The Risks associated with academic work: An analysis of trends 2008 - 2014

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Research Domain: Academic practice, work, careers and cultures (AP)

Abstract: An examination of the contemporary nature of academic work depicts a profession associated with increasing demands, role and work-life conflict, high levels of presenteesim and psychological distress. A number of studies have examined a range of stressors and strains associated with work in UK higher education institutions, however, differences in measures, and samples make comparison across studies and time frames difficult.

The current study aims to address these limitations by utilising a benchmarking to assess the level of risk associated with academic work, across three waves of nationally collected data in 2008, 2012 and 2014. The study presents data across seven hazard categories identified as key indicators of work-related stress by the Health and Safety Executive in 2008, 2012 and 2014. Comparisons against benchmark data and HSE hazard categories are made. Results are discussed with reference to the current UK Higher education context and directions for future research presented.

Paper: Research findings suggest that UK academics are overworked, with staff regularly reporting working longer than forty hours per week, whilst approximately one-fifth report working more than sixty hours per week (Bentley & Kyvik, 2012). In addition to long working hours, UK academics report higher levels of administrative load that many of their colleagues internationally (Bentley & Kyvik, 2012). Such high levels of administration have been identified as a source of stress in UK academic staff (Collins & Parry-Jones, 2000), whereas role conflict has been identified as a source of work-related stress in 50 - 75% of respondents in a range of UK studies (Kinman, 2001; Daniels & Guppy, 1992).

The existing body of work has identified a range of stressors associated with academic work. However, differences in measurement, sampling strategy and range of higher education institutions
included make comparison difficult. Additionally, only limited attempts have been made to assess changes in the psychological hazards associated with academic work over time, or to compare academic work against national benchmark data. The current study addresses these gaps by adopting the Health and Safety Executive’s (HSE) Management Standards Indicator Tool (MSIT) to measure and compare levels of psychological hazard at three time points (2008, 2012 and 2014), allowing comparison across the three waves of data and against the HSE benchmark data for other sectors.

The Management Standards approach conceptualises and measures stress as a workplace hazard in the same way as physical threats are assessed and managed. The associated MSIT assesses the levels of hazard associated with seven key dimensions associated with work-relates stress, namely: demands, control, manager support, peer support, relationship, role and change (McKay et al, 2004). These hazards are compared against a set of benchmarks and advised actions, whereby scores at or above the 85th percentile are classified as ‘very good’ and those within the 50th and 80th percentiles are classified as ‘good’, with areas for improvement. Means scores that fall within the 20th and 50th percentiles or below the 20th percentile are considered dimensions where there is ‘clear need for improvement’ or ‘urgent action required’ respectively. (HSE, 2009)

Methodology: A cross-sectional correlational design was utilised. An online questionnaire was distributed electronically to all active members of the University and College Union in 2008, 2012 and 2014. Six thousand two-hundred and three (46% female), 7068 (53% female) and 3952 (55% female) full-time academic staff completed the survey in 2008, 2012 and 2014 respectively.

Measures: The HSE Management Standards Indicator tool (MSIT) consists of 35 items comprising seven subscales assessing demands, control, manager support, peer support, relationships, role and change. Items are scored on 5-point Likert scales, where higher scores indicate lower levels of risk. The MSIT has been found to be a reliable diagnostic instrument in both public and private sectors (Brookes et al, 2013)

Results: Mean scores for each of the MSIT subscales were calculated for each wave of data collection and compared against the HSE benchmark mean and percentile for that dimension (see table 1 below).

Table 1: Mean scores for each dimension by year, alongside the HSE benchmark mean and percentile.

<table>
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<tr>
<th>Subscale</th>
<th>2008 Mean</th>
<th>2012 Mean</th>
<th>2014 Mean</th>
<th>HSE Benchmark Mean</th>
<th>HSE Benchmark Percentile</th>
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<tbody>
<tr>
<td>Demands</td>
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<td>Control</td>
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In 2008, six out of seven dimensions failed to meet the target levels set by the HSE. Only control met the 85\textsuperscript{th} percentile of benchmarked data. The results suggest that psychosocial risks associated with demands, manager and peer support, role and change were particularly high for academic staff in 2008, with mean scores at or below 5\textsuperscript{th} percentile of benchmark data.

Mean scores across six dimensions dropped between 2008 and 2012, indicating increasing risks associated with the majority of psychosocial hazards assessed. Risks associated with demands increased, with 99\% of benchmarked organisation data scoring higher on the management of demands in the workplace. Mean scores for peer support, role and change were broadly in line with the findings in 2008, but control and relationships showed more marked reductions in mean scores, reflected in increased risk in these dimensions. Manager support showed some marginal improvement between 2008 ($M = 2.86$) and 2014 ($M = 2.89$).

Mean scores for control continued to fall between 2012 and 2014. Control was the only dimension to meet the HSE standards in 2008, but this dimension moved from ‘doing very well’ to being classified as ‘clear need for improvement’ in 2014. Further reductions in mean scores for demands, peer support, manager support, role and relationships saw these dimensions remain at the critical benchmark level of ‘urgent action required’. A small uplift in the change dimension is observed in a mean score increase of .02 between 2012 and 2014, however, this increase was too small to translate to an improvement against the benchmark data percentiles.

These findings indicate an overall pattern of increasing risk across the three data sets, suggesting the work-related wellbeing of UK academic staff worsened between 2008 and 2014. Comparisons with HSE benchmark data demonstrates that, for most dimensions, academic staff have lower levels of wellbeing than the comparison data set. Where wellbeing had previously been high, in the case of control, the data suggest a downward trend, with deteriorating wellbeing across time.

The adoption of a benchmarking approach, using the HSE MSIT (Mackay et al, 2004) has allowed comparisons to be made against UK benchmarks and has ensured that findings across different waves of data collection can be tracked over time. The increasing demands, reducing resources and associated strain outcomes are discussed with reference to significant changes in the HE sector in the UK, prior to and continuing over the period of data collection. Plans for follow up research will be outlined.

References:


