

Intelligence MEMOS



From: Rosalie Wyonch
To: Health Policymakers and Administrators
Date: February 9, 2022
Re: **HEALTH CARE PROVIDERS AND SICK DAYS**

Almost all sectors had [higher-than-average absences](#) due to illness or disability in January 2022. Healthcare and social assistance was no exception – 13.3 percent of employees were absent from work, compared to an average of 9.9 percent in pre-pandemic years. Hospitals have cancelled surgeries, closed units or wards, and reports of nursing shortages [abound](#).

Even so, the most recent labour force data suggest that the current shortages will likely be short-lived.

Throughout the pandemic, there has been continuous [conversation](#) about burnout, stress, deteriorating mental health, increased family responsibilities and the risk of COVID-19 exposure all exacerbating the problem. The most recent labour force survey highlights that the short-term pressures of illness and family caregiving were particularly acute in January, in the midst of the Omicron surge. More health workers were off sick in January 2022 than at any point so far in the pandemic. Similarly, a higher proportion of health workers missed work due to family and childcare responsibilities in January than throughout the pandemic.

Across all health occupations, the proportion of work-hours missed due to family responsibilities or sickness was higher in January 2022 than any point in 2021 and was also higher than any point in the pandemic for technical and assisting health workers. Nurses' aides, orderlies, patient services representative and other assisting health workers were particularly affected – more than 15 percent of work hours were missed due to illness in January 2022, more than double the monthly average of 6.4 percent throughout 2021. When combined with family caregiving responsibilities, assisting healthcare workers missed one of every five hours normally worked.

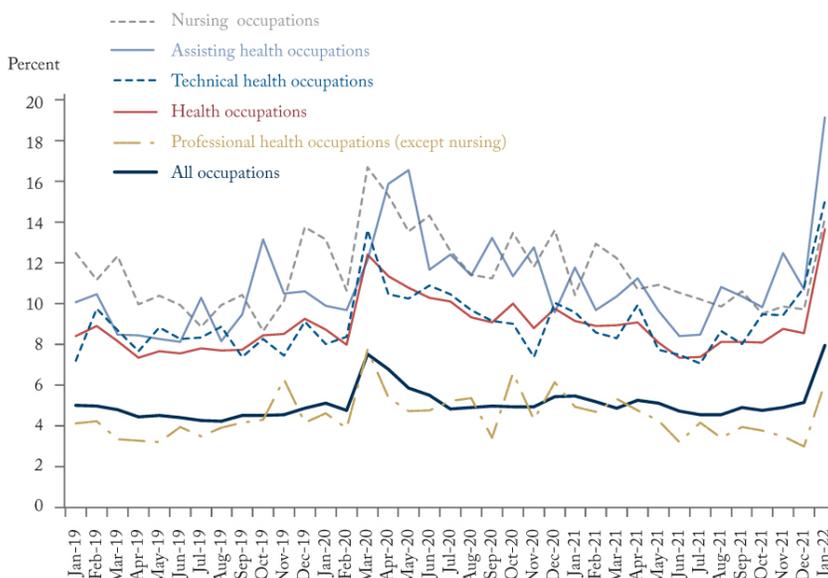
These observations suggest that the highly infectious Omicron variant and associated public health restrictions significantly affected the supply of health labour, and reduced the capacity of the healthcare system at the same time that demand was increasing sharply due to the rise in infections, creating a severe but short-term health labour shortage.

Perhaps more importantly, labour market data indicates that longer term factors are unlikely to provide a full explanation of current shortages. [Research](#), surveys and data showed labour shortages across the healthcare system before COVID-19. Low unemployment and a growing number of job vacancies provide evidence of a [general shortage of health workers](#) that is similar to pre-pandemic. The health labour force and employment grew more than the total economy during the pandemic, suggesting that growth in demand for healthcare workers could be contributing to shortages, instead of a mass exodus of workers from the industry.

Health labour shortages and the resulting capacity constraints on healthcare are undeniable, but recent labour market data provides some evidence for optimism. Absences due to illness and family caregiving responsibilities are likely to decline as the number of new COVID cases falls, and schools, daycares, and recreational activities resume more-normal operations.

But the pre-existing pressures on the workforce won't disappear on their own, they were common before the pandemic and will likely continue. There is a need for deeper understanding of the shifts within the health sector as well as the growth in demand for health workers. Health human resource planners and governments will need to adapt to COVID-induced changes to the health labour market as well as increasing recruitment and retention of workers to better match the labour supply with growing and changing demand for healthcare.

Proportion of Hours Out of Work Due to Sickness or Caregiving Responsibilities



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Notes: Professional health occupations (except nursing) includes physicians, dentists, optometrists, chiropractors, pharmacists, dieticians, therapy and assessment professionals and other health diagnosing and treating professionals. Assisting health occupations include nurses aides, orderlies and patient services associates, dental assistants and other assisting occupations in support of healthcare.

Source: [Labour Force Survey Public Use Micro Data Files \(Jan 2019 – Jan 2022\)](#). Author's calculations.