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Sickness absentees'
experiences of encounters
with the Swedish Social
Insurance Agency and
healthcare

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Summary

The Swedish Social Insurance Inspectorate (Inspektionen för socialförsäkringen, ISF) is an independent supervisory agency for the Swedish social insurance system. The objectives of the agency are to strengthen compliance with legislation and other statutes, and to improve the efficiency of the social insurance system through system supervision and efficiency analysis and evaluation.

The ISF's work is mainly conducted on a project basis and is commissioned by the government or initiated autonomously by the agency. This report has been initiated by the agency and presents results on long-term sickness absentees' experiences of encounters with the Swedish Social Insurance Agency (SSIA) and healthcare professionals.

Background

There are few studies on factors that may have an impact on an individuals' sick leave and return to work. One such factor is, according to some studies, how sickness absentees experience encounters with the SSIA and healthcare. There are only some studies on this, mainly focusing on encounters with healthcare.

Objectives

The main purpose was to investigate how sickness absentees experienced encounters with professionals within the SSIA and healthcare. The purpose was also to study different types of positive and negative encounters in order to better understand if there are differences in such experiences due to gender, age, country of birth, cause of sickness absence, place of residence, duration of sick-leave spell and level of education.

Methods

In 2013, a questionnaire was sent to about 17,500 individuals with an ongoing sick-leave spell that had lasted for 4–8 months and to 1,000 individuals who recently had their claim for prolonged sickness benefit denied. In 2004, a similar survey was sent to about 10,000 sickness absentees with an ongoing sick-leave spell that had lasted for 6–8 months. The response rates were 52 and 58 per cent in 2013 and 2004, respectively.

Findings

Among the sickness absentees in 2013, a great majority (88%) had experienced positive encounters in their contact with the SSIA and corresponding figures for healthcare was 95%. More than a fifth of the participants had experienced negative encounters both with the SSIA and healthcare.

A slightly larger proportion of middle-aged women and people with higher education had experienced positive encounters with the SSIA and with healthcare, respectively. A larger proportion of younger individuals, those not born in Sweden, and with a lower level of education had experienced negative encounters with the SSIA, as well as with healthcare.

A majority of those who had experienced negative encounters also had experienced positive encounters. Seventy-four per cent had only experienced positive encounters and seven per cent had only experienced negative encounters with the SSIA.

A large proportion of the sickness absentees responded that positive encounters, especially with healthcare, had promoted their ability to return to work. Among those who had experienced negative encounters with the SSIA, 20 per cent answered that this had hindered their return to work.

Compared with the results from 2004, a larger proportion of the sickness absentees had had contact with the SSIA in 2013 than in 2004 (98% vs. 88%). A slightly larger proportion stated that they had experienced positive encounters with the SSIA in 2013 than in 2004. As for encounters with healthcare, there was no such difference between the years.

The differences between age groups were relatively large in 2004; in 2013 such differences had diminished. Moreover, a larger proportion among those with mental sick-leave diagnoses had experienced positive encounters in 2013 compared to 2004.

A larger proportion of people who had their claim of prolongation of sickness benefit denied, experienced negative encounters with the SSIA (68%) compared to 21 per cent among the sickness absentees. Among those denied sickness benefit, 42 per cent had experienced only negative encounters with the SSIA, compared to seven per cent among the sickness absentees. Still, a majority of those denied sickness benefit had experienced positive encounters with the SSIA. Furthermore, a higher rate of those born in Sweden had experienced positive encounters. Nevertheless, a larger proportion of those having experienced negative encounters with the SSIA stated that this had hindered their return to work (42% compared to 20% among the sickness absentees).

A large proportion of those who had been denied sickness benefit had not understood the reasons for the decision (59%) or did not find the decision reasonable (76%). A third of them reported having felt wronged by the written information from the SSIA concerning the decision.

Conclusions

The study concludes that a great majority had experienced positive encounters with the SSIA as well as with healthcare. The rates of experiencing positive and negative encounters were rather stable over the years. The rates of sickness absentees having had contact with the SSIA were higher in 2013 than in 2004. The SSIA could improve the written information about denied prolongation of sickness benefits.

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