

Australian Social Trends 2007

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ISSN 1321-1781

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SYMBOLS AND USAGES

billion 1,000 million kg kilogram m metre n.a. not available

n.e.c not elsewhere classified

n.p. not published n.y.a. not yet available

no. number '000 thousand '000m thousand million

\$ dollar

\$m million dollars \$b billion dollars \$US American dollar % per cent

* estimate has a relative standard error of 25% to 50% and should be used with caution

** estimate has a relative standard error of greater than 50% and is considered too unreliable for general use

.. not applicable

— nil or rounded to zero (including null cells)

Where figures have been rounded, discrepencies may occur between the sums of the component items and totals.

Work-related injuries

In 2005–06, men's work-related injury rate was 74 per 1,000 employed and women's rate was 51 per 1,000 employed.

Workplace injuries and illnesses range in severity and may cause short-term or long-term pain, disability or death. As well as the impact on their health, injured workers may also be absent from work, suffer loss of income or perhaps even lose their job.

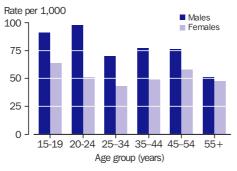
The costs associated with a work-related injury are not only borne by the worker, but also the employer and the community. Direct costs include medical expenses (hospitalisation, doctors visits and rehabilitation), legal costs, and the cost of hiring a replacement worker. Indirect costs include lost output due to reduced productivity, reduced staff morale, and the administration of workers' compensation claims.¹

Injured workers

Of the 10.8 million Australians who worked sometime in the 12 months to June 2006, 6.4% (690,000 people) experienced at least one work-related injury or illness. The work-related injury rate for this period was 64 per 1,000 employed.

More men (438,000) than women (252,000) experienced a work-related injury in 2005–06, partly reflecting men's higher level of employment. Men also experienced a higher injury rate – 74 per 1,000 employed men compared with 51 per 1,000 employed women. Differences in the types of jobs held by men and women, such as differences in occupation and industry, may explain the differences in injury rates. Generally, fewer women work in professions that consistently have high numbers of injuries or illnesses.²

Work-related injury rates(a): sex and age — 2005–06



(a) Injured workers per 1,000 people who worked sometime in the 12 months to June 2006.

Source: Work-Related Injuries, Australia, 2005–06 (ABS cat. no. 6324.0).

Data sources and definitions

This article draws on work-related injuries data collected in the ABS Multi-Purpose Household Survey. The survey collected information on the most recent work-related injury experienced by people aged 15 years and over, living in private dwellings (but excluding people living in very remote parts of Australia) who worked sometime in the 12 months to June 2006.

A work-related injury is any injury, illness or disease which first occurred in the 12 months prior to interview, where a person suffered either physically or mentally from a condition that arose out of, or in the course of, employment. Included are work-related injuries that occurred while commuting to or from work, outside of work but while on work duty, or during work breaks. Excluded are work-related injuries that resulted in death prior to interview and injuries suffered by workers residing as patients in hospital at the time of interview.

Types of injuries or illnesses and how these occurred have been classified based on the *Type of Occurrence Classifications System (TOOCS)*, which was developed by the Office of the Australian Safety and Compensation Council (ASCC) for use in coding workers' compensation claims.

An *injured worker* is a person who worked sometime in the 12 months to June 2006 and experienced a work-related injury or illness during that period. The injury may have occurred in the current job or in a previous job.

Injury rates for all employed persons and for those by sex, age, and state or territory are calculated by dividing the number of injured workers by the number of people employed (in that group) sometime in the 12 months to June 2006.

Injury rates for all other groups are calculated by dividing the number of injured workers by the number of people employed (in that group) at the time of interview.

...age

Studies have shown that younger workers sustain work-related injuries at higher rates than older workers. Factors contributing to this include their employment in industries with high injury rates (such as service and retail), possible lack of awareness of work safety, inexperience on the job, and lack of adequate training.³

In 2005–06, workers aged 15–19 years experienced an injury rate of 78 per 1,000 employed, while those aged 20–24 years experienced an injury rate of 75 per 1,000. Young men, aged 20–24 years, experienced

the highest work-related injury rate of any age group. Their injury rate was 98 per 1,000 employed men, in contrast to women of the same age who experienced an injury rate of 51 per 1,000 employed women (aged 20-24 years).

Older workers, aged 55 years and over, experienced the lowest work-related injury rates - 50 per 1,000 employed. Unlike all of the younger age groups, the injury rates for men and women in this age group were similar.

...full-time and part-time work

Full-time workers experienced a higher work-related injury rate (73 per 1,000 employed) than part-time workers (60 per 1,000). Men who worked full-time had the highest injury rate, 81 per 1,000. Women reported similar injury rates for both full-time and part-time work, 55 and 57 per 1,000 respectively.

The highest injury rate among men was experienced by those working 41–49 hours per week (92 per 1,000 employed). Among women, those working 50 or more hours per week had the highest injury rate (75 per 1,000).

...industry

People working in industries involving physical work were at higher risk of experiencing a work-related injury. In 2005-06, the industries recording the highest injury rates were Agriculture, forestry and fishing (109 per 1,000 employed), Manufacturing (87 per 1,000), and Construction (86 per 1,000). These higher risk industries were typically male dominated. Industries with the highest work-related injury rates for men were Agriculture, forestry and fishing (128 per 1,000 employed men), Personal and other services industries (101 per 1,000), and Manufacturing (98 per 1,000). Almost two-thirds (65%) of men working in Personal and other services industries worked for Public order and safety services (includes Police services).

Industries with the highest work-related injury rates for women were Accommodation, cafes and restaurants (98 per 1,000 employed women), Health and community services (71 per 1000) and Retail (70 per 1,000). Health and community services was also represented in the top five injury rates for men, 96 per 1,000 employed.

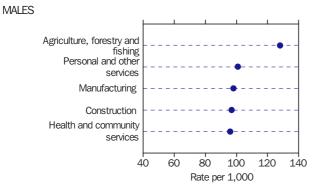
Types of injuries sustained by workers varied across industries. Sprains or strains represented the highest proportion of injuries for workers in Retail trades (36%) and Transport and Storage (34%). Cuts or open wounds accounted for the highest proportion of injuries for workers in Electricity, gas and water supply (52%) and Mining (42%).

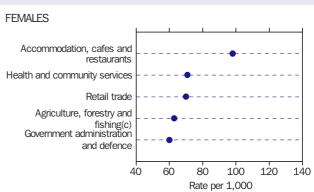
...occupation

In 2005-06, occupation groups with the highest injury rates were Intermediate production and transport workers (108 per 1,000 employed), Tradespersons and related workers (107 per 1,000) and Labourers and related workers (106 per 1,000). These three occupations accounted for more than two-fifths (45%) of all injured workers, yet represented only 29% of all employed persons.

Many occupations within these groups involve physical work, possibly contributing to their higher injury rates. The Intermediate

Work-related injury rates(a) by industry(b) — 2005–06

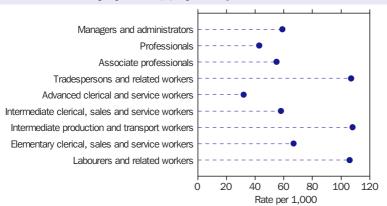




- (a) For any industry group, the work-related injury rate is the number of injured workers divided by people currently employed in that industry (in their main job).
- (b) Industries with more than 5,000 injured workers.
- (c) Estimate has a relative standard error of 25% to 50% and should be used with caution.

Source: Work-Related Injuries, Australia, 2005-06 (ABS cat. no. 6324.0).

Work-related injury rates(a) by occupation — 2005-06



(a) For any occupation group, the work-related injury rate is the number of injured workers divided by people currently employed in that occupation (in their main job).

Source: Work-Related Injuries, Australia, 2005-06 (ABS cat. no. 6324.0).

production and transport workers occupation group includes Intermediate plant operators, Intermediate machine operators, and Road and rail transport drivers. Tradespersons and related workers includes Mechanical and fabrication engineering tradespersons, Automotive tradespersons and Construction tradespersons. Labourers and related workers includes Cleaners, Factory labourers, and Agricultural and horticultural labourers.

Professionals experienced one of the lowest injury rates (43 per 1,000 employed). This group includes Science, building and engineering professionals, Business and information professionals, Health professionals and Education professionals.

The highest work-related injury rates were experienced by men working as Labourers and related workers (117 per 1,000 employed) and Intermediate production and transport workers (116 per 1,000). Women who experienced the highest injury rates worked as Labourers and related workers (87 per 1,000 employed) and Elementary clerical, sales and service workers (74 per 1,000).

More than one-third (37%) of injured Intermediate production and transport workers and one-quarter (25%) of injured Labourers and related workers experienced a sprain or strain as their most recent work-related injury. The most common injury experienced by Tradespersons and related workers was a cut or open wound (33%).

In most occupations the action of lifting, pushing or pulling an object was responsible for the highest proportion of injuries. However, for Managers and administrators and Tradespersons and related workers, hitting or being hit or cut by an object was the cause of most injuries sustained.

Work-related fatalities in Australia

The most severe type of work-related injury or illness is one that results in death. In 2003–04 there were 332 people who died in Australia as a result of work-related injuries. This equates to a rate of 3.5 per 100,000 employed people.

More than two-thirds (68%) of fatalities resulted from injuries sustained while working for income, with one-third (33%) of these involving a road crash. More than one-quarter (27%) of deaths were attributed to commuting workers. The highest number of work-related deaths was recorded for the Agriculture, forestry and fishing industry (72 or 22%), followed by Transport and storage (62 or 19%) and Construction (52 or 16%).

The number of work-related fatalities may vary over time, due to adjustments to figures which occur when workers who have been seriously ill or injured fail to recover. Some illnesses, for example asbestosis, have a long latency period, leading to difficulty in estimating the true number of fatalities.⁴ Additionally, not all work-related deaths result in a claim for compensation, so the total number of fatalities may be higher.

Source: Australian Safety and Compensation Council, 2006. Estimating the number of work-related traumatic injury fatalities in Australia 2003–04, viewed 6 July 2007, http://www.ascc.gov.au/.

Most recent work-related injury

The types of injuries and illnesses that are now common are different from those that were common a few decades ago. Changes in workplace technology have led to an increase in musculoskeletal disorders, as workers use different equipment and different motions. For instance, the overuse of personal digital devices has led to sprained thumbs becoming more common.⁵

While office work may seem relatively low risk, there are a number of health issues that can be attributed to the use of computers. Awkward or stationary postures may lead to back or neck pain, and repetitive tension or motion, such as mouse work, may lead to strain injuries. Glare or inadequate lighting may result in eye fatigue, blurred vision or headaches.

In 2005–06, the most commonly reported injuries sustained were sprains or strains of joints and adjacent muscles, comprising almost one-third (30%) of work-related injuries. The next most commonly reported injuries were cuts or open wounds and chronic joint or muscle conditions (both 19%). Of those workers who experienced a work-related injury or illness, similar proportions of both men and women reported sprain or strain injuries (both 30%). Cuts or open wounds were more common for men (22%) than women (14%), while chronic

ioint or muscle conditions were more common among women (23%) than men (16%). Almost two-fifths (38%) of young workers aged 15-24 years, who experienced a work-related injury or illness, reported a cut or open wound as their most recent work-related injury. In contrast, sprains or strains were the most common injury for all other age groups.

...how occurred

Work-related injuries occurred in a variety of ways, the most common resulting from lifting, pushing or pulling an object (32%). Hitting or being hit or cut by an object accounted for more than one-quarter (27%) of injuries, with a higher proportion of men who experienced a work-related injury or illness reporting injuries resulting from hitting or being hit or cut by an object than women (31% compared to 19%).

Women who experienced a work-related injury or illness reported a higher proportion of injuries resulting from repetitive movement Just over one-in-two (58%) work-related injuries involved some time away from work, with the amount of time varying with the type of injury sustained. Just over one-fifth (21%) of injured workers were away from work for

than men (11% and 6% respectively). Women

men (15% compared to 11%).

...time off work

also reported a higher proportion of falls than

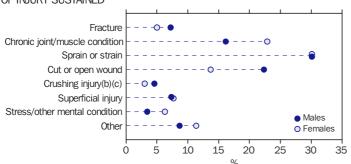
1-4 days, over one-quarter (28%) for five or more days and a small group (2%) had not returned to work since the injury or illness occurred.

Injuries that resulted in large periods of time away from work included stress or other mental conditions and fractures. About half of the people who reported stress or other mental conditions (51%) and those who sustained fractures (48%) took five or more days off work. In contrast, almost three-quarters (73%) of people who sustained a superficial injury and almost half (47%) of those who sustained a cut or open wound required no time off work.

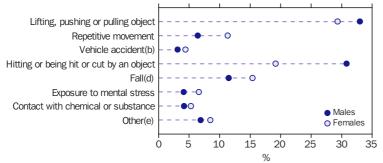
One in seven (14%) injured workers had ceased the job in which they experienced their most recent injury or illness. Of these, more than one-quarter (29%) ceased their jobs as a result of the injury or illness.

Most recent work-related injury(a) — 2005-06

TYPE OF INJURY SUSTAINED



HOW INJURY OCCURRED



- (a) People who worked sometime in the 12 months to June 2006.
- (b) Female estimate has a relative standard error of 25% to 50% and should be used with caution.
- (c) Includes 'Internal organ damage' and 'Amputation'.
- (d) Includes 'Fall on same level (slip or fall)' and 'Fall from height'.
- (e) Includes 'Prolonged standing or working in cramped or unchanging positions' and 'Long term

Source: Work-Related Injuries, Australia, 2005-06 (ABS cat. no. 6324.0).

The cost of work-related injuries

A work-related injury may involve a number of costs, including loss of income, medical expenses, and lost productivity. There may also be compensation for reduced quality of life or the treatment of a long-term injury or illness. In some cases, there may also be legal fees, investigative costs or fines and penalties.1

Estimating the total cost of work-related injuries is difficult, as workers' compensation data generally only include the number of accepted (paid) claims. Injuries resulting in a short absence from work or no time off are unlikely to result in a compensation claim. This is particularly true for certain types of working arrangements, for instance self-employed or casuals, and some industries, such as Agriculture or Construction.1

In 2004, the National Occupational Health and Safety Commission (NOHSC) estimated that the ABS Australian National Accounts estimates for workers compensation payments to households represented 22% of the total costs of work-related injuries in 2001-02, with indirect costs such as lost productivity, loss of income and quality of life comprising the remainder. Assuming that the composition of total costs has remained at a similar level since 2001–02, the total cost of work-related injury for the financial year 2005–06 would be at least \$34.9b (based on an estimate of \$7.8b in workers compensation payments to households in 2005–06). ^{1.6} This figure does not include provision for the compensation of pain and suffering and early death.

Sources of financial assistance

In 2005–06, there were 392,700 (57%) injured workers who received some type of financial assistance to cover medical expenses or income loss. More than half (55%) of these people received workers' compensation, while almost one-quarter (23%) received financial assistance through regular sick leave from their employer.

Injured workers who were absent from work for five days or more represented a large proportion (82%) of those who received financial assistance. More than four-fifths (82%) of people who had not returned to work since the illness or injury occurred had received financial assistance.

Most injured workers (96%) who did not receive any financial assistance had not applied for workers' compensation. The main reason they did not apply for workers' compensation was that it was a minor injury only or compensation was not considered necessary.

Endnotes

- 1 National Occupational Health and Safety Commission, 2004, The cost of work-related injury and illness for Australian employers, workers and the community, NOHSC, viewed 21 February 2007, https://www.ascc.gov.au/.
- 2 Hoskins, AB 2005, 'Occupational injuries, illnesses and fatalities among women', *Monthly Labor Review*, vol. 128, no. 10, pp. 31–37.
- 3 Breslin FC, Smith P, Koehoorn M and Lee H, 2006, 'Is the workplace becoming safer?', *Perspectives on Labour and Income*, Statistics Canada, cat. no. 75-001-XIE, pp.18–23.
- 4 Victorian Department of Human Services 2007, Fact sheet: Asbestos and your health, Better Health Channel website, viewed 3 April 2007, http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Asbestos_and_your_health?open>.
- 5 Wiatrowski, W 2005, 'Occupational safety and health statistics: New data for a new century', Monthly Labor Review, vol. 128, no. 10, pp. 3–10.
- 6 Australian Bureau of Statistics 2006, *Australian System of National Accounts 2005–06*, cat. no. 5204.0, ABS, Canberra.

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