# SPECIAL REPORT

# The Community strategy 2007-2012

# A trip on a UFO

The Commission Communication on the Community health and safety at work strategy for the period 2007-2012 received short shrift from the unions. "The Commission's general approach seems to view occupational health primarily as a variable of the productivity and competitiveness of businesses", lamented the European Trade Union Confederation in a press release.

Laurent Vogel goes further in his forensic analysis of the Commission text published here to claim that, "Productivity seems to have become an end in itself and the basis for legitimating any social policy". On top of that particular political spin, the ETUI-REHS researcher catalogues a string of other failings in the new Community strategy, singling out the failure to mention the importance of workers taking part in implementing prevention policies, and stripping away the labour inspectorate's policing and enforcement responsibilities to reduce it to a business services agency.

The failure to mention REACH's potentials for improving workers' protection from chemical hazards and the scant attention paid to tackling work-related illnesses evidence the yawning gulf that seems to divide the European establishment from workplaces. It is as if the authors of the Commission document had been whisked off on a flying saucer for a long trip a million miles from Earthbound factories, assembly lines and building sites.

And yet European policy-makers have enough surveys, figures and other statistics at their fingertips. The working conditions survey done by the Dublin Foundation among 30 000-odd European workers, for instance, whose key findings we report on here. They make uncomfortable reading, and offer a tiny glimpse of what work intensification means for the health of millions of workers. The figures

 35% of European workers say their work is making them ill – give the lie to the Commission's favoured rhetoric that quality and productivity at work go hand in hand.

The analysis of the findings of the ETUI-REHS's survey on labour inspection systems in Europe unfortunately brings no ray of hope to the gloomy picture on working conditions. Laurent Vogel finds a growing gap between labour inspectorate responses, still very largely focused on work accidents, and the challenges posed by preventing occupational illnesses, which are now the foremost cause of work-related deaths.

These findings, and our complaints about them, are not just directed to the European authorities.

We also want the trade unions to take them on board, in the hope that they will see them as an invitation to take a longer, harder look at their own health and safety at work strategies.

# A critical look at the health and safety at work strategy 2007-2012

The Commission Communication on the Community HSW strategy for 2007-2012 was given a rough reception by the trade unions. The union criticisms were anything but a simple hissy fit, and raise big questions about the conditions for an effective preventive strategy. Most of these questions go to national strategies as much as the Community strategy. They are not just about where other actors and institutions may be going wrong. They also point to the need for the trade union movement to take a hard look at its own health and safety at work strategy.

# The need for a Community strategy

Along with equality of opportunity for men and women, health and safety at work has been one of the most vigorous areas of Community social policy intervention. The score of directives adopted in the field have helped bring on what are often major reforms in all European Union countries. These are important gains that need defending against employers' and some governments' attempts to roll them back in different and sometimes shambolic ways that all amount to deregulation. These gains will not be defended by turning a blind eye to the real failings of Community health at work policies. The Community directives do a vital job in providing a common frame of reference for the different EU states. But they are not enough to automatically level working conditions upwards.

Some failings are inherent to the legislation. Directives are compromise laws, and so may be not absolutely internally-consistent and contain provisions that can be interpreted and applied in very different ways. This is a constraint that any Community social policy has to work within. Damage limitation is the only option, as the current balance of political power offers no prospects for radical improvements.

But the main problem is not with the legislation itself. The experience of the past fifteen years has shown that even the most coherent and ambitious laws are not enough, because they have to operate in a conflict situation – that of labour relations.

Their application is heavily conditioned by two sets of factors:

- the social dynamics of workplaces and society. No improvement in working conditions ever comes from a simple "top down" reform – it has to be driven by collective action of the workers themselves;
- an institutional dynamic, which is about the public authorities defining and implementing a coherent strategy<sup>1</sup>.

The pursuit of a Community HSW strategy stems from the broad consensus that Community legislation must be backstopped by exactly that institutional dynamic, both at EU level and in each State. It is not about setting the non-legislative instruments of such a dynamic against existing or future legislation. Rather, it is a concern that the directives should be a more effective means of levelling-up working conditions that makes the case for a set of non-legislative measures which could help deliver that objective.

# What is a strategy?

"Strategy" has become a buzz-word. It has long since left the theatre of war to permeate countless other spheres. It describes an action that draws together a set of measures in an articulated and coherent way to achieve specific ends. You can have a love strategy as much as a business strategy. Medical research has gone so far as to attribute strategy to viruses. A strategy requires there to be at least a clear definition of the objectives to be attained, deployment of appropriate means, consistency of means, mechanisms for evaluating and if need be correcting what was done in a given period.

For health and safety at work, it is essential to start from a detailed situation evaluation and plan the activity of the different participants who make up a preventive system<sup>2</sup>. Even using the most token definition, it takes a big stretch of the imagination to see the Communication put forward by the Commission as a strategy.

It contains a jumble of ideas, a few mostly vaguely-worded proposals, often conflicting objectives lumped together, almost nothing by way of a timetable, very little about the available means, and a big gap where the evaluation mechanisms should be. Like many Community texts, the document's internal logic is focused on looking for a wording that will set no backs up, or at least, in which everyone will be able to find what they are looking for. Failing that, there is always coining new hybrid

<sup>&</sup>lt;sup>1</sup> For a comparative analysis, see D. Walters (ed.), Regulating health and safety management in the European Union: a study of the dynamics of change, Brussels, P.I.E., Peter Lang, 2002.

<sup>&</sup>lt;sup>2</sup> Of particular interest is J.L. Castellá, Guía de introducción a los Sistemas Nacionales de Seguridad y Salud in el Trabajo, ILO, 2002.

terms like "flexicurity" in the hope of keeping everyone happy!

The Communication blazons individual well-being, business productivity and profits, balance between work and other aspects of life, flexibility and security, and a string of other promises of a glorious future in a Brave New World. The future European society looks like a hen house that offers bliss to both fox and hens. It is what is known as a "win-win-win" scenario – what advertisers use to persuade us that buying a particular car clearly helps protect the environment.

But until the foxes turn vegetarian, there is a need to set objectives and provide means that take into account the real conflict of interests in which health and safety at work fits. It is a bizarre fate for the word "strategy" – evolved in warfare situations – to describe a set of ideas and actions that deny the existence of conflict. Whenever the Communication touches on the compatibility of entirely disparate objectives, it simply cites examples of "virtuous circles". So, "the lack of effective protection to ensure health and safety at work can result in absenteeism in the wake of workplace accidents and occupational illnesses, and can lead to permanent occupational disability. This not only has a considerable human dimension, but also has a major negative impact on the economy". Not that this is wrong, but the reality is much more complex. Some forms of health damage incur no financial loss to firms, others only short- or long-term losses, etc. The linkage between health and safety at work, and workplace absences is less straightforward than the Commission intimates.

This aim to reconcile conflicting interests and objectives turns to farce when the Communication tackles the gender equality issue. The Commission wants equality... to increase women's productivity! It says that, "Inequality both inside and outside the workplace can have an effect on the health and safety of women at work and thus have an impact on their productivity". Productivity seems to have become an end in itself and the basis for legitimating any social policy. It is an approach which conveniently forgets that the unequal distribution of unpaid work also plays into the productivity of men's work.

# General objectives: quality and productivity

The Communication defines a very wide array of objectives. But at no point does it examine how they stack up against each other. Are they at crosspurposes? How far can they be reconciled? Where are compromises needed? These questions are dodged.

The very title of the Communication is telling: "Improving quality and productivity at work: Community strategy 2007-2012 on health and safety

at work". The strategy is therefore summarized by two objectives from which the very word "health" has been airbrushed out. The concept of "quality of work" could not be more vague. It can signify many different things: quality of life at work, quality of the end product, quality of the work process as the best fit between corporate goals and work organisation (this is the direction generally taken by quality-related standards<sup>3</sup>), etc. And productivity can be seen as pulling in opposite directions on multiple levels (individuals, firms, societies, etc.).

What is the linkage between productivity and health and safety at work? The question is anything but straightforward. This report lays no claim to analyse its different facets, but it can be said that there are different ways of boosting productivity, and that the health impact of these different ways can be infinitely variable. Defining a health and safety at work strategy by starting out from the premise that it is about increased productivity begs several questions. It may be just a soundbite phrase to placate employers' concerns. It may be a self-imposed restriction: health is to be improved only to the extent that the improvement also enhances productivity. Or it may be a criterion for the choice of priorities and concrete policies to be implemented.

The Communication is never specific about the connection between productivity and health and safety at work. Magpie-like, it simply stacks the two objectives together. The choice of work accidents as the main indicator of the outcomes to be achieved may imply that the immediate, visible costs to business are given priority over long-term health damage. A thorough discussion of the economic aspects of health and safety at work would obviously be useful to help go beyond the empty spin that automatically ties prevention to competitiveness.

# What priority areas?

The Communication defines a set of priority areas for action focused on six main elements:

- strengthening implementation of Community legislation:
- encouraging the development and implementation of national strategies;
- promoting changes in behaviour;
- confronting new risks;
- assessing progress made;
- promoting health and safety at international level.

This kind of salami-slicing is no help in getting clearly-defined, specific objectives. It does not start out from an analysis of the current situation and the problems it poses. The Communication was structured according to the Commission departments' internal concerns. Each element is defined in sufficiently vague terms to become a dumping ground for a rag-bag of disparate objects. It is a classic example of "cut and paste": chunks of text from a

<sup>&</sup>lt;sup>3</sup> Economists point to the potential incompatibility of company managements' quality goals with health and safety at work. "Quality of work" as conceived by business managers is not automatically four-square with workers' quality of life at work. There is neither a virtuous nor a vicious circle. Everything depends on the social conditions in which the work organisation is set. See: Ph. Askenazy, E. Caroli, New Organizational Practises and Well-Being at Work: Evidence for France in 1998, LEA Working Paper 03-11, 2003.

wide range of sources are lumped together with no overall approach that clearly defines the priorities. The result is more of a long list than a coherently-defined policy.

What makes this worse is that the Communication seems to stand almost outside time. It mainly reflects internal box-ticking approaches: demarcating the dividing lines between the different Commission departments, determining the instruments used, avoiding conflicts with Member States, etc. As a result, it puts the biggest focus on parroting forms of words that get repeated from one document to another, giving the appearance of a strong consensus. What the Communication does not do is to situate the strategy in a specific context. It allbut ignores the implementation of REACH (a major reform that gets only a single mention in a relatively secondary point on labour inspection). Nowhere does it mention the challenges posed by Community enlargements, even though the last European working conditions survey (2005) highlights the wide gaps between national situations<sup>4</sup>.

# The issue of Community legislation

The first element relates to the legislative framework. Each term has been weighed in the balance to avoid having to take a clear stand on the debate on the role of Community legislation that has been raging for nigh-on fifteen years. Each paragraph is constructed to be a sop to deregulationists without caving in completely. There is no problem with such a drafting exercise on paper. The big "if" is whether it can drive a coherent policy.

Optimists will point to the Commission's pledge to enforce Community legislation and its exhortation to Member States to pay attention to this matter. It announces that practical guidance will be produced. Pessimists will wonder about the repeated heralding of legislative simplification, the reference to "unnecessary administrative charges" that legislation allegedly places on business. The real policy choices are shelved.

Looking at the concrete initiatives announced in this part of the Communication, a number of useful proposals and some major ambiguities stand out.

Strengthening the implementation of Community legislation is an absolute must in a situation where the gaps between extremes are steadily widening. Subcontracting where there is no coordination between the different employers is a big problem. Preventive services in Europe today are another core issue. The Communication rightly emphasizes both. But it does so inconsistently by deciding from the outset that Community action will be confined to a possible recommendation. The logical thing would have been to take stock of what has happened with a soft law instrument like a recommendation in a

field like health and safety at work. It has not been the most edifying of experiences.

The Commission then calls for greater co-operation between labour inspection bodies. This part of the Communication contains a few positive approaches, especially on the need for market surveillance, environmental policy and labour inspection to work in concert. Here again, the Communication seems to want to stick to its "something for everyone" policy. On the one hand, it emphasizes the importance of labour inspection and offers proposals for improved European co-operation, while on the other, it defines the role of labour inspection in terms that could turn it into anything but a health and safety enforcement authority. In the list of what it expects of national strategies, it cites the "involvement of labour inspectors as intermediaries to promote better compliance with the legislation in SMEs, primarily through education, persuasion and encouragement, then, where necessary, through coercive measures".

The Communication then addresses the future development of Community legislation. Once again, it performs a balancing act, with sops all round but no assessment whatever of real needs. The Communication says that Community legislation will be simplified. In so doing, it clearly ties the debate into a firmly deregulationist frame of reference focused mainly on reducing paperwork for business. Here again, there should have been a specific analysis of the health and safety at work issues<sup>5</sup>. But no. From the 1980s onwards, the Community legislative approach has been to focus on implementing systematic, planned management of health and safety at work problems. Rather than reacting to hazards as they arose, it rightly called for health and safety requirements to be given weight in all company decisions. That kind of approach requires appropriate resourcing. It entails essential "administrative costs". Political pressure from some Member States is trying to push it in a different direction. The Netherlands, the United Kingdom and Denmark in particular have mounted a barrage of opposition to these "administrative costs". But they have offered not the slightest credible alternative to the implementation of systematic, planned management of health and safety at work problems<sup>6</sup>. In its Communication, the Commission is careful not to say exactly what it will do on the simplification front, for it knows full well that it is an exercise which could undermine the entire edifice of Community health and safety legislation.

Future legislative measures are announced in the most diffident terms. The Commission says it will "continue its work, through the ongoing consultations with the social partners, to find ways of improving risk prevention with regard to musculoskeletal disorders, carcinogens and needlestick infections". Movement on the two biggest issues (carcinogens and musculoskeletal disorders) has been stalled for

- <sup>4</sup> Critically discussed from an analysis of the situation in Lithuania by Charles Woolfson and Dace Calite, New European Community Strategy for Health and Safety: The elephant in the room, *International Journal of Occupational and Environmental Health*, vol. 13, 2007, p. 342-355.
- <sup>5</sup> We have been here before. The very first issue of this Newsletter looked at the inconsistency of the deregulationist case in an article on the Molitor report. That was back in October 1995. Since then, the report has sunk into oblivion, but the case it built, with slight variations in the words, lingers on in most of the documents subsequently produced by the health and safety deregulation lobby.
- <sup>6</sup> See the special report: The Community strategy at mid-term, *TUTB Newsletter*, No. 26, December 2004, p. 17-30. Downloadable from http://hesa.etui-rehs.org > Newsletters.

years. The Commission no longer even dares utter the word "directive" despite it featuring in the strategy for 2002-2006. So the Commission will continue its work between 2007 and 2012, but will it ever complete it? After five years of fudging the issue, it could have given a clearer statement of what "ways" it plans to "find".

On chemical hazards, the Commission simply flags up a third list of indicative exposure limits, as well as the possible revision of the Carcinogens Directive. Hardly a far-reaching programme. The third list is ready, and adopting it will do nothing to make good the huge delay in defining exposure limits at EU level. There is also nothing to say that the Commission will adopt all the health criteria-based exposure limits put forward by the Community's Scientific Committee (SCOEL). Think only of what happened back in 2006 when the second list of indicative exposure limits was up for adoption – the Commission caved in to industry pressure and dropped the exposure limits for nitrogen oxide and nitrogen dioxide (NO and NO<sub>2</sub>).

The Commission draws no conclusion from the implementation of REACH, and so has likely forfeited an important opportunity to strengthen the prevention of chemical hazards in workplaces. Specifically, the role of the European Chemicals Agency is passed over in silence. And yet, a coherent policy on chemical hazards would require organised cooperation between those concerned with health and safety at work and the bodies responsible for implementing REACH. Clarification is needed in several areas, like the link to be made between occupational exposure limit values in workplaces and the idea of no-effect exposure levels that will be worked out by the chemical industry.

# **National strategies**

The Communication then moves on to the key issue of national health and safety at work strategies. It recommends a method that it would have done well to apply to its own work: "These strategies should be defined on the basis of a detailed evaluation of the national situation, with the active participation and consultation of all interested parties, including the social partners."

The proposals on national strategies centre around four material things: health surveillance, the rehabilitation and reintegration of workers excluded from the workplace by health problems, taking account of social and demographic change, and strengthening coherence between health and safety at work policy and other policies like public health, regional development, employment and restructuring, and public procurement.

It is regrettable, however, that the first three of these four points do not really interface with Community initiatives. Health surveillance is particularly crucial if the strategy's outcomes are to be evaluated with wider-ranging data sets than just work accident figures.

The fourth thing – coherence between health and safety at work policy and other policies – significantly omits two big things: internal market and enterprise policy, and environmental policy. Such an unambitious wording reflects the degree to which health and safety at work policy is seen as marginal compared to other European policies. Something which was very clearly to be seen in the debates around REACH.

# Change attitudes or promote a social dynamic?

That part of the Communication on changing attitudes is packed with ambiguities and contradictions. Its glimmerings of positive signs are swamped in forms of words which could result in policies that would work against any form of coherent strategy. The Commission takes great care not to define its own role here, but simply exhorts a series of other parties to do things. Truth to tell, it is a failing wide-spread in the Communication. The Commission is more often found saying that it will encourage other parties to do something than to set itself something to do.

This part lumps together two spheres of activity that have no direct connection other than a general political shibboleth of the "culture of risk prevention". The first focuses on training in health and safety for pupils and students in all levels of education, as well as employers and workers. The Commission is contemplating a recommendation on health and safety training in all training policies.

No-one doubts the importance of training. But it has to address the real needs. Technical training focused on risks fails to address the key issue of how companies operate. A series of surveys done among young workers injured in serious accidents clearly show that lack of technical training is not necessarily the biggest factor. Workers' lack of control of working conditions due to the employer's right of control of employees is what in many cases acts to neutralize the real knowledge that workers have about what prevention requires<sup>7</sup>. There is often a huge gap between theory training in a school or college and the reality of workplace labour relations characterised by a lack of democracy, job blackmail, pressure for more productivity, etc. These situations are much worse for contingent workers. They are part of the reason for the very critical plight of temporary agency workers, regardless of the level and standard of their training.

Instead of calling for a change in attitudes by reference to a culture of risk prevention seen as a sort of

<sup>&</sup>lt;sup>7</sup> See, in particular, D. Cru, N. Frigul, P. Clappier & A. Thébaud-Mony, La construction sociale de l'accident de travail chez les jeunes : formation aux risques du travail et vécu de l'insertion professionnelle à la sortie du système de recherche, Paris, Ministry for Education, 1995.

individual mind-mapping, the Community strategy ought to be addressing the work-related obstacles to prevention, especially flexibility and insecurity.

The second part of this "cut and paste" job is to call for the creation of "healthier and safer work-places". The idea is to persuade business that it can become more competitive by encouraging workers "to adopt lifestyles which improve their general state of health".

The emphasis on lifestyles bespeaks an individualistic, often moralising approach to health problems that is often only a pale secular rationalisation of the religious conception of ill-health as a punishment for individual sins. The social determinants of health are swept aside. Public health is reduced to interventions to persuade individuals to "manage" their health as carefully as an investor would his share portfolio. The key issue of social inequalities of health is given a back seat.

Also, giving business a mission in this field based on its profit potential is dangerously inappropriate on three counts:

- it may undermine the collective prevention of work hazards. A recent debate among Dutch occupational doctors discussed the question<sup>8</sup>, "What to do if an economic analysis shows that the costbenefit ratio of intervention on individual behaviours like drinking or smoking is more favourable than replacing carcinogens in the workplace?" Not a few doctors argued that in such a case, intervention on the so-called individual factors would take priority;
- it invests the company with a mission that may impinge on workers' private lives. The European Commission's fudge over employment discrimination against smokers is indicative of the danger of giving employers a greater say over aspects of workers' personal lives<sup>9</sup>. There have been many cases of abuse over testing for illegal drug use and discrimination on health grounds;
- it may distort public health policies by allowing them to be enforced by actors with aims different to public health objectives.

The final part of this section holds a major surprise – probably an unintended consequence of cobbling patchy texts together. While the issue of workers' representation is omitted in every part of the Communication where it should logically have been found, it suddenly pops up in the actions called for at the bottom of the paragraph on "health". The aim is far-reaching: "To ensure that workers' representatives are given a greater coordinating role in the systematic management of occupational risks". This objective is clearly contradicted by the recommended level of action. The Commission simply calls on trade unions and employers' organisations to address the matter in the context of the "sectoral social dialogue". It does not take rocket science

to foresee that in so inappropriate a framework for such an issue (which has nothing sectoral about it!), nothing will happen...

The most rational explanation for this incongruity is that the total omission of workers' representation in health and safety must have struck one of the officials involved in drafting the text as glaringly odd. The disembodied phrase must have been cannibalized from another text lying around on his computer hard drive. And this hapless phrase must have been bounced around between paragraphs before finally landing in the least logical place possible. And yet, the issue involved would have borne serious analysis. Countless workers in Europe have no representation in health and safety. And the existing representation bodies are often under-resourced (training, information, access to expertise, right of co-decision or unilateral initiative, etc.) to do their job properly. This seriously inhibits prevention.

# Identifying new risks and promoting mental health

This part of the Communication "patches together" two points. One is on identifying new risks and rightly calls for a bigger fundamental and industrial research focus on work-related health problems. Here, the Communication lumps hazards like dangerous substances and musculoskeletal disorders together with new risks like those related to nanoparticles.

The other point is that of promoting mental health at work. This is surely a good thing. But the Commission sets itself no concrete tasks. It passes the buck to Member State and social partner initiatives.

The Commission flags up no specific measures in this part. It merely encourages other parties (the Bilbao Agency, Member States and social partners) to do something.

# **Evaluating progress made**

Any coherent strategy requires the means for regular evaluation. And evaluation has been one of the weakest points of Community policies in this field so far.

The Communication proposes various measures for improving the collection of information, chiefly through Community instruments – especially Eurostat statistics on work accidents and occupational illnesses – but also exchanges between national information systems.

The measures called for seem poor or too ill-defined to plug the vast gaps that are clear to see. The only statistics in any way usable for comparison (with significant caveats) are those on reported work

- <sup>8</sup> A debate attended by the author at the conference organised by the Netherlands Society of Occupational Medicine in Arnhem on 23 May 2007. The debate centred around the application of the new Community strategy in the Netherlands.
- <sup>9</sup> The debate was set rolling by a written question put to the European Commission on 8 May 2006 by Scots MEP, Catherine Stihler, who asked whether a job advertisement with the heading "Smokers need not apply" breached EU anti-discrimination legislation. Commissioner Spidla's answer was so ambiguous that it seemed to justify such discrimination. Later, the Commission specified that it had only said that such discrimination was not prohibited by the existing directives.

accidents. Where occupational illnesses are concerned, any attempt to harmonize statistics falls foul of the fact that recognition of occupational illnesses takes place within wholly different and highly discriminatory national systems. Most of the health damage caused by work is invisible in the national statistics. Harmonizing statistics means harmonizing recognition systems first. This objective set by the European Union back in 1962 will never be achieved so long as the Commission balks at adopting a binding instrument on the matter.

What other scant data there is available on health and safety at work, exposures to work-related risks and the preventive measures implemented is far from uniform between countries and wholly exceptional in the form of Community data. Looking just at preventive measures, it has to be said that the provisions most needed in firms (workers' representation and preventive services) feature in no statistical research in most Member States.

Any strategy evaluation is therefore built on very shifting sands. Even reported accident figures are put to questionable use in Community documents. They focus on all-worker frequency rate trends, disregarding the trend in the distribution of workers between sectors and occupations. And yet it is clear that part of the recorded improvement in frequency rates is a knock-on effect of redistributing the labour force into lower-accident-rate sectors and occupations. A reduction in the overall all-worker frequency rate does not necessarily mean that better prevention is taking place<sup>10</sup>.

There is a real danger that serious problems will be overlooked by overplaying and especially by misusing the work accident indicator. According to the International Labour Organisation's (ILO) overall estimates, work accident mortality in the developed countries is markedly lower than that from work-related diseases (see table). So, in Sweden, the ILO estimates that 63 deaths were caused by fatal work accidents in 2001 versus more than 3000 deaths from work-related diseases. The estimated figures for the United Kingdom are 236 and 20 120, respectively, and 1209 and 10 787 in Romania. Many more people die each year in Europe from asbestos-related cancers alone than in all work accidents.

This is why trade unions are distinctly cool about a 25% cut in work accident frequency being set as a major objective of the Community strategy for 2007-2012. If relevant indicators are not set in other areas, too-narrow a focus on aggregated work accident frequency statistics may conceal continuing or worsening major risks from chemicals, musculoskeletal disorders or to mental health. This would work against taking account of the health and safety of women at work and implementing policies to prevent long-term risks.

The aim of a 25% reduction in reported work accident frequency rates looks like a last minute inclusion in the Communication. The urge for a soundbite headline overshadowed any concern for coherence. The Commission press release heralding the new strategy pushed the envelope to talk about bringing down work-related accident and occupational disease rates by 25%. The Communication itself only mentions accidents. During the strategy, groundwork discussions, the trade unions, governments and employers' representatives all cautioned against an arbitrary choice of quantitative indicators at Community level. The differences in national situations and, even more, the difficulty of getting uniform data, should have prompted the Commission not to give in to the temptation of spinning the news.

10 One of the very few studies into this refers to the United Kingdom: R. Davies and P. Jones, *Trends and context to rates of workplace injury,* HSE, Research report No. 386, 2005. The authors call for prevention policies to be evaluated by reference to occupation-specific work accident trends rather than aggregated all-worker data.

#### Work-related mortality figures for EU countries, 2001

Tronk related mortantly figures for 20 countries, 2001									
Country	Total employment (x 1000)	Fatal accidents ILO estimate	Work-related mortality	Deaths caused by dangerous substances					
Austria	3799	137	2846	613					
Belgium	4051	78	2965	639					
Bulgaria	2751	317	2781	596					
Cyprus	309	40	435	94					
Czech Republic	4728	525	4759	1020					
Denmark	2725	56	1999	430					
Estonia	577	53	571	122					
Finland	2388	64	1766	380					
France	24 113	730	17 918	3859					
Germany	36 816	1107	27 350	5891					
Greece	3917	90	2883	621					
Hungary	3859	389	3845	825					
Ireland	1716	74	1298	280					
Italia	21 634	1397	16818	3622					
Latvia	1037	105	1034	222					
Lithuania	1522	169	1531	328					
Luxembourg	277	16	213	46					
Malta	146	7	111	24					
Netherlands	7865	116	5722	1232					
Poland	14 207	1463	14 184	3041					
Portugal	4999	414	3978	857					
Romania	10 697	1209	10 787	2313					
Slovakia	2124	257	2159	463					
Slovenia	914	122	940	202					
Spain	15 945	1160	12 526	2698					
Sweden	4239	63	3085	664					
United Kingdom	28 225	236	20 356	4384					
Total EU	205 580	10 394	164 860	35 466					

Source: J. Takala, Decent Work – Safe Work, ILO Introductory Report to the XVIIth World Congress on Safety and Health at Work, Orlando, 2005

#### The international dimension

The final part focuses on the international dimension of health and safety at work. It is an undeniably positive turn. Co-operation with the ILO should be backstopped by a policy to tackle the systematic operation of double standards by European multinationals<sup>11</sup>. These double standards are sometimes actively connived in by some European governments. Think only of the British government's outrageous attempts in 2000 to systematically cut the levels of protection for pregnant workers when ILO Convention No. 183 was being adopted<sup>12</sup>. This debate highlighted the discord among Member States, some of which refused to promote at international level rules that were in line with a Community directive already in force. Many EU states, indeed, continue to ratify ILO Conventions only in dribs and drabs (see table p. 21-22).

The Commission's announced pledge to a world asbestos ban is also very positive. But it should also extend to waste disposal and, especially shipbreaking.

Here again, there is a regrettable lack of any reference to REACH. And yet improved prevention of chemical hazards clearly also requires a coherent policy at world level for evaluating chemicals and prohibiting the most dangerous substances.

# **Eloquent silences**

The Communication is not easy for non-insiders to understand. This is not because it is written in difficult language. But the Communication often lapses into code. What might seem a mundane phrase to the average person actually refers back to policies set by stereotyped wordings. In some cases, a word or reference has far-reaching political ramifications that go unmentioned and even less analysed.

In many respects, what is omitted, disregarded and skated around speaks more than the words. The Communication often shirks the debate rather than address contentious issues or ones that are the subject of turf wars between different Commission departments.

REACH is a major reform with a significant potential impact on health and safety at work. Far from drawing the conclusions of REACH, the Communication mentions it only as a sideshow issue. The words "organisation of work" are used only sparingly. The Commission seems resigned to employers treating work organisation as their private domain. There is no question of their allowing workers a major say in their work life and hence how companies are run. The links between equality and health and safety at work policies are given a passing nod, when this was one of the big failures of Community policy over the period 2002-2006. The growth of

contingent employment is addressed only incidentally, with no specific initiative contemplated in the matter<sup>13</sup>. Worker representation receives the most casual treatment when the objectives of health and safety at work and democracy in the workplaces are inseparable. Working time is another no-go area. It is mentioned nowhere in the Communication, although the Commission has put forward proposals to amend the Community legislation on the matter that plainly go against a coherent health and safety at work strategy.

# Where our responsibilities lie

The Commission's Communication offers no prospects for a dynamically developing Community health at work policy going forward. There are many obstacles. The Commission's in-house resources have been slashed from what they were in the early 1990s, when the complexity of the issues to be dealt with and the enlargement from 12 to 27 States demand greater resources.

The Council of Ministers' Resolution adopted on 25 June 2007<sup>14</sup> reflects a policy whose sights are set low. It is a compromise text between States that would have like to push the Commission to go further and those that felt that the Communication gave too few assurances to the pro-deregulation lobbies. As a result, the Resolution sends out very contradictory signals. On some points, the text somewhat improves the contents of the Communication. There are, for example, clearer statements on worker representation, labour inspection, the meaning of quality of work, etc. But on other points, the Council Resolution seems to want to damp down the few – albeit hesitantly-phrased – concrete initiatives announced by the Commission.

So, the Council Resolution is tight-lipped on the need to revise the Carcinogens Directive, and on the musculoskeletal disorders directive. The Council's silence betrays the deep divisions that exist today among the Member States on any development of Community legislation. Likewise, the Council Resolution places extreme emphasis on any legislative initiative being locked into the hostile and tunnel-visioned framework of so-called "better regulation". The new buzzword is simplification of legislation "without reducing the existing levels of protection". Negotiators will love the wording. It hides the fact that specific proposals for simplification by themselves significantly reduce existing levels of protection.

This faces the trade unions with a big responsibility. With Community action on health and safety at work flagging, trade union action based in workplaces is the main thing that is capable of giving impetus to more progressive national preventive strategies. Arguably, it could be said that the dynamic between the Community and national levels has gone into reverse. Throughout the 1990s, Community policy

<sup>&</sup>lt;sup>11</sup> The multinational Etex (formerly Eternit), for example, is still producing asbestos cement in different countries, and spearheaded a pro-asbestos propaganda campaign in Brazil.

<sup>&</sup>lt;sup>12</sup> See: "ILO: New Maternity Protection Convention", *TUTB Newsletter*, No. 14, June 2000, p. 9-11. Downloadable from: http://hesa.etui-rehs.org > Newsletter.

<sup>&</sup>lt;sup>13</sup> The word "insecure" appears once only in a descriptive bracket, on page 3. There is no reference to temporary agency workers!

<sup>&</sup>lt;sup>14</sup> OJ, C-145 of 30 June 2007, p. 1-4.

had been the stimulus for many reforms, thoroughgoing debates and real changes in most Member States. This impetus has lost much of its momentum. It will probably continue playing a positive role in countries where the situation is worst and bargaining positions are least favourable. In other countries, it is more likely that only internal dynamics will give fresh impetus to health and safety at work policies. That is not to say that union action in this field should withdraw into parochial nationalism. On the contrary, the problems are broadly

similar and the only way to develop a more favourable bargaining position is through joint initiatives and gradually working out a joint strategy. Any progress in the coming years will therefore hinge on trade unions' abilities to organise co-operation, mount united campaigns and give a voice to the immense groundswell of workers' demands on health and safety at work.

**Laurent Vogel**, Researcher, ETUI-REHS lvogel@etui-rehs.org

# EU Member State ratifications of the ILO's health and safety at work Conventions adopted since 1980

European Union countries have a poor track record on ratifying International Labour Organisation (ILO) health and safety at work Conventions.

We looked at the ten Conventions adopted in this field since 1980. Convention No. 187 was discounted, being adopted only in 2006, which is too soon to draw meaningful conclusions about the number of ratifications. Also, its implementation is closely tied to ratification of the other Conventions. All other health and safety at work Conventions adopted between 1980 and 2001 were included.

The status of ratifications is generally poor, with wide differences between States. In some States, there is clear political obstruction. Four countries France, Greece, Malta and the United Kingdom have not ratified a single one of these Conventions. The situation in another group of eight countries is little better. Austria, Bulgaria, Estonia, Ireland, Latvia, Lithuania, Luxembourg and Romania are below the already very low Community average, with just one or two of the ten Conventions ratified. The biggest group counts eleven countries. Their score is unimpressive. Germany, Belgium, Cyprus, Denmark, Spain, Hungary, Italy, the Netherlands, Poland, Portugal and Slovenia have managed just three or four ratifications. Four more dynamic countries - Finland, Slovakia, Sweden and the Czech Republic – make up a group with at least five ratifications each. The one country that has ratified most ILO health and safety at work Conventions is Sweden with eight of the ten ratified. Only one Convention has been ratified by at least half of EU countries – the fairly general Convention No. 155, which broadly corresponds in content to the 1989 framework directive.

One of the two least ratified Conventions is Chemicals Convention No. 170 with barely three ratifications out of the 27 States. This makes little sense. When it was being adopted, the Member States rightly stood up against the Commission's argument that they had no competence to negotiate a Convention that had ramifications for the free movement of goods. The Court of Justice found for the Member States (and the Council) against the Commission. Having battled to negotiate the Convention, the States have turned their backs on ratification! Safety and Health in Agriculture Convention No. 184 has also gone largely unratified. Its more recent date (2001) may go some way to explaining this. Prevention of Major Industrial Accidents Convention No. 174 has also been largely shunned (four ratifications). And yet it is a valuable complement to the Community directives on the matter by involving workers' representation in the various measures to prevent major industrial accidents - one of the big failings of the Seveso directives.

Source: ILOLEX, October 2, 2007

# **List of Conventions examined**

Convention (No. 155) on occupational safety and health, 1981

Convention (No. 161) on occupational health services, 1985

Convention (No. 162) on asbestos, 1986

Convention (No. 167) on safety and health in construction, 1988

Convention (No. 170) on chemicals, 1990

Convention (No. 171) on night-work, 1990

Convention (No. 174) on the prevention of major industrial accidents, 1993

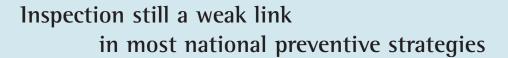
Convention (No. 176) on safety and health in mines, 1995

Convention (No. 183) on maternity protection, 2000

Convention (No. 184) on safety and health in agriculture, 2001

											Number of the 10 Conventions
	C155	C161	C162	C167	C170	C171	C174	C176	C183	C184	ratified
Austria	-	-	-	-	-	-	-	+	+	-	2
Belgium	-	-	+	-	-	+	+	-	-	-	3
Bulgaria	-	-	-	-	-	-	-	-	+	-	1
Czech Republic	+	+	-	+	-	+	-	+		-	5
Cyprus	+	-	+	-	-	+	-	-	-	-	3
Denmark	+	-	+	+	-	-	-	-	-	-	3
Estonia	-	-	-	-	-	-	+	-	-	-	1
Finland	+	+	+	+	-	-	-	+	-	+	6
France	-	-	-	-	-	-	-	-	-	-	0
Germany	-	+	+	+	-	-	-	+	-	-	4
Greece	-	-	-	-	-	-	-	-	-	-	0
Hungary	+	+	-	+	-	-	-	-	+	-	4
Ireland	+	-	-	-	-	-	-	+	-	-	2
Italy	-	-	-	+	+	-	-	-	+	-	3
Latvia	+	-	-	-	-	-	-	-	-	-	1
Lithuania	-	-	-	-	-	+	-	-	+	-	2
Luxembourg	+	-	-	-	-	-	-	-	-	-	1
Malta	-	-	-	-	-	-	-	-	-	-	0
Netherlands	+	-	+	-	-	-	+	-	-	-	3
Poland	-	+	-	-	+	-	-	+	-	-	3
Portugal	+	-	+	-	-	+	-	+	-	-	4
Romania	-	-	-	-	-	-	-	-	+	-	1
Slovakia	+	+	-	+	-	+	-	+	+	+	7
Slovenia	+	+	+	-	-	-	-	-		-	3
Spain	+	-	+	-	-	-	-	+	-	-	3
Sweden	+	+	+	+	+	-	+	+		+	8
United Kingdom	-	-	-	-	-	-	-	-	-	-	0
Total ratifications by EU States	14/27	8/27	10/27	8/27	3/27	6/27	4/27	10/27	7/27	3/27	73 ratifications out of 270

Source: ILOLEX, October 2, 2007



abour inspection as an institution emerged in 19th century industrialised societies<sup>1</sup>. Today, it holds a central place in national prevention systems in all countries<sup>2</sup>. Without labour inspection systems, there would be very little point to health and safety laws. One surprising feature of the changes in preventive systems over the past fifteen years is the little focus put on labour inspection in most European Union countries. Preventive measures have been extended to previously neglected areas, but the labour inspectorate staffing totals and responsibilities have seldom stayed in line with the new needs.

Also, labour inspection is constantly assailed by complaints about its inspection and enforcement responses from employers who want to be effectively let off scot-free for placing workers in danger. In some countries, government policies have undermined labour inspection resources. In some cases, inspectorates' responsibilities have been made

unclear by having an advisory role foisted on them in preference to inspection and enforcement. The European Court of Justice is also sending out disturbing signals in a deeply questionable judgement on surveillance of the work equipment market (see News in brief, p. 46).

This article is based on a survey done by our Department between December 2006 and February 2007 (see box).

# No Community harmonization

There has been a radical shake-up in the rules on health and safety at work in all the countries examined over the past twenty years, mainly driven by carrying the Community directives over into national law. Labour inspection, by contrast, has remained essentially an individual Member State sphere of responsibility.

# **Description of the survey**

The survey was done in the 27 EU countries plus Switzerland, Norway and Croatia. A questionnaire was sent out to the authorities responsible for labour inspection (30 bodies) and trade union confederations (approximately 70). It was also posted on our website so that individuals (mostly labour inspectors) and local organisations (mostly trade unions or associations of labour inspectors) could answer it.

From the 30 public bodies contacted, we received 14 replies (referred to here as "official replies"). From the trade union confederation side, we received 26 replies from 19 different countries (referred to as "union replies"). We received 12 replies from individuals (mostly labour inspectors) or specialised organisations (mostly trade unions/associations of labour inspectors) in 7 different countries. All told, of the 30 countries covered by the survey, only three (Ireland, Romania and Slovakia) sent no reply.

The best-case scenario was taken to be that of countries for which we received an official reply, a union reply and at least one individual reply from an inspector or association of inspectors. This made it possible to compare the different replies, which often provided complementary information. Only two countries – Portugal and the United Kingdom – fell into this class.

Six countries – Belgium, Bulgaria, Cyprus, Denmark, Estonia and the Netherlands – returned at least one official reply and one union reply.

In five countries – Cyprus, Lithuania, Luxembourg, Slovenia, Norway and Switzerland – only the official authorities sent in replies.

Replies from trade union confederations only were received from eight countries – Spain, Finland, Hungary, Latvia, Malta, Poland, the Czech Republic and Croatia.

Three countries – France, Italy and Sweden – returned both trade union replies and individual replies.

Individual replies only were sent from three countries – Germany, Austria and Greece. For Germany, the reply covered only the situation in one Land. The data we have are not necessarily representative for the whole of Germany.

Some respondents also sent in documents – like reports on activities and analytical articles – which helped fill out the replies to the questionnaire.

This information set was supplemented by documents held in the ETUI-REHS documentation centre.

<sup>&</sup>lt;sup>1</sup> Few historians have explored the history of the labour inspectorate. One notable exception is: V. Viet, Les Voltigeurs de la République. L'Inspection du travail en France jusqu'en 1914, Paris, CNRS, 1994.

<sup>&</sup>lt;sup>2</sup> See: W. Von Richthofen, *Labour Inspection*. A guide to the profession, Geneva, ILO, 2002.

The structure and operation of labour inspection systems in the different countries of Europe still differ in major ways that can best be accounted for by a range of factors.

# Generalist inspectorate or specialised health and safety inspectorate

Generalist inspection systems tend to police compliance with all the rules governing employment relations. Specialised systems police only health and safety at work. But within each of these broad categories lie what may be significant differences.

Specialised inspection can address all health and safety issues, including work organisation and workers' representation in the company, or restrict its scope by taking a narrower approach to work hazards. The United Kingdom's inspection system, for example, has no remit for workers' safety representation, and responsibility only for some aspects of working time. This state of affairs is apt to encourage a narrowly technical approach to risks and overlook the workplace dynamics that enable effective prevention to be organised.

#### Single system or multiple participants

In some countries, labour inspection is carried out by a single corps of public servants. Other countries have other bodies whose activities complement those of the main inspectorate. This is particularly the case in the four biggest EU states. In France, Germany and Switzerland, action by the generalist labour inspectorate is supplemented by specialised inspection systems set up as part of social security system coverage of work-related risks. Italy has a twin-track system comprising the labour inspectorate (with a generalist remit, sponsored by the Ministry of Labour) and the national health system which, through its local units, also has inspection responsibilities for health and safety at work. The United Kingdom's main inspection agency (the Health and Safety Executive) exists alongside local authorities with specific responsibility for inspecting small and medium-sized service sector firms.

The labour inspectorate is not always a unitary body. Some countries (France, Luxembourg) have a specific inspectorate to police the activity of occupational health services. Belgium is a case apart with a staterun federal labour inspectorate split into different specialised branches (welfare at work, employment laws, social security, supervising the economic information provided to workers' reps, etc.). In Sweden, a specialised agency polices the regulations for chemicals used in workplaces and sold to consumers.

Some countries also have specialised inspection services for particular branches, like the transport inspectorates in France and the Netherlands. Labour inspection responsibilities may be performed by other organisations in some branches of the public service. Also, all European countries have specific

environmental inspectorates that also often have remits over workplaces (especially firms presenting major industrial accident hazards) or issue permits for certain business activities. Inspection of work equipment placed on the market was not included in our questionnaire. In some countries, this is mainly a labour inspection remit, while in others, it falls more to supervisory agencies run by the economic regulation authorities.

#### Coverage of all employed worker

Generally-speaking, transposition of the Community directives has improved the public services by extending the remit of labour inspection or creating specific inspection agencies in some branches. By contrast, the working conditions of some categories of workers are not policed by any inspection service. Most Community countries operate such exceptions for domestic workers and inmates working in prisons. The survey was not able to go more deeply into this issue, which requires further consideration at some future point.

It might also be instructive to determine how effectively labour inspection activity can be in production processes which combine employed and self-employed workers – a fairly common situation in construction, transport, agriculture, retail and other sectors.

# Inspection ratios: disturbingly low in most countries

The questionnaire contained a series of questions on inspectorate staffing totals and the ratio of the number of inspectors to the number of workers and firms subject to inspection.

The first inescapable conclusion is that such figures are not always kept. This information was available in only 21 of the 27 countries for which we received replies. But where several replies were received for the same country, the differences between the sources tend to be very limited.

Taking the indicator of number of inspectors per million workers, countries can be classified into three groups. The variations between EU countries are significant. Taking the extremes, there is a variation from one to five between the lowest ratio countries (between 45 and 50 inspectors per million workers in Belgium, Spain, Hungary, Slovenia and the Netherlands) and the highest ratio ones (over 250 inspectors per million workers in three countries: Finland, Greece and Italy). This finding, however, needs to be qualified by a more detailed analysis of the structures and tasks of the different inspection systems. The International Labour Office (ILO) finds cause for concern in those industrialised countries, where the inspector-to-worker ratio is below 100 inspectors per million workers<sup>3</sup>. That is the case for 11 of the 22 states for which our survey returned data.

<sup>&</sup>lt;sup>3</sup> ILO, press release, 16 November 2006, ref. ILO/06/52.

But the basic "inspectors-per-million-workers" ratio is not a conclusive indicator of the front-line labour inspection ratio. The British trade union reply emphasizes this point, and observes that out of a total Health and Safety Executive (HSE) staff of more than 1500, only 900 inspectors are active in work-place inspections.

The "inspectors-per-100 000-firms" ratio is a useful pointer to the labour inspection enforcement capacity faced with the increasing complexity of production processes and, especially the legal fragmentation of firms through subcontracting networks. The Polish statistics which reveal the difficulty of ensuring proper monitoring are relevant here. In 1995, the labour inspectorate carried out inspection visits in 54 550 firms, accounting for just over 5 172 363 workers. In 2005, the number of visits had increased by just over 10% compared to 1995, rising to 66 693. But the number of workers concerned had fallen by approximately a third to 3 393 532. Many replies call attention to this problem: even where inspectorate staffing totals are unchanged or slightly up, the needs-resources gap continues to widen.

One thing that is totally missing is uniform indicators at European level. The data on inspection ratios (measured per number of workers and firms covered) need supplementing with more systematically-collected data on inspections carried out on health and safety at work. This kind of data was sent in for a few countries only. The methodology used to collect these data differs from one country to another. Few countries have successfully evaluated the statistical probability of an inspection visit of a randomly-selected workplace in a given year. It would be helpful if far more self-consistent statistical indicators were compiled as part of the Community strategy.

# **Staffing total trends**

The replies on staffing total trends reveal wide between-country variations. National situations are not moving closer together, in that countries with the lowest inspector ratios may also be those where staffing totals are falling. Short-term swings are difficult to interpret: a sudden rise or fall may just be a correction from an opposite trend in previous years. Beyond these annual variations, the general long-term trend is that the role of labour inspection is being under-rated in national prevention strategy roll-out.

There are three factors common to all countries:

- the fragmentation of production channels, not least through subcontracting;
- the increased complexity of inspection work from legislation that is less about the "nuts-and-bolts" and imposes management obligations in the broad sense (risk assessment, consultation of workers, implementation of preventive services, etc.);

#### Number of inspectors per million workers \*

Low ratio (under 100)	Medium ratio (100-200)	High ratio (over 200)
Germany <sup>a</sup>	United Kingdom	Denmark
Belgium <sup>b</sup>	Sweden	Finland
Spain	Austria	Italy
Hungary	Estonia	Greece
Slovenia	Latvia	
Netherlands	Poland <sup>d</sup>	
Portugal	Norway	
Malta		
Luxembourg		
France <sup>c</sup>		

- \* Countries are ranked by ascending order in each column.
- a. The reply relates to only one Land and does not include mutual insurance fund officers.
- b. The reply relates only to specific health and safety at work inspectors.
- c. The reply does not include the regional sickness insurance fund (CRAM) inspection officers. It says that the labour inspection development plan should increase the inspectors- per-million-workers ratio from 94 in 2006 to 148 in 2010.
- d. The Polish trade union reply states that of the 2439 labour inspection staff, 1457 are engaged in work-place inspection activities. On this basis, Poland has been classed as "medium ratio".
- expansion of the scope of health and safety at work to include such things as mental health problems, a focus on harassment and different forms of psychological violence, etc.

Such a situation requires an expansion of inspectorates' staffing totals and areas of competency. There is no clearly-distinguishable Europe-wide trend in staffing totals, but most of the national replies claim that inspectorates are sometimes drastically understaffed. As to areas of competency, it will be seen below that there are also serious gaps in most countries.

As far as staffing total trends go, the overwhelming impression is of a lack of any real strategic planning by States. In many countries, trends are uneven. Labour inspection is neglected and staffing totals decline in cycles that can extend for five to ten years. These cycles are halted in times of crisis or when specific events like a disaster or "unexpected" rise in fatal accident rates elicits a knee-jerk public policy response in the form of a recruitment drive to at least partially offset the deepening staff shortage. This kind of reactive policy offers no way of achieving structural consolidation in labour inspection. It is a fire fighting strategy.

# **Areas of competency**

The questionnaire asked for a rating of the professional expertise available. It listed six types, with scope for adding others. Replies for each type of competency could range from 5 to 0. The average score for all six types of competency listed in the questionnaire was 2.77, with wide variations between types. The most commonly-found type was safety engineer (average score: 3.94) followed by lawyers (3.35). Two other types of expertise had average scores over 2.5 – industrial hygienists (2.80) and occupational doctors (2.66). Two areas seem fairly disregarded,

failing to achieve an average score of 2.5 – ergonomists (2.33) and psychologists (1.51).

While a high level of safety engineers is found almost uniformly across Europe, the presence of occupational doctors is much more variable. They are well-represented in some countries (Belgium, Italy, Cyprus) and practically non-existent in others (Denmark). In some countries, assessments are sharply divided. In the United Kingdom, for example, the official reply claims that occupational doctors are very well represented within the inspectorate, whereas the other replies give a much less rosy assessment. The sanguine official view is not borne out by a literature review – much of the medical competency previously possessed by the HSE appears to have been dispensed with.

# **Areas of activity**

Analysis of the areas of labour inspection activity shows them broadly to be focused on work accidents and other safety issues. Chemical hazards are less systematically inspected for. Psychosocial and ergonomic risks are only really priorities in a minority of countries.

This distribution of labour inspection activities is borne out by the national statistics where they break down inspections by category. For example, Belgium's labour inspection report for 2005 indicates that out of 7394 cases handled, 3083 (42%) involved work accidents.

#### **Obstacles**

Picking out the obstacles to efficient labour inspection is less easy. The average score for all the factors listed in the questionnaire was just short of 3 (2.96) on a scale from 5 (situation very good, no significant obstacle from this factor) to 0 (situation very bad, this factor is a major obstacle). The specific score for each factor tends to hover around the average score.

Three factors receive a somewhat more critical rating (around 2.5):

- ability of appropriate policy-makers to frame a specific, effective policy to support labour inspection activities;
- time available to inspectors to inspect workplaces;
- effectiveness of legal penalties for contraventions reported by inspectors.

It is this latter factor that gets the least favourable assessment and lowest scores (0 or 1), especially from respondents who are inspectors or associations/ trade unions of inspectors. This rating is borne out by the additional documents supplied, especially the activity reports published annually by labour inspection authorities in different countries. They reveal that labour inspection non-compliance reports are rarely followed by a court case, and that most contraventions reported go effectively unpunished.

Some countries have administrative fines on top of legal penalties. Although easier to levy, they seem to be little used. The Netherlands labour inspection authority report for 2005, for example, reports that just over 5000 administrative fines were imposed in that year. Just under half (2433) related to health and safety at work, and they amounted to just under 7 million euros (roughly averaging 285 euros per contravention fined). Administrative fines levied for breach of the foreign workers employment legislation were very similar in number, but markedly higher in total amount (over 13.2 million euros). The

Inspection activities: average score over all replies				
Investigation of a serious or fatal work accident				
Action related to safety other than accident investigations				
Action related to chemical hazards with immediate or short-term effects	3.22			
Control of the contents of risk assessments and drawing up of prevention plans	3.20			
Control of workplace health and safety management	3.12			
Checking compliance with the rules on consultation and representation of workers	2.86			
Control of workers' health and safety information and training				
Substitution of dangerous substances like carcinogens or reprotoxins by non-dangerous or less dangerous substances	2.73			
Checking compliance with exposure limits	2.71			
Control of temporary workers' health and safety conditions	2.71			
Action related to ergonomic problems	2.33			
Control of preventive services' activity in regard to health surveillance	2.52			
Control of preventive services' activity other than health surveillance				
Action related to psychosocial risks, especially different forms of violence and harassment	1.98			

same report emphasizes that the inspectorate gives a marked preferences to "light hand" intervention. Where a contravention is found during an inspection visit, non-penalty enforcement measures (warning, prohibition notice) are used in over 80% of cases. "Punitive measures" were applied in just under 20% of cases. In 10% of the cases, inspectors ordered work to be halted. In 4% of cases, they levied an administrative fine. In 4% of cases, they combined halting work with an administrative fine or a report to the prosecution authorities. In just 1% of cases, they wrote up a non-compliance report. Where a contravention is established in connection with a serious or fatal accident, by contrast, administrative fines or reports are much more common (56% of investigations into such accidents result in "punitive" action). This reflects a more reactive than preventive approach, in that the most deterrent measures tend to be used for contraventions that result in deaths or serious injuries, and not for putting workers at risk.

Some countries have sought to lessen the degree to which employers escape liability by improving the linkages between the justice system and labour inspection, and by creating specialised units within the court system to prosecute health and safety offences. Spain's central prosecution service has been given a specialised section in all geographical districts. The trade unions work directly with these specialised prosecutors to bring the force of criminal law to bear on employers who flout their prevention obligations. One specific aim of the action plan for prevention recently adopted in Spain is to improve the linkages between the labour inspection authority and these specialised sections of the prosecution service<sup>4</sup>.

Some other factors not mentioned in the questionnaire were reported by respondents, such as no or too little co-operation with workers' safety reps (especially in the United Kingdom). This key aspect will be looked at further below. Some replies took issue with the age structure of labour inspection staff, raising fears of a rapid decline in the service from a failure to recruit enough new inspectors. In Belgium, for example, the average age of all inspectorate staff was 50 years in 2005 and, by the end of 2006, 18% of the staff were aged 60. Assessments of factors internal to inspectorates (initial training, continuing training, relations between inspectors and their superiors) tended to be more favourable. The Finnish reply, by contrast, reported a conflict between the labour inspection service and its sponsoring ministry. The recent European Court of Justice ruling on surveillance of the work equipment market reveals how helpless inspectors are when their job is obstructed by superiors reluctant to lock horns with employers.

# Relations with the other participants in prevention

It is not feasible to have labour inspectors permanently sited in each workplace. Relations between

inspectors and the other participants in prevention are therefore key to the effectiveness of inspection systems. This may seem to go without saying, but it does reveal significant differences of approach between inspection services.

Some systems seem to focus on relations with employers, providing them with encouragement, advice and support. This kind of approach is all about not putting the frighteners on employers, and speaking their language by showing that a proper health and safety policy will boost their profit margin. Enforcement is used only reluctantly. The inspectorate's function may become muddled, turning it into a sort of free health and safety at work consultancy paid for out of the public purse. In the United Kingdom, for instance, the labour inspection authority played a sometimes very equivocal role when the Community directives were being transposed by intimating to employers that it would not be officious in punishing contraventions.

Relations with the employer are not just about the priorities assigned to inspection or advice. Over and above this policy issue must be considered the ability of the inspection service to act on the quality of OHS management. The framework directive and the national reforms which accompanied its implementation highlight the importance of systematic, planned and participatory management. Four key components of this management play a special role: risk assessment, planning of preventive measures, taking prevention requirements into account in corporate strategizing, consultation of workers and their representatives on all issues likely to affect health and safety at work. There is an important need to distinguish two debates here. One is about the place of enforcement measures and penalties in inspection policies. The other concerns the importance of holistic health and safety management versus specific tangible aspects. There is no automatically right answer to these two problems<sup>5</sup>. Tight checks on managerial organization or advice on breaches of particular technical specifications are equally possible approaches. Taking health and safety into account as a management system involves redefining some basic types of competency in the inspection service: an ability to audit material aspects of management systems, the power to intervene in company labour relations practices, a grip on risk assessment issues. The "interpersonal relations" aspect of the inspectorate's work takes on a very particular importance. Unless these abilities are developed and the necessary time found to put them into practice, inspections are likely to be confined to ticking off the boxes for the existence of selected procedures and documents without judging their effectiveness. This failing may be exacerbated by the tendency in some States to expand certification by commercial organisations, which marginalises the role of labour inspection. This debate is reflected in two issues in very many Community countries.

<sup>&</sup>lt;sup>4</sup> Plan de acción para el impulso y la ejecución de la estrategia española de seguridad y salud en el trabajo (2007-2012). (Periodo julio 2007-abril 2008), Madrid, 25 July 2007.

<sup>&</sup>lt;sup>5</sup> For a more comprehensive discussion, see A. Bruhn, The inspector's dilemma under regulated self-regulation, *Policy and Practice in Health and Safety*, Vol. 4, No. 2, 2006, p. 3-23.

One is the role of labour inspection in relation to risk assessment<sup>6</sup>; the other is the importance of a systematic policy of support for workers' reps by the labour inspection service.

Most occupational ill-health develops in a context of adversarial workplace relations. To be effective, labour inspection should support the activity of workers and their trade unions to improve working conditions. It should ensure that workers' collective rights to information, training and consultation are respected. It should be based on active co-operation between the inspection system and the system for trade union representation of workers in health and safety. No European inspection system takes this approach in any material way. Some, however, are more receptive to it and appreciate the importance of action that also includes the prevailing system of labour relations in firms. Empirical data from several countries tend to show that firms which have workers' representation in health and safety also most invariably operate a prevention policy.

In some Central and Eastern European countries, this debate has also focused on a specific institution, a partial legacy of the past, whose redeployment in a new context could be a big asset for prevention. In some of these countries, what are known as "worker inspectors" play a special role. In truth, the institution's origins lie much further back in time. It emerged in the industrialised countries of western Europe at the end of the 19th century and had long been a central demand of the trade unions in France, Germany and England<sup>7</sup>. The trade unions had secured recognition for union reps to act as inspectors under a variety of names in industries like mining. In some cases, these worker inspectors held auxiliary posts within the general labour inspection authority. The evidence is that this institution made a major contribution to prevention provided there was a clear demarcation of roles between the collective representation of workers and enforcement of legislation. In most former Soviet bloc countries, the labour inspection system had forged close ties with the trade unions and was partly based on the activity of these "worker inspectors". This relationship was not clear-cut inasmuch as the trade unions tended to operate as an extension of the Party and State authorities. The worker inspectors often sought to play down company management's liability for accidents and blame them on mistakes by individual workers. The revival of independent trade unions ought to have given a new impetus to this institution.

The worker inspection system was heavily rundown during the transition towards capitalism and has completely disappeared in some countries. In Poland, it has struggled to stay alive in firms with trade union representation<sup>8</sup>, but remains highly active in the mining industry in the Czech Republic.

The International Labour Organisation (ILO) has often played an unclear role in relation to attempts in some countries to forge closer links between the labour inspection authority and the unions. In Luxembourg, for example, an ILO audit of the labour inspection service in 2002 criticised the appointment of labour inspectors on proposals from representative trade unions. ILO missions in Central and Eastern European countries have recommended that trade union inspection systems be dismantled on the basis of quite shaky reasoning<sup>9</sup>.

Far from being a quirk of former Soviet bloc countries, the worker inspection system could in many ways strengthen preventive strategies in the countries of Western Europe. Although lacking such wide-ranging powers, the district workers' safety reps in Sweden carry out some labour inspectionlike tasks by running legislation enforcement campaigns in some areas. Generally, the right to stop work in case of serious and imminent danger has also been defined in some (mainly Nordic) countries as a collective right exercised by workers' reps. It is a power that has some similarities with labour inspection activity and is a very useful supplement to it in enabling very rapid action in circumstances where any delay may have serious consequences. The Australian system is informative here<sup>10</sup>. Workers' safety reps in a number of Australian States have the right to serve provisional improvement notices (PINs) on the employer. If he does not agree with the improvement notice, he can call in the labour inspection service. The scheme has yielded encouraging results. Surveys done by the Australian trade unions show that in the vast bulk of cases, a PIN has resulted in preventive measures being taken. In most of the cases where the employer has appealed to the labour inspection authority, it has upheld the PIN on the grounds of a real failing in prevention.

Relations with preventive services are also a key issue. Many replies describe them as unsatisfactory, either because the labour inspection service fails totally to inspect preventive service activities, or because it merely checks their nominal compliance with the conditions of approval. Generally, there is no real joined-up working between preventive and labour inspection services. The situation is certainly made worse by the fact that the framework directive has not been fully transposed in several countries where the necessary competencies of preventive services have not been defined at all or couched in much too general terms (Sweden, the United Kingdom and Ireland are particular cases in point). The fundamental questions are: How to define the public role of these services which are generally controlled by employers? How to collectivise the experience of these services so as to avoid fragmentation of their activities by individual workplaces? This is an issue that far transcends the bounds of the discussion on the strategy of labour inspection.

<sup>&</sup>lt;sup>6</sup> See in particular Vincent Tiano's thesis, *Les inspecteurs du travail à l'épreuve de l'évaluation des risques : une profession sous tension*, sociology thesis, University of Aix-Marseille II, 2003. See also: V. Tiano, Les inspecteurs du travail aux prises avec l'évaluation des risques, *Travail et emploi*, No. 96, October 2003, p. 67-83.

<sup>&</sup>lt;sup>7</sup> See P. Aries, Inspection du travail et Inspection ouvrière dans le discours de la CGT de la genèse de l'institution à l'entre-deux-guerres, *Droit et société*, No. 33/1996, p. 389-404.

<sup>&</sup>lt;sup>8</sup> See in particular: INTEPF, Les relations de travail en Pologne : évolution et perspectives, Journal du voyage d'étude effectué du 4 au 11 juin 2000, Institut national du travail, de l'emploi et de la formation professionnelle.

<sup>&</sup>lt;sup>9</sup> See in particular: International Labour Organization, *The Role of Labour Inspection in Transition Economies*, Document No. 48, 1998.

<sup>10</sup> For a detailed review, see: S. Page, Worker Participation in Health & Safety. A review of Australian provisions for worker health & safety representation, HSE, 2002. This report is based on an analysis of the situation in the State of Victoria.

Italy is a case apart, with two very different types of preventive services existing alongside each other. One is the public prevention services established as part of the 1978 health reforms. These services are highly active in developing workplace health and safety and have the powers and competencies of a labour inspection authority in health and safety matters. The other is the preventive services set up under new legislation passed in 1996. These are company in-house services that may enlist external consultancy expertise. There are almost no private inter-company preventive services.

Belgian employers must appoint a specialized prevention advisor as part of their in-house service or enlisted from an external intercompany service specifically for prevention of the different forms of harassment and violence at work<sup>11</sup>. This prevention advisor must notify the labour inspection service of situations where the employer has not taken appropriate measures to put an end to situations of harassment or violence.

# On from lip-service recognition

Looking beyond the lip-service recognition of the importance of labour inspection, it is clear that there is a big gap in the comparative study of labour inspection in Europe. Quantitative indicators are sadly wanting. Systematic studies on the requirements for effective intervention are even thinner on the ground<sup>12</sup>. More sources and parliamentary reports are available at individual country level.

The survey done by our department was very limited in scope. The aim was to collect assessments from different participants on selected aspects of inspection activity. It enables only a few proposals to be sketched out for future research and for policy debates on preventive strategies.

Above all, the survey findings raise major issues of coherence.

- 1. There is a yawning gulf between the known health outcomes of work and the focus in practice on accidents. In areas like prevention of chemical hazards, action on psychosocial factors or the health impact of the spread of contingent employment, there is a big job of work for labour inspection to do in defining effective interventions. The lower visibility of the poor long-term health outcomes of working conditions is apt to weaken policy-makers' support for any such debate;
- Even where work accidents are concerned, labour inspection activity seems much more reactive than preventive. And that reactivity is itself heavily undermined by the difficulty of achieving effective penalties;
- 3. Relations between labour inspection and the workplace participants in prevention especially the trade unions are haphazard. A major potential for joined-up working is not being put to use.

**Laurent Vogel**, Researcher, ETUI-REHS lvogel@etui-rehs.org

<sup>&</sup>lt;sup>11</sup> Protection against Violence and Psychological or Sexual Harassment at Work Act of 11 June 2002, *Belgian Official Gazette*, 22 June 2002.

<sup>&</sup>lt;sup>12</sup> Notable exceptions are the following article and the odd studies cited in its bibliography: L. Lindblom and S.O. Hansson, Evaluating workplace inspections, *Policy and Practice in Health and Safety*, 2004, p. 77-91.

# Working conditions in Europe A big picture view

#### Sara Riso,

Information Liaison Officer, European Foundation for the Improvement of Living and Working Conditions Work is growing more intensive, new technology use and training opportunities are still limited, working hours are getting shorter but are still mainly set by employers with limited scope for change, health and safety at work still remain a big concern, working conditions differ widely between the "old" and "new" Member States, between women and men, and between different age groups. This is the evidence from the Fourth Working Conditions Survey done in 2005 by the European Foundation for the Improvement of Living and Working Conditions, following those of 1991, 1995 and 2000/2001. As the fourth survey, it is a rich seam of information on trends in European working conditions.

# **European working conditions** surveys: 1991-2005

The European working conditions survey is the oldest of those done by the Foundation – the first dating from 1991, when Europe had just 12 Member States. It was repeated in 1995 (EU-15), 2000 (EU-15 plus Norway) then extended to 13 candidate and accession countries (12 of which are now Member States of the European Union). The 4<sup>th</sup> and most recent edition of the survey in 2005 covered 31 European countries (EU-25 plus Romania and Bulgaria – Member States since 2007 – Croatia, Turkey, Norway and Switzerland).

Over the different surveys, the questionnaire has changed to a great extent, and in 2005 comprised over 100 questions and sub-questions. Tightly-focused on industry in 1991, the survey has developed over the past 15 years to include a wide range of indicators for a more searching and thorough-going analysis of working conditions. The downside is that this affects the comparability of all the questions over the years.

# Big changes over the past 15 years

The dominant trends of the last 15 years are the spread of non-traditional forms of employment (part-time and temporary work) and greater numbers of women entering the labour market. Overall, the survey shows that economic growth does not automatically bring improved working conditions. Working conditions remain relatively stable despite changes in the sectoral composition of the labour force that might suggest the possibility of quality improvements.

An analysis of trends since the early 1990s evidences that the use of new technologies is increasingly widespread, average working time is steadily falling, imposed flexibility of working schedules is spreading, work is getting more intensive, work organisation has become more commercial, information on health and safety at work is slightly better, exposure to physical risks and violence is little changed, there is some progress on labour market segregation, but no greater access to training, some groups remain highly exposed and vulnerable to early exclusion from the workforce. This emphatically shows the vital need to continue pressing for improved working conditions in a context marked by the gradual but steady ageing of the workforce, and for the development of the European economy.

#### **Work intensification**

The survey measured the level of work intensification through four proxy indicators of work intensity – work to very tight deadlines, at high speeds, not enough time to do the job, interruptions. Indicators on factors of pace were also included.

The survey shows that work intensification in Europe and the number of pace constraints are continuing to grow. More and more people are working at high speeds and to strict deadlines. In 2005, 26% of workers in the EU-27 reported having to work at very high speeds all or nearly all the time, and 12% seldom or never had enough time to finish the job.

The determinants of work pace in the EU reflect the predominance of the service sector and commercial



European Foundation for the Improvement of Living and Working Conditions

The European Foundation for the Improvement of Living and Working Conditions is a tripartite EU body, whose role is to provide key actors in social policy making with findings, knowledge and advice drawn from comparative research. The Foundation was established by Council Regulation (EEC) No. 1365/75 of 26 May 1975. It is head-quartered in Dublin, Ireland.

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organisations. For approximately 70% of workers, their work pace is directly determined by the demands of customers, patients, users, etc., while the automatic speed of a machine determines the work pace of 20% of the working population. Work pace determined by workmates or performance targets also appears to be on the rise.

Work intensification is not always compensated by autonomy and support in the work environment. Highly skilled white collar workers enjoy most autonomy in their work, while lower skilled blue collar workers have less. Level of education determines how much control workers have on how they do their job. In other words, only about half of workers with no more than primary education can choose how to perform their work, compared to 80% of those with tertiary level qualifications. Nor can workers always count on support from their workmates and line superiors to cope with this work intensification. About 67% of European workers can get help from workmates if they ask, and 56% from their line superior.

Work intensification has a clear negative impact on occupational health. Weekly working hours may have gone down, but work paces are steadily rising. Approximately half the workers surveyed say that their work involves painful or tiring positions, while more than half work at high speeds (60%) and to very strict and tight deadlines (62%). The considerably high level of stress in the EU-27 (22%) comes as no surprise, therefore.

# **Working hours**

Weekly working hours in the EU have got steadily shorter since 1991. This reduction is due to a set of factors (e.g. the spread of part-time working). Standard working hours remain the norm for most workers: 58% of workers work the same number of hours each day, 74% the same number of days each week, 61% have fixed starting and finishing times. The working hours are fixed by the employer in most cases: 56% of workers report that their working hours are fixed by their organisation and cannot be changed. Only 24% of employees can adjust their working hours to their needs, in some cases within set limits. Workers with regular working hours, approximately 40 hours a week, working the same number of days each week and hours each day, and starting and finishing work at fixed times, report the highest degree of satisfaction.

However, a goodish number of workers (15%) in Europe continue to work long hours – 48 hours or more a week. The survey shows that long working weeks and non-standard working hours have negative occupational health outcomes. Approximately 55% of respondents who work more than 48 hours a week say that their work is injurious to their health, and 45% report that their health and safety are at risk at work. Of the different non-standard working hours,

night work (after 10 p.m.) seems to be more associated with health problems – particularly insomnia.

# Paid and unpaid work

While men in all countries work more hours than women in paid employment, the survey findings show that when working time is calculated by adding together paid and unpaid working hours, commuting time and the hours of a second job, women – including part-time workers – work more than men. Women generally work part-time to spend more time on the family and home, while male part-timers spend even less time doing unpaid work than full-timers.

This does not mean that women are better paid for this "double duty" – if anything, the opposite. Most women fall into the lower income category, and a smaller proportion of women (20%) than men (40%) fall into the top income bracket in all countries. The gender gap between part-time workers is less wide. This shows the road still to travel on gender equality.

#### **Old and new Member States**

While general trends can be picked out, working conditions still vary widely between Member States, and especially so between the new and old Member States.

New Member States (NMS) report less gender segregation, with a markedly higher proportion of women in supervisory/management posts than in the EU-15 (28% in the NMS against 24% in the EU-15).

Exposure to physical risks and work-related health disorders reveals a less positive picture. Approximately 40% of workers in the NMS consider they have been exposed to health and safety risks at work (against an average of 25% in the EU-15). Furthermore, the NMS (Bulgaria and Romania most of all) generally record the highest levels of exposure to work-related risks, especially those associated with heavy industry (e.g., noise, vibrations, breathing in fumes or using chemicals).

There are also striking differences between the EU-15 and the NMS where use of information technologies is concerned: 42% of workers in the EU-15 never use a computer at work versus 60% in the NMS.

Northern Europe often seems to set the European pace and perform "better" in terms of employer-provided training and flexible working hours.

# Older and younger workers

The gap between younger and older workers is particularly striking where computer use is concerned: almost 20% of workers in the 25-39 age bracket work all their time on computers, compared to 11%



of over-55s. Older workers also get a poorer deal on training opportunities. In 2005, approximately 29% of workers aged 25-39 received training from their employer, against 19% of over-50s.

On the other hand, older workers are less exposed than younger ones to fast-paced work: 37% of workers aged 50-plus report working at very high speeds against 46% of younger workers.

Younger workers aged 15-25 are more exposed than older workers to some physical risks (tobacco smoke, tiring positions, standing positions, heavy loads and repetitive hand and arm movements). Where sickness absence, whether or not work-related, is concerned, workers aged 15-25 (21%) report fewer absences than older workers (23%), and are off work for less time (approximately 3 days against an average 5 to 6 days for older workers).

# Exposure to physical risks and health outcomes

The number of workers who consider their health and safety to be at risk because of their work has declined over the last 15 years. However, while the share of the European workforce employed in traditional, physically demanding sectors (e.g., manufacturing and agriculture) is declining, the survey reveals that some physical risks are still prevalent – e.g., approximately 46% of workers report working in uncomfortable or tiring positions for at least a quarter of the time.

Men are more exposed than women to some risks and vice versa. Men report more exposure than women to traditional work-related physical risks (noise, vibrations, etc.), while women, especially in the education and health sectors, are exposed to other risks (e.g., work involving lifting or moving people).

Ergonomic risks (repetitive hand or arm movements, work in uncomfortable or tiring positions, etc.) are more evenly gender-balanced. In occupational terms, blue-collar workers are much more exposed than white-collar workers to almost all physical risk factors at the workplace.

Where the effects of work on health are concerned, some 35% of the workers surveyed reported that their work is bad for their health. The most commonly cited work-related health disorders are backache (25%) and muscle pains (23%) followed by fatigue and stress (22%). These are mainly problems for workers in agriculture, health care, education and the construction industry.

# Violence, harassment and bullying at work

Bullying, harassment, violence and threats, along with different kinds of discrimination, contribute to psychological ill-health and stress. Around 5% of

workers report having been subjected to instances of violence, bullying or harassment in their workplace in the twelve months preceding the survey. Variations between countries may be wide. For example, there is a difference between Bulgaria and Finland of 1 to 10 (in Bulgaria's favour) in the incidence of exposure to violence. This is due to a set of factors, like cultural differences, the centrality of this issue in public and political debate, the degree of public awareness of the problem, and the willingness to report it.

Women are more exposed (6%) to bullying and harassment than men (4%), especially young women (8% of women aged under 30). There is a higher incidence of women exposed to unwanted sexual attention in the Czech Republic (10%), Norway (7%), Turkey, Croatia (6%), Denmark, Sweden, Lithuania and the United Kingdom (5%), but a lower incidence (1%) in some southern European countries (Italy, Spain, Malta and Cyprus). As mentioned earlier, what constitutes an act of violence can vary from one country to another according to sensitivity to and awareness of the issue, so these percentages do not necessarily reflect the real incidence of the problem.

A higher level of bullying and harassment is reported in larger establishments (over 250 workers), in the education and health sectors, and in the hotel and catering sector. Signally, rates of violence and harassment are generally lower in sectors where physical risks are high (especially construction and agriculture), although the converse is also true.

Workers who experience violence or bullying at the workplace have more work-related health problems than those who do not. Four times more report psychological health problems, sleep disorders, anxiety and irritability in particular, as well as physiological symptoms, like stomach ache. An above-average number of those exposed to bullying and harassment take time off work for work-related health problems (23% versus 7%) and also tend to take longer sick leave.

#### **Information on hazards**

There has been a significant increase in the proportion of workers in the EU-15 who think themselves not well or not at all informed about workplace hazards (15% versus 9% in the NMS). There is also a notable significant correlation between company size and the level of information on workplace hazards. Workers in large firms broadly consider themselves to be well-informed. Permanent employees think themselves better informed about hazards than those with less steady jobs. One point to be made, however, is the minor change made in the wording of the question in the last survey. Up to 2000, the question referred to the "risks resulting from the use of materials, instruments or products which you handle in your job", while in 2005, it

referred more generally to risks related to the performance of the job.

The purpose of this change was to widen the scope of the original question, which was focused on the traditional notion of industrial workplace hazards. The question put in 2005 better reflects the reality of work in present-day Europe, and the real levels of information about workplace hazards.

#### **General considerations**

The Foundation's working conditions survey is unique in Europe. Analysing the successive surveys since 1991 allows general trends to be picked out and gives a broad picture of how working conditions in Europe are changing over the years. The statistical data<sup>1</sup> are made available to the scientific community and researchers into the quality of work to help deliver even more searching outcomes: the important thing is to give the labour market participants access to the information to make their own interpretation and decide what needs to be done. Confronted with the many challenges besetting society, astute readers will be able to form a view of developments in hand in society, and reflect on necessary public policy measures.

# Methodology

A total of 29 680 workers were questioned for the 2005 survey in face-to-face interviews in their own homes outside the most common working hours, and for over half an hour on average. The survey was carried out simultaneously in 31 European countries using an identical questionnaire available in 27 languages and 11 local adaptations. The respondents (persons in employment as defined by the European Labour Force Survey – employees and self-employed) were selected by multi-stage random sampling in order to be representative of the population in employment. The 2005 Labour Force Survey (Eurostat) was used as the sampling and weighting basis. The interview questionnaire covers a series of aspects of working life: physical hazards, working time, work organisation, job satisfaction, health, workplace absences, whether the job is physically supportable long-term, work-life balance, violence and harassment, pay, time outside work.

Quality assurance<sup>2</sup> included external control of service providers, clearly defined tasks, responsibilities and functions for the actors, and performance indicators for each stage of production of the statistical data, and systematic checks on the work done by the different actors. A report on the quality of the data produced was written at the end of the survey<sup>3</sup>.

In 2006, the Foundation carried out its first ever comparative post test on aspects related to development at work and employability; the descriptive report has been published in October 2007<sup>4</sup>.

# The survey's strengths and limits

The survey's main defining attribute is to be the only Europe-wide survey on working conditions. This makes it a single source of harmonised data for European policy-makers on key quality of work and employment indicators. As such, it helps inform European policy-making on aspects of work. It also makes up for the lack of national data in many countries and creates a basis for international comparison.

The Foundation's working conditions survey has become a set standard for researchers into the quality of work, and its statistical data are used by many national and international organisations involved in the field. The survey data are also used for derived data analyses, in particular on gender equality in the workplace, work organisation, sectoral profiles, etc. This enables a more searching analysis of the survey findings, giving better insights into how different working conditions interact.

But it must be borne in mind that institutional and cultural differences between countries may influence the way in which the questions are understood and answered. So any between-country comparisons must be approached with caution. The survey describes respondents' own working conditions as they perceive them, working from the principle that workers are best placed to assess their own working conditions and give an easily-digestible big picture view of them. There is also a limitation stemming from the sample size in each country - 1000 per Member State and 600 in the 5 smaller EU countries –, which reduces the scope for subsequent disaggregation of the data. This means that the number of cases may be too small to derive relevant conclusions for a comprehensive analysis at the national or sectoral level. Furthermore, averages may mask between-country, between-sector and within-country differences. In a very real sense, the survey's main aim remains to provide a broad-brush view of working conditions, problems and trends on a European scale.

# The surveys of the European Foundation for the Improvement of Living and Working Conditions

- Fourth European Working Conditions Survey, 2006. Available in English on www. eurofound.europa.eu/publications/htmlfiles/ef0698.htm, to be published soon in German and French.
- Fourth European Working Conditions Survey: résumé, 2006. Available in 23 languages on www.eurofound.europa.eu/publications/htmlfiles/ef0678\_en.htm.
- Fifteen years of working conditions in the EU: Charting the trends, 2006. Available in English, German and French on www.eurofound.europa.eu/publications/htmlfiles/ef0685\_en.htm.
- Fourth European Working Conditions Survey: info sheet, 2006. Available in 23 languages on www.eurofound.europa.eu/publications/htmlfiles/ef0652\_en.htm.
- Fourth European Working Conditions Survey: Qualitative post-test analysis, 2007. Available in English on www.eurofound.europa.eu/publications/htmlfiles/ef07671. htm.

More information, contact Sara Riso, Tel.: +353 1 204 3216, sri@eurofound.europa.eu

<sup>&</sup>lt;sup>1</sup> The statistical data are available from the University of Essex (www. esds.ac.uk/findingData/ewcsTitles.asp). Details of how to register are available on www.data-archive.ac.uk/aandp/access/access.asp.

<sup>&</sup>lt;sup>2</sup> See: www.eurofound.europa.eu/docs/ ewco/4EWCS/4EWCSqualityassurance paper.pdf.

<sup>&</sup>lt;sup>3</sup> See: www.eurofound.europa.eu/docs/ ewco/4EWCS/EWCSqualitycontrolreportEU25.pdf.

<sup>&</sup>lt;sup>4</sup> Fourth European Working Conditions Survey: Qualitative post-test analysis: www.eurofound.europa.eu/publications/htmlfiles/ef07671.htm. More detailed information on the post test is available on www.eurofound.europa. eu/ewco/surveys/EWCS2005/posttestindex.htm.