**Understanding the psychological and social influences on office workers taking breaks; a thematic analysis**

Mike Oliver¹, Karen Rodham¹, Jennifer Taylor¹, Claire McIver1

¹Staffordshire University, UK.

Corresponding author: m.oliver@student.staffs.ac.uk

(ORCID 0000-0002-4889-5849)
**Abstract**

**Objective:** There is a growing trend whereby office workers refrain from taking breaks at work. Previous research has not explored how employees understand the enablers and barriers to taking breaks. This study explored how office-based workers describe their behaviour in relation to, and perceive the notion of, taking breaks.

**Design:** Five focus groups were held with 27 employees of differing levels of seniority at a local authority in the UK. Inductive thematic analysis was employed with the researchers maintaining a deliberate stance of curiosity towards the data, allowing for reﬂexivity and awareness of preconceptions towards the research.

**Results:** The analysis identified 5 key themes: the non-binary nature of taking breaks at work, the influence of social and work relationships, the superordination of work over breaks and health, contradictory feelings of guilt and anxiety and being ‘fair game’ for work related matters if you remain at your desk at break times.

**Conclusion:** This paper suggests that the complex relationships that people have with taking breaks, with others and with their physical environment should be taken into account when trying to understand break-taking behaviour. Based on these findings, suggestions for further research and potential health-related policy and organisational changes are made.

# Keywords

workplace, breaks, health, focus groups, thematic analysis

# Introduction

The workplace has long been acknowledged as a setting that can contribute both positively and negatively to people’s health and wellbeing (Dalgren & Whitehead, 1991). Similarly, the social sciences have a long and distinguished track record in terms of contributing to the understanding of how workplace breaks and relationships within the workplace can contribute to both health and productivity. For example, in the USA, the original Hawthorne Studies of the 1920’s indicated that social factors, such as relationships with supervisors, could affect motivation and productivity (Stand, 2000). At the same time in Great Britain, the Industrial Fatigue Research Board, later the Industrial Health Research Board, populated with eminent psychologists of the time, was established to understand the links between work, health, in the form of physical injury, and productivity (Schilling, 1944).

There is a large and growing body of research examining how the workplace can be used as a setting for interventions which contribute to improving both the physical and psychological health of people at work. These interventions typically require employees to undertake activities during their lunch or rest breaks and can range from simply encouraging them to go on walks (Sianoja, Syrek, de Bloom, Korpela, & Kinnunen, 2017), undertake relaxation activities such as yoga or tai chi (Hartfiel, Havenhand, Khalsa, Clarke, & Krayer, 2011; Tamim et al., 2009) or more physically demanding activities such as cycling or boxing (Wollseiffen et al., 2016). However, the findings and recommendations from this research field are far from conclusive. Additionally, much of the research fails to address what and how the workers themselves actually think and feel about taking the breaks that could promote their health.

In parallel with the increase in workplace intervention-based research, there is growing concern about the amount of time people spend sitting down and therefore not being physically active (World Health Organization [WHO], 2014). Indeed, research has shown a damaging relationship between long periods of uninterrupted sedentary behaviour and coronary heart disease (Kivimäki et al., 2006; Petersen et al., 2014), obesity (Thorp, Owen, Neuhaus, & Dunstan, 2011), colorectal cancer (Cong et al., 2014), unhealthy ageing (Dogra & Stathokostas, 2012) and bone mineral content (Chastin, Mandrichenko, & Skelton, 2014). In recognition of the issue’s broader importance, the WHO has outlined reducing the amount of physical inactivity as one of its key global targets for the prevention and control of non-communicable diseases (WHO, 2014).

This link between physical ill-health and inactivity is of particular concern for those who work in offices since this is the location where they spend the highest proportion of their sitting time. The trends for this are increasing; for example people in office-based roles can spend between 30% and 50% of their total sitting time at work (Jans, Proper, & Hildebrandt, 2007; Kazi, Duncan, Clemes, & Haslam, 2014). In a study involving Australian working adults, Miller and Brown (2004) found that people were spending nearly 9.5 hours sitting on a weekday, with half of this sitting time being at work. For managers and professional workers, this rose to over 6 hours sitting at work.

 One of the main conclusions arising from an extensive literature review to provide guidelines on behalf of Public Health England is for employers to support their sedentary employees to take breaks which involve standing and movement (Buckley et al., 2015). In creating the Healthy Workplace Framework and Model for the WHO, Burton (2010) concludes that although the research evidence to support the health benefits of taking breaks during the working day is mixed, nonetheless employers and employees should still attempt to take breaks, and undertake activities within these breaks, that promote their physical and mental health.

In addition to the research that has focused on physiological outcomes, there have been studies that demonstrate that there can be psychological benefits associated with taking breaks. In a meta-analysis of workplace physical activity interventions which required workers to take breaks during their working day, Conn, Hafdahl, Cooper, Brown and Lusk (2009) found evidence to suggest that improvements in mood and quality of life outcomes are possible. Using the Health Data Survey for England, which is an annual survey using a representative sample of adults, Hamer, Coombs and Stamatakis (2014) show that there is an association between prolonged periods of sitting without breaks and increased psychological distress. Burton (2010) states that psychosocial factors in the workplace include how work is organised, the amount of involvement people have in decisions relating to what they do on a day-to-day basis, support from supervisors and how much time people are given to complete tasks, as well as flexibility with when breaks can be taken. In a meta-analysis of the impacts of stress on mental health in the workplace, Stansfield and Candy (2006) concluded that common mental disorders, ranging from anxiety to depression, are associated with workplaces where workers have limited ability to affect their psychosocial environment.

The right of workers to take breaks during the working day has gained increasing recognition in most Western economies. With regard to breaks and rest periods, current UK legislation states that “Workers have the right to one uninterrupted 20 minute rest break during their working day, if they work more than 6 hours a day” (The Working Times Regulation, 1998). Taking a break during the working day, which is both supported by legislation and has sufficient research evidence to recommend it, would therefore appear to be a logical, health-promoting behaviour. However, there appears to be a growing trend for large numbers of office workers to refrain from taking breaks at work, with surveys reporting that between 66% and 82% of workers do not always take their breaks (Bupa, 2015; Mastercard/Ipsos Mori, 2016). Therefore, despite the legislation to support people in taking breaks, it is unclear why this trend exists.

The majority of the broad literature on workplace health is conducted within the positivist, experimental research paradigm. There is therefore a paucity of research which directly explores the viewpoint of workers by asking them how they feel and think about taking breaks. Indeed, Martin, Karanika‐Murray, Biron and Sanderson (2016) propose that to counter the narrow paradigm in which much of workplace research is set, a broader level of analysis is required. They suggest that research should consider how individuals relate to, and work with, one another as well as explore the environmental factors at play. They propose that talking to people may further our understanding of how people think about and relate to taking breaks during the working day.

In one rare example from the literature in the field of interest to this current study, Gilson, Burton, van Uffelen and Brown (2011) conducted focus groups with Australian office workers to explore their perceptions of the health issues linked with long periods of sitting and to actively seek practical suggestions for ways to reduce sedentary behaviour. They found that workers did recognise the health risks associated with long periods of sitting and could suggest practical actions to mitigate the risk. However, they also feared that their productivity would be damaged by these actions and that, without leadership support, their suggested changes would not be successfully implemented.

Gilson et al. (2011) showed the importance of asking workers to share their perceptions, ideas and opinions. The workers showed that they understood that not taking breaks could be associated with health risks. Although they were able to produce practical suggestions to address the increased risk, they did not feel empowered to make the changes without leadership support. This shows the complexity underlying what at face value might seem to be a straightforward issue: take breaks and reduce your health risks. Our study builds on the approach taken by Gilson et al. (2011) and seeks to invite office-based workers to share their experiences and perceptions about taking breaks at work.

Health Psychology models designed to support health behaviour change can provided a practical link between understanding the psychological and social influences on behaviour and subsequent research and applied interventions. For example, the COM-B model (capability, opportunity, motivation and behaviour) provides an overarching summary of potential interventions to support health behaviour change (Michie, Atkins & West, 2014). The structure of the COM-B model was used to inform the questions used in the focus groups within the current study.

The current study built on previous studies such as those by Gilson et al. (2011) in order to provide researchers with the insights to inform practical behaviour change interventions. A greater insight into the meanings, perceptions and experience of taking breaks at work could help researchers to design more effective behaviour change interventions such as those based on the COM-B approach to behaviour change. The current study sought the perspective of office workers to inform ways of increasing the number of workers taking breaks and in so doing, improve the health and wellbeing of people at work. The aim of this research was therefore to explore the psychological and social influences on office workers break-taking behaviour.

# Methods and methodology

*Theoretical approach*

A critical realist perspective facilitates an understanding of social reality rather than simply describing it (Vincent & O'Mahoney, 2018). Within a critical realist perspective the authors were therefore aiming to search for explanations of how office workers think about taking breaks at work. In this case, what is the reality faced by office workers in terms of taking breaks in a workplace setting in which there are multiple social relationships embedded within complex rules, regulations, cultural norms and expectations? Within the flexibility of data collection method afforded by the critical realist perspective, the authors chose to conduct focus groups in order to gather data which would support the generation of insights.

*Participants*

A total of 27 office-based employees took part in five focus groups, stratified by grade, with two focus groups consisting of junior staff, two of middle-managers and one of senior managers. Nine of the participants were of a junior grade, 14 were of a middle-management grade and four were senior managers. 18 participants were female and nine were male. The age range was 20 to 65, with a mean of 45. (Table 1).

<<insert table 1 here>>

*Participant Recruitment*

Team leaders were asked to circulate a document outlining an opportunity for people in their teams to participate in a study relating to taking breaks at work. It was made clear that participation would be considered as part of the working day and no break time or leave would need to be taken. No incentives were offered. A number of measures were highlighted in order to encourage participation and to promote as much natural discussion as possible within the focus groups. Prospective participants were told that their team leaders would not be part of the focus groups, and that their contributions would be anonymised. Teams were targeted where it was unlikely that they would have a close working relationship with the first author (who is employed by the organisation where this research took place). Stratifying the focus groups by work grade was deliberate, with the intention that being amongst peers would allow people to speak more freely. It was also made clear that the rooms in which the focus groups were to take place would be out of sight of other colleagues. Ethical approval for this research was given by both a University Ethics Committee and the Research Governance Panel of the local authority in question.

As per national legislation, the organisation at which this research took place requires eligible employees to take a break of 20 minutes if they work for a period of six hours or more. Additionally, some employees are required to complete timesheets on which they must record a minimum of 20 minutes’ break time each day. However, adherence to, and enforcement of this break is inconsistent, ranging from none at all to rigorous enforcement. The 2017 employee health and wellbeing survey carried out at this organisation revealed that it had become custom and practice for many people to ‘work through’ their allocated break time.

*Procedure*

Focus Group (pilot): The focus group procedure, including supporting documentation and question schedule, was piloted with colleagues from the first author’s team. Pilot participants were ineligible to take further part in the study.

Focus Groups: Each participant read an information sheet, signed a consent form, and provided basic demographic information. Each of the focus groups lasted approximately one hour, which included the introduction, completion of paperwork, actual focus group discussion and debrief . Each focus group was recorded for later transcription and analysis. Pseudonyms were allocated to all participants as a part of the transcription process and are used in the results section of this paper. The focus groups took place between August and October 2017.

Based on the guidance set out by Hugh-Jones (2010), a semi-structured interview approach and schedule was deployed. The intent was to ensure consistency of questions across the focus groups, whilst acknowledging that the individuality of each focus group would take the conversation in differing directions. Engel (1980) suggested that health and illness cannot be considered in isolation, but rather needs to be considered as being affected by a combination of biological, psychological and social factors. The questions were further influenced by the structure of the COM-B model, to ensure that they allowed for exploration of capability, opportunity and motivation (Michie, Atkins & West, 2014). The interview schedule therefore reflected this approach with questions such as ‘What is your current experience of taking breaks at work?’, ‘If you do/don’t take breaks, please tell us a bit more about that... How do you think about (not) taking them ... What’s your thought process?’, ‘How does the relationship you have with your line manager (or colleagues) affect whether you take breaks or not?’, ‘What is your attitude to the workplace or work as somewhere or something that affects your physical/mental health?’.

*Analysis*

Inductive thematic analysis, a method for identifying, analysing and reporting patterns (themes) within data without trying to fit it into a pre-existing coding frame (Braun & Clarke, 2006) was employed. This is an established qualitative technique that allows in-depth exploration across a data set to find repeated patterns of meaning. This approach is grounded in, but goes beyond, the surface of the data to facilitate, in this case, the development of an in-depth understanding of the attitudes of local authority staff towards taking breaks at work. The key steps of thematic analysis include extensive familiarisation with the data, generation of initial codes, and then the search for overarching themes. A theme is defined as representing *“... some level of patterned response or meaning within the data set...”* gathered as part of the research (Braun & Clarke, 2006, p. 10). These are then reviewed for coherence and distinctiveness, before being closely defined and named (Braun & Clarke, 2013).

In line with the approach to analysis outlined in Rodham, Fox and Doran (2015), rather than attempting to temporarily suspend our beliefs and knowledge, the authors employed Le Vasseur’s approach, which ‘involves attempts to get beyond the ordinary assumptions of understanding and stay persistently curious about new phenomena’ (Le Vasseur, 2003, p. 419). This was particularly important, given the first author’s link to the participating organisation. The ability to develop a curious stance towards one’s data requires a researcher to engage in reﬂexivity and to become mindful of their role in the creation of knowledge, and to self-monitor the ‘impact of our biases, beliefs and personal experiences on the research’ (Berger, 2015, p. 2). The first author analysed the data. In addition, one of the transcripts was independently analysed by the second author. The first two authors then met to compare codes, themes and to employ Le Vasseur’s curious stance to their respective responses to the data.

**Results**

Five themes were identified that encapsulated how office workers said they thought about and behaved in relation to, taking breaks at work and the impact this may have on their health: the non-binary nature of taking breaks at work; relationships and taking breaks; the superordination of work over breaks and health; contradictory feelings of guilt and anxiety and if you are at your desk, you are “fair game”.

***Theme 1: The non-binary nature of taking breaks at work***

There were some people who always took a break and equally those who said they never took breaks. However, the majority of participants were fluid in their relationship with taking a break; there were people who took breaks if they planned ahead, or as part of maintaining social relationships at work:

 “I do take a lunchbreak if I book you know, to go out with somebody so I try and do that at least once a week” (Ruth, Focus Group 4)

“So for me breaks rather than being a regular occurrence tend to be situational, either when I’ve arranged something ...” (Paul, Focus Group 5)

This conscious setting aside of time for a longer break indicates that breaks may have come to be seen as a treat or reward, and certainly not something to be taken every day. Taking a break has become something that has to be planned for and booked into the work diary, much in the same way as a meeting is. There appears to be a further gradation of how people view breaks, ranging from a ‘quick’ break which often merges into the working day, through to breaks that are planned for, take longer and are viewed as something special:

“... I don't take breaks often to eat lunch so I’ll tend to just eat at my desk. The only time I tend to take a full hour is when I’ve already got it booked in like with other colleagues or friends or something.” (Kate, Focus Group 4)

Some participants did recognise the importance of taking a break in the middle of the day, and appeared to convince themselves that by doing a less intense work activity, such as responding to emails, whilst eating their lunch at their desk, would actually be taking a break. Others regarded the physical act of getting up to make a cup of tea, or walking to the canteen to get some food or drink but returning to their desks to consume this would also count as their break. The greater importance that people appear to be placing on completing their work over the time they give themselves for breaks, or simply the sheer volume and pressure of work, may go some way to explaining this pattern of behaviour.

***Theme 2: Relationships and taking breaks***

This theme demonstrates that people do not think about breaks in social isolation. Work is a social activity, and all the participants work with people and for people. Work is also frequently set in the context of family life, with people leaving their family in the morning and returning to it in the evening. These relationships influence how, when and why people take breaks. The relationships talked about included those with family and friends, colleagues (who may be friends as well), one’s team and line managers. The following discussion amongst the junior staff in Focus Group 3 demonstrates how the interactions that people have with one another, their line manager and their own behaviour can explain whether a culture of feeling able to take a break exists:

“I don't feel there’s any pressure from my Line Manager not to take a break at all.” (Rebecca)

“No we don't...” (April)
“No I don't, I don't feel there is any pressure from management at all. It's... I put that pressure on myself.” (Alison)

“Nor me, I know on my floor we all work it out between ourselves, so we all say ‘When do you want to go, and when do you want to go?’ and all that. I’m not fussed normally, as long as I have a lunchbreak and that's all I’m bothered about.” (Karl)

Conversely, where line managers’ attitudes to taking breaks are not perceived so positively, taking breaks becomes harder for people, as this interaction amongst the middle-managers in Focus Group 4 below demonstrates. In this case we can see that the combination of perceptions and unspoken rules and beliefs seems to be creating a culture in which taking a break is ‘frowned on’.

“I’ll be honest, I take no notice, I take them if I need them. I do ignore that. There is sometimes an unsaid...you can pick up on things can't you?” (Jill)
“I mean if you...” (Patrick)
“You mean if you take one and they think you shouldn't have a break, is that what you mean?” (Viv)
“If a meeting is put in, in your lunch hour.” (Jill)
“Oh right.” (Viv)
“And you say you’ve got to go for an appointment, during your lunch hour, it's frowned on.” (Jill)

In Focus Group 2, which contained the most senior participants, there was recognition of this key relationship. These participants knew that their staff should be taking breaks, and recognised that the example they set is not always the best one:

“And I encourage my teams to have their breaks but I probably don't lead by example.” (Paul, Focus Group 2)

People who had constructive and positive relationships with their teammates were more comfortable in being able to take breaks, with several participants noting the unwritten rules that develop around the subject:

““Am I okay to have an hour lunch today?” People say “Yes that's fine.” And then you just...it’s really relaxed, you just talk to your colleagues about it and it's just you go as you come.” (Neil, Focus Group 3)

“I think they’re unspoken patterns aren’t they sometimes? They’re unspoken.” (Sarah, Focus Group 1)

Family commitments clearly influenced the decision about whether or not to take breaks:

“I mentioned bad reasons there but good reasons in your life, if like when I go for lunch with my partner and my daughter, I do take like an extra hour because most of the time, when I was spending 20 minutes eating but I end up having like cuddles off my daughter and stuff so I end up taking ages and not realising, so there are good reasons and bad reasons.” (Neil, Focus Group 3)

This final comment from Neil illustrates the power that a positive break can have on both the individual taking the break, and on reminding others of this positive effect. His comment speaks volumes for his own wellbeing, but when he shared this quote the impact on the mood of the other participants was tangible, with much smiling, laughing and nodding in agreement. This suggests that the simple act of reminding people that breaks have ‘good reasons’ may prompt people to think differently about taking them.

***Theme 3: The superordination of work over breaks and health***

The third theme shows that people acknowledge the common sense health benefits of taking breaks, but when faced with a choice, place more importance on completing work tasks or attending meetings during lunch hours, than on the assumed health benefits of taking a break. The sheer volume of work and context of austerity in a local authority setting influenced people towards putting work ahead of breaks and their own health:

“Is working through lunch hour maybe linked to austerity, the greater matter of doing more with less? Trying to squeeze more into a working day?” (Adam, Focus Group 2)

“I would rather get on with it than take a break. I would rather just be doing the doing so that I know I’m getting on with it rather than worrying later on potentially because I haven't done it.” (Holly, Focus Group 2)

In Focus Group 4, participants discussed what would happen if they simply chose to take a break, when a work commitment in the form of attending a meeting arose. The clear domination of the work commitment over the personal break was evident:

“I’ve always attended a meeting at lunch time if it's been put in”. (Kate, Focus Group 4)

 “There’s a sense isn't there, the only thing that would trump a meeting, is another meeting. Or another work-related thing, your own time would never trump an office situation...” (Patrick, Focus Group 4)

Indeed, for some participants, breaks had become an inconvenience or annoyance, either because they get in the way of work or, because other people need to use the break room to hold a meeting.

“I know I’ve been having lunch in the breakout area before and I’ve seen people come round with laptops and stuff and thinking “I need a desk, I need a meeting space” and I’m like “I’ll move...” because I feel like I shouldn't be there having my lunch when people need these desks to have meetings.” (Rebecca, Focus Group 3)

This final comment neatly captures the current paradigm in which people are thinking and behaving. Even if someone has taken the decision to have a lunch break, this can be truncated by not **only** their own workload, but by that of others.

***Theme 4: Feelings of guilt and anxiety – contradictory positions***

The fourth key theme established a polarity in terms of guilt and anxiety amongst the participants. Participants spoke of feeling under pressure to get back to their desks from a break as soon as possible and some felt the need to make up excuses for taking what most would consider to be a normal break. For example an extreme sense of anxiety, verging on panic, is revealed in this comment:

“Like if I’ve gone out for lunch and it's taken a bit longer than usual and I’ve been an hour and 15 minutes, now you can take as long as you want on the flexitime, there’s no policy but if you happen to take over an hour I’m “Oh I’m really sorry, the jacket potato took ages to arrive” and you... You kind of panic don't you when you get back and apologise to the team. And they do it as well don't they so, like somebody in my team a couple of weeks ago came back really, really flustered because she had like an hour and a half and I was like “No worries it's fine.” But she was panicking, and texting “I’m on my way back!” and I was “It's fine, it's your time!” but I think there is, there’s an anxiety around it isn't there... ” (Viv, Focus Group 4)

Others were also willing to share stories of extreme feelings of guilt in relation to taking time for a break:

“I think in some areas there is a bit of a bad feeling about taking, people who take a full hour all the time and really I don't think we should feel like that but perhaps we do and perhaps it's because it's like an unspoken, a sort of unspoken rule if you like that you probably shouldn’t take an hour every day.” (Alison, Focus Group 3)

However, in contrast and recognising individual differences, a smaller number of people stated that such feelings simply did not arise with them. For example, in response to Viv’s quote above, Jane said:

“I know what you mean but I don't feel guilty. No. [. . .]I mean I’m not paranoid, if I want to take a lunch quite frankly I would take a lunch.” (Jane, Focus Group 4)

The written rules of the organisation at which this research took place do allow people to take breaks, but the unwritten rules seem to outweigh them. Baker (1980) notes that often the beliefs about how people *should* behave carry more weight than any formal policy or guideline. The interconnected set of beliefs and influence of relationships, combined with the pressure of work, seem to be creating a culture where many feel guilty or anxious about taking breaks.

***Theme 5: If you are at your desk, you are “fair game”***

The final theme concerned the relationship that people have with their physical work environment. The lack of suitable places in the local authority building where staff could have a break was seen as a barrier to taking breaks:

“I think that's the problem sometimes is trying to find somewhere to sit, ... so it's very busy, there’s a lot of staff on our... the breakout area is used a lot for meetings and sometimes you do feel a little uncomfortable eating your lunch while there’s all these meetings going on.” (Rebecca, Focus Group 3)

This physical work space problem meant that some staff missed breaks or would simply opt to take their breaks at their desk.

“... it tends to be at the desk, try to take the time maybe to look at the *Newspaper* or look at the internet a little bit while I’m eating. That's it really.” (Steve, Focus Group 5)

However, this strategy often had the consequence that if they were at their desk, then they would be considered “fair game” to be asked work-related questions:

“and you do find you just sit at your desk and people continually ask you while you’re eating, they say “I’m sorry, I know you’re eating your lunch but...” and continue to tell you well what they want from you. So it is difficult to get a lunchbreak and I don't very often take one.” (Vez, Focus Group 4)

“I have to say from the other side if someone is sitting at their desk eating they’re fair game, I will apologise but I will interrupt.” (Paul, Focus Group 5)

People either make a personal choice to stay at their desk, or feel compelled to do so because of the lack of suitable space in which to take a break. Regardless of how they end up at their desk, it seems that another unwritten rule has been established in this organisation, namely that being at your desk symbolises that you are ‘working’ or at least available to be asked work-related questions. There also appears to be a collective submission to this fact, and even an overt acknowledgement of it amongst people who appreciate taking breaks themselves.

# Discussion

Despite the focus on the health benefits of decreasing sedentary time at work, and legislation to support people taking breaks, there appears to be reluctance amongst a large number of people to regularly adopt this behaviour. Therefore, the aim of this research was to explore the psychological and social influences on office workers break-taking behaviour. This study has identified several insights which lend themselves to further research and to potential organisational changes to support improved workplace health and wellbeing.

The analysis has helped to further our understanding into why a considerable number of people continue with behaviours in the workplace that could be deleterious to their health. The dominant theme is the degree of importance which people place on work versus breaks. There are many potential reasons why people do this. A recent survey of workers in Britain concluded the four main reasons to be high workload, cultural expectations within the organisation, expectations of a line manager or it is seen as an investment to further one’s career (Working Families, 2018). The research presented in this paper suggests that people who feel that work commitments override all other factors are less likely to take a break, and that even if they do, they may feel anxious or guilty as a result. This means that they may remain at their desk, both contributing to the ‘no break culture’ and also being “fair game” for others to approach them with work-related matters during break times, thus adding to their workload. This combination of factors goes some way to helping us realise why organisations wishing to create a healthier culture in relation to taking breaks find it such a challenge.

Whilst the questions contained within the interview schedule may have presupposed a binary position (i.e. those people that *do*, and those people that *don’t* take breaks), this presupposition was challenged by the finding that a fluidity in break-taking behaviour existed. There were those who did take breaks and those who did not, but there were also those who sometimes took breaks and those who often took breaks. It is not as simple as there being one group of people who do take breaks and another who don’t. Future research should therefore aim to deepen our understanding of this nuance. Learning what enables and influences workers’ decisions to take breaks is important, not least to facilitate exploration of how those people who only take breaks occasionally could be encouraged to take them more often, or how those that never take breaks could be encouraged to take just one break a week.

This study has demonstrated the impact of relationships on how people think about and behave with regard to taking breaks. Whilst individual differences may account for the degree of anxiety or guilt that people feel in social situations (Tangney, 1990), such as taking a break at work, this study has shown that relationships with family, colleagues and leadership can influence attitudes and behaviour with regard to taking breaks. The analysis suggests that where people experience guilt or anxiety they are less likely to take a break. This behaviour then contributes to the cultural norms of the particular team within which these people work, making it even harder for people to feel comfortable to take a break. Rather than focusing on the physical act of taking breaks, the findings suggest that interventions should perhaps be focused on how colleagues relate to one another in the context of taking breaks. Using the biopsychosocial framework proposed by Engel (1980), we strongly argue that the focus in this field to date has been on the biological or physical aspects of taking, or not taking breaks. Our research has shown that participants report psychological and social influences on their break taking behaviour. We therefore propose that the psychosocial influences provide fertile ground for future research.

Research has shown how the design of office environments can affect factors including attitudes and work outcomes (Lee & Brand, 2010), performance (Meijer, Frings-Dresen & Sluiter, 2009), sick leave (Bodin, Danielsson, Chungkham, Wulff & Westerlund, 2014) and creativity (Dul & Ceylan, 2011). The themes identified in this research have reflected this and contributed further to recognising the importance of the physical and geographical attributes of a workplace as either enablers or blockers to people taking breaks. Even when people want to take breaks, the lack of suitable places to rest or eat drives people back to their desks at break times. This can then have consequences such as carrying on working, browsing the internet or being approached by colleagues for work matters. Similarly, the workplace practice of arranging meetings at lunchtimes, which people feel compelled to attend, erects a further barrier to taking a lunch break.

The bulk of previous research has been set in a positivist paradigm, providing the evidence for regulatory health bodies and organisations to promote more physical activity for people engaged in sedentary occupations. This research, using a qualitative approach, has brought the perspectives and attitudes of the people expected to engage with these behaviours to the fore. This helps to explain why the desired behaviour change is not always seen, but also provides insights which may help researchers and policymakers to consider ways in which people will engage in this behaviour.

***Limitations***

The first author was not in an organisational position of seniority over any of the participants. However, as Fisher (1993) notes, the role of facilitator could have placed him in a temporary position of power during the focus groups, which may have led to socially desirable responses from the participants. Even though the participants were intentionally selected to be of a similar grade within each focus group, there may still have been social and power relations affecting the discussions between them. The context of this research and the role of the first author within the local authority may have influenced the process of data analysis, although Le Vasseur’s (2003) approach was used by the first and second authors during the analysis phase in order to mitigate this risk. It is also recognised that this research took place within just one public sector organisation, in just one country, the culture and practices of which may not be reflective of other organisations and countries.

***Recommendations for further research***

The findings of this study indicate a number of areas which merit further research. This research could help move towards defining the practical steps which organisations could implement in order to build a culture in which taking breaks is both an acceptable norm, increase the proportion of people taking breaks and be seen as beneficial for the health and wellbeing of employees. The COM-B model (Michie, Atkins & West, 2014) provides a well-established behaviour change framework with which to consider these areas for further research.

It would be useful to examine whether augmenting the basic legal requirement that “workers are allowed to spend it away from their desk or workstation (i.e. away from where they actually work)” (UK Government, 2018) to “workers are *expected to* spend it away from their desk or workstation (i.e. away from where they actually work), *and not undertake any work-related activity during this time”* could provide a stronger statement of intent and indication of support for workers, which could potentially lead to a behaviour change in this regard.

Research could be undertaken to investigate how a simple awareness campaign about the physical and mental health benefits of taking breaks could affect break-taking behaviour. The focus groups in this current research became unintentional interventions in themselves, and may provide one element of such research:

“...after having this... coming to this focus group now, it's something that I’ll be consciously trying to do ...” (Lucy, Focus Group 5)

Recognising the fact that there is not a simplistic binary position of ‘those that do’ and ‘those that don’t’ take breaks both within and between individuals would be helpful for future research. As with any arbitrary division of people into different groups, there is the risk of creating conflict and division (Tajfel & Turner, 1986). A more helpful position to adopt may be one that raises awareness of the importance of taking a break for health reasons (as well as it being a legal requirement), but one which also recognises that the pressures of work do not always allow the ideal situation where everyone takes a meaningful break every working day.

This research also indicates that the social and interpersonal aspects of taking breaks may be important in terms of influencing-break taking behaviour, with line manager and peer relationships being key factors. Future research could address the impact of how the behaviour of and relationships with these others affects break-taking behaviour. There is also an indication that the physical environment of a workplace affects how people think about taking breaks. Further research could measure how ‘break only’ areas during designated break times could impact on break-taking behaviour.

In conclusion, this research suggests that rather than being a simple phenomenon, taking breaks in the workplace is a complex interrelationship of behaviour and attitudes set within the physical environment and culture of organisations. It has provided insights that are useful for further research into workplace health and wellbeing. This in turn could lead to a practical set of actions that those responsible for workplace health and wellbeing, both at an organisational and national policy level, may wish to consider in order to change behaviour with regard to taking breaks in the workplace.

**References**

Baker, E. L. (1980). Managing organizational culture. *Management review*, *69*(7), 8-13.

Berger, R. (2015). Now I see it, now I don’t: Researcher’s position and reflexivity in qualitative research. *Qualitative research*, *15*(2), 219-234.

Bodin Danielsson, C., Chungkham, H. S., Wulff, C., & Westerlund, H. (2014). Office design's impact on sick leave rates. *Ergonomics*, *57*(2), 139-147.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, *3*(2), 77-101.

Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners*. sage.

Buckley, J. P., Hedge, A., Yates, T., Copeland, R. J., Loosemore, M., Hamer, M., ... & Dunstan, D. W. (2015). The sedentary office: a growing case for change towards better health and productivity. Expert statement commissioned by Public Health England and the Active Working Community Interest Company. Br J Sports Med, bjsports-2015.

Bupa. (2015). Take a break. Taken from: https://www.bupa.com/sharedcontent/articles/take-a-break

Burton, J., & World Health Organization. (2010). WHO healthy workplace framework and model: Background and supporting literature and practices.

Chastin, S. F., Mandrichenko, O., & Skelton, D. A. (2014). The frequency of osteogenic activities and the pattern of intermittence between periods of physical activity and sedentary behaviour affects bone mineral content: the cross-sectional NHANES study. BMC Public Health, 14(1), 4.

Cong, Y. J., Gan, Y., Sun, H. L., Deng, J., Cao, S. Y., Xu, X., & Lu, Z. X. (2014). Association of sedentary behaviour with colon and rectal cancer: a meta-analysis of observational studies. British journal of cancer, 110(3), 817-826.

Conn, V. S., Hafdahl, A. R., Cooper, P. S., Brown, L. M., & Lusk, S. L. (2009). Meta-analysis of workplace physical activity interventions. *American journal of preventive medicine*, *37*(4), 330-339.

Dahlgren, G., & Whitehead, M. (1991). Policies and strategies to promote social equity in health. *Stockholm: Institute for future studies*.

Dogra, S., & Stathokostas, L. (2012). Sedentary behavior and physical activity are independent predictors of successful aging in middle-aged and older adults. *Journal of aging research*, *2012*.

Dul, J., & Ceylan, C. (2011). Work environments for employee creativity. *Ergonomics*, *54*(1), 12-20.

Engel, G, E. (1980). The clinical application of the biopsychosocial model. *American journal of Psychiatry*, *137*, 535-544.

Fisher, R. J. (1993). Social desirability bias and the validity of indirect questioning. *Journal of consumer research*, *20*(2), 303-315.

Gilson, N. D., Burton, N. W., van Uffelen, J. G., & Brown, W. J. (2011). Occupational sitting time: Employees' perceptions of health risks and intervention strategies. *Health Promotion Journal of Australia: Official Journal of Australian Association of Health Promotion Professionals, 22*(1), 38-43.

Hamer, M., Coombs, N., & Stamatakis, E. (2014). Associations between objectively assessed and self-reported sedentary time with mental health in adults: an analysis of data from the Health Survey for England. *BMJ open*, *4*(3), e004580.

Hartfiel, N., Havenhand, J., Khalsa, S. B., Clarke, G., & Krayer, A. (2011). The effectiveness of yoga for the improvement of well-being and resilience to stress in the workplace. *Scandinavian journal of work, environment & health*, 70-76.

Hugh-Jones, S. (2010) The Interview in Qualitative Research. In M. A. Forester. Doing Qualitative Research in Psychology: A Practical Guide. London: Sage

Jans, M. P., Proper, K. I., & Hildebrandt, V. H. (2007). Sedentary behavior in Dutch workers: differences between occupations and business sectors. *American journal of preventive medicine*, *33*(6), 450-454.

Kazi, A., Duncan, M., Clemes, S., & Haslam, C. (2014). A survey of sitting time among UK employees. Occupational medicine, 64(7), 497-502.

Kivimäki, M., Virtanen, M., Elovainio, M., Kouvonen, A., Väänänen, A., & Vahtera, J. (2006). Work stress in the etiology of coronary heart disease—a meta-analysis. *Scandinavian journal of work, environment & health*, 431-442.

Lee, S. Y., & Brand, J. L. (2010). Can personal control over the physical environment ease distractions in office workplaces?. Ergonomics, 53(3), 324-335.

Le Vasseur, J. J. (2003). The problem of bracketing in phenomenology. *Qualitative Health Research, 13*, 408–420.

Martin, A., Karanika‐Murray, M., Biron, C., & Sanderson, K. (2016). The psychosocial work environment, employee mental health and organizational interventions: Improving research and practice by taking a multilevel approach. *Stress and health*, *32*(3), 201-215.

Mastercard/Ipsos-Mori. (2016). Is the lunch hour dead? 82% of working Brits typically don’t take a full one. *Mastercard Engagement Bureau*. Retrieved from: https://newsroom.mastercard.com/eu/press-releases/is-the-lunch-hour-dead-82-of-working-brits-typically-dont-take-a-full-one/

Meijer, E. M., Frings-Dresen, M. H., & Sluiter, J. K. (2009). Effects of office innovation on office workers' health and performance. *Ergonomics*, *52*(9), 1027-1038.

Michie, S., Atkins, L., & West, R. (2014). The behaviour change wheel: a guide to designing interventions. Great Britain: Silverback Publishing.

Miller, R., & Brown, W. (2004). Steps and sitting in a working population. *International journal of behavioral medicine*, *11*(4), 219-224.

Petersen, C. B., Bauman, A., Grønbæk, M., Helge, J. W., Thygesen, L. C., & Tolstrup, J. S. (2014). Total sitting time and risk of myocardial infarction, coronary heart disease and all-cause mortality in a prospective cohort of Danish adults. *International Journal of Behavioral Nutrition and Physical Activity*, *11*(1), 13.

Rest Breaks. The Working Times Regulations. (1998). Retrieved from: http://www.legislation.gov.uk/uksi/1998/1833/regulation/12/made

Rodham, K., Fox, F., & Doran, N. (2015). Exploring analytical trustworthiness and the process of reaching consensus in interpretative phenomenological analysis: Lost in transcription. *International Journal of Social Research Methodology, 18*(1), 59-71.Saldaña, J. (2011). *Fundamentals of qualitative research*. OUP USA.

Schilling, R. S. F. (1944). Industrial health research: the work of the industrial health research board, 1918-44. British journal of industrial medicine, 1(3), 145.

Sianoja, M., Syrek, C. J., de Bloom, J., Korpela, K., & Kinnunen, U. (2017). Enhancing Daily Well-Being at Work Through Lunchtime Park Walks and Relaxation Exercises: Recovery Experiences as Mediators.

Stand, J. (2000). The” Hawthorne effect”-what did the original Hawthorne studies actually show. Scand J Work Environ Health, 26(4), 363-367.

Stansfeld, S., & Candy, B. (2006). Psychosocial work environment and mental health—a meta-analytic review. Scandinavian Journal of Work, Environment & Health, 32(6), 443-462.

Tamim, H., Castel, E. S., Jamnik, V., Keir, P. J., Grace, S. L., Gledhill, N., & Macpherson, A. K. (2009). Tai Chi workplace program for improving musculoskeletal fitness among female computer users. *Work*, *34*(3), 331-338.

Tangney, J. P. (1990). Assessing individual differences in proneness to shame and guilt: Development of the self-conscious affect and attribution inventory. *Journal of Personality and Social Psychology, 59*(1), 102-111.

Tajfel, H., & Turner, J. C. (1986). The Social Identity Theory of Intergroup Behavior. Psychology of Intergroup Relations. Eds. S. Worchel and WG Austin. Chicago: Nelson.

Thorp, A. A., Owen, N., Neuhaus, M., & Dunstan, D. W. (2011). Sedentary behaviors and subsequent health outcomes in adults: a systematic review of longitudinal studies, 1996–2011. *American*

Vincent, S., & O'Mahoney, J. (2018). Critical Realism and Qualitative Research: An Introductory Overview. SAGE Handbook of Qualitative Research Methods, 36-78.

Wollseiffen, P., Ghadiri, A., Scholz, A., Strüder, H. K., Herpers, R., Peters, T., & Schneider, S. (2016). Short Bouts of Intensive Exercise During the Workday Have a Positive Effect on Neuro‐cognitive Performance. *Stress and Health*, *32*(5), 514-523.

Working Families. (2018). The Modern Families Index 2018. Retrieved from https://www.workingfamilies.org.uk/wp-content/uploads/2018/01/UK\_MFI\_2018\_Long\_Report\_A4\_UK.pdf

World Health Organization. (2014). Global status report on noncommunicable diseases 2014: attaining the nine global noncommunicable diseases targets; a shared responsibility. In *Global status report on noncommunicable diseases 2014: attaining the nine global noncommunicable diseases targets; a shared responsibility*.

**Table(s)**

**Table 1** Focus group details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Group** | **Number in group** | **Age** | **Gender** | **Grade within organisation** |
|  |  | **18-30** | **31-45** | **46-55** | **56+** | **F** | **M** |  |
| FG1 | 3 |  |  | 1 | 2 | 2 | 1 | All junior |
| FG2 | 4 |  | 1 | 3 |  | 2 | 2 | All senior |
| FG3 | 6 | 1 | 2 | 2 | 1 | 4 | 2 | All junior |
| FG4 | 8 | 1 | 5 | 2 |  | 7 | 1 | All middle  |
| FG5 | 6 |  | 1 | 5 |   | 3 | 3 | All middle |