





Construction Sector

A plain English guide











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Analysis of Work-related Injury and Illness 2001 - 2014

Construction Sector

Sectoral Analysis No. 2: Construction Sector by O. Kenny, B. Maître and H. Russell (April 2018)









Analysis of Work-related Injury and Illness 2001 - 2014

About this report

This report is a summary of the longer document named in the title above. It focuses on the **Construction** sector findings of earlier reports that examined work-related injury and illness across the economy as a whole.

All injuries and illnesses reported by workers are included regardless of whether or not they were absent from work, as many people continue to work while sick or injured.

Why is this report necessary?

Employment levels in this sector rose and fell dramatically since 2001, driven by a property bubble and subsequent crash. The rate of work-related injury closely followed the rise and fall pattern in the sector, as did the illness rate.

The fatality rate in the sector is considerably above the average of all other sectors combined. Despite a fall in the rate during the recession years, the rate is rising again as the sector recovers.

It is important, therefore, to examine and analyse these trends and patterns in the sector with a view to improving worker health and wellbeing, and reducing the number of fatalities and injuries.

How was this report completed, and what research information does it cover?

We used information from the Central Statistics Office's (CSO) Quarterly National Household Survey (QNHS) to inform this report. Specifically, we used information gathered in the annual special module on work-related accidents and illnesses. The module is restricted to those who are employed at the time of the survey, or who are not currently employed but had worked during the 12-month reference period.

For example, in 2015, in the case of injuries, respondents were asked:

'How many, if any, injuries did you incur at work (excluding commuting) during the period January 2014 to December 2014?'

For illnesses, the following question was asked:

'How many, if any, illnesses or disabilities have you experienced during the 12 months January 2014 to December 2014, that you believe were caused or made worse by your work?'

Respondents were also asked how many days they had taken off work as a result of these injuries or illnesses.

The QNHS is carried out in private households and the responses are unconnected to any workplace reporting.

Using the survey information, we analysed it and applied it to the sector under the following headings:

- Worker and job characteristics and risk of injury
- Worker fatalities in the construction sector
- Work-related illness in the construction sector.
- Days lost due to illness and injury
- Inspections

The findings for each section are presented below.

Worker and job characteristics and risk of injury

In this section, we examined the relationship between the risks of injury among construction sector workers and a range of factors such as personal and job characteristics – for example, age, gender, nationality, shift work, whether workers were employees or self-employed, how experienced they are, and so on.

The significant findings were:

- Injury risk is highest among construction workers in the 35 44 age group (5.5%). This is a significant increase on the risk for those aged over 45 (between 1.3% and 3.8%).
- Men (4.6%) are much more at risk of injury than women (0.7%).
- Irish workers (4.6%) are a higher risk group than non-Irish (3%).
- Those working between 40 and 49 hours have the highest risk (4.5%), which is significantly different to those working 30 to 39 hours (3.0%) and those working more than 50 hours (2.6%).
- Those with less than six months' experience are over three times more at risk (15.3%) than those with 6 12 months' experience (4.8%).

Worker fatalities in the construction sector

Analysis of the information regarding worker fatalities over the period in question yielded the following findings:

- The fatality rate for this sector was considerably above the all-sector average for the years 2001 2014.
- There were 104 worker fatalities during the boom years (2001 2007), falling to 49 fatalities in the recession and recovery years (2008 2014).
- The drop in the fatality rate in this sector during the recession years was steeper than the drop in other sectors.

Work-related illness in the construction sector

In this section, we examined the association between illness and time period (the boom years 2001 – 2007; recession years 2008 – 2011; and recovery years 2012 – 2014), together with the characteristics of those working in the construction sector and their job structure.

Over the period 2002 to 2014, 66% of all illnesses reported by workers in the construction sector were due to musculoskeletal disorders (MSD), compared to 47% across all sectors.

The significant findings were that:

- Rates of work-related illness were higher in the boom period (3.3%) than in the recession period (2%).
- Men are more than three times more likely to experience work-related illness (2.9%) than women (0.8%). This is the opposite of the findings in other sectors.
- Workers under 25 years are significantly less likely to have had an illness in the preceding 12 months (1.0%), compared to all other age groups (between 2.0% and 4.3%).
- The rate of illness is higher for the self-employed (3.3%) than it is for employees (2.4%).
- Those working less than 30 hours a week show higher risks of illness (5.3%) than those working more than 30 hours. The risk of illness is almost six times higher for those who have less than six months' experience (16.5%) than it is for those with 5+ years' experience (2.8%).

Days lost due to illness and injury

In this section, we examined the information in terms of two timeframes – the boom years of 2001 – 2007 and the recession and recovery years of 2008 – 2014. The main findings were as follows:

- During the boom years, the average number of days lost to injury (712 per 1,000 workers) and illness (553 per 1,000 workers) was the **second highest** of all sectors.
- The average number of days lost to injury fell during the recession years, following the pattern of other sectors.
- The average number of days lost to illness in the recession and recovery years dropped steeply (from 553 to 313 per 1,000 workers).
- The average number of days lost to illness during the recession and recovery years was lower than all other sectors combined.

Inspections

In this section, we examined the impact of health and safety inspections in relation to the rates of injury and illness. The main conclusions were as follows:

- Inspection rates per 1,000 have been consistently much higher in this sector than others.
- The inspection rate peaked in 2010 with 47.1 inspections per 1,000 workers. This was over five times the inspection rate of other sectors.
- The inspection rate fell consistently over the recession and recovery years, but still remains about five times higher than other sectors.

Where can I get more information?

You can get the full version of this document on the Economic and Social Research Institute (ESRI) website www.esri.ie

Also, you can download the following documents:

Trends and patterns in occupational health and safety in Ireland.

Work-related musculoskeletal disorders and stress, anxiety and depression in Ireland: Evidence from the QNHS 2002–2013.

These are ESRI publications and are available on their website at www.esri.ie/publications/

You can also access plain English summaries of these publications on the Health and Safety Authority's website at:

www.hsa.ie/eng/Publications and Forms/Publications

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