

Women in paid work, some health and safety issues

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Introduction

Australia, perhaps more than most, is a masculine country. Not in the sense of macho posturing, although there is a bit of that, but in uncritical, tacit assumption that the masculine is the benchmark. Perhaps this should be expected in a country whose European settlement was by British and Irish, mainly male, convicts whose presence was supplemented later by boatloads of women, brought to civilise disruptive unruliness and begin building families for the emerging colony. The masculine norm continued, through the mythology built up by participation in several wars, dominant industries such as mining and stock farming, and cultural obeisance to the romance of "the bush" - non-metropolitan Australian where men are men and women are incidental.

Although Australian women won the right to vote in 1899, when the first national minimum wage was set in 1907, it was at a level that could support a married man with two dependent children. Workers who could not meet those criteria – e.g. women – were paid disproportionately less, a situation that remains for women in the paid workforce albeit through more subtle mechanisms of disadvantage. Despite the principle of equal pay for work of equal value being recognised in 1969, and the granting of an equal minimum wage to women and men in 1974, the average weekly wage has consistently been lower for women than men, across and within occupational categories. Currently, the 56.4% of Australian women in the paid workforce who have full time employment (ABS 2002) enjoy one of the narrowest wage gaps at 84.6% of men's full-time ordinary earnings. This decreases to 66.0% of men's total earnings (ABS 2002), ranging between only 6.6% less in retail and a massive 44.0% in the finance and insurance sector (Creed 2002).

Workforce Participation

With this provenance, then, it is unsurprising that Australia has one of the most gendered workforces

amongst comparable economies. The OECD reports that, while the vast majority of the female workforce in member countries is concentrated into about 16% of occupational categories, Australia is one of five countries where women seem to have fewer occupational options and one of two with a long-term, persistent employment gap (OECD 2002 (forthcoming)). As well, Australian women's paid occupational opportunities are reported to be affected disproportionately by motherhood. Having one child aged 15 years or less brings significantly reduced participation by a mother in the paid workforce, and two or more children is much more likely to mean part- rather than full-time work (OECD 2002 (forthcoming)). This effect cancels the positive impact of education levels on women's paid workforce participation found in all other OECD countries.

At the beginning of 2002, 55.2% of women in the civilian population aged 15 years and older were in the paid workforce, 6.0% more were unemployed (ABS 2002). Women in paid employment were clustered into four industries: Retail Trade (17.6%), Health and Community (17.3%), Education (10.9%), and Property and Business Services (11.1%) (please note: these percentages have been updated from the abstract). The percentage of women working in other industries included Manufacturing (7.6%), Accommodation, cafes and restaurants (6.4%), Finance and insurance (4.8%), Government administration and defence (4.3%) and Personal and other services (4.2%). Less than 4% of women in paid employment were working in each of Agriculture, forestry and fishing, Mining, Electricity, gas and water supply, Construction, Wholesale trade, Transport and storage, Communication services, and Cultural and recreational services.

Occupationally, nearly three quarters of women in paid employment were Intermediate (28.2%) or Elementary (14.9%) clerical, sales and service workers, Professionals (20.6%) or Associate professional (10.0%). Another 9% of women in paid employment were Advanced clerical and service workers and 8% were Labourers. Less than 5% were in each of the Managers and administrators, Tradespersons and Construction and transport workers fields. Closer inspection of the data (ABS 2002) found continued gendered division within these occupational categories.

Full-time

Of the women employed in the Intermediate category, 69.7% were clerical workers and 25.2% were service workers. Although women comprised 62.6% of workers in this category, there was a wider spread of men across the subsets: 54.4% were clerical, 18.5% were service workers, and 27.1% were in sales (only 5.1% of the women workers were in sales). However, 78.7% of women employed as Elementary clerical, sales and service workers were in sales (62.2% of men in this category were in sales). Women were more evenly distributed across the Professions with 25.0% in Business and information, 23.2% in Health, 31.9% in Education, and 15.5% in Social, arts and miscellaneous professions. Women outnumbered men in the Health and Education categories. As Associate professionals, 80.2% of women were in Business and administration (37.1%) or were managing supervisors in sales and service areas (43.1%). Another occupational indicator – hours worked – showed the male workforce working more full time hours than the female in all areas except health and education professionals, health and welfare associate professionals, food tradespersons, secretaries and personal assistants, other advanced clerical and service workers, intermediate clerical and service workers, and elementary sales workers.

Part-time

In every major occupational category except Tradespersons and related workers and Intermediate production and transport workers, women outnumbered men with stark visibility of the gender divide in participation mode (Table 1).

Table 1: Female/Male Participation (%) in the paid workforce, Australia 2002

	Female		Male	
	Full time	Part time	Full time	Part time
Managers/Administrators	19.5	64.0	80.5	
Eg farmers/farm managers	19.4	69.3	80.6	
Professionals	41.8	76.8	58.2	
Eg Business and info professionals	32.3	62.1	77.7	
A/Professionals	32.8	69.7	67.2	
Eg Science, engineering and related	15.5	65.3	84.5	
Trades/related workers	6.7	41.5	93.3	
Eg Food tradespersons	20.4	66.8	79.6	
Advanced clerical, etc	83.9	95.9	16.1	
Eg not secretaries or PAs	62.6	93.4	37.4	
Intermediate clerical, etc	62.6	87.8	37.4	
Eg sales	23.9	72.4	76.1	
Inntermediate production and transport workers	9.4	32.3	90.6	
eg machine operators	34.8	74.5	65.2	
Elementary clerical, etc	51.4	75.6	48.6	
Eg service workers	25.8	48.8	74.2	
Labourers and related Workers	24.9	55.7	75.1	
Eg cleaners	36.5	73.1	63.5	

Patterns of Women's participation also changed by greater or lesser degrees in category subsets: in

Intermediate clerical sales and service workers, and 2.5% were in sales. By far the greatest proportion (88.6%) of women in Elementary clerical, sales and service

work were in sales – indeed, they were 66.9% of all workers across the subsets comprising this category. Seventy-one point six percent of women were in professions, comprising 55% off all workers in the health and education

Professions ; and while they were 69.7% of the part-time

Associate professionals participation was spread relatively evenly over all this category's subsets. The changes in workforce participation were also evident in the raw hours worked which showed female dominance as

specialist and farmers and farm managers ; business and

information, health, education and social, arts and miscellaneous professionals ;

other associate professionals, administration , managing supervisors , health and welfare , and

; food tradespersons , other tradespersons and related workers ; all subsets of

~~Advanced technical workers~~ and Elementary clerical, sales and services workers except

; Intermediate machine operators ; cleaners and factory workers .

With consecutive governments' policy wedded to economic rationalism, the effects of globalisation have begun to bite in terms of workplace restructuring. The past decade has seen strong growth in casual and part-time employment, moves away from the dominant 9 am-5 pm, five day working week, sustained higher unemployment, labour market deregulation and changes in the use of technology (ABS 2001). While the largest employment group continued to be employees with some paid entitlements, the other large groupings were the self-employed (14%) and self-identified casuals (18%) of whom two-thirds were women. These work arrangements are characterised by greatly reduced entitlements, including access to both holiday and sick leave, superannuation contributions, and so on. More than half of self-identified casuals worked in the Accommodation, cafés and restaurants; Retail trade and Property and business services industries.

People in full-time employment, including the self-employed were working longer hours for which a fifth of employees received no compensation (ABS 2002). Of women in paid employment, 41.9% worked part-time with nearly a quarter (23.4%) of these wanting either more part-time or full-time hours (ABS 2002). The majority (56.6%) of the underemployed paid workforce were women, as was the proportion (55.3%) of multiple paid job holders. Of women holding multiple jobs, 78.8% were born in Australia, 56.6% were married, and 71.8% were in the children rearing age range 25-54 years. The Australian Bureau of Statistics (ABS) describes the latter employment category as being important

and Manufacturing (11.2%)¹. There were more women than men harmed in

Accommodation, Finance and insurance (73.9%), Education (56.4) and

(50.1%). By far the most women suffered injury and poisoning (83.8%), followed by mental disorders (6.8%) and diseases of the musculoskeletal system and connective tissue (5.6%). Only in the mental disorders category did women (56.1%) outnumber men.

In Western Australia, in 1996-97, 71.7% of all lost time diseases affecting women were mental disorders (39.3%) and musculoskeletal (32.4%) (White 2001). Most (63.6%) injuries were associated with muscular stress (42.4%) and falls, trips and slips (21.2%). Disease details are not available for 1999-00, however the rates for injuries associated with muscular stress (43.3%) and falls, trips and slips (22.4%) remained constant, indicating that disease rates may also have done so (Worksafe WA 2001). But what do these data mean?

Women's work and health

It is accepted that, because of the gendered nature of Australia's labour force, there are significant differences in women's and men's experience of occupational health (Bohle and Quinlan 2000). Until recently, these differences have been hidden by women being partitioned into a narrow range of occupations considered to be physically, morally, intellectually and emotionally appropriate. Women, particularly married women, in the paid workforce contradicted values shaping family and gender roles. The occupations open to them not only were thought the most fitting but were also considered to be safe (Quinlan 1996; Williams 1999). Both of these factors – the "natural" fit hence their safety – excluded women's occupations from OHS attention; so much so that, prior to 1985, women's occupations were not recorded for death registration purposes (Mathers 1994).

Inclusion of women's experience in OHS data may be another outcome of the 1970s' women's movement that forced change to women's working conditions and to society's opinion about women's workforce participation. By the end of the 1980s, occupational health was one of seven priority areas in Australia's women's health policy which had been developed from consultation with more than a million women in all parts of the country. Associated research priorities included examination of the conditions of rural women, women in factories and offices, outworkers and homeworkers. The research priorities also included the effect of various pollutants and mechanisation of production processes, outcomes of pregnancy and maternity leave arrangements, family responsibilities, the impact of shiftwork and the outcomes of occupational ill-health in terms of access to workers compensation and disability pensions (Kane 1991). The women's health policy underpinned the development of the nationally endorsed Health goals and targets for Australian Women (Subcommittee on Women and Health 1993) which recorded promote occupational health and safety in women as Goal #5.1 and included a range of strategies to begin addressing related issues. At much the same time, the only national compilation of women's occupational health and safety data (Worksafe Australia 1994) was issued and the ABS published Women's Health (ABS 1994), chapter eight of which provided data and discussion about women's illness and health by occupation.

With the political climate allowing examination of women's health in the paid workplace, it became apparent that, as with the male workforce, patterns of disease and injury were strongly linked to paid workforce participation in terms of both industrial and occupational categorisation. For example, the majority (67.7%) of occupational injuries to women in Western Australia's

industry were to staff in hospitals and nursing homes with muscular stress occuHealth and Community times more often than the next highest injury category of falls, trips and slips. About half of the injuries were attributed to manual handling techniques, with concomitant above average duration and severity rates. The economic imperatives of publicly versus privately funded health care are underlined

by the majority of injuries being suffered by registered nurses in hospitals but by ward helpers in nursing homes (White 2001). In response to related escalating workers' compensation costs, a major teaching hospital in Perth has introduced a patient handling risk management program with intensive regular training for "minimal lift" work practice and aspirations to "no lift" with the strain being taken by hoists, slings and other mechanical aids (Barton 2002). The relevant union advised that specialist orderly positions, specifically to lift and turn patients, in that hospital were made redundant some years ago. Further, work demands in nursing homes are too heavy for two people to be available at the same time, to use the lifting equipment.

Muscular stress was also the dominant form of injury for women working in the manufacturing (specifically in meat processing and other manufacturing), sales (supermarkets, grocery and department stores) and cleaning (cleaning services and State government administration) sectors. The injury rate for women working in the Accommodation and restaurants sector was higher than the average rate for women in paid employment, and they were more likely to suffer falls, trips and slips (29.1%) than muscular stress (24.4%), although not by much. The rate of falls, trips and slips and muscular stress were on a par for school teachers, particularly for primary school teachers, and it was for teachers that work-related stress was more evident (11.4% of injury mechanism) (White 2001).

In Australia, as elsewhere (WHO 1997; Harlem Brundtland 1999), musculoskeletal disorders are experienced up to three times more by women than men (Industry Commission 1995) with their cause attributed to workplaces and equipment designed to a male norm, work practices such as over-use of a limited range of movement and poor posture that are shaped by repetitive task demands and/or participation in casual or outwork where regulation of the workplace is either minimal or non-existent (Williams 1999). Women's injuries are more likely to be chronic and, once incapacitating, to cause more lost working days than men's yet less likely to be compensated where minimum levels of

incapacity are set. It is also thought that women are less likely to seek compensation because their claims are countered with arguments that domestic duties contributed to their injuries and that their injuries are not so severe that they have stopped doing housework (Bohle and Quinlan 2000) - with survey after survey finding that Australian men have not embraced equitable distribution of domestic labour (Austen and Birch 2002), there is nobody else to do it. Another reason suggested by union experience is that, with significant numbers working in small, non-unionised workplaces, women are reluctant to claim against an employer they regard as a friend.

While it has been recognised that factors underpinning women's occupational health and safety are quantifiably different to those of men's, there has been little movement to regulate conditions under which the injuries occur. One reason for this is women's lower participation in organised labour. In 2000, 22.8% of women in the paid workforce in Australia were members of trades unions, a decrease from about 35% at the beginning of the 1990s. Despite their dominance in these industries, only 19.7% of women in retail, 43.5% in education and 32.8% in health and community services had joined a union (ABS 2002). While men's union membership has also decreased over the past decade, it remains higher than women's in all industries other than retail trade, finance and insurance, and health and community services resulting in a focus by collective action on organised, male dominated industries. Another reason is that, without a collective voice, women's ability to negotiate wages and conditions has been further undermined by industrial relations reform, including marketplace deregulation.

Interestingly, the national and Western Australian trades union leaders are women, an outcome of affirmative action policy designed to demonstrate the relevance of unionism to women, to help women organise around issues of importance to them, to build the organisational strength of women in unions and to develop alliances between unions and women's and community organisations on matters of common interest (Creed 2001).

As noted above, there has been a major shift to flexible – ie, unregulated, unprotected and insecure – work arrangements over the period paralleling the decline in union membership. This shift is in response to OECD-driven initiatives to have national economies driven by internationally competitive imperatives to minimise production costs and maximise investment returns to private shareholders. An effect of this is for investment to be constantly on the move to find cheaper labour and materials, most often located in countries with developing economies, far away from investors and company head offices.

A corollary for workforces in developed countries are threats to conditions of paid employment, and to employment opportunity, brought by principles of competition. As noted above, the more obvious outcomes in Australia of the global investment push are increased part-time, casual and self-employed workforces, accompanied by reduced occupational protection where this can be avoided through mechanisms such as contracts with agents that effectively isolate the worker from institutionalised support either through legal definitions of eligibility or through workers' lack of knowledge of those supports (Lim 1998; Brandis and Crunden 2002). This is exacerbated by policy directing the workforce away from collective bargaining to workplace agreements and individual contracts which are known to disadvantage women's working conditions and wages (ACTU 2000). Despite rhetoric about individual work contracts giving workers greater control over their employment, the reality is that the inherent inequality between employer and worker, particularly for workers with competing domestic responsibilities, renders the worker vulnerable to exploitation to meet the employer's needs.

The transition to new economic organisation must be embedded in a rational framework of support that recognises the different but equal contribution made by all sections of the national workforce. We do not live in an economy but in a society, a cultural construct marked by many inter-dependent roles,

relationships, rights, responsibilities and aspirations. In reality, paid and unpaid work is not rigorously kept separate but blends over our waking day – a fact lost on bureaucracies such as taxation offices. To be a woman endeavouring to balance paid and unpaid work expectations with the domestic and personal is to confront a range of challenges that are qualitatively and quantitatively different to those of men. From securing quality childcare, to fulfilling obligations to other family members such as aging parents and school aged children, to fulfilling domestic requirements, to meeting paid and community work obligations, women have a set of capacities that may require a broadening, or a specific schedule of injury that recognises their full range of social responsibilities.

However, in recent years those supports seem to be reducing. Paradoxically, while globalisation is pursued because of its putative benefits, these seem elusive for populations. Government services such as health care and education are regularly described as being in crisis. Financial support to the losers of the competitive climate is minimal and increasingly contingent on meeting "mutual obligations" for its receipt so that women in their forties, fifties and even sixties are required to undergo the travesty of demonstrating they have sought jobs that they won't get to ensure a continued income. Shifts in child-care funding mean the demand for those services cannot be met (Austen and Birch 2002), and calls for universal maternity leave are being refused by the government. Only 30% of Australian women in the paid workforce have access to some maternity leave; where it is available in Western Australia, the norm is a maximum six weeks (Creed 2002). There are no limits on maximum hours of work resulting in increased fragmentation of "shop floor" time, and of overall hours worked, in a reduction in incentives such as overtime for irregular or long hours or hours controlled by the worker, and a shift to task completion rather than hours worked as the measure for remuneration (Heiler 2002). Euphemisms such as "flexibility", "reform", de-regulation", "enterprise bargaining" are used to redefine reduced protection and exploitation. Those of us idealistic enough to believe that any benefits of globalisation

should be distributed globally recognise that the demands of capitalism will make this a challenging goal.

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