressing the identified gaps and implementing the recommendations, employers can better support and enhance worker wellbeing to keep their employees well in a changing world.

## Methodology and stages undertaken for Being Well in a Changing World





# 1. Better measurement for better understanding

The World Health Organisation (WHO) defines health as ‘a state of complete physical, mental, and social wellbeing and not merely the absence of disease or infirmity.’<sup>10</sup> But what is wellbeing and how does it link to worker health?

## Defining wellbeing

There is no universal definition of wellbeing, therefore, there is no consensus on best practice, what should be measured, or how organisations can measure progress. Where measurement occurs, there are clear inconsistencies. If society cannot agree on a consistent definition, approach, or set of metrics, how can we effectively generate an empirical evidence-base and help employers support their employees to be well in a changing world?

Wellbeing is a concept that has both subjective and objective elements. Different approaches and applications are used to assess wellbeing<sup>11</sup> presenting challenges in establishing a universal metric for measurement.

Attempts have been made, with the WHO seeking to develop an agreed definition of wellbeing and establish a consensus on a set of indicators that includes both objective and subjective aspects.<sup>12</sup>

## Wellbeing measurement, as a baseline

Alongside the lack of an agreed definition, there are no standardised metrics for measuring wellbeing; as this report has found from a review of both academic literature and industry sources. This makes it hard to compare the effectiveness of different interventions, programmes, and policies that seek to help workers to be well in a changing world.

Examples of the measures of wellbeing found in the grey and academic literature review include validated scales on topics such as depression, stress, burnout, and anxiety. These are generally based on self-reporting, so may themselves contain subjectivity.

Agreement around, and use of, objective measurements would begin to establish baselines and could include data such as sickness, absence, health screening by a healthcare professional, or physiological measures such as blood pressure or heart rate.

A clear metric or set of common indicators for wellbeing could usefully apply to all organisations, regardless of sector, industry, country/countries of operation, and working modes (in-person, hybrid, flexible, and home working) and this, itself, presents challenges. These are discussed further in this section.

Indicators should be measurable by organisations. Metrics should be mapped on to a clear framework or model to enable evaluation. If metrics were commonly used across organisations, it would improve our ability to evaluate across policies and interventions, as well as across industries and sectors. This would lead to an improvement of the evidence-base and toolkit available to organisations, policymakers, and health and wellbeing professionals.

## 1. Better measurement for better understanding

### Cultural Differences

A universal metric for wellbeing must recognise the cultural differences that exists on a nation-by-nation (or, where federalised, state-by-state) basis. These are challenges also found in looking to agree a global definition of wellbeing.

Despite these challenges, it is still possible to develop a standardised and universal metric for wellbeing, allowing for the facilitation of research and performance tracking. Even relatively objective metrics of health may differ according to different population groups but understanding how they may differ between populations allows some level of calibration and comparability across groups.

Similarly, a composite index of various dimensions that contribute to wellbeing could be generated. This would not be dissimilar to the 10 domains and 60 measures of wellbeing currently collected by the Office for National Statistics (ONS)<sup>13</sup> and could be as simple as Gallup's '5 Essential Elements of Wellbeing'.<sup>14</sup>

Being Well in a Changing World provides an initial scoping of these dimensions, and this could be further developed with a panel of experts (made up of policymakers, industry experts, academics, trade unions, employers, and employees.)



## 2. Health, safety, and wellbeing: a virtuous circle

The COVID-19 pandemic catalysed conversations about worker wellbeing. It was a dialogue, with global application, about the steps needed to keep workers well in a rapidly changing world. Post-pandemic, this dialogue has continued, growing both in importance and focus. Today, more employers are recognising the virtuous circle<sup>15</sup> that exist when they join up the dots between health, safety, and worker wellbeing.

We see why an integrated approach is important when we look at the consequences of failing to join up the dots, which becomes a vicious, not a virtuous circle.

A disjointed approach risks inefficient interventions that fail to provide workers with the skills and resources that they need to be well in a changing world. Duplication of workstreams, unclear channels of communication,<sup>16</sup> and overlapping or conflicting priorities risk exposing workers to seen or unforeseen hazards.

Data collected in this research project shows that 87% of employers are already grounding their wellbeing strategy in health and safety, informed both by changing attitudes to mental health<sup>17</sup> and to worker wellbeing in our post-pandemic world.

Historically, health and safety, through regulation and legislation, has primarily focused on the prevention of physical injuries<sup>18</sup> and the reduction of workplace fatalities and non-fatal injuries. With public attitudes moving towards mental health acceptance and de-stigmatisation<sup>19</sup> and an increased focus on worker wellbeing post-pandemic, it is unsurprising to find that most employers are joining up the dots between health, safety, and wellbeing.

This data does show however, that 13% of employers are not employing an integrated approach, which risks leaving their employees without adequate support in a changing world.

Where an integrated approach is proactively employed, employers see returns in fewer workplace injuries and fatalities,<sup>20</sup> because happier workers are both more risk-aware and risk-averse. They contribute to a safety culture defined by personal responsibility<sup>21</sup> and, in turn, contribute to a collective safety culture that looks to proactively and responsively identify, manage and mitigate risks.



## 2. Health, safety, and wellbeing: a virtuous circle

If reducing workplace injuries and illnesses was not enough,<sup>22</sup> we also know that happier workers are also more productive,<sup>23</sup> with a study from the University of Oxford showing that happier workers are 13% more productive than unhappy colleagues.<sup>24</sup>

An integrated approach also increases retention rates,<sup>25</sup> reduces recruitment costs, boosts employee satisfaction, and contributes to a positive public perception of a joined-up approach between health, safety, and wellbeing is needed, given that just one in ten UK workers define themselves as 'engaged' at work,<sup>26</sup> and 76% of UK employees report moderate-to-high levels of workplace stress.<sup>27</sup>

This data comes alongside a wider social, political, and economic context that reflects the core purpose of this report. How can employers keep their workers well when faced with economic stagnation,<sup>28</sup> widening gaps in the standard of living<sup>29</sup> and rising levels of economic inactivity;<sup>30</sup> leading to a society that is poorer, less happy, and less healthy?<sup>31</sup>

Rarely can we start from the ground up and build processes from scratch. In reality, changes and integrations follow evolutionary and not revolutionary pathways. So, what evolutionary actions can employers take to ground their wellbeing strategies in health and safety?

Put simply, an integrated approach offers us the ability to improve stagnant economic growth, kickstart productivity, and keep workers safe, healthy, and happy. Failure to take action will see a continuation of worsening social, political, and economic conditions that leave workers less healthy and less happy.

## 3. Growing the good practice evidence-base?

A wide range of interventions for wellbeing are being used by employers. These may take the form of information and guidance, the provision independent support/counselling, wider organisational changes (such as where wellbeing sits within corporate structures), access to yoga, exercise, or mindfulness.

Literature on the effectiveness of these different interventions ranges; with most focussing on information or advice provision and training. There is not a large body of evidence on most of the other options being used by employers to address wellbeing.

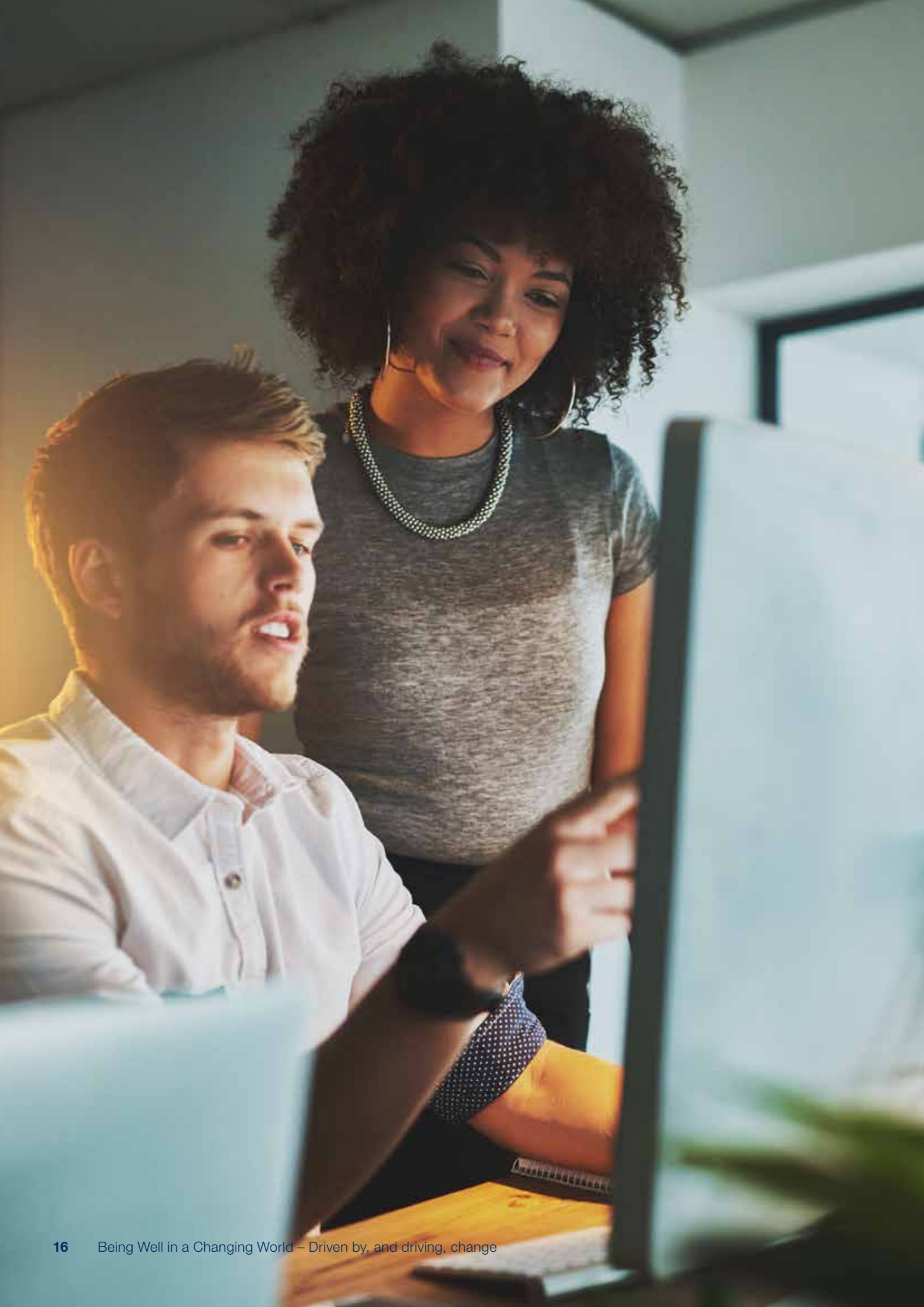
In particular, an area where progress needs to be made is in better supporting the wellbeing of a more dispersed workforce and in recognising our changing working styles and habits. 142 of the respondents of the survey pointed to this being one of their greatest challenges. Almost 5 years after the start of the pandemic this suggests a knowledge gap for society which evidence and guidance can work to plug.

The evidence-base around wellbeing needs to be built for all levels of an organisation – employing both a top-down and bottom-up approach – alongside demonstrating its place within and contribution to the strategic and tactical needs of the organisation as a whole. This includes not only the evaluation of interventions but also the regular monitoring of worker wellbeing.

There is also a need for more evaluation of the cost-effectiveness of existing interventions. Financial, resource, and time pressures are among the greatest challenges organisations face in supporting worker wellbeing. It is, therefore, important to have an accessible evidence-base as to the cost-effectiveness of interventions, likely returns, and tools to help employers make a compelling business case for wellbeing.

The sharing of this information can help organisations to benchmark themselves against their past performance, measure internal progress, and benchmark these against other publicly available wellbeing data (in a similar way to environmental, Social, Governance (ESG) reporting) to understand whether their strategies and programmes are working (and whether they could be more effective). A community of practice can also complement toolkits, allowing organisations to learn from each other, share best practice, and build an approach to wellbeing that seeks improvement through wider supply chains.

This is evidenced in the findings of this report, where good practice case studies were viewed as the highest area of future interest for respondents. As well as wellbeing forums, which enabled knowledge sharing, these were the most prominent actions/resources not currently used or of future interest. This finding suggests that organisations may lack awareness of the value that can be gained from such activities.



# 4. A holistic approach to wellbeing

A holistic approach to wellbeing offers workers the greatest chance to thrive, individually and collectively; both inside and outside of the workplace. In our post-pandemic world, society is coming to accept that stresses and anxieties beginning in the workplace don't stop at the end of the working day. More and more we recognise that professional stresses can impact our personal lives and personal stresses can impact our professional lives, creating vicious and virtuous circles. While data collected as part of this project shows that a majority of employers are grounding their wellbeing offering in a mixed strategy approach, it's unclear just how joined-up these mixed strategies are.

A holistic approach to wellbeing seeks to turn a vicious cycle into a virtuous one by joining up the dots between the differing domains (physical, psychological, emotional, and financial) and realms (professional and personal) of wellbeing. This both recognises the complex interplay that exists within wellbeing and seeks to improve the whole health of a person, rather than dealing with challenges in isolation.

Data collected demonstrates that most surveyed organisations are already deploying a 'mixed strategy' approach, in recognition of their employees' complex and changing wellbeing needs.

Worker wellbeing does not exist in a vacuum. It is shaped, for better or worse, by a range of external factors, challenges, and changes, some of which were outlined in the introduction to this report. Being Well in a Changing World requires wellbeing strategies that are both proactive and responsive and which sit across wellbeing domains and realms to challenge the multi-faceted nature of change.

As part of data gathering, employers were asked to rank their employees' wellbeing needs, with physical wellbeing ranking as the primary consideration for 90% of organisations interviewed. This was followed by mental wellbeing (80%) and financial wellbeing (70%). These claims were validated by the survey results which found that in 90% of surveyed organisations physical wellbeing was their most common wellbeing priority, followed by mental wellbeing (reported by 80% organisations) and financial wellbeing (reported by 70% organisations).

# 5. Designing for a diverse workforce

Being Well in a Changing World found that wellbeing priorities were observed to differ amongst differing groups. Most commonly these differences were driven by demographic characteristics such as age, gender, and religion.

One example can be seen through the younger workers interviewed, who stressed the importance of corporate social responsibility and wanting to give back to the communities in which they live and/or work.

Other examples of this can be seen in wider calls to recognise and support often-overlooked challenges affecting employees, whether this be as individual workers or larger groups sharing common problems.

Over 4.5 million women in the UK experience perimenopause or post-menopause, with symptoms ranging from insomnia and sleep problems to hot flashes. This figure accounts for almost 15% of the national workforce.<sup>32</sup>

Without adequate support, we risk growing numbers of women leaving the workforce and taking with them valued (and valuable) experience and insights. Only 26% of UK organisations have formal menopause policies leaving almost three quarters of UK workplaces with ad-hoc approaches that don't, necessarily, provide any support to perimenopausal or post-menopausal women. This is, perhaps, a key driver for the current spike in women aged between 45 and 55 leaving the workforce.<sup>33</sup>

The variety of needs different workers have is clear from the Health and Wellbeing at Work Report 2023 (published by the Chartered Institute for Professional Development, CIPD)<sup>34</sup> and other sources. The CIPD report shows that financial wellbeing is a growing contributor to wider wellbeing, and that the impacts of the COVID pandemic (alongside the presentation of long-COVID) continues to impact employees.

To have the greatest impact, wellbeing strategies need to focus on the challenges faced by differing groups, whilst also providing a firm foundation for all workers.

## Hybrid and home workers

Today's workforce is more geographically dispersed, both within the nations and regions of the United Kingdom and around the world. The globalised nature of industry and trade sees many organisations operating across multiple nations, regions, and legal jurisdictions.

Since the COVID-19 pandemic, home-working and hybrid work models have become more commonplace. Before the pandemic in 2019, about 12% of UK workers reported working from home at some point during the working week.<sup>35</sup> In 2023, this percentage rose to over 30%.

Staff are now more likely to live and work in differing and dispersed locations. Additionally, employers are finding that better flexibility and hybrid work options are of growing importance to staff.<sup>36</sup>

Furthermore, all employees have the statutory right to request flexible working to be considered by their employer.<sup>37</sup> Flexible working is more likely to be a net benefit to productivity. However, our research found that some organisations report that these models of work can pose challenges in engaging staff, managing, and monitoring health and wellbeing across the organisation. About 23% of our survey respondents cited the dispersed workforce and the lack of staff engagement as being among their greatest challenges for supporting worker wellbeing.

## Workplace and workforce profiles

A wholly generic approach towards wellbeing would not work for a diverse range of businesses and workforce profiles. Wellbeing programmes need to be tailored to individual businesses relative to the operational environment, nature of operations and workforce makeup. Common frameworks or overall solutions are likely to provide useful start points for consideration among similar types of businesses and workforce profiles.

Development of the evidence-base for successful wellbeing strategies (recommendation 3) will require evaluation of the characteristics of a business and its workforce, allowing for an understanding of how these might influence the success or failure of particular strategies. A toolbox based on the learnings from this evidence-base can provide business leaders and organisations with the means to develop an effective wellbeing strategy for their organisation.

The National Institute for Health and Care Excellence (NICE) suggests having a three-tiered approach, involving 1) an organisational approach serving as a foundation, followed by 2) individual, and 3) targeted approaches.<sup>38</sup> The adoption of a multi-level approach, as suggested by NICE, fits with the findings of this report, demonstrating the need to have the right cultural factors in place to deliver wellbeing.

## 5. Designing for a diverse workforce

Fundamentally, the culture of an organisation should support wellbeing throughout all three tiers and should allow employees to freely move throughout the tiers to best access the support and resources that they need. This strategy involves building a strong ecosystem for worker wellbeing, with employers engaging with employees and their representatives to understand what support and services they need to be well in a changing world.

Additionally, embedding tools such as workplace accreditations and charters can improve both the environment and the culture. Sector-specific resources can provide best practice and guidance to support the development of a comprehensive organisational programme.

### Support for emotional and psychological wellbeing

Managers and line managers play an important role in the wellbeing of those they manage, from initial informal support to signposting those they manage to Employee Assistance Programmes (EAP) and workplace wellbeing services.

This approach should be supported by training for managers on how to discuss mental wellbeing (i.e. starting the conversation) with employees. Using these conversations will help to identify sources of stress and agree next steps or further support available to access (i.e. managing the conversation).

### Multi-morbidity

The percentage of people living with long-term and multiple long-term health conditions (multi-morbidity) which limit their ability to work, has risen from 16% to 18% between 2019 and 2022, along with an increase in sickness absence.<sup>39</sup> Added to this, the number of adults living with two or more long-term (and complex) conditions increased by 70% between 2004 -2019, with areas of economic deprivation being hit hardest.<sup>40</sup>

Multimorbidity has been called “one of the greatest challenges facing health services, both presently and in the coming decades”,<sup>41</sup> with estimates that more than one in four adults in England live with two or more complex, long-term conditions.<sup>42</sup>

Safe spaces, as part of tailored wellbeing strategies, allow for honest discussions between employees and managers. In turn, this allows for signposting to resources and support, enabling managers to help their employees to be well in a changing world.

### Individual and group-based interventions

The CIPD *Health and Wellbeing at Work*<sup>43</sup> report cites 16 different types of non-work issues facing employees for which workplace support could be provided.<sup>44</sup> These include caring responsibilities, domestic abuse, and chronic conditions.

The CIPD report states that: “Three-fifths of respondents report their health and wellbeing activity includes provision for working parents/ carers of children (60%) and over half include bereavement support (55%) to a large or moderate extent.” However, the degree to which organisations incorporate support for other health issues and life events is more mixed. This suggests that there are gaps when a person needs a specific type of generic support, for example when dealing with gambling harm or domestic abuse.

The online survey conducted as part of Being Well Together in a Changing World found that 70% of respondents’ organisational purpose was linked to the wellbeing of their workers. This is further supported by a study in 2023 which found that there was a strong or moderate quality of evidence for the effectiveness of organisational interventions.<sup>45</sup>



# Key Findings

## Literature Review: Key Findings

### Academic literature picked up that employers are making interventions:

- 45% of documented interventions (33 papers) were based on providing employees with information.
- 45% (33 papers) of documented interventions reported providing employees with guidance and/or advice.
- 42% (31 papers) of documented interventions reported providing employees with some form of training.

### Academic literature reported gaps in practice:

- A lack of standardised definitions and methods.
- A lack of investigation into practical aspects of delivery (including cost-effectiveness and term length for implementation).
- A lack of interventions tailored to specific groups.
- A pressing need for higher quality and consistency across projects.

## In-person interviews: Key Findings

- 90% of organisations articulated that physical wellbeing was their most common wellbeing priority, followed by mental wellbeing (80%) and financial wellbeing (70%).
- 80% of respondents reported that their wellbeing strategy was informed by health and safety.
- Senior leaders, Human Resources (HR) leads, and Safety, Health, Environment (SHE) leads were the most commonly identified roles having the greatest responsibility and accountability for wellbeing.
- 100% of participants reported that feedback from workers was used to shape their wellbeing strategy and actions (the most popular method for data collection was survey/poll).
- Data collection relied heavily on lagging, reactive and not proactive data sources.
- Economic challenges and uncertainty were the most prominent challenges anticipated to supporting future worker wellbeing.

## Online Survey; Key Findings

- The majority (87%) of survey respondents reported their wellbeing strategy to be grounded in health and safety.
- Organisational strategy was most commonly developed in-house (58%) and/or with input from workers (33%) and/or from external experts/consultants (28%).
- 70% of respondents stated their organisational purpose was linked to the wellbeing of their workers.
- Prominent roles accountable for workforce wellbeing were Human Resources leads (53%), Safety Health and Environment (SHE) leads (46%) and Chief Executive Officer (CEO)/Managing Director (MD) (35%).
- The top three drivers for organisations supporting the wellbeing of their workers were: to improve engagement (49%), enhancement of performance or productivity (40%) and staff retention (34%).
- Mental wellbeing and physical health were ranked as high priorities of focus (amongst 67% of respondents combined).
- Most common challenges to supporting worker wellbeing were time pressures (25%), resources challenges (24%) and having a dispersed workforce (23%).

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- <sup>41</sup> [Making sense of the evidence: Multiple long-term conditions \(multimorbidity\) - NIHR Evidence](#)
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- <sup>43</sup> [Health and wellbeing at work \(cipd.org\)](#)
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