



What is a good job?

Summary report 2011

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In this document, you'll find a summary of the independent study we commissioned from Cardiff University: 'What is a good job? The relationship between work/working and improved health and wellbeing'.

The researchers would like to thank all those organisations and individuals that took part in the research, as well as those who facilitated their contact with organisations and individuals.



What's the problem?

A lot of research has been done to examine the effects of negative job characteristics, and this has shown clear links between adverse working conditions and poorer employee health and wellbeing. However, there is also a growing awareness that good work is generally good for health and wellbeing, when compared with unemployment.¹

This means that there's a need to compare the importance of different factors and integrate this knowledge so that we can find the balance between the adverse and beneficial effects of different types of work.

Until now, very little research has been carried out to find out which job characteristics are good for health. We commissioned Dr Andrew Smith and colleagues at the Cardiff University Centre for Occupational and Health Psychology to investigate the relationship between work, wellbeing and health, taking account of the nature and quality of the work.

The project had three main goals:

- to describe and assess the concept of wellbeing at work and its relevance to work-health relationships
- to determine the relative importance of job characteristics to wellbeing
- to consider the extent to which work is good for health.

What did our researchers do?

The team carried out the research in two stages:

- a literature review, secondary analyses of existing databases and examination of individual differences
- collecting new data.

For the literature review, the team searched 10 databases and two reviewers independently considered relevant publications. Unlike existing studies, the review considered beneficial effects rather than negative ones.

The team did secondary analyses of existing data so that they would be able to address issues that couldn't be resolved by the literature review. Two large existing databases² were analysed. The team focused on the nature of any association

¹ Waddell G and Burton K. Is work good for your health and wellbeing? The Stationery Office, 2006.

² Secondary analyses were carried out on the Bristol Stress at Work survey and Cardiff Health and Safety at Work survey, which have a total of more than 10,000 participants.

between both positive and negative measures of job characteristics and wellbeing, and considered associated changes in job characteristics and wellbeing over time.

In parallel to our IOSH-funded research, the team also assessed individual differences in coping and attributional style³ using data from other studies. These studies looked at individual differences in wellbeing and health and examined positive and negative coping and attributional styles.⁴ They focused on university staff and nurses, who work in sectors where problems with wellbeing at work have already been identified. The team wanted to see whether any differences in coping and attributional style were related to health and wellbeing outcomes, and to find out whether any effects were independent of job characteristics or modified the impact of job type on health.

For the second phase of the project, two surveys were carried out to collect new data:

- a cross-sectional survey of established workers
- a longitudinal⁵ survey of people starting work, taking measures immediately before and three months after they began their jobs.

The established workers study provided important comparison data. In addition, the longitudinal study allowed the researchers to define cause and effect relationships more clearly, to study key individual differences as well as features of the work environment, and to eliminate the impact of past employment on participants.

What did our researchers find out?

The literature review, secondary analyses and new data all support the conclusion that health and wellbeing vary as a result of work. The new data collection suggested that individual appraisals of job characteristics also play a role in the relationship between work and wellbeing.

Literature review

The literature review found that existing research to date has no clear conceptual background. For example, the question ‘What makes a good job?’ can be interpreted in several ways, and the answer depends on the context in which it is asked, with factors such as cultural, political and economic environment influencing the response. Existing research also often fails to distinguish between the absence of negative effects and the presence of positive ones. However, most of the existing research involved cross-sectional studies and did not take into account specific jobs

³ Attributional style’ indicates how people explain the causes of an event they experience.

⁴ The team used data from Mark G. The relationship between workplace stress, and job characteristics, individual differences, and mental health (unpublished PhD thesis). Cardiff University, 2008. This thesis involved surveys of nurses and university staff.

⁵ A longitudinal survey involves repeated observations of the same attributes over a period of time.

or the individual characteristics of employees. Most of the existing research did not use positive measures of job characteristics or wellbeing, and no 'gold standard' had been established for these measures.

Secondary analyses

The research team used its conclusions from the literature review, which identified gaps in knowledge, to develop the secondary analyses of existing databases. The researchers considered the presence or absence of negative and positive effects and changes over time, and included other factors that might have an influence.

The data showed strong, independent associations between positive and negative job characteristics and wellbeing. However, the nature of these links varied. Strong links between changes in job characteristics and changes in wellbeing over time were significantly influenced by baseline levels of job characteristics, and the databases contained relatively few positive measures of job characteristics and wellbeing. The research team concluded that a comparative approach is important to assessing the relationship between work and wellbeing.

Individual differences

The results of the two studies carried out in parallel with our IOSH research programme showed that the effect of job characteristics on health varies, depending on the coping and attributional styles of the employee. This means that it is important to include both individual appraisals of the job as well as measures of the work environment.

Negative coping and attributional behaviours were associated with high levels of depression and anxiety and low job satisfaction, while positive coping and attributional behaviours were significantly associated with lower levels of depression and anxiety and high job satisfaction.

The study of nursing staff found that intrinsic effort, problem-focused coping, negative coping and social support often have a more significant effect on outcomes than job characteristics do. This suggests that for occupations such as nursing, police and firefighting, where changing working practices is not a realistic option, the main focus should be on individual and social support factors, with a secondary focus on job characteristics.

New data collection

The two surveys showed a similar pattern of associations and findings among established workers and those starting work. Associations tended to be either positive or negative, rather than a mixture of the two, and the team found that positive and negative measures were focused on different concepts rather than opposite ends of the same spectrum.

Job characteristics were more strongly associated with appraisals of work than with individual characteristics. Furthermore, appraisals of work and job characteristics were more strongly associated with outcomes than with individual characteristics.

The responses of the established worker and new starter groups were broadly similar in terms of job characteristics, perceptions and outcomes. However, there were some differences on specific measures.

- In terms of job characteristics, the new starters group reported greater reward, while the established workers group reported greater control.
- The new starters group had higher levels of job satisfaction, both overall and on specific measures including pay, promotion, reward, conditions and communications, and higher levels of work involvement.
- The established workers group had a higher quality of working life in terms of pay, while new starters had a higher quality of working life in terms of both pride (in their work and organisation) and happiness.
- Those in the established worker group had higher depression levels.

Any differences between the two groups seemed to reflect variations that can be expected as a result of differences in the workers' career stage.

The researchers found that individual components or specific combinations of these were not the best indicators of health outcomes. A far better measure – the 'total good job score' – was a combined score representing:

- the measure of total job characteristics (both presence of positive features and absence of negative ones)
- employees' appraisals of job characteristics (eg job satisfaction, absence of stress at work).

The surveys suggest that the extent to which work is good for health depends not only on workers' job characteristics, but also on their appraisals of these. Changes in job characteristics and/or appraisal may be associated with changes in wellbeing, and this has important implications for both intervention and prevention.

Factor	Comprising
Job characteristics	
1 Manager support	Manager support, intrinsic reward, uplifts (from supervisor)
2 Demand	Demand, extrinsic effort, intrinsic effort, unsociable and unpredictable hours
3 Control	Control over work organisation
4 Role	Role, night work
5 Peer support	Peer support, uplifts (from co-workers)
6 Skills	Skill discretion, uplifts (from skills)
Appraisals of job	
1 Management	Satisfaction with management/supervisor, quality of working life in terms of management
2 Work	Intrinsic job motivation and higher order need strength, enjoyment, satisfaction with work and the nature of work, and quality of working life in terms of autonomy
3 Stress	Stress, satisfaction with conditions, quality of working life in terms of balance
4 Reward	Satisfaction with pay, promotion and benefits, and quality of working life in terms of pay
5 Peers	Satisfaction with co-workers
Outcomes	
1 Negative mental wellbeing	Negative mood, anxiety, depression, cognitive failures at work
2 Physical health	Physical health and symptoms, use of painkillers, fatigue, minor accidents at work
3 Positive mental wellbeing	Positive mood, quality of work in terms of autonomy and happiness

Table 1
Job characteristics, appraisals and outcome factors identified by the researchers

What does the research mean?

The project addressed the issues of how to define a good job, and how the characteristics associated with a good job relate to health. The literature review, secondary analyses and new data collection all suggest that:

- health and wellbeing vary as a function of work (as shown in previous research)
- concepts of job characteristics, perceptions and wellbeing depend on a number of factors.

Specific aspects of work are likely to be important because in the event of a problem, any interventions will aim to change these. However, wellbeing at work generally reflects the balance between beneficial and adverse conditions and workers' appraisals of these. This global picture, representing the 'culture' rather than any individual component, provides the best measure of what makes a good job.

There's also a need for a process approach to work and wellbeing, comprising job characteristics, appraisals and outcomes. Within this, a multifactorial approach of combined effects best describes the associations between work and wellbeing.

Our understanding of what makes a good job, and how we should conceptualise, study, and help workplaces provide it, is incomplete. However, the concept of a good job has the potential to contribute as much to research as the concept of a bad job.

The research has identified avenues for further research and provided a framework that can be used both to study and change wellbeing in the workplace.

- Further research can now use the framework developed here to look at specific diseases, accidents and injuries.
- Similarly, studies of specific sectors and groups of workers (such as older workers) can use this approach.
- The researchers found that wellbeing doesn't always change in a dose–response fashion for all factors, and this requires further investigation.
- The mechanisms that underlie the associations found in this study can also be addressed by combining the present approach with a more biopsychosocial model.

What's next?

Interventions

Information from risk assessments can be used to develop and evaluate interventions that could improve wellbeing, rather than helping individuals cope with negative aspects of work.

Prevention and management

Issues such as stress, mental illness and musculoskeletal disorders, and conditions such as cardiovascular disease and cancer are often linked. A unified approach to these issues could have far-reaching effects on wellbeing and long-term health. The framework can be applied to these areas and integrated with approaches aimed at both practice and policy, while also having an impact on theoretical development.

Management Standards

The framework could also be used to enhance the current methodology and assessment model of the HSE Management Standards approach so that it can include higher level organisational factors and balance positive and negative drivers of employee health. Work could be done to assess the reliability of the Management Standards indicator tool and risk management process and tailor the approach to specific contexts. This approach could help provide a better link between risk assessment and interventions, and enable education and support for users and experts.

Job retention and return-to-work programmes

Wellbeing is a key issue affecting people who face a break in employment or are planning to return to work. A focus on 'good jobs' will play a key role in ensuring the

wellbeing of these groups. For more resources to help you address health issues in the workplace, visit [iosh.com/resources](https://www.iosh.com/resources).

Our research

This project is one of a series of projects commissioned by IOSH to focus on the interactions between work, health and wellbeing. The first report looks at the impact of work-related violence on health and wellbeing and how these incidents affect health (University of Sheffield). The second explores voice use and the impact of vocal and communication demands in the call centre industry (University of Ulster). The third is a longitudinal study of the effects of shift work on health (University of Monaco project).

Don't forget

Like most studies, this one had some limitations. Results obtained from the samples used in the secondary analyses of existing data may not apply to all groups of workers. Indeed, the analyses in this project provide the basis for future research rather than conclusive information about the area.

One weakness of the established workers study was that it is a cross-sectional study, which makes it difficult to draw conclusions about causal mechanisms. In addition, measurements of health in this research were dependent on subjective reports, and this could be addressed in future research.

Our summary gives you all the major findings of the independent project report by Cardiff University. If you want to read about the study in more depth, you can download the full report at [iosh.com/research](https://www.iosh.com/research).

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IOSH
The Grange
Highfield Drive
Wigston
Leicestershire
LE18 1NN
UK
+44 (0)116 350 0700
www.iosh.com

 twitter.com/IOSH_tweets
 facebook.com/IOSHofficial
 linkedin.com/company/iosh
 youtube.com/IOSHchannel
 instagram.com/ioshofficial
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