

*Comparison between two representative panels of French employees collected  
in September 2020 and September 2022*

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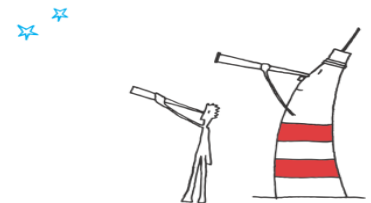


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1. Methodology
2. The health crisis in France
3. Overall differences between the two sample groups (2020 vs 2022)
4. Differences according to some variables
5. Conclusion



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# METHODOLOGY



- Preventis regularly ask a specialist institute to collect a **representative sample of French employees**
  - One was collected in September 2020 (n= 1520)
  - A new one was collected in September 2022 with the same method (n= 1502)
- The collection of the two sample groups is based on **the quota method** applied to the following variables: *gender, age, professional status, region, size of the company, sector of activity.*
- In addition, **cross quotas** have been set up: *size of the company crossed by sector of activity and size of the company crossed by professional status*



<p><b>QUANTITATIVE DEMANDS</b></p> <ul style="list-style-type: none"> <li>Workload</li> <li>Work pace</li> <li>Cognitive demands</li> </ul>	<p><b>ORGANIZATION AND LEADERSHIP</b></p> <ul style="list-style-type: none"> <li>Predictability</li> <li>Rewards</li> <li>Role clarity</li> <li>Organizational justice</li> <li>Value conflicts</li> <li>Quality of leadership of supervisor</li> <li>Social support from supervisor</li> <li>Trust between employees and management</li> </ul>	<p><b>PROFESSIONAL EXPERIENCE</b></p> <ul style="list-style-type: none"> <li>Commitment to the workplace</li> <li>Satisfaction at work</li> <li>Meaning of work</li> </ul>
<p><b>AUTONOMY</b></p> <ul style="list-style-type: none"> <li>Influence at work</li> <li>Possibilities for development</li> </ul>		<p><b>HEALTH AND WELL-BEING</b></p> <ul style="list-style-type: none"> <li>Self-rated health</li> <li>Emotional demands</li> <li>Exhaustion</li> <li>Stress</li> <li>Work / life balance</li> <li>Job insecurity</li> </ul>
<p><b>RELATIONSHIP BETWEEN COLLEAGUES</b></p> <ul style="list-style-type: none"> <li>Social support from colleagues</li> <li>Mutual trust between colleagues</li> </ul>		
<p><b>PSYCHOLOGICAL MENTAL HEALTH QUESTIONNAIRES</b></p>		<p>Perceived Stress Scale (<i>Cohen and al.,1983</i>) – 10 items                  Hospital Anxiety and Depression Scale (<i>Zigmond &amp; Snaith, 1983</i>) - 14 items</p>



- The French **COPSOQ** questionnaire : 54 items grouped into 24 scales
  - The scores of the scales are harmonized to obtain values out of 100
- The **Perceived Stress Scale (PSS)** : 10 items
  - Individual scores range from 10 to 50<sup>1</sup>
- The **Hospital Anxiety and Depression Scale (HADS)** : 7 items assessing depressive symptoms and 7 items assessing anxiety symptoms
  - Individual scores ranging from 0 to 21 for both types of symptoms<sup>2</sup>
- ANOVA analyses were conducted on SPSS 25 to observe **the differences between the two samples** on each COPSOQ scale, on the Stress score and on the Anxiety and Depressive symptoms scores
  - We only present significant differences at  $p < .05$

<sup>1</sup>Dupret, E., & Bocéréan, C. (2013). La mesure du stress en milieu professionnel avec l'échelle de Stress perçu (Perceived Stress Scale): pertinence des versions en dix et quatre items. *Psychologie du travail et des organisations*, vol.19, n°4, 362-384,

<sup>2</sup>Bocéréan, C., & Dupret, E. (2014). A validation study of the Hospital Anxiety and Depression Scale (HADS) in a large sample of French employees. *BMC Psychiatry*, 14:354



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## THE HEALTH CRISIS IN FRANCE



From 17 March to 11 May 2020

- Establishment of a **generalized lockdown**
- **Closure of schools, universities, restaurants, non-essential shops and cultural venues** (cinemas, theatres, museums, etc.)
- Restriction of movement within the national territory
- **Closure of borders** with countries outside the European Union

From 12 May to 28 October 2020

- **Progressive reopening** of schools, restaurants, non-essential shops and cultural venues
- **Mandatory social distancing** in enclosed public spaces
- **Mandatory wearing of masks** in enclosed spaces and certain public places
- Limiting gatherings to a maximum of 10 people

From 29 October to 15 December 2020

- Introduction of the **second generalized lockdown**
- Schools and universities remain open but with a **half-capacity**
- Curfew between 8 pm and 6 am

September 2020 : collection of the sample group





## February 2021

- **Lockdown measures are decided on weekends** in some departments (depending on the incidence rate of the virus and its variants)

## From 3 April to 3 May 2021

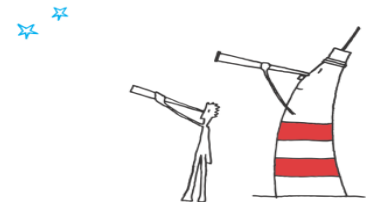
- Faced with the saturation of the intensive care units, the French government announces a **3rd generalized lockdown**
- **Closure of nurseries, schools, universities**, in some regions, which will be extended to the whole territory from 3 April 2021
- **Closure of non-essential shops and cultural places**
- **Curfew** between 9 pm and 6 am
- **Mandatory wearing of masks in all public places**

## From May to June 2021

- **Gradual reopening of schools, restaurants, non-essential shops and cultural venues**
- Opening of terraces in bars and restaurants (to 50% of their capacity)
- **End of curfew**
- Indoor sports facilities will be allowed to operate at 35% of their capacity
- Easing of travel and assembly restrictions

## From July 2021

- Introduction of a compulsory **health pass** for access to enclosed public places (restaurants, cinemas, theatres, museums, etc.)



## August 2021

- Since 9 August 2021, **health pass is mandatory for commercial catering activities, health, social and medico-social services and establishments**
- On 30 August 2021, the health pass is compulsory **for people and employees who work in these places**, establishments, services or events
- More than 50 million people had received at least one dose of the COVID-19 vaccine by August 2021

## September 2021

- On 30 September 2021, the health pass is compulsory **for minors aged over 12 years**
- Minors aged 12 years or over will now have to show a QR code to access certain places, such as restaurants and cinemas, but also to take part in certain school outings
- There are about 5 million of them

## November 2021

- At the end of November, given the resurgence of cases of covid 19, anyone over 18 years of age must receive a **third dose of vaccine to keep a valid health pass** from 15 January 2022
- The wearing of a mask is once again compulsory in all places open to the public

## December 2021

- The deadline for the third dose of the vaccine is reduced to three months, compared to four months previously
- Return of the capacity limits: 2000 people for indoor events and 5000 people for outdoor events. Standing concerts are prohibited.
- Ban on eating food in public transport, cinemas, theatres and sports facilities
- **Return of compulsory wearing of masks outdoors** in city centers.
- **Remote working** will be made compulsory for a minimum of three days whenever possible



January 2022

- Health pass will be replaced by the **vaccination pass** for all

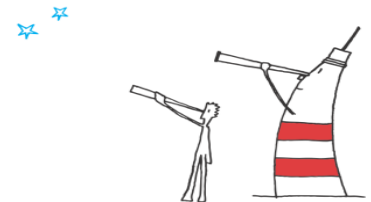
February 2022

- End of audience size limits in establishments with a seated audience
- Remote working recommended rather than compulsory
- End of the obligation to wear a mask outdoors
- Resumption of concerts and shows with a standing audience, as well as standing consumption in bars, transport and leisure establishments.

**WITH a vaccination pass until 14 March 2022**

September 2022

September 2022 : collection of the new sample



## Measures taken by the government concerning the country's economy

March 2020

French President is committed to protecting employees and companies with the locution "Whatever it takes"

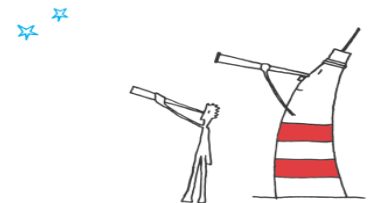
- **Deferral and cancellation of taxes** for companies
- Establishment of a **solidarity fund to help small businesses** and the self-employed cope with the crisis
- Extending access to **short-time work** for employees of companies affected by the crisis
- Suspension of rents for small businesses affected by the crisis
- Loan guarantees for companies in financial difficulty
- **Financial aid** for the sectors most affected by the crisis, such as tourism, hotels and restaurants
- **Digitalization aid** for businesses to help them adapt to the crisis and develop their online activities

This "whatever it takes" is estimated at 424 billion euros over 3 years



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## DIFFERENCES BETWEEN THE TWO SAMPLE GROUPS (2020 vs 2022)



# Differences between the two sample groupes (2020 vs 2022)

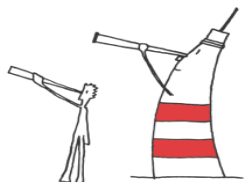
2020 vs 2022

Quantitative demands	Workload	
	Workpace	
	Cognitive demands	
Autonomy	Influence at work	
	Possibilities for development	
Organization & Leadership	Predictability	
	Rewards	
	Role clarity	
	Organizational justice	
	Value conflicts	
	Quality of leadership of supervisor	
	Social support from supervisor	
Relationship between colleagues	Trust between employees and management	
	Social support from colleagues	
Professional experience	Mutual trust between colleagues	
	Commitment to the workplace	
	Satisfaction at work	
Health and well-being	Meaning of work	
	Self rate health	
	Emotional demands	
	Exhaustion	
	Stress	
	Work/ life balance	
	Job insecurity	
Psychological health	Perceived Stress (PSS)	
	Anxiety symptoms (HADS)	
	Depression symptoms (HADS)	

Lower in 2022 : pace of work, cognitive demands and job insecurity

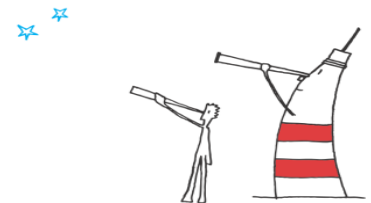
Deteriorated in 2022 :

- job satisfaction and the meaning of work
- Self-rated health, exhaustion
- The psychological health questionnaires



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## DIFFERENCES ACCORDING TO SOME VARIABLES



During most of the health crisis, there were several kind of working conditions. We can divide french employees into three groups (Direction de l'Animation de la Recherche, des Etudes et des Statistiques - DARES, 2022):

- **Employees whose activity has been completely (in 2020) or partially stopped (in 2021) :**
  - they have been compensated by "partial activity" (they are paid by the French state up to 84% of their net salary, which still implies a loss of salary)
  - 51% of them have an intermediate status
- **Remote working employees** (totally during the 1st lockdown, partially afterwards) :
  - 41% during the 1st lockdown (of which 65% are executives)
  - 60% of large companies vs 23% of companies with less than 50 employees
- **Employees who worked during the health crisis** (36% according to INSEE, 2022)
  - health sector, food retail sector, cleaning sector, transport sector, civil protection sector, industrial sector
  - 48% of these employees were of intermediate status
    - Remember that at the beginning of the health crisis, these employees were not well protected against the virus and that the first vaccines were available in April-May 2021





## Differences by employment status

		2022 vs 2020	Executive, higher intellectual profession n=289	Intermediate profession, foreman n=402	Staff member, service staff n=387	Laborer n=424
Quantitative demands	Workload					
	Workpace	■	■		■	
	Cognitive demands	■		■	■	
Autonomy	Influence at work					
	Possibilities for development					
Organization & Leadership	Predictability					
	Rewards					
	Rôle clarity					
	Organizational justice					
	Value conflicts		■			
	Quality of leadership of supervisor					
	Social support from supervisor					
	Trust between employees and management					
Relationship between colleagues	Social support from colleagues					
	Mutual trust between colleagues					
Professional experience	Commitment to the workplace			■		
	Satisfaction of work	■		■		■
	Meaning of work	■		■		■
Health and well-being	Self rate health	■		■		
	Emotional demands					
	Exhaustion	■				
	Stress					
	Work/ life balance					
	Job insecurity	■	■		■	■
Psychological health	Perceived Stress (PSS)	■	■	■		■
	Anxiety symptoms (HADS)	■	■	■		■
	Depression symptoms (HADS)	■	■	■		■

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### Intermediate-status employees :

This category was the highest among those who were in **partial activity** (with loss of salary) and the most numerous to **have worked during the health crisis**.

The **loss of salary for some, the fear of endangering themselves and their families by going to work**, may have resulted in the emergence of a negative feeling about the importance of work in their lives.

This more unfavorable feeling towards the importance of work also affected the laborers 58% of whom worked on site during the health crisis.



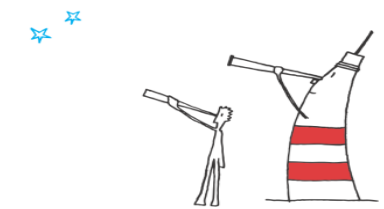
# Differences by sector of activity

		2022 vs 2020	1	2	3	4	5	6
Quantitative demands	Workload							
	Workpace	■		■				
	Cognitive demands	■		■	■			
Autonomy	Influence at work							
	Possibilities for development							
Organization & Leadership	Predictability							
	Rewards							
	Rôle clarity							
	Organizational justice		■					
	Value conflicts							
	Quality of leadership of supervisor							
	Social support from supervisor							
	Trust between employees and management							
Relationship between colleagues	Social support from colleagues		■					
	Mutual trust between colleagues		■			■		
Professional experience	Commitment to the workplace							■
	Satisfaction of work	■				■		
	Meaning of work	■		■	■	■		
Health and well-being	Self rate health	■			■			
	Emotional demands							
	Exhaustion	■				■	■	■
	Stress							
	Work/ life balance			■				
	Job insecurity	■		■		■	■	
Psychological health	Perceived Stress (PSS)	■	■		■	■	■	■
	Anxiety symptoms (HADS)	■					■	■
	Depression symptoms (HADS)	■					■	■

- 1 : Industry (n=340)
- 2 : Construction (n=126)
- 3 : Trade, transport, accommodation, catering (n=432)
- 4 : Public administration, education, health, social work (n=158)
- 5 : Other service activities (n=223)
- 6 : Other activities : Information-communication, administrative, finance and insurance, property business, scientific and specialised technical activities (n=222)

Sector 4 is the one that has been **most affected**: we all know what has happened in **the health system** which, in France, has been completely overwhelmed; carers have suffered a lot, have not been able to do their job properly and we can hypothesize that, if this group had been able to be split up, we would have seen a degradation of the conflict of values.

The **teaching profession** was also damaged by distance learning, whereas contact with pupils and students is, in our opinion, essential.



## Differences by company size

2022  
vs  
2020

		≤ 50 employees n=539	From 50 to 499 employees n=299	From 500 to 999 employees n=67	≥ 1000 employees n=597
Quantitative demands	Workload				
	Workpace				
	Cognitive demands				
Autonomy	Influence at work				
	Possibilities for development				
Organization & Leadership	Predictability				
	Rewards				
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Psychological health	Perceived Stress (PSS)				
	Anxiety symptoms (HADS)				
	Depression symptoms (HADS)				

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Companies with more than 1,000 employees are those whose respondents feel the most degraded on many indicators.

Intermediate occupations and executives are employed in these companies. They have made extensive use of **remote work**. We can talk about the impact of relationship to work and the distance to the company but also the impact on doing exceeding normal working hours without enough recovery.

Companies with 50 or fewer employees score unfavorably on the meaning of work and on psychological health indicators. They represent 35% (vs. 28% on average) of the "Trade, transport, accommodation and catering" sector, which has been most affected by the health measures: closure of small shops, restaurants, hotels, etc. They also employ the most less qualified people (31% laborers vs. 25% on average and only 12% executives vs. 19% on average). Furthermore, we have seen that small businesses have suffered the most financially from the crisis.



## Differences by age

		2022 vs 2020	≤ 29 years old n=305	30-39 years old n=395	40-49 years old n=422	50 to 59 years old n=332	≥ 60 years old n=49
Quantitative demands	Workload						
	Workpace	■	■		■	■	
	Cognitive demands	■	■				
Autonomy	Influence at work						
	Possibilities for development						
Organization & Leadership	Predictability						■
	Rewards						
	Rôle clarity						
	Organizational justice						
	Value conflicts		■				
	Quality of leadership of supervisor						
	Social support from supervisor						■
Relationship between colleagues	Trust between employees and management						
	Social support from colleagues						
Professional experience	Mutual trust between colleagues						
	Commitment to the workplace					■	■
	Satisfaction of work	■					
Health and well-being	Meaning of work	■			■		■
	Self rate health	■				■	
	Emotional demands			■		■	
	Exhaustion	■	■	■			
	Stress			■			■
	Work/ life balance						
Psychological health	Job insecurity	■	■			■	
	Perceived Stress (PSS)	■		■	■	■	■
	Anxiety symptoms (HADS)	■		■			
	Depression symptoms (HADS)	■		■			

Although the **30–39-year-olds** evaluate the scales relating to their health (COPSOQ and psychological health) and well-being more unfavorably in 2022 than in 2020. We can hypothesize that they have experienced this period of health crisis less well than the others for rather **personal and family reasons** (presence of children, constraints less well experienced, etc.).

It was **from the age of 40** onwards that employees evaluated their **relationship to work** less well; this is perhaps an awareness that the youngest had already had before the COVID period and which spread to the other age groups.

**Employees aged 60 and over** are more likely to work in small companies (63% vs. 34% on average), which, as we have already seen, are those that have suffered most financially from the health crisis. An other hypothese is that it was more difficult to them to manage with remote work and digitalization (access to information, interactions with manager,...) ☆ ☆



# Differences by gender

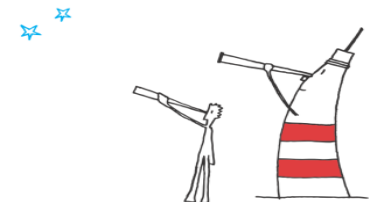
		2022 vs 2020	Women n=658	Men n=844
Quantitative demands	Workload			
	Workpace	■	■	■
	Cognitive demands	■	■	■
Autonomy	Influence at work			
	Possibilities for development			■
Organization & Leadership	Predictability			
	Rewards			
	Rôle clarity			
	Organizational justice			
	Value conflicts			
	Quality of leadership of supervisor			
	Social support from supervisor			
Relationship between colleagues	Trust between employees and management			
	Social support from colleagues			
Professional experience	Mutual trust between colleagues			
	Commitment to the workplace			
	Satisfaction of work	■		■
Health and well-being	Meaning of work	■		■
	Self rate health	■	■	
	Emotional demands			
	Exhaustion	■		
	Stress			
	Work/ life balance			
	Job insecurity	■	■	
Psychological health	Perceived Stress (PSS)	■	■	■
	Anxiety symptoms (HADS)	■	■	■
	Depression symptoms (HADS)	■	■	■

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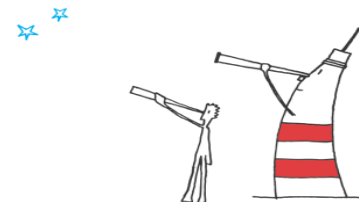
The differences observed between women and men are, as is often the case, linked to other variables than simply being a woman or a men.

Men, who show more unfavorable trends than women, are :

- more likely to work in industry (26% vs. 18% of women) and construction (10% vs. 6% of women); they are therefore among the employees who have worked on site, despite the lack of protective equipment for some time
- more likely (and this ties in with the previous point) to be laborers (36% vs. 18% of women)
- more likely to work in a large company (42% vs 36% of women)
- older than women (34% vs. 21% are in the "40-49 years" age group and 29% vs. 20% are over 50).



# 5/ CONCLUSION



In conclusion, we can see that the health crisis in France has had two important effects :

- **Remote work has been massively "adopted" in companies where it is possible with favorable and unfavorable impacts**

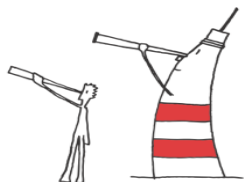
The health crisis caused a big revolution in France : while companies were previously rather reluctant to this way of working, they realized that it was possible and that it could be profitable for companies (less space needed, implementation of flex office, etc.).

- ✓ Nevertheless, the interventions we have made in companies on this subject show the limits of this way of working: apart from the fact that the material and personal conditions must allow for serene remote working, contact with colleagues, informal discussions, face-to-face support from the manager are no longer possible and the risk of relocation of certain activities (to other countries) is real.

- **The relationship to work has changed** (and not only for the youngest)

It would be borne by the youngest before the health crisis. However, it turns out that in this analysis, it appears from the others age groups of 40 years and over. We can put forward the following hypothesis :

- ✓ in recent years, younger employees no longer have the same relationship to work as their elders; their priorities are different (reconciliation of private and professional life, more free time for leisure, the possibility of modulating their working hours, changing companies if theirs no longer suits them, etc.); the COVID period therefore did not change the perception they already had
- ✓ on the other hand, the periods of lockdown, the fear of being infected by the virus (or that someone close to them might be) has certainly allowed older people to question their life priorities and these are now closer to those of younger people.



# THANK YOU FOR YOUR ATTENTION !

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