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5. Work and worklessness

5.1. Introduction

Employment is good for health. Earnings from paid employment can provide access to a good standard of living and being in work is linked to a positive sense of wellbeing. People who are not working have a higher risk of poor physical and mental health, have fewer social connections and are less active on average. [1] [2] Long-term unemployment is particularly bad for health, with the effects lasting for many years.

While there is clear evidence that employment can have positive health benefits, the quality of the work itself is also important. Being in 'good work' - which is safe, rewarding and provides a sense of self-worth - is what really matters for positive health outcomes. [3] [4] The workplace is, therefore, an important setting for promoting health and wellbeing and can help to reverse the harmful effects of longterm unemployment and prolonged periods of ill health.

Barriers to employment including poor health, lack of education and skills, plus wider local and national political and economic factors, all mean that some people are more at risk of worklessness than others.

Both Hackney and the City of London have experienced significant economic growth in recent years, with accompanying increases in levels of employment. However, not all sections of the local population have benefited to the same extent from these changes.

This section describes patterns of employment, unemployment and economic inactivity in Hackney and the City, exploring the links with health and wellbeing, and summarising the evidence and local practice in promoting health through employment and in the workplace. Key definitions used throughout this section are described in Box 1.

City daytime worker population – people who travel in to the City of London to work

Economically inactive – people without a paid job who have not actively sought work in the last four weeks and/or are not available to start work in the next two weeks. This includes students, those who are looking after family/the home, people who are long-term sick and retired people (it does not include those who are unemployed/seeking work – see below).

Employability – a set of skills, education and other attributes that allow a person to function successfully in a role and adapt their skill set to different occupations.

National Statistics Socio-Economic Classification (NS-SEC) – one of two social classification systems used in this section. This is based on an individual's occupation and type of employment, and is intended to capture both occupation and socio-economic status. There are eight main categories (see Table 1).

Standard Occupation Classification (SOC2010) – one of two social classification systems used in this section. This is based on an individual's occupation. There are nine main categories (see Table 1).

Unemployed – describes people out of work and actively seeking employment.

Working age population – for the purpose of this section, people aged 16-64.¹

Table 1: Socio-economic and occupational categories used in this document

NS-SEC categories

- L1. Higher managerial, administrative and professional occupations
- L2. Lower managerial, administrative and professional occupations
- L3. Intermediate occupations
- L4. Small employers and own account workers
- L5. Lower supervisory and technical occupations
- L6. Semi-routine occupations
- L7. Routine occupations
- L8. Never worked and long-term unemployed

SOC2010 major groups

- 1. Managers, directors and senior officials
- 2. Professional occupations
- 3. Associate professional and technical occupations
- 4. Administrative and secretarial occupations
- 5. Skilled trades occupations
- 6. Caring, leisure and other service occupations
- 7. Sales and customer service occupations
- 8. Process, plant and machine operatives
- 9. Elementary occupations

Source: ONS²

Notes: NS-SEC categories cannot be converted directly into SOC2010 major groups, nor vice versa. Data are presented in this section using the categories in the original data source.

¹ Under current legislation, the state pension age for women will increase to 65, the same as for men, in 2018. The pension age will increase for both men and women, reaching 67 by 2028.

² http://www.ons.gov.uk/ons/guide-method/classifications/soc2010/soc2010-volume-3-ns-sec--rebased-on-soc2010--user-manual/index.html

5.2. Key facts about work and worklessness in Hackney and the City of London

- Almost three guarters of the local population are of working age (16-64) years) – 72% in Hackney and 73% in the City.
- Two thirds of working age adults are in employment in Hackney this equates to 132,000 people (an employment rate of 66%). Due to the small resident population in the City, recent estimates of the number of employed residents are not available, but in the 2011 Census three quarters (74%) of the working age population were in employment.
- The daytime population of the City of London (comprising largely of City workers) is more than 50 times the size of the small resident population – over 400,000 people. [5]
- Most employed residents of Hackney (80%) work outside the borough's boundaries. Over half (59%) of the number of jobs within Hackney are not done by residents, but by those travelling into the borough from elsewhere.
- Economic growth in Hackney and the City has been accompanied by rising employment and a reduction in unemployment and economic inactivity over the past decade. The local labour market appears to have recovered from the recent economic downturn.
- A majority (60%) of employed Hackney residents work in the 'highest' occupations (SOC2010 categories 1-3). Hackney jobs are primarily based in the banking/finance/insurance industry and also public administration.
- The City of London is one of the world's leading financial and business centres with a dense concentration of financial and professional services. [5]

5.3. Health and wellbeing impacts

5.3.1. Employment

There is good evidence that work is good for health and wellbeing. The Department of Work and Pensions (DWP) commissioned a review of this topic in 2006, which found that: [3]

- employment provides economic resources and therefore material wellbeing
- work meets important psychological needs because work is a social norm. and because it is central to individual identity, social roles and social status
- employment and socio-economic status are the main drivers of social gradients in physical and mental health and mortality.

Employment also has more direct impacts on health and wellbeing. For people with long-term health conditions, work can be therapeutic and promote recovery and rehabilitation. [3] More generally, most working age adults spend a lot of their time at work, which means that the workplace is an important setting for promoting and enabling positive health and wellbeing. There is growing evidence of the effectiveness of workplace health interventions in addressing a range risk factors for long-term health conditions - including smoking, physical inactivity, diet and obesity. [6]

Conversely, a person's job can expose them to risks to their health, which will vary according to their occupation (e.g. manual or non-manual work), working environment (e.g. fixed office location or flexible/mobile setting) and working patterns (e.g. part-time or full-time, temporary or permanent, daytime or shift work). The latest national estimates show that annually, between 2013/14 and 2015/16, an average of 622,000 workers were injured in workplace accidents and a further 528,000 workers suffered a new case of ill health which they believed to be caused or made worse by their work. [7] Moreover, jobs that are insecure or poorly paid are rarely good for wellbeing. A specific example is the growing concern regarding the negative impact of zero hours contracts on peoples' health and wellbeing,³ although there is an argument that some workers benefit from the flexibility that these contracts offer. [8]

Stress and anxiety, and musculoskeletal disorders, are major causes of absence from work. [9] At a national level, stress/depression/anxiety accounted for 11.7 million days lost due to work-related ill health in 2015/16 (almost half of the total days lost); musculoskeletal disorders accounted for 8.8 million days lost (one third of the total). [10]

In 2014, the London Health Commission reported that in London employers lose 6.63 million working days each year due to stress, anxiety or depression. At a £30,000 annual wage, this equates to £1.1 billion in lost output. [11]

There are, therefore, significant benefits for employers, as well as employees, from addressing health through the workplace. [6] [12]

5.3.2. Unemployment and economic inactivity

Unemployment is associated with negative health outcomes, increasing the risk of limiting long-term illness, mental health problems and cardiovascular disease, as well as higher mortality rates (including from suicide). [1] The greatest impact is felt among those who experience long-term unemployment.

Unemployment affects health in three main ways, by: [1]

- creating financial problems (which affect living standards and can affect social integration and self-esteem)
- increasing risk of distress, anxiety and depression (affecting the individual as well as their family)
- impacting on health behaviours (unemployment is associated with increasing smoking and alcohol consumption and reduced physical activity).

As well as unemployment impacting on health, so poor health also increases the risk of someone becoming unemployed, which can create a cycle of ill health and worklessness. People who are in poor health and those with caring responsibilities

³ A zero hours contract is one where the employer is not obliged to provide any minimum working hours and the worker is not obliged to accept any work offered.

(who are vulnerable to long-term health problems of their own) are more likely to be economically inactive on average. In addition, people in lower skilled jobs and/or with lower level qualifications are at increased risk of unemployment. As such, worklessness can exacerbate social inequalities in health outcomes. [1]

5.4. Number of people affected locally

5.4.1. Employment

In Hackney in 2015-16, 132,000 working age residents were in employment - an employment rate of 66%. [13] Only a minority (20%) work within the borough of Hackney, with most working in other local authority areas (see Table 2).

Table 2: Location of employment of adult Hackney residents (age 16+, 2011)

Location	Percentage of residents ⁴
Hackney	20%
Westminster & City of London	23%
Islington	11%
Camden	10%
Tower Hamlets	8%
Other local authorities	28%

Source: Census. (NOMIS table WF02EW)

In the City of London, the weekday population (comprising mostly of City workers) is more than 56 times the size of the small resident population – around 438,000 people worked in the City in 2015, an increase of 27% since 2010. [14]

Data from the Annual Population Survey (APS) show that, between July 2015 and July 2016, almost two thirds (60%) of Hackney's working residents were employed in management, professional or associate professional occupations (categories 1-3 in the NOC2010 system, see Table 1). [15]

In 2012, over half of Hackney employers (7,840 businesses in total) were in the 'knowledge' industries - such as information and communication, finance and insurance, property, professional, scientific and technology services. Recent years have seen significant growth in Hackney in the information and communication sector, as well as the professional, scientific and technology sectors. For further information, see the 2014 'Local Economic Assessment Headlines' report. [16]

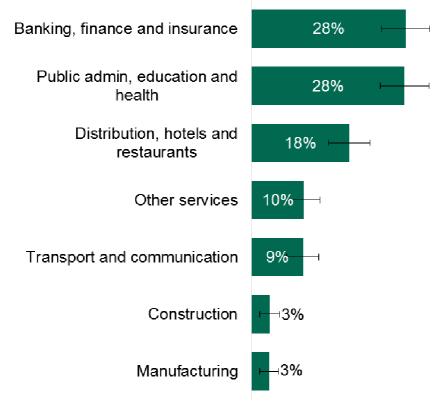
Figure 1 shows the major industries of employment for Hackney residents between July 2015 and June 2016. This is a very similar pattern to the industries of

⁴ This does not include residents who work at home or have no fixed work address.

employment of those working in Hackney (whether resident or not) over the same period.

Figure 2 shows the major industries of employment for those working in the City of London over this same period. No data on industry of employment of residents is available for the City.

Figure 1: Employment by industry for Hackney residents (July 2015-June 2016)



Source: ONS Annual Population Survey

49% Banking, finance and insurance Public admin, education and health Transport and communication Distribution, hotels and restaurants Construction Other services Manufacturing Energy and water

Figure 2: Employment by industry for those working in the City of London (July 2015-June 2016)

Source: ONS Annual Population Survey

In 2016, the median⁵ weekly pay for full-time employed workers in Hackney was £618.10, excluding overtime and the self-employed. The equivalent median hourly pay for full-time employed workers in Hackney was £16.25. In the City, the median weekly pay for full-time employed workers was £957.30 (again excluding overtime and the self-employed), and the equivalent median hourly wage was £25.94. [17]

5.4.2. Unemployment and economic inactivity

In Hackney, between July 2015 and June 2016, 11,400 residents of working age were unemployed – an unemployment rate of 8%. [17] A further 57,000 (29% of working age residents) were economically inactive (see Box 1 for definitions). Just over a third (36%) of economically inactive residents were students, more than one fifth (22%) were looking after the family/home and just under a guarter (24%) were long-term sick.

Welfare reform is having, and is expected to continue to have, a significant impact in Hackney in particular, in the context of relatively high levels of deprivation with large numbers of residents affected by out of work and in work poverty. [18] In 2015, 81 per 1,000 working age residents in Hackney were claiming out-of-work benefits and

⁵ The median of a collection of values (in this case, weekly pay for full-time workers) is the value that is higher than 50% of values and lower than 50% of values. This measure is used so that a few very high (or very low) values do not skew the reporting of averages.

21 per 1,000 residents in the City of London.⁶ For further detail, see 'Living standards' section of this JSNA chapter.

5.5. Inequalities

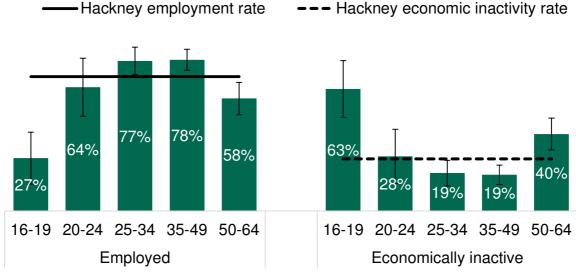
This sub-section describes available data on patterns of employment, unemployment and economic inactivity by key equalities characteristics – presenting local data wherever possible.

5.5.1. Age

Figure 3 shows that Hackney residents aged 25-49 have the highest employment rates and the lowest economic inactivity rates. Employment rates are lowest among 16-19 year olds (who are the most likely to be economically inactive, including students). Six in 10 50-64 year olds (58%) are employed and 40% are economically inactive. Unemployment rate by age in Hackney is not available, however in London as a whole (which has similar employment and economic inactivity patterns), unemployment is highest in 16-19 year olds, next highest in 20-24 year olds, and similarly low in all older age groups.

Daytime City workers also have a relatively young age profile (primarily between 20 and 50 years of age). [19]

Figure 3: Hackney resident employment rate and Hackney resident economic inactivity rate, by age (2015)



Source: ONS Annual Population Survey

In the 2011 Census, Hackney residents aged 25-34 were more likely than other age groups to be employed in NS-SEC 'higher managerial, administrative and professional' (16%), 'lower managerial, administrative and professional' (33%) and 'intermediate' occupations (11%). Older residents (aged 50 plus) were more likely

⁶ Out-of-work benefits include JSA, Incapacity Benefit/Employment Support Allowance and Income Support.

than younger residents to be employed in 'lower supervisory and technical' (8%), 'semi-routine' (17%) and 'routine' occupations (23%) in 2011. [20]

Also in the 2011 Census, two fifths (41%) of 25 to 34 year olds living in the City of London, and a similar proportion (30%) of 35 to 49 year olds, were employed in 'higher managerial and professional' occupations. A guarter of 50-64 year olds (27%) and the same proportion of those aged 65+ in the City were also employed in these occupations.

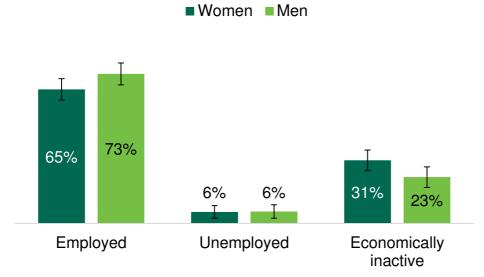
A very small proportion of City residents had never worked and/or were long-term unemployed in 2011. This was most common among 18-24 year olds, at 5%. [20]

For information on residents who are not in employment, education or training (NEET) see the 'Education and training' section of this JSNA chapter.

5.5.2. **Gender**

Figure 4 shows that unemployment rates are the same for men and women living in Hackney, but men are slightly more likely to be employed and women to be economically inactive (although neither of these differences are statistically significant)

Figure 4: Working age employment, unemployment and economic inactivity in Hackney residents by gender (July 2015 - June 2016)



Source: ONS Annual Population Survey

Figure 5 below shows that, in 2011, men living in Hackney were more likely than women to be in NS-SEC 'higher managerial, administrative and professional' or 'routine' occupations; men were also more likely to be self-employed. Conversely, women were more likely than men to be employed in 'lower managerial', 'intermediate' and 'semi-routine' occupations. A higher proportion of women than men in Hackney had never worked or were long-term unemployed.

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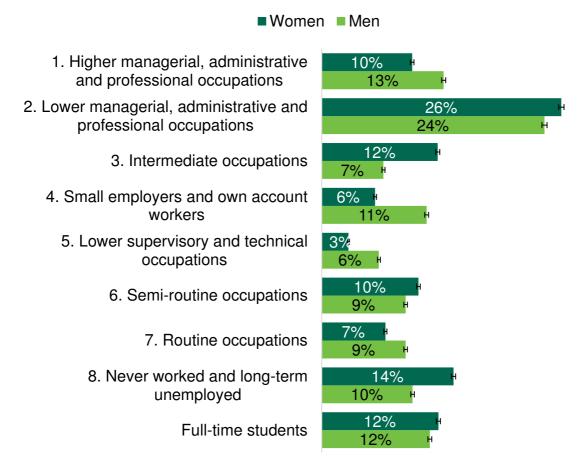


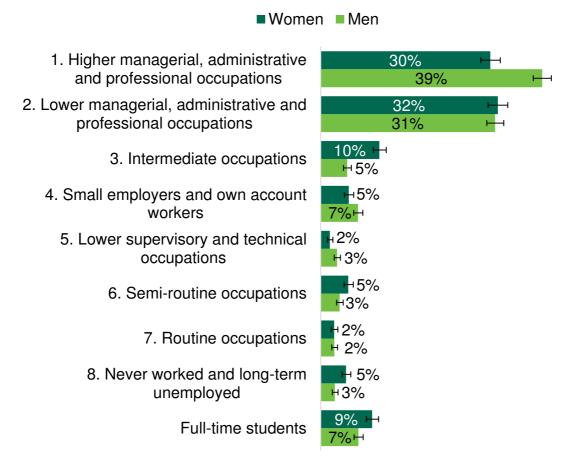
Figure 5: Occupation of Hackney residents, by gender (2011)

Source: ONS Census

In the City of London the daytime worker population is male-dominated, comprising around 220,000 male and 140,000 female workers. [19]

Figure 6 shows that, while employment in 'higher managerial, administrative and professional' occupations was much higher in both male and female residents of the City in 2011 compared with Hackney, again a higher proportion of men were employed in these occupations. Also as in Hackney, women were twice as likely as men to be employed in 'intermediate' occupations, and were more likely to have never worked or be long-term unemployed.

Figure 6: Occupation of City of London residents, by gender (2011)



Source: ONS Census

In 2016, the median weekly pay for full-time employed men working in Hackney was £632.40 (excluding overtime and the self-employed). The median weekly pay for fulltime employed women working in Hackney was £590.80 (again excluding overtime and the self-employed). [17]

Figure 7 shows that the median hourly wage for men and women living or working in Hackney is not statistically significantly different. [21] There is, however, a large gap in median hourly wage by gender for City employees, with female City workers' median hourly wage just 72% that of male City workers'. No data is available for City residents.

For information about the number of people claiming out-of-work benefits by gender, see 'Living standards' section of this JSNA chapter.

£29.58 £21.23 £15.67 £14.83 £14.32 £14.02 Female Male Female Male Female Male Working in the City Working in Living in Hackney Hackney

Figure 7: Median hourly wage, by gender (2016)

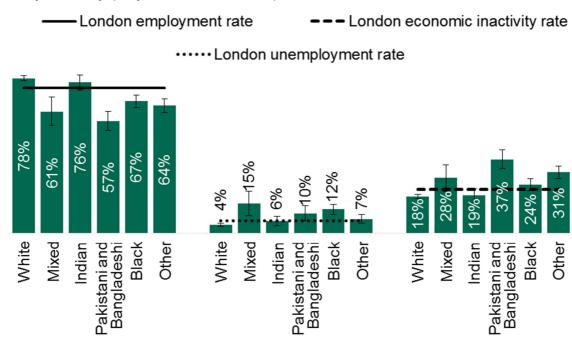
Source: ONS Annual Survey of Hours and Earnings

5.5.3. Ethnicity

Economic activity by ethnicity is not available in detail for Hackney or City residents. Figure 8 shows the breakdown for London as a whole. White London residents are more likely to be employed, and less likely to be unemployed or economically inactive, than almost all Black, Asian and other minority ethnic (BAME) groups. Mixed, Pakistani and Bangladeshi, Black and Other ethnicity residents are less likely to be employed; Mixed and Black residents are more likely to be unemployed; Pakistani, Bangladeshi and Other ethnicity residents are more likely to be economically inactive than the London average.

Economically inactive

Figure 8: London residents' employment, unemployment and economic inactivity rates, by ethnicity (July 2015 - June 2016)



Source: ONS Annual Population Survey

Employed

In the 2011 Census, White Hackney residents were most likely to occupy each of the highest three NS-SEC occupations (L1-L3), followed by people from Mixed ethnic backgrounds. Just under a third (30%) of White residents and just under a guarter (22%) of Mixed ethnicity residents held lower managerial, administrative and professional occupations. The highest proportion of residents occupying routine occupations and having never worked/long-term unemployed were in Black and Other ethnic groups (11% and 23%, respectively, for both groups). [20]

Unemployed

A similar pattern was found in City of London residents. Again in 2011, White City residents were the most likely to occupy the highest three NS-SEC occupations, followed by people from Mixed ethnic backgrounds. A third (33%) of White residents and a guarter (27%) of Mixed ethnicity residents were in lower managerial, administrative and professional occupations. The highest proportion of residents occupying routine occupations or never having worked/long-term unemployed were in Black and Other ethnic groups (6% and 9%, respectively, for both groups). [20]

5.5.4. Disabilities and long-term health conditions

Nationally, people with long-term conditions are less likely to be employed than those without. [22] Among adults age 16-64 with a disability that limits their daily activities, almost half (46%) were in employment in 2012, compared with three quarters (76%) of non-disabled workers. [23]

Risk of unemployment varies greatly with different types of health condition - people with mental health problems or learning difficulties are much less likely to be in work than those with physical health problems. [1] The detrimental impact of mental

illness on employment outcomes is exacerbated where this occurs alongside a physical health condition. [24]

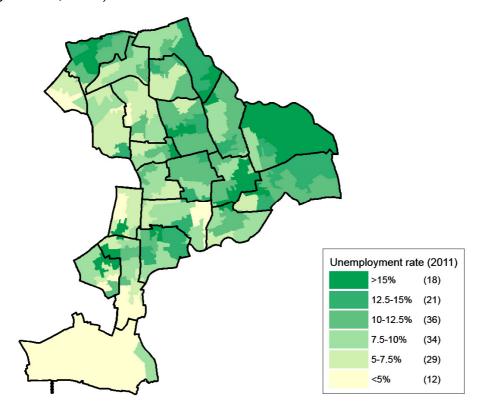
5.5.5. Socio-economic disadvantage

People in lower skilled jobs and with lower level qualifications are at increased risk of unemployment. Conversely, people with higher levels of education are more likely to be employed. For information on education levels in Hackney and the City, see the 'Education and training' section of this JSNA chapter.

5.5.6. Location within Hackney and the City

Figure 9 shows that higher levels of unemployment are seen in the east of Hackney and in Woodberry Down in the north west. Portsoken in the east of the City has higher unemployment than the rest of the City.

Figure 9: Map of unemployment as a proportion of economically active residents (age 16-74, 2011)



Source: ONS Census

Figure 10 shows comparatively lower economic activity (and correspondingly higher economic inactivity) in the north and east of Hackney. Portsoken in the east of the City has lower levels of economic activity (and higher levels of economic inactivity) than the rest of the City.

Economic activity (2011) >80% (18)75-80% 70-75% (32)65-70% (31)(39)

Figure 10: Map of economically active residents as a proportion of all residents (age 16-74, 2011)

Source: ONS Census

5.6. Comparisons with other areas and over time

5.6.1. Employment

Jobs in Hackney and the City

The number of jobs has increased over the period 2010-2015 in both Hackney and the City of London.

Figure 11 shows the total number of people with Hackney-based jobs has increased by 26% from 86,000 in 2010 to 108,000 in 2015.

Hackney's employment sector with the highest growth was 'distribution, hotels and restaurants', which grew by about 7,250 jobs over the period 2010-2015, or an increase of 60%. This was the highest growth both in absolute terms (number of jobs) and relative terms (percentage increase in number of jobs). Hackney's biggest employment sectors, 'banking, finance and insurance' and 'public admin, education and health' (see Figure 1 in Section 5.3.1) saw the joint second absolute growth in jobs, with an increase of around 6,000 jobs (about 25%) in both. [14]

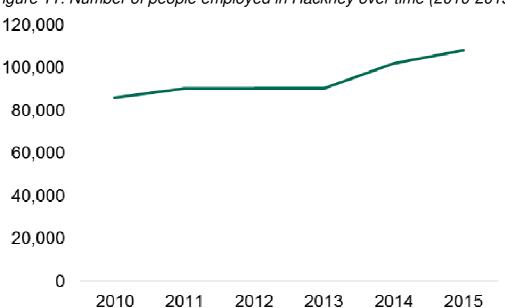


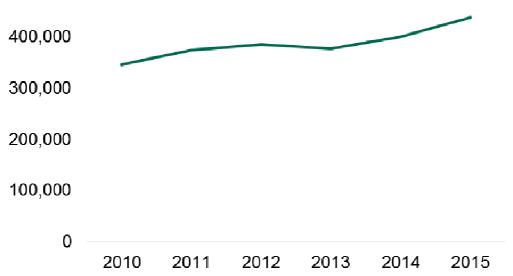
Figure 11: Number of people employed in Hackney over time (2010-2015)

Source: ONS Business Register and Employment Survey

Figure 12 shows an increase of 27% in City employees from 345,000 in 2010 to 438,000 in 2015.

The largest increase in number of jobs was seen by the biggest sector, 'banking, finance and insurance' (see Figure 2 in Section 5.4.1), which grew by around 67,000 jobs between 2010 and 2015, an increase of about 25%. The second largest increase in number of jobs was seen in the 'transport and communication' sector, which grew by around 15,000 jobs, or over 50%. [14]

Figure 12: Number of people employed in the City of London over time (2010-2015) 500,000



Source: ONS Business Register and Employment Survey

Employment among local residents

Overall, the employment rate among working age Hackney residents was similar in 2015 to many of Hackney's statistical peers, as well as the London and England averages (Figure 13). [15] The employment rate in the City of London is similar to Hackney, but it is not possible to make a reliable comparison with other areas as no confidence intervals have been provided for this figure.

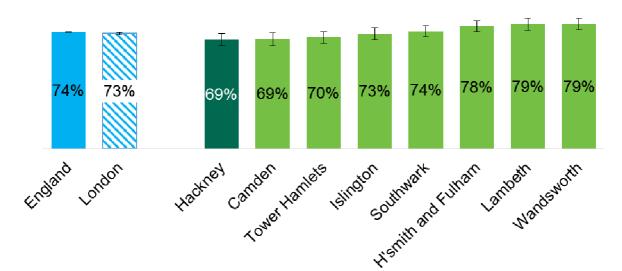


Figure 13: Resident employment rate (age 16-64, 2015)

Source: ONS Annual Population Survey

Note: Period covered is slightly different to that used to describe employment rates and numbers in section 5.4.1.

Hackney's employment rate improved relative to London between 2004 and 2009. and has remained broadly in line with the regional average since (Figure 14). The overall trend over the past decade in Hackney is towards higher employment and lower economic inactivity. Trend data are not available for the City of London.

By sector, the largest increase in number of jobs held by Hackney residents in recent years was in the 'distribution, hotels and restaurants' industries - a growth of 6,300 jobs (37%) over the period 2009-2015. The second largest increase in number was in 'public admin, education and health' - an increase of 3,300 jobs (10%). The 'transport and communication' industries saw a decrease of 5,800 (32%) jobs held by Hackney residents. [15] Please note that these data are from a different source to that reported for 'Jobs in Hackney and the City' above and so cannot be directly compared.

--- London ——Hackney England 80% 70% 60% 50% 40% 30% 20% 10% 0% 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015

Figure 14: Resident employment rate over time (age 16-64, 2004-2015)

Source: ONS Annual Population Survey

Occupation of employed Hackney residents

Figure 15 shows there are no statistically significant differences between the proportions of the Hackney and London resident populations in each of the SOC2010 occupation categories. However, both Hackney and London have more residents in the top three occupation categories ('managers, directors and senior officials', 'professional occupations' and 'associate professional and technical') than England. Data are not available for City of London residents.

■Hackney ■London ■England 13% Managers, directors and senior 12% officials 11% 28% Professional occupations 25% 20% 19% Associate professional and 18% technical 14% 8% Administrative and secretarial 10% + 11% 6% Skilled trades 8% ⊢ 10% 10% Caring, leisure and other 8% ⊢ service 9% 6% Sales and customer service 7%⊦ 7% -3% Process, plant and machine 5% 6% H 8% Elementary occupations 9% 11%

Figure 15: Occupation levels of employed residents (2014)

Source: ONS Annual Population Survey

Self-employment

The proportion of employed Hackney residents age 16+ who are self-employed has remained fairly constant at around 20% over the period 2009 to 2015. The 2015 rate of 20% is not statistically significantly different from the London rate. [15]

Equivalent data are not available for the City.

Part time work

The proportion of employed Hackney residents age 16-64 who work part-time has remained fairly constant at around 25% over the period 2009 to 2015. The 2015 rate of 24% is not statistically significantly different from the London rate. [15]

Equivalent data are not available for the City.

Pay

Figure 16 shows that Hackney residents' median gross hourly wage is not statistically significantly different from any of Hackney's statistical peers, London or England. [21] Figure 17 shows that, in line with patterns in London and England, Hackney residents' median gross hourly wage has fallen in 'real terms' (i.e. adjusted for inflation) over the period 2010-2016.

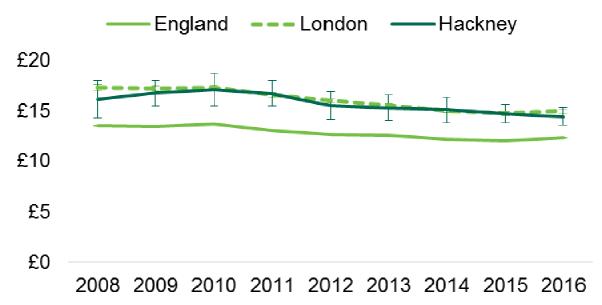
Comparable data are not available for the City.

Figure 16: Median gross hourly wage of employed residents (2016)



Source: ONS Annual Survey of Hours and Earnings

Figure 17: Residents' median gross hourly wage over time, adjusted for inflation (2008-2016)



Source: ONS Annual Survey of Hours and Earnings. Bank of England Inflation Calculator. [25]

Figure 18 shows that the median gross hourly wage is higher for those working in the City of London than those working in London. England and most of Hackney's statistical peers. The median gross hourly wage for those working in Hackney is not statistically significantly different from that in London, England, most of Hackney's statistical peers, or the same measure for Hackney residents (Figure 16).

Figure 19 shows that the median gross hourly wage for those working in Hackney and in the City has decreased in real terms over the period 2010-2016. In both cases, it has done so more steeply than the decline across London as a whole, although the City of London median gross hourly wage has remained far above the average London level.

Figure 18: Median gross hourly wage of those working in each location (2016)



Source: ONS Annual Survey of Hours and Earnings

-England --- London --- Hackney --- City £35 £30 £25 £20 £15 £10 £5 £0 2008 2009 2010 2011 2012 2013 2014 2015 2016

Figure 19: Median gross hourly wage of those working in each location over time, adjusted for inflation (2008-2016)

Source: ONS Annual Survey of Hours and Earnings. Bank of England Inflation Calculator. [25]

5.6.2. Unemployment and economic inactivity

Figure 20 shows that the unemployment rate in Hackney in 2015 was similar to its statistical peers, London and England. The local unemployment rate has fallen from 11% in 2004, when it was statistically higher than the regional and national averages (Figure 21). Data are not available for City of London residents.

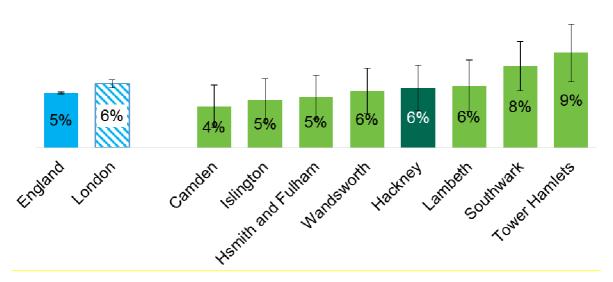


Figure 20: Resident unemployment rate (age 16-64, 2015)

Source: ONS Annual Population Survey

England --- London Hackney 20% 15% 10% 5% 0%

Figure 21: Resident unemployment rate over time (2004-2015)

2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015

Source: ONS Annual Population Survey

Figure 22 shows that over a quarter of Hackney residents were economically inactive in 2015/16, which is higher than most of Hackney's statistical peers, London and England. Data are not available for City of London residents.

In Hackney, rates of economic inactivity have fallen significantly since 2005, from 41% to 29% in 2015 (Figure 23).

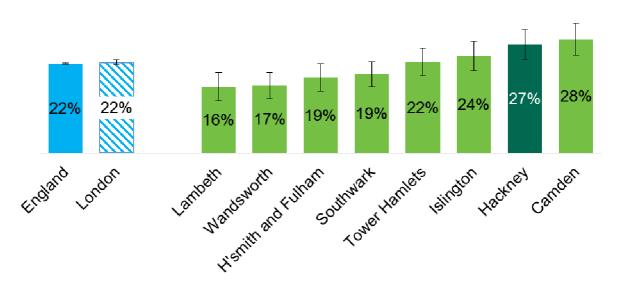


Figure 22: Resident economic inactivity rate (age 16-64, 2015)

Source: ONS Annual Population Survey

England --- London -Hackney 50% 40% 30% 20% 10% 0% 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015

Figure 23: Economic inactivity over time (age 16-64, 2004-2015)

Source: ONS Annual Population Survey

5.7. Evidence and best practice

Patterns of work and worklessness are driven by national, regional and local economic policy. This section does not attempt to summarise all of these various policies here.

A national spotlight was shone on the issue of work and health with the publication of Dame Carol Black's review. 'Working for a healthier tomorrow', in 2008, [4] The focus of this review was working age adults, and included a number of detailed recommendations for the government, making the case for investment in workplace health initiatives and expanding the role of occupational health to help people find and stay in work.

This section provides an overview of evidence and best practice in relation to two broad areas:

- 1. interventions which aim to promote health and wellbeing through the
- 2. recommendations to prevent people from falling out of the labour market due to poor health.

5.7.1. Promoting health and wellbeing through the workplace

Box 2 illustrates the potential impact of workplace health initiatives and Box 3 summarises a number of ways in which psychosocial working conditions can be improved for improved staff health.

Box 2: Evidence of effectiveness of workplace health initiatives [6]

Listed below are the summary points from a review of scientific and grey literature to identify best practice and highlight the elements of effective initiatives from around the world.

- Effective workplace health initiatives need to target multiple risk factors, specifically those that represent the highest disease burden in the region where the workplace is located.
- Successful workplace health initiatives combine health education with changes in the physical and social workplace environment.
- Workplace health initiatives need to be underpinned by management buy-in and employee ownership.
- Workplace health initiatives need to be targeted to each unique workplace and cultural setting.
- Workplace health initiatives should involve baseline testing and follow-up for ongoing evaluation and monitoring, and allow for employee feedback to facilitate programme improvement.
- Effective workplace health initiatives will result in reduced employee absenteeism, increased employee productivity, reduced employer health costs, and increased employee job satisfaction.

Box 3: How to improve psychosocial working conditions for improved staff health and wellbeing [26]

Psychosocial working conditions can be improved through:

- greater employee control over their work
- greater employee participation in decision-making
- line management training
- effective leadership and good relationships between leaders and their employees
- engaging employees, ensuring they are committed to the organisation's goals and motivated to contribute to its success
- providing employees with the in-work training and development they need to develop job satisfaction
- providing greater flexibility within a role to increase an employee's sense of control and allow them to improve their work-life balance
- reducing stress and improving mental health at work (the leading causes of sickness absence)
- addressing the effort-reward imbalance.

The Health and Safety Executive provides a regulatory framework for workplace health and safety in Great Britain. Workplaces are advised to provide 'welfare' facilities (e.g. access to drinking water and toilets), promote a healthy working environment (e.g. good ventilation and temperature) and provide a safe workplace (e.g. maintain the premises and work equipment).⁷

The National Institute for Health and Care Excellence (NICE) has produced evidence-based guidelines on workplace health, with a focus on organisational culture and the role of line managers (see Box 4 for a summary of the key recommendations).

⁷ http://www.hse.gov.uk/simple-health-safety/workplace.htm

Box 4: NICE guidance on workplace health and management practices [27]

Organisational commitment - make health and wellbeing a core priority, value the strategic importance and benefits of a healthy workplace.

Physical work environment – statutory responsibilities for facilities and equipment. *Mental wellbeing at work* – creating a supportive environment that enables employees to protect and enhance their own health and wellbeing.

Fairness and justice – ensuring unfair treatment of employees is addressed as a priority, treating each employee as an individual.

Participation and trust – encourage employees to have a voice, actively seek their contribution in decision-making.

Senior leadership – consistent leadership supporting employee health and wellbeing to act as role models and proactively challenge actions that may adversely affect employee health and wellbeing.

Role of managers – recognise and support the key role that line managers have in protecting and improving employee health and wellbeing, regularly seek line managers' views on staff morale and staffing.

Leadership style of line managers – positive leadership style and avoidance of negative behaviour.

Training – ensure line managers receive training on the importance of maintaining people's health and wellbeing at work.

Job design – including the importance of health and wellbeing in job descriptions.

The London Healthy Workplace Charter provides an evidence-based framework for action to support employer investment in staff wellbeing. The Charter works by recognising good practice at three levels of assessment across eight broad standards, as outlined in Box 5.

Box 5: London Healthy Workplace Charter [28]

The Charter consists of three levels of assessment – 'commitment', 'achievement' and 'excellence'. At each level, employers are assessed across eight broad standards:

- corporate support
- health and safety
- attendance management
- physical activity
- healthy eating
- smoking cessation
- substance misuse
- mental health and wellbeing

Each of these standards are assessed primarily around leadership, culture and communication. Practical tools and guidance are provided for employers to support implementation.

5.7.2. Supporting people with health conditions to find and stay in employment

As the population ages, and the state pension age increases, supporting people with long-term conditions in the workplace will become increasingly important. [29] The Work Foundation's submission to the Health Committee in 2013 estimated that approximately 21 million people of working-age will have at least one long-term condition by 2030. [30] Evidence suggests that personalised, tailored support is effective in helping people with disabilities or long-term conditions into work. [31]

Employers are responsible for the health and safety and welfare of their employees, whether they have a disability or not. [32] Under equality law, an employer must make reasonable adjustments for disabled employees.

The Department for Work and Pensions (DWP) has published practical advice for employers on employing disabled people and people with health conditions. [33] This covers issues such as:

- recruitment (including the Work Choice scheme see Box 6)
- reasonable adjustments
- available support to meet additional costs of adaptations (including the Access to Work scheme)8
- supporting older workers
- advice on specific conditions (including mental health conditions, hearing and visual impairments, physical and 'hidden' impairments)
- legal aspects (including discrimination and dealing with performance issues).

This DWP guidance also provides links to specialist organisations for further advice and support (see Box 7), and encourages employers to sign up to the Disability Confident scheme to demonstrate their commitment to supporting employees with long-term conditions and disabilities.

⁸ https://www.gov.uk/access-to-work/overview

Box 6: The Work Choice scheme

Work Choice is a voluntary scheme that enables working age people to find, keep and get on in a job if they have a recognised disability.9 The scheme offers an interview to determine the type of support and help that is needed, which can include:

- training
- building confidence
- finding a job that is suitable
- interview coaching
- developing skills.

There are three levels of help which can be extended by three or six months in exceptional circumstances and when there is a clear prospect of getting a job. The three levels are:

- 1. work entry support including advice on work and personal skills to help find a job which can last up to six months
- 2. in-work support to help support a person to start work and stay in a job lasting up to two years
- 3. longer-term in-work support to help a person get on in their job and work without support.

Published December 2016; updated January 2017

⁹ https://www.gov.uk/definition-of-disability-under-equality-act-2010

Box 7: DWP recommended sources of advice for employers on employing people with disabilities and long-term health conditions [33]

- The Advisory, Conciliation and Arbitration Service (Acas) which provides free advice for employers on employment legislation including advice on age and the workplace.
- The Equality and Human Rights Commission (EHRC) promotes and monitors human rights. It protects, enforces and promotes equality across nine areas, including disability.
- The Business Disability Forum (BDF)¹⁰ is an employer organisation that offers information, support and advice on disability as it affects business. It can help employers make sure that their online recruitment tools and processes are fully accessible for disabled people.
- Clear Talents¹¹ can help organisations identify and manage reasonable adjustments for job applicants, employees and students. It is free to use for applicants.
- The British Association for Supported Employment (BASE)¹² is the national trade association involved in securing employment for disabled people.
- The Disability Action Alliance¹³ brings together disabled people's organisations with other organisations to work in partnership to change the lives of disabled people.
- The big I.D.E.A. (Inclusion, Diversity, Equality, Accessibility)¹⁴ is a place for the diversity industry, employers, and jobseekers to communicate. The site brings together the best of what the industry has to offer with a broad range of views from employers, jobseekers, and diversity policy makers.

NICE has also published guidance on long-term sickness absence and incapacity to work, with a particular focus on supporting employees with musculoskeletal disorders or mental health problems. [34] The recommendations focus on effective and cost-effective interventions within a managed return-to-work pathway that aims to:

- prevent or reduce the number of employees moving from short-term to longterm sickness absence
- help employees on long-term sickness absence return to work
- reduce the number of employees who take long-term sickness absence on a recurring basis
- help people receiving sickness-related benefits return to (paid and unpaid) employment.

This NICE guidance also recommended that relevant proposals in Dame Carol Black's review ('Working for a healthier tomorrow') are taken forward – including case-managed, multidisciplinary support for patients in the early stages of sickness absence (the new Fit for Work scheme – see section 5.8.2 below). [4] Further NICE

¹⁰ http://www.businessdisabilityforum.org.uk/

¹¹ https://www.cleartalents.com/

¹² http://base-uk.org/

¹³ http://disabilityactionalliance.org.uk/

¹⁴ http://www.thebigidea.co.uk/

guidance on effective approaches to promote and protect the health of workers with chronic diseases is currently in development.¹⁵

The London Healthy Workplace Charter also includes a number of standards relevant to supporting people with health problems to stay in work (see section 5.7.1 above).

5.8. Services and support available locally

5.8.1. Promoting health and wellbeing through the workplace

Both the London Borough of Hackney and the City of London Corporation have achieved London Healthy Workplace Charter status, recognising the work both local authorities are already doing to support staff health and wellbeing. Charter status also provides a platform for the two authorities to work with other local employers to create healthier workplaces for their employees. Homerton hospital, a major employer in Hackney, has also achieved Charter status and has a programme of work in place to improve the health of its staff and visitors.

As well as achieving Charter status, the City has a well-developed programme of support for businesses through the local Business Healthy programme, which was set up in 2014 (see Box 8).

Box 8: Business Healthy in the City of London

Business Healthy is an initiative run by the City of London Corporation whereby businesses of all sizes operating in the City can sign up free to access resources, expert guidance and support relating to the promotion of employee wellbeing in their workplaces. The network runs a series of events throughout the year that focus on a range of issues - for example stress in the workplace, mental and physical wellbeing and alcohol misuse.

Membership of Business Healthy also provides access to a network of other businesses located and operating within the Square Mile who are committed to maintaining and improving the health and wellbeing of their staff. Business Healthy's objectives fit within the wider City of London Corporation's vision to support, promote and enhance the City of London as the world leader in international finance and business services and to foster an excellent working environment.

Business Healthy has almost 500 members and organises a number of stand-alone events each year for its members, in addition to joint events with external partners and member organisations.

¹⁵ https://www.nice.org.uk/guidance/indevelopment/gid-phg58/documents

5.8.2. Supporting people with health conditions to find and stay in employment

Fit for Work is a new national service that provides a free assessment and return to work support for people at risk of long-term sickness absence. 16 It is intended to complement existing occupational health services and/or fill gaps in workplace services. Employees can be referred by their GP or employer if they have been off work for four weeks or more.

There are three Job Centre Plus locations in Hackney (Dalston, Hackney and Hoxton) which provide support to all people of working age to help them into paid work. This section does not describe in detail the full range of support available locally to help Hackney residents to find and stay in employment. Box 9 provides a snapshot of a selection of current support (at time of writing) available for those who face particular barriers to employment, due to their health or related issues.

As in Hackney, there is a range of support to help local people in the City of London to find and stay in work. Access to Job Centre Plus services is available in neighbouring local authority areas.

Box 9: Snapshot of a selection of local services and support available in Hackney

- Hackney Ways into Work programme run by the Council to generate employment opportunities within the borough, targeting in particular those residents with the greatest barriers to work.
- Job Centre Plus disability employment advisors provide assistance and advice on finding a job to people with a health condition or disability that affects their ability to work. A range of other providers also work with Job Centre Plus to support people to find work, including Remploy who deliver the national Work Choice programme (as described in Box 6).
- Lee House an employment and rehabilitation centre which provides a structured, supportive environment with focused education and employment pathways for its members, to progress from supported mental health services into mainstream opportunities.
- MIND in the City, Hackney and Waltham Forest offers a range of wellbeing activities and therapies to reduce social isolation through education and support in to the workplace, including an Employment Support and Retention Service.
- Hackney One Team a supported employment agency specialising in placing people age 16+ with learning disabilities and people with substance misuse problems into paid employment.

¹⁶ https://www.gov.uk/government/collections/fit-for-work-guidance

5.9. References

- [1] Institute of Health Inequity, "Fair Society, Healthy Lives," The Marmot Review,
- [2] Lelliott, P., Tulloch, S., Boardman, J. et al, "Mental Health and Work," Royal College of Psychiatrists, 2008.
- Waddell, G., Burton, K., "Is work good for your health and well-being?," The [3] Stationery Office, London, 2006.
- Black, C., "Dame Carol Black's Review of the health of Britain's working age [4] population - Working for a healthier tomorrow," London: TSO, 2008.
- City of London Corporation and the City Property Association, "Future [5] Workstylees and Future Workplaces in the City of London - Research Report," City of London Corporation and the, 2015.
- Collaborating for Health, "Workplace-health initiatives: evidence of [6] effectiveness," Collaborating for Health, 2011.
- Health and Safety Executive, "Costs to Britain or workplace fatalities and self-[7] reported injuries and ill health, 2014/15," Health and Safety Executive, 2016.
- [8] ACAS, "Acas warns of the negative impact of zero-hours exclusivity clauses," ACAS, 2014.
- [9] Burtin, W. N., Chen, C., Conti, D. J. et al., "The Association of Health Risks With On-the-Job Productivity," *Journal of Occupational and Environmental* Medicine, no. doi: 10.1097/01.jom.0000169088.03301.e4, 2005.
- [10] Health and Safety Executive, "Working days lost," Health and Safety Executive, [Online]. Available: http://www.hse.gov.uk/statistics/dayslost.htm. [Accessed November 2016].
- [11] London Health Commission, "Better Health For London," London Health Commission, 2014.
- [12] GLA Economics, "London's business case for employee health and wellbeing," Greater London Authority, 2012.
- [13] NOMIS, "NOMIS data set for employment," [Online]. Available: https://www.nomisweb.co.uk/reports/lmp/la/1946157248/report.aspx#tabeinact . [Accessed October 2016].
- [14] Office for National Statistics, "Business Register and Employment Survey," 2015.
- [15] Office for National Statistics, "Annual Population Survey," 2016.
- [16] London Borough Hackney, "2014 Local Economic Assessment Headlines," London Borough Hackney Corporate Policy and Partnerships, 2014.
- [17] NOMIS. [Online]. Available: http://webarchive.nationalarchives.gov.uk/20160105160709/http://www.ons.go v.uk/ons/guide-method/classifications/current-standardclassifications/soc2010/soc2010-volume-3-ns-sec--rebased-on-soc2010--usermanual/index.html.
- [18] Institute for Fiscal Studies, "The Impact of Proposed Tax, Benefit and Minimum Wage Reforms on Household Incomes and Work Incentives," Institute for Fiscal Studies, 2015.

- [19] City of London Corporation, "City and Hackney Joint Strategic Needs Assessment: City supplement," 2014.
- [20] Office for National Statistics, "Census 2011".
- [21] Office for National Statistics, "Annual Survey of Hours and Earnings 2016".
- [22] Black, C., Frost, D., "Health at Work an independent review of sickness absence," Department for Work and Pensions, 2011.
- [23] Department for Work and Pensions and Office for Disability Statistics, "Disability facts and figures," HM Government, 2014.
- [24] Steadman, K., Sheldon, H. Donnaloja, V., "Complexities and challenges working with multiple health conditions," The Work Foundation, Lancaster, 2016.
- [25] Bank of England, "Inflation Calculator," [Online]. Available: http://www.bankofengland.co.uk/education/Pages/resources/inflationtools/calc ulator/index1.aspx. [Accessed 14 December 2016].
- [26] Public Health England, UCL Institute of Health Equity, "Local action on health inequalities: workplace interventions to improve health and wellbeing," 2014.
- [27] National Institute for Health and Care Excellence (NICE), "Workplace health: management practices (NG13)," Manchester, 2016.
- [28] Greater London Authority, "London Healthy Workplace Charter," 2015. [Online]. Available: https://www.london.gov.uk/sites/default/files/selfassessment framework.pdf. [Accessed October 2016].
- [29] Emmerson, C., Heald, K., Hood, A., "The Changing Face of Retirement -Future Patterns of Work, Health, Care and Income among the Older Population," Institue of Fiscal Studies, 2014.
- [30] The Work Foundation submission to Health Committee, "Written evidence from The Work Foundation (LTC)," Parliament UK, 2013.
- [31] Institute of Health Equity, "Increasing employment opportunities and improving workplace health - evidence reviews," 2014.
- [32] Health and Safety Executive, "Guidance for employers," no date. [Online]. Available: http://www.hse.gov.uk/disability/employers.htm. [Accessed November 2016].
- [33] Department for Work & Pensions, "Employing disabled people and people with health conditions," Department for Work & Pensions, 2016.
- [34] National Institute for Health and Care Excellence (NICE), "Workplace health: long-term sickness absence and incapacity to work (PH19)," Manchester, 2009.