The association of social capital with need for recovery and sick leave in a public sector ageing workforce

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Background. Maintaining sustainable employability in the context of an ageing workforce represents a major challenge for European countries. The aim of this study was to investigate social capital – both at individual and at work unit level – in relation to indicators of sustainable employability (need for recovery and sickness absence) in a public sector ageing workforce.

Methods. A cross-sectional questionnaire study design was used. Results are based on a sample of 1268 workers clustered within 78 work units in seven public administrations. Mean age was 42.4 years (sd 10.3); 64.3% were females. The Need for Recovery Scale was administered and dichotomized. High sickness absence duration was defined as \geq 10 days in the preceding 12 months. Social capital was assessed through the average of three scales from the COPSOQ: social community, vertical trust and justice & respect. The mean individual scores per work unit were aggregated to represent the contextual level of social capital. Stepwise Generalized Linear Mixed models were tested with SPSS 20.0.

Results. After assessing a model including gender, age, occupation, shift work, poor contacts with relatives/friends, quantitative demands, emotional demands, degrees of freedom, job insecurity, and physical strain, we stepwise added individual level and work unit level social capital as possible antecedents of the sustainable employability indicators. Results showed that higher individual social capital reduced the odds for having a high need for recovery, while no relation was observed with social capital at work unit level. On the contrary, the odds for high sickness absence duration were significantly reduced by high levels of work unit level – but not individual level – social capital.

Conclusions. The results suggest that workplace social capital is associated with indicators of sustainable employability in an ageing workforce, independent of work content characteristics. High need for recovery seems to be mainly determined by individual level psychosocial risk factors, including individual perceptions of social capital. Regarding high sickness absence duration, a role for contextual social capital at work unit level was observed.