

## The Health-Damaging Potential of New Types of Flexible Employment: A Challenge for Public Health Researchers

The globalization of economic activity is leading to upheavals in the world of work, creating new demands for productivity and adaptability in an increasingly deregulated labor market. The global employment situation looks grim: worldwide, about 150 million persons are actually unemployed (i.e., seeking or available for work but unable to find it).<sup>1</sup> “Flexibility” in the job market has been proposed as a prerequisite for economic competition and also as a solution to current high unemployment rates.<sup>2</sup> While there is little agreement about what is meant by flexibility, the capacity of employers to ensure labor’s rapid adaptation to lowering wages, arduous working conditions, or displacement by new technology, including job loss, is typically implied by most definitions.

Conspicuous among the different types of flexibility has been the growth of atypical employment or underemployment, with reduced job security (e.g., home-based work, temporary work, informal work),<sup>3</sup> and the decline of standard full-time, permanent jobs. According to estimates of the International Labour Organization, 25% to 30% of the world’s workers—between 750 million and 900 million people—are underemployed, that is, “either working substantially less than full-time, but wanting to work longer, or earning less than a living wage.”<sup>1</sup> In Europe, “flexible employment” (defined as part-time work, work involving temporary contracts, or self-employment) increased by 15% from 1985 to 1995.<sup>4</sup>

Today, “precarious paid employment” (defined as fixed-term and temporary contracts) accounts for 15% of paid employment in the European Union.<sup>5</sup> In the United States, where flexible work grew earlier than in Eu-

rope, the proportions of workers in jobs expected to be temporary were approximately 4.9% in 1995 and 4.4% in 1997.<sup>6,7</sup> If the definition used includes any kind of flexible job (e.g., part time, independent or company contract, self-employment, on call, temporary, day labor), the proportion in 1995 almost reaches 30% of the workforce.<sup>6</sup>

There is overwhelming evidence that unemployment is strongly associated with mortality and morbidity, harmful lifestyles, and reduced quality of life.<sup>8,9</sup> Because new forms of work organization and flexible employment are likely to share some of the unfavorable characteristics of unemployment, it seems plausible that they could also produce adverse effects on health.<sup>8</sup> The experience of job insecurity has been associated with psychological ill health, and insecure jobs tend to involve high levels of exposure to work hazards of various kinds.<sup>10–18</sup> With regard to the health effects of different types of flexible employment, however, current evidence is much more scarce.<sup>5,19–23</sup>

Today, workers may experience a variety of dynamic employment forms ranging on a continuum from unemployment through underemployment to satisfactory employment, or even overemployment (as in forced overtime).<sup>8</sup> The frontier between many types of flexible employment and unemployment is becoming blurred. Burchell has argued that there may be a vicious cycle in which many unemployed individuals are more likely to have been previously in temporary jobs and that many of those temporary jobs, in turn, lead to spells of unemployment.<sup>24</sup>

Therefore, future research needs to move away from investigations that compare the health or well-being of unemployed and employed persons toward an analysis of unemployed and underemployed workers vs workers with stable jobs.<sup>8</sup> At present, knowledge is very limited, and there are many questions to be answered. What is the potential impact of flexible employment on different health outcomes? What is the role played by potentially modifying variables, such as working conditions or the social and environmental context? What is the risk distribution across socioeconomic groups?

There are a number of potential pathways through which new types of employment might damage health. The experience of flexible employment itself, and the insecurity and instability associated with it, may be an important source of stress. In addition, the work environments of persons in flexible and stable employment may differ; for example, those in flexible employment may be exposed to more hazardous or dangerous work environments and may face greater demands or have lower control over the work process, both of which have been associated with adverse health outcomes.<sup>25</sup>

Finally, the effects of underemployment may also extend to family members and dependents, and living in an environment with high rates of underemployment may affect the fully employed as well. Even if flexible employment has only a modest impact on health at the individual level, the magnitude of the potential effects on population health, given the growing number of workers exposed, may be enormous.<sup>26</sup>

In order to investigate the relationship between new types of employment and health, investigators will need to generate models that specify how macroeconomic processes, country-level and regional factors, individual employment situations, and health are inter-related. Governments and health agencies should establish adequate information systems as well as research plans to address new forms of employment with potentially important implications for employees, trade unions, and employers.

Moreover, researchers should give more visibility and consideration to this potentially important public health topic. The public health researchers of the 19th century were very aware of the relationship of work and social class with ill health.<sup>27-29</sup> Public health researchers at the beginning of the 21st century must face the challenge of unraveling the consequences of new types of employment for the health and well-being of workers and the wider population they support. □

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## Contributors

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