

# Millions of Australians have a chronic illness. So why aren't employers accommodating them?

February 5 2024, by Peter Ghin and Susan Ainsworth

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[More than 20 million Australians](#) have at least one long-term health condition, [63%](#) of whom are in the workforce.

The [causes of chronic illness](#) are complex and are often unconnected to a person's work. But at times, the continued exposure to work stressors can lead to or exacerbate chronic health conditions including [musculoskeletal disorders](#), [heart disease](#), [anxiety](#) and [depression](#).

[Our research](#) found 73% of people believed their [chronic illness](#) was at least partially caused or worsened by their job. Almost one in five people believed work entirely caused or worsened their illness.

These findings accord with data from [Safe Work Australia](#) which indicates health conditions (particularly [mental health](#)) account for an increasing proportion of serious workers' compensation claims.

Our research [also found](#) people with chronic illness were likely to report various forms of workplace discrimination, including being rejected from a job (63%), being treated unfairly in the workplace (65%) and harassment (52%).

So what are employees getting so wrong? And what are the solutions to improving working conditions for people with chronic illnesses?

## **Employers' responsibilities have grown**

In 2022, [Safe Work Australia](#) updated its work health and [safety regulations](#) to include specific guidelines on the management of "psychosocial" hazards in the workplace.

A [psychosocial hazard](#) is anything that can cause psychological and [physical harm](#), including the design or management of work and workplace interactions or behaviors.

Common examples include job demands, low job control, poor support, lack of role clarity, exposure to traumatic events, harassment and

bullying. The failure to eliminate or minimize psychosocial hazards can cause [work-related stress](#), resulting in poor health outcomes for workers.

Organizations need to improve their engagement and management of chronically ill workers to meet their legal obligations.

## How employers are getting it wrong

Few organizations have sophisticated approaches to [managing employees who are chronically ill](#). And managers often feel [ill-equipped](#) to effectively support chronically ill employees.

Instead, there is a tendency to rely on outmoded [human resource](#) and [occupational health](#) and [safety systems](#) originally designed to accommodate short-term absences and acute illnesses.

Return-to-work policies tend to fall short because they assume a phased and linear return to full working capacity. This is often not the case for people with chronic illness, whose symptoms may be degenerative or fluctuate over time.

Chronically ill workers are [rarely considered](#) in organisational diversity and inclusion policies and procedures. At best, they may be incorporated into umbrella disability policies, which can be problematic as people with chronic illness do not necessarily [self-identify as "disabled"](#).

Many chronically ill workers fly under the radar. This is partly because organizations don't collect this data but it's also due to the often invisible nature of chronic illness. Someone living with conditions such as long COVID or endometriosis, for example, may present as unimpaired to their colleagues. However, they will often be dealing with complex, fluctuating symptoms that are largely invisible at work.

Workers may also choose [not to disclose](#) their illness due to fears of being stigmatized, treated differently, or passed over for promotion. [Our research](#) on leaders living with chronic illness found only 18% fully disclosed their illness to their employer. Almost three-quarters of leaders with chronic illness (73%) deliberately hid their illness at work.

## **What can employers do?**

Here are three ways employers can begin to proactively meet their obligations to workers with chronic illness.

### **1. Make adjustments**

Workers with chronic illness sometimes experience fluctuations in their condition which can impact their ability to complete tasks or meet deadlines. It may be necessary for managers to consider sensitively discussing a revised work schedule, the delegation of time-sensitive tasks, or discuss implementing reasonable adjustments to improve workflow.

These can be challenging conversations, but engaging with them directly means employers can allocate the resources they need to meet their business objectives, while also reducing employee experiences of overwhelm.

### **2. Accept reasonable requests**

Workers with chronic illness may require reasonable adjustments, such as flexible working, to enable them to perform to the best of their ability.

Take these requests at face value and minimize the administrative

hurdles associated with approving such accommodations. Failing to do so is likely to erode trust, entrench feelings of not being supported and increase an employee's psychological distress.

### **3. Train managers**

Managers may sometimes deny a request for a reasonable adjustment based on the belief that this creates a precedent for all team members. Decisions like these can compound feelings of stress, as they may be experienced as a lack of procedural fairness by employees living with chronic illness.

With appropriate training, managers are more likely to recognize that chronically ill workers are generally not seeking "[special treatment](#)," but ways to work more effectively within their changed capacities.

By recognizing the value of employees of all abilities, and proactively and systematically addressing the needs of their chronically ill workforce, employers can minimize extended workplace absences and improve the productivity of their workforce.

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Provided by The Conversation

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