

---

## Lesson - 11

# ORGANISATIONAL HEALTH - 'ABSENTEEISM'

### 11.0 Objective:

On completion of this lesson, you should be able to understand the:

- \* importance of organisational health
- \* scope and objectives of organisational health
- \* occupational Hazards and Risks
- \* meaning, Scope and Magnitude of Absenteeism
- \* measures for Control of Absenteeism

### Structure:

- 11.1 Introduction
- 11.2 Objectives and Importance of Organisational Health
- 11.3 Measures to improve Organisational Health
- 11.4 Industrial Health Programme
- 11.5 Absenteeism, Scope & Magnitude
- 11.6 Adverse Effects of Absenteeism
- 11.7 Causes of Absenteeism
- 11.8 Measures for Control Absenteeism
- 11.9 Summary
- 11.10 Technical Terms
- 11.11 Self - Assessment Questions
- 11.12 Reference Books

### 11.1 Introduction:

The term "HEALTH" is a positive and dynamic concept and implies more than an absence of illness. The World Health Organisation (W.H.O) has defined health as: "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". Organisational Health refers to a system of public health and preventive medicine which is applicable to industrial concerns (organisation concerns). According to the **Joint I.L.O.** (International Labour Organisation) W.H.O. Committee on Organisational Health, Industrial Health is - "the prevention and maintenance of physical mental and social well being of workers in all occupations". In this connection, failure of a worker to report for work when he is scheduled to work, therefore the failure to report the work place is called "absenteeism". However, there is a mechanism to prevent the workers absenteeism in an organisation.

## 11.2 Objectives and Importance of Organisational Health:

According to **W.H.O.** any industrial organisation should have to maintain some measures to provide good health provisions among the industrial workers, i.e. (i) Prevention and maintenance of Physical, mental and social well being of workers in all occupations; (ii) Prevention among workers of ill-health caused by the working conditions (iii) Protection of workers in their employment from risks resulting from factors adverse to health and (iv) Placing and maintenance of the worker in an occupational environment adopted to his physical and psychological equipment.

The modern concept of industrial hygiene differ from the traditional concept. The later is concerned with “the mere absence of an ascertainable disease or infirmity”, while the modern concept refers to “the health which is the outcome of the interaction between the individual and his environment. He is health who is well adjusted”. In other words, the modern concept anticipates and recognises “Potentially harmful situations and applies engineering control measures before serious injury results. In other words, organisational/industrial health depends not only on the individual but also on the environment in which he lives and works.

### Objectives:

The basic objective of industrial health is the prevention of disease and injury rather than the cure of disease. It involves a programme of health conservation and prevention of occupational disease. **Veil** observes that the aim of industrial hygiene is “the promotion and maintenance of the highest degree of the physical, mental and social well-being of workers; the prevention of factors which make for ill health in their working conditions; their protection in their occupations from risks arising from factors which are adverse to the maintenance of health; the placing and maintenance of the worker in an occupational environment which is adopted to his physiological and psychological equipment; and, to summarise, the adaptation of work to man and each man on his job.

### Importance of Organisational Health:

Since a large number of workers spend a great deal of their time in an industrial setting, their environment is not usually conducive to a health life. Moreover, malnutrition, insanitary and psychological conditions, and the strains and stresses under which they live impair their health. “On the one hand, efficiency in work is possible only when an employee is health; on the other, the industry (in which he is employed) exposes him to certain hazards which he would not meet elsewhere, and which may affect his health. It is with the intention of reducing these hazards and improving the worker’s health that the discipline of industrial health came into being as a branch of public health in its own right.

The symptoms of bad health are a high rate of absenteeism and turnover, industrial discontent and indiscipline, poor performance and low productivity. That is the reason why, when industrial health programmes are introduced, both employees and workers benefit. A reduction in the rate of labour turnover, absenteeism, accidents and occupational diseases has been the natural consequence of industrial health programmes. The other, benefits, which cannot be easily measured, include reduced spoilage, improved morale, increased productivity per employee and a longer working period of an individual.

## 11.3 Measures to improve the Organisational Health:

The Factories Act, 1948, insists that the following preventive measures must be adopted in industrial establishments.

**i) Cleanliness:**

Every factory should be kept clean and free from effluvia - from drain and privy refuse, and from dirt. It should be washed at least once in 14 months or painted at least once in five years. Floors should be swept and cleaned, at least once every week, with some disinfecting fluid.

**ii) Disposal of Waste and Effluents:**

Effective arrangements should be made for their and/or treatment.

**iii) Ventilation and Temperature:**

Provision should be made for the circulation of fresh air, and temperature should be maintained by building wells and roofs of such materials as would keep it within reasonable limits. High temperature may be controlled by white washing, spraying and insulating the factory premises and by screening outside walls, roofs and windows.

**iv) Dust and Fumes:**

Effective measures should be taken to prevent, or at any rate reduce, the inhalation and accumulation of dust and fumes. Exhaust appliances should be used near the point of the origin of dust and fumes.

**v) Lighting:**

Sufficient and suitable lighting natural or artificial or both, should be made available in the factory premises.

**vi) Overcrowding:**

No room should be overcrowded. There should be at least 500 cu.ft. of space for every worker.

**vii) Drinking Water:**

A sufficient quantity of cool drinking water should be made available for the employees throughout the year, particularly during the hot summer months.

**viii) Privy:**

Adequate latrine and urinals should be separately provided for men and women employees.

**ix) First Aid Appliance:**

There should be an adequate number of boxes containing first aid materials, qualified personnel to administer first aid, and an ambulance or at least a room where an injured employee may be given first aid.

**11.4 Industrial Health Programme:**

Every industrial (organisational) unit has a positive policy which aims at maintaining the good health of employees, whether they are on the job or off the job. Some units run mental health programmes as well. A comprehensive industrial health programme not only ensures the good health of employees, but also leads to a lowering of the rate of absenteeism and health insurance costs, and results in higher productivity and improved morale.

A comprehensive industrial health programme should include:

- a) A professional staff of Physicians and Nurses;
- b) Adequate facilities for emergency care and injuries sustained in the course of work, and for the conduct of pre-employment and post-employment medical check-ups;
- c) Proper first aid treatment for occupational injuries and diseases;
- d) A careful post-employment medical examination of those who are exposed to particular occupational hazards;
- e) Reasonable first aid treatment of employees for non-occupational ailments - for example, for cold, sore throat, skin disorders, headaches and gastrointestinal upsets.
- f) Information and education services which aim at promoting the health of employees;
- g) The maintenance of adequate and confidential medical records.
- h) Co-operation of the company medical officer with those who are responsible for accident prevention and control of environment with a view to achieving an integrated employee health programme.
- i) Co-operation with public health authorities implementing a mass inoculation programme and other measures for the prevention of communicable diseases, and
- j) Advice on, and supervision of, the provision and maintenance of satisfactory sanitary conditions in the factory premises.

Satisfactory physical and mental health services have to be provided if the loss of working days in an industrial establishment is to be reduced. For this purpose, those who suffer from communicable diseases should be isolated from the others, and an adequate provision should be made for the detection and treatment of remedial diseases. Moreover, all industrial employees must necessarily be inoculated when there is imminent danger of the outbreak of epidemics, such as Small-Pox, Cholera and Typhoid.

### **11.5 Absenteeism, Definition, Meaning, Scope and Magnitude:**

Absenteeism has been variously defined by different authorities. According to **Webster's Dictionary**, "absenteeism is the practice or habit of being an 'absentee', an 'absentee' is one who habitually stays away". According to the **Labour Bureau, Simla**, 'absenteeism is the total manshifts lost because of absences as a percentage of the total number of manshifts scheduled to work. In other words, it signifies the absence of an employee from work when he is scheduled to be at work; it is unauthorised, unexplained, avoidable, and willful absence from work. For calculating the rate of absenteeism, two facts are taken into consideration - the number of persons scheduled to work and the number actually present. An employee is to be considered scheduled to work when the employer has work available and the employee is aware of it, and when the employer has no reason to expect, well in advance, that the employee will not be available for work at the specialised time. Any employee may stay away from work if he has taken leave to which he is entitled, or on the ground of sickness or some accident, or without any previous sanction of leave. Thus, absence may be authorised or unauthorised, willful or caused by circumstances beyond one's control.

### **Magnitude of Absenteeism:**

It has been observed that the phenomenon of absenteeism does not exist only in Indian industry; it is a universal fact. The difference is only in terms of magnitude. The rate of absenteeism varies from 7 percent to nearly 30 percent. In some occupations, it has risen to the abnormal level of 40 percent in some reasons. The extent of absenteeism may differ from industry to industry, place to place and occupation to occupation. It may also differ according to the make-up of the work force. Absenteeism may be extensive in a particular department of an industry or a concern.

### **11.6 Adverse Effects of Absenteeism:**

The adverse of absenteeism are too many to be listed. We can describe them under two broad categories as under:

#### **I. On Industry:**

Absenteeism in industry stops machines, disrupts processes, creates production bottlenecks, hamper smooth flow or continuity of work, upsets production targets, results in production losses; increases direct overhead costs, increases workload of the inexperienced, less experienced or substandard workers as substitutes, this turn creating problems of recruitment, training, job adjustments, morale and attitudes. Manpower planning is rendered impossible casual or substandard employees increase machine downtime, rejection of finished products, breakdown of machinery and consequent idle machine-hours. Absenteeism, on the one hand, directly contributes to the rise in production costs while on the other it deprives the industry of its hand-earned reputation due to deterioration in quality of goods produced and the delay in supply to valued customers.

#### **II. On Workers:**

Effects of absenteeism on those who cause it are equally baneful. Frequent absenteeism adversely affects the economy of the workers himself. It reduces his earning and adds to his indebtedness, decreases his purchasing power, makes it difficult for him to meet necessities of life, leading to personal problems of attitude and morale, and in many cases loss of employment and resultant disaster for his dependants.

### **11.7 Causes of Absenteeism:**

The causes of absenteeism in general are as numerous as human beings themselves. They can, however, be classified as under:

- 1. Personal Factors:** Such as age, marital status, health, education, hobbies and extracurricular activities.
- 2. Work Environments:** Such as working conditions relations with co-workers, relations with superiors and attitude towards job.
- 3. Home Conditions:** Such as distance from residence, mode of conveyance, family size, problems, responsibilities.
- 4. Economic Factors:** Low wages compel a worker some part time job to earn some side income. But this often results in constant absent to the regular work.
- 5. Social and Religious Ceremonies:** Social and religious functions divert workers from work

to social activities. In a large number of cases, the proportion of absenteeism due to sickness, accident or maternity is not as high as it is due to other causes, including social and religious causes.

**6. Alcoholism:** the habit of alcoholism among workers is a significant cause of absenteeism which is high in the first week of each month. When workers receive their wages. Thus, hangover the next day leads to absenteeism.

**7. Improper and unrealistic personnel policies:** In most cases, unskilled, untrained, illiterate and inexperienced workers are recruited who fail to cope up with, and adopt themselves to their jobs and to their industrial environment favouritism and nepotism are rampant. These factors generate a frustration in the minds of workers which results in low efficiency, low productivity and unfavourable employee - employer relationships which in turn, lead to long period of absenteeism.

**8. Inadequate Leave Facilities:** Negligence on the part of the employer to provide adequate leave facilities compels the workers to fall back on E.S.I. leave, casual leave, special leave, medical leaves etc. Therefore, these leaves leads to absent to the work place.

### 11.8 Measures for Control of Absenteeism:

“Absenteeism is a serious problem for a management” because it involves heavy additional expenses. The management is generally uncertain about the probable duration of an employee’s absence and cannot take appropriate measures to fill the gap.

**The Encyclopedia of Social Sciences suggests the following measures to reduce the rate of absenteeism:**

- i) The personnel management should encourage notification, especially in cases of sickness when the duration of absences is likely to be long.
- ii) In case of personal and family circumstances. e.g., illness of children in the case of married women employees which make absences unavoidable, leave should be granted liberally.
- iii) To reduce unavoidable absence due to sickness and industrial accidents, programmes of industrial hygiene and safety should be strengthened.
- iv) Regularity in attendance can be encouraged to some extent by the offer of a bonus and other pecuniary inducements.

#### Other measures for control of absenteeism:

In the light of the above discussion following are some of the important measures. Which should be taken to control absenteeism in Indian industry/organisation.

#### 1. Management interest:

At present very few managements in India take real interest in controlling absenteeism. Measures to prevent strikes and lock-outs receive far greater attention. One reason for this situation may be that strikes and lock-outs are more noisy and visible while absenteeism is silent and unnoticeable.

#### 2. Check at the time of Selection:

At the time of selection it should be kept in mind that there are some people who want to have

a job merely for the sake of status. Some others want it because it gives them a ready-made platform for their social and union activities. To still others it is a second string to the bow. Their primary interest is in getting casual jobs outside the factory which give them higher wages. All such persons should be carefully sorted out by probing them at the time of interview.

### **3. Role of Supervisors:**

Absenteeism being essentially a problem related to individual behaviour, can be better talked at the immediate supervisor's level rather than by the staff department. Such tactical methods as supervisors paying visits to a sick worker's house or a supervisor interviewing and counselling a chronic absentee of his department may prove very effective.

### **4. Safety Programmes:**

An effective safety programme can check absenteeism which is due to employment injuries and occupational diseases.

### **5. Preventing misuse of Employees State Insurance Scheme:**

It is generally believed that E.S.I. which is a desirable social security measure is many times misused as a convenient umbrella for concealing feigned sickness. Presented with a medical certificate under this scheme there is relatively very little that the employer can do even if in possession of reasons to suspect validity.

### **6. Improved Communication and Prompt Redressal of Grievances:**

Since a majority of the workers are illiterate bulletins and written notices, journals and booklets are not understood by them. Therefore, timely illustrations and instructions, meetings and counselling, are called for. Written communication becomes meaningful only when workers can read and understand. As for grievance settlement, the management should recognise that a delayed grievance may become a complicated case. A procedure for foigo and prompt redressal of grievances is, therefore, essential. It would be better if the various units adopt the model Grievance procedure. Supervisor should be trained to handle a worker's grievance in an informal and humane manner.

### **7. Other Measures:**

- a) There should be clear and definite rules and regulations on authorised and unauthorised leave.
- b) The rules and regulations relating to attendance must be explained to workers.
- c) A proper record of each worker's attendance should be maintained on a special daily attendance card.
- d) A supervisor should not be regarded as "another worker" and should be given definite authority to take action in all cases of absenteeism.

### **11.9 Summary:**

The basic objective of organisational health is the prevention of disease and injury rather than the cure of disease. It involves a programme of health conservation and prevention of occupational disease. Therefore, the symptoms of bad health are a high rate of absenteeism and labour turnover, industrial discontent and indiscipline, poor performance and low productivity. That is the reason, why, when industrial/organisational health programmes are introduced both employers and employees benefit.

The employer, the employee and the state have a definite role to play. If each performs it properly and harmoniously, the problems of inefficiency, underised conflict, low productivity, dissatisfaction on the part of workers and their low morale resulting in frequent absenteeism can be largely eliminated. Industrial relations in a democracy should be based on an integrated approach aiming at individual satisfaction and group satisfaction, and achievements of the goals of the community and of the nation as a whole.

### 11.10 Technical Terms:

1. Absenteeism - an employee not present himself from his work.
2. Magnitude - Importance, extent
3. Redress - Compensation, set right
4. Grievance - Dissatisfaction, fairfull
5. E.S.I. - Employees State Insurance Act 1948.

### 11.11 Self- Assessment Questions:

1. What is meant by organisational health? Explain the objectives and magnitude.
2. Define absenteeism? Explain the causes of absenteeism in an organisation?
3. What are the measures for control the absenteeism in an organisation?

### 11.12 Reference Books:

1. C.B. Mamoria - *Personnel Management*, Himalaya Publishing House, New Delhi, 1979.
2. Prof. P.C. Tripathi - *Personnel Management and Industrial Relations*, Sultan Chand & Sons, New Delhi, 1998.
3. Chatterjee, N.N - *Management of Personnel in Indian Enterprises*, Allied Book Agency, Calcutta-1980

**Dr. D. NAGESWARA RAO**