



1 9 9 2

***European Year
of Safety, Hygiene
and Health Protection
at Work***

***Europeans
and
health and safety
at work***

A survey

COMMISSION OF THE
EUROPEAN COMMUNITIES

SUMMARY

SYNOPSIS

SUMMARY

NOTE

1. INTRODUCTION

2. CONTEXT OF THE STUDY AND OF THE RESULTS

- 2.1 "1992"
- 2.2 The social dimension
- 2.3 Distribution of activity sectors within each Member State of the Community
- 2.4 Breakdown of companies according to size in each Member State
- 2.5 The position of women in the sample, and features of the results
- 2.6 General remarks

3. RESENTATION OF REPLIES BY SUBJECT

- 3.1 The role of the European Community
- 3.2 Perception of risks
- 3.3 Incidence of work-related illnesses and accidents at work
- 3.4 Prevention and responsibilities

4. ANALYSIS OF POPULATION PROFILES

- 4.1 Presentation of results in profiles
- 4.2 Indicators
- 4.3 Other values used to prepare profiles
- 4.4 Presentation of profiles

5. DETERMINING FACTORS FOR THE REPLIES

6. CONCLUSION

- 6.1 A current cause for concern
- 6.2 The company: a driving force in prevention
- 6.3 Varied situations
- 6.4 Determining factors for the replies
- 6.5 Risk sectors
- 6.6 A Community dimension

ANNEXES

NOTE

This Eurobarometer survey was carried out on behalf of the Health and Safety Directorate of the Directorate-General for Employment, Industrial Relations and Social Affairs of the Commission of the European Communities. It is part of the approach developed and implemented by the Directorate-General for Audiovisual, Information, Communication and Culture, which conducts and publishes the Eurobarometer surveys every six months.

The survey was carried out by institutes associated with the INRA (Europe) European Coordination Office. They were selected on the basis of tenders. All are members of the European Society for Opinion and Marketing Research (ESOMAR) and conform to its standards. The survey results were analysed in greater detail by V. Grosjean and M. Vandekeere of the Industrial Psychology Service and the Opinion Research Centre of the University of Liège.

In accordance with normal practice for this type of survey, the European Commission disclaims all responsibility for questions, results and commentaries; these do not necessarily reflect its views. This report is an internal document of the Commission of the European Communities.

SYNOPSIS

* In order to prepare for the European Year of Safety, Hygiene and Health at Work in 1992, Directorate V/E (Health and Safety) of the Commission of the European Communities carried out a survey on these subjects through Eurobarometer; the sample comprised 12 500 people, representing the national working populations in the 12 Member States.

* ***A matter of current concern***

- » 42% of European workers think that their health is or could be affected by their work;
- » 40% think they run the risk of an accident at work;
- » one worker in four is concerned for both his health and his safety;
- » 27% use potentially dangerous equipment or machinery for more than a quarter of their working hours;
- » 84% consider industrial accidents and occupational diseases to be common or very common in their country;
- » 14% of European workers say they have had an industrial accident or occupational disease recognised as such by the competent national bodies;

* **European expectations**

- » 94% of the European working population is in favour of legislation common to all Community countries;
- » 60% consider that the application of Community legislation will improve their health and safety conditions;
- » 67% would like more information on Community activities relating to the health and safety of workers;

* ***Responsibility lies with the company; ...***

- » 65% of the working population consider that the company bears the main responsibility for preventing accidents and diseases;
- » 53% feel that improving safety could improve their efficiency;

* ***... much has already been done ...***

- » 83% of workers are satisfied or very satisfied with action taken to ensure safety, hygiene and health;
- » 86% consider themselves well informed about risk prevention;

* ***... but there is still much to be done***

- » workers say that, the more potentially dangerous their work, the less informed and satisfied they are;
- » 60% of those replying know a person in charge of health and safety;
- » 28% say they have received training in safety, hygiene and health;
- » 55% of workers have already had the possibility of giving their opinion on improving protection;

* ***Different situations***

There are differences, some of them significant, between:

- » **countries**, where the replies often show specific national structures;
- » **sectors of activity**, where the tables show some organisation and coherence; according to respondents, agriculture and construction stand out due to their high level of risk and low level of prevention, while the "energy, extractive and chemical industries" are also a high-risk sector, albeit with a better level of prevention. It should be noted, however, that no sector is free of dangers;
- » **occupations**, since "blue-collar workers" are clearly more exposed than others;
- » **companies of different sizes**, since small and medium-sized companies do not appear to have the same resources for prevention.

1. INTRODUCTION

With the European Year of Safety, Hygiene and Health at Work in 1992 in mind, the Commission of the European Communities conducted a survey of the opinions and perceptions of Europeans on this subject in spring 1991.

The aims of this study, conducted by Directorate V/E (Health and Safety) are as follows:

- an improved understanding of how health and safety at work are perceived in the Community as a whole;
- to provide the basic elements for implementing an information campaign to coincide with the European Year 1992.

In order to do this, the 20 questions asked were based on the following subjects:

- perception of risks to health and safety at the workplace;
- preventive and protective measures;
- perception of responsibilities;
- the role expected of the European Community.

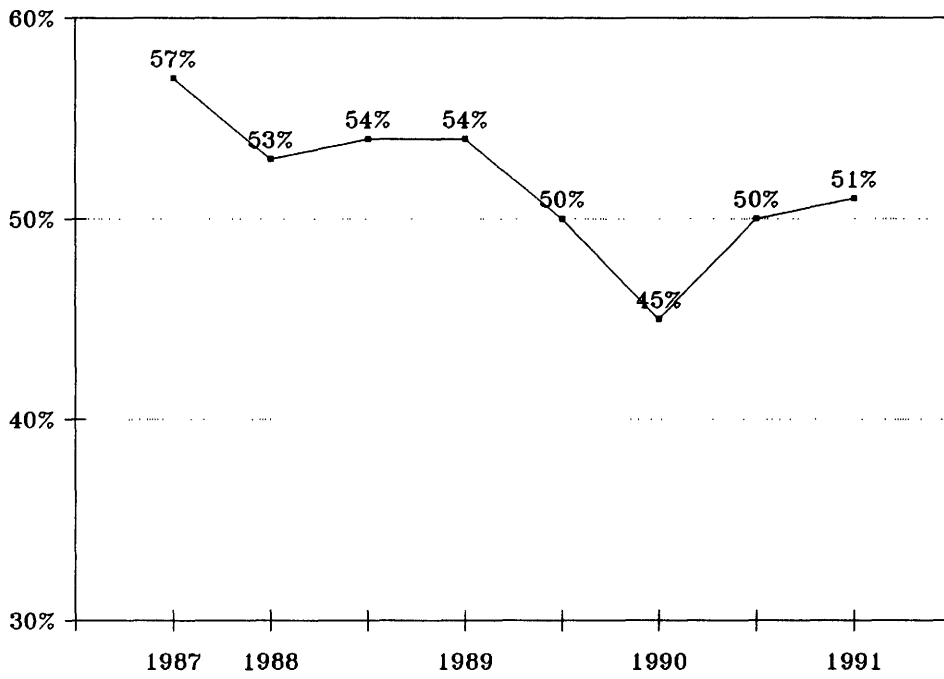
The method chosen was to integrate these specific questions into the Eurobarometer. The sample of approximately 12 500 people is representative of the national populations of the 12 Member States who are in employment (employed and self-employed in all sectors of activity). Non-active people, students, the retired and the unemployed are excluded.

The technical specifications for this survey, carried out on the basis of face-to-face interviews, are listed in the Annex. It is worthwhile noting, however, that while the normal Eurobarometer procedure provides a sample of 12 500 individuals, this includes both workers and non-active people (the proportion of employed people varying between 40 and 65% according to country). A supplementary sample was therefore put together following the same method, in order to arrive at an approximate total of 12 500 people in active employment. This total was weighted in accordance with certain variables: region, population density, sex, age and sector of activity, using data from Eurostat (Statistical Office of the European Communities) as a reference.

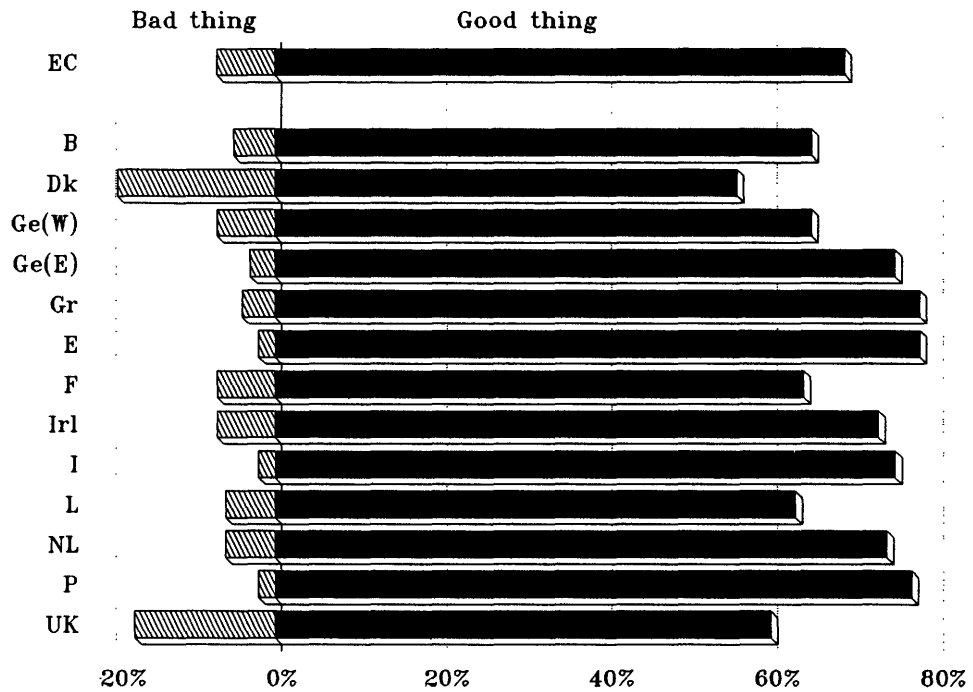
This report is in five sections (in addition to the introduction):

- the overall context of the study. Health and safety are very specific considerations in relation to workplaces, and it is therefore important to be well acquainted with the characteristics of those workplaces (sectors of activity, company size, structure of workforce, etc.). They also form part of the social dimension of the Single Market of 1993 and are recorded in the Charter of Fundamental Social Rights, which deserves a higher profile among Europeans;
- presentation of replies to questions listed by subjects, and of any particularly significant findings, with particular regard to their incidence in particular population sub-groups;
- construction of population sub-group profiles based on more general indicators in order to improve understanding of their specific characteristics. It appears that the European perceives and interprets health and safety problems in different ways depending on which sector of activity he works in, in which country, whether in a large or small company, as a manual worker or in management, employed or self-employed;
- highlighting the determining factors in the trends of replies to various questions. It will be worthwhile determining the basic "structures" of perceptions; in some areas nationality is the determining factor, while in others it is the activity or occupation;
- finally, a summary of the salient features of the analysis, with a view to giving them an overall coherence.

1992 - a "good thing"



Attitude to the social dimension



2 CONTEXT OF THE STUDY AND OF THE RESULTS

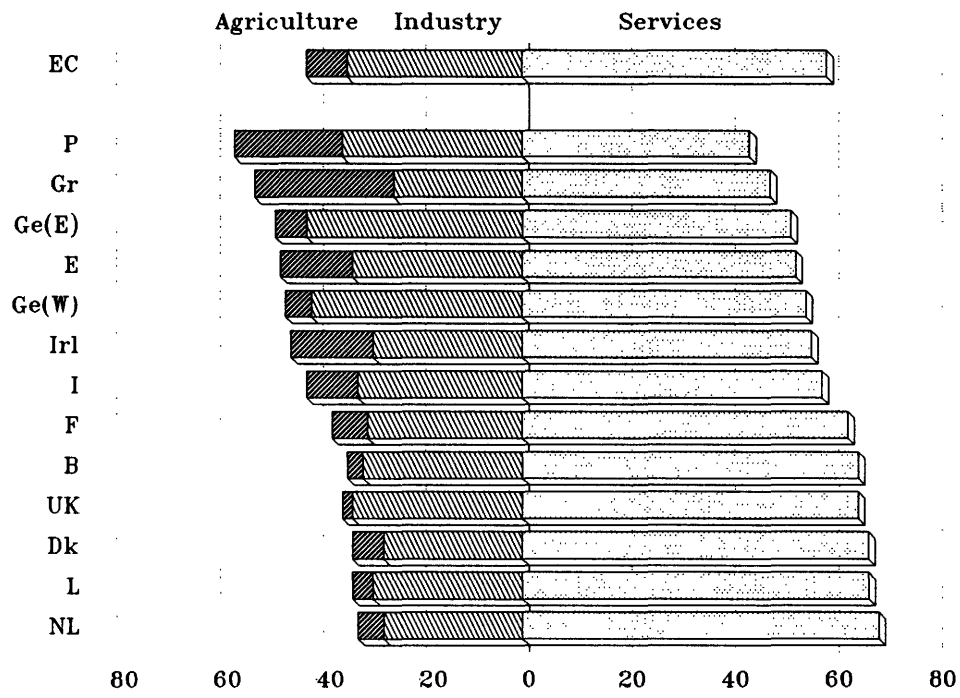
2.1 "1992"

The European Year of Safety, Hygiene and Health at Work will largely take place during 1992. This year will be crucial both for the completion of the Single Market and for the Community's social dimension. The standard Eurobarometer, carried out in the spring of 1991 and based on the entire population, provides some interesting information on the subject of the Single Market. Following a decline in 1989 in opinion favourable to the completion of the Single Market there was a clear recovery of opinion considering it a "good thing" when the last survey was carried out in the autumn of 1990. In this one the level remains exactly the same. 51% of the citizens of the European Community consider the completion of the Single Market in 1992 to be "a good thing" for "people like themselves". 9% hold the opposite view and 31% see it as "neither good nor bad".

2.2 THE SOCIAL DIMENSION

The social dimension of the 1992 Single Market heralded by the Year features prominently in the expectations of Europeans. The level of those considering it "a good thing" is similar to that in the spring of 1989 (69%). Only 7% regarded it negatively. The question asked since the spring of 1989, however, relates to the "Social Charter", and more specifically to the declaration instituting a "Community Charter of Fundamental Social Rights". This time it refers to a "social dimension" which must accompany the Single European Market, explaining that this consists of a common basis of rules and regulations on the rights and responsibilities of workers and employers in all Member States.

Sectors of economic activity

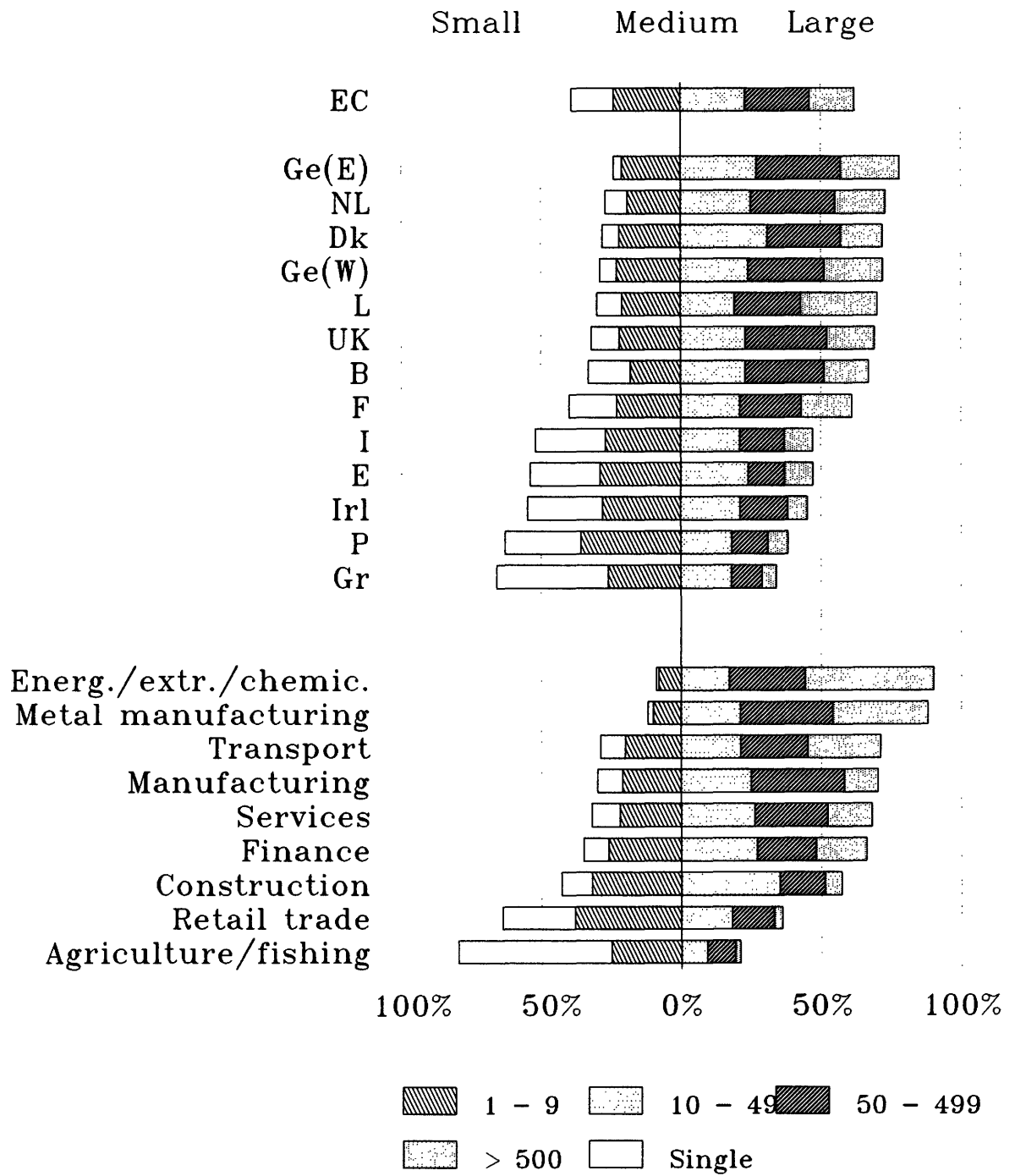


In this latest version, 24% more Spaniards, 12% more Portuguese and Luxembourgers and 9% more Belgians consider it "a good thing". Spain, Greece, Portugal, the Netherlands, the former GDR and Ireland remain most in favour of the social dimension. In contrast, support for this policy in the United Kingdom has declined (-11%).

2.3 DISTRIBUTION OF ACTIVITY SECTORS WITHIN EACH MEMBER STATE OF THE COMMUNITY

If the average distribution of economic activity between the primary, secondary and tertiary sectors at Community level is examined, the figures are 7.5% for agriculture, 34% for industry and 59% for services. This, however, conceals significant differences between some countries. The agricultural sector in Greece and Portugal is much more important (27% and 21%), while the opposite applies in the United Kingdom (2.4%). The industrial sector is more significant in Germany (40.5 and 42%), but much less so in Greece (25%) or the Netherlands (26.5%). The services sector, which is in first place in every country, leads by a much wider margin in the Netherlands (69%) and Luxembourg (67%) than in Portugal (44%) and Greece (48%). Thus, where a particular problem is raised by the workers in a particular sector, its impact will be all the greater in a country where that sector is more developed. In other words, differences between Member States sometimes merely reflect differences in the structure of their economic activities.

Size of undertakings



2.4 BREAKDOWN OF COMPANIES ACCORDING TO SIZE IN EACH MEMBER STATE

As with sectors of activity, there are wide variations between countries in the breakdown of companies according to size.

The family company is omnipresent in Greece (accounting for 40% of respondents) and almost non-existent in Germany (5.6% and 2.5%). On the other hand, Germany (21%) and Luxembourg (27%) have the largest number of companies employing more than 500 people. Greece and Ireland are at the opposite extreme, with 5% and 7% respectively.

With regard to the size of companies in the various sectors of activity, some sectors appear to be dominated by the largest companies, for example the energy/extractive/water/chemical industries (with 74% of jobs in companies employing more than 50 people) and metal manufacturing (67%). Others tend to comprise smaller or even very small companies, for example the construction industry (43% of respondents said they worked in companies employing 10 people or less), retail trade (64%) and, in particular, agriculture and fishing (80%).

Here too, differences noted between countries or sectors of activity will be dependent on variations in the size distribution of companies.

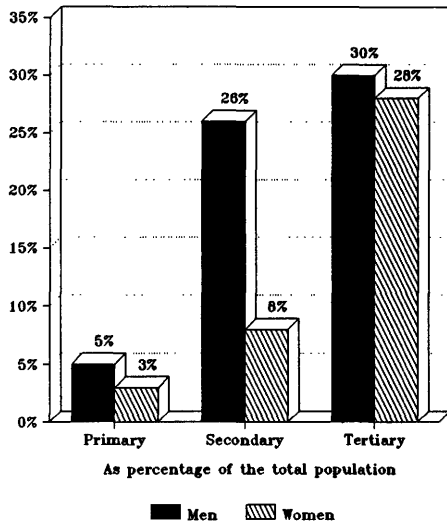
2.5 THE POSITION OF WOMEN IN THE SAMPLE, AND FEATURES OF THE RESULTS

What is the attitude of women to problems of health and safety at work? Are they more or less aware of them, or more or less exposed?

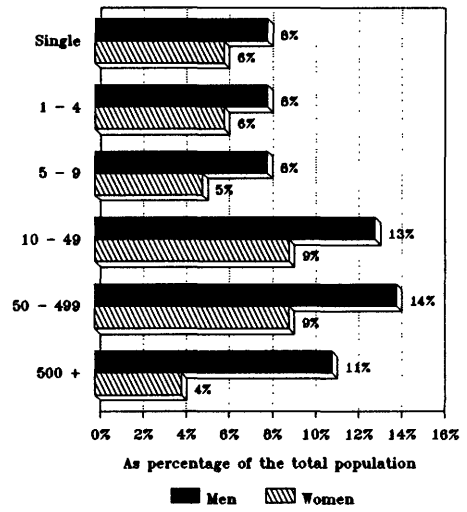
This question has been explicit throughout the study. Since the replies can apparently be organised into a coherent table, they will be summarised here.

The immediate impression is that differences in the replies are due to differences between jobs and not to particular sensitivities or risks.

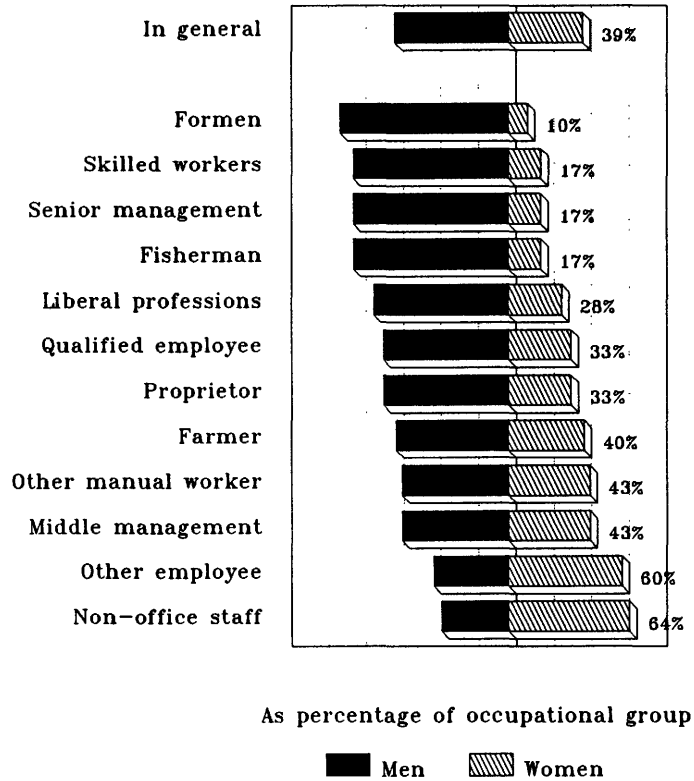
Sex; sector of activity



Sex; company size



Sex and occupation



There are fewer women workers than men, and they are mainly employed in the tertiary rather than the secondary sector. They are generally employed in smaller companies (less than 10 persons). The proportion of women in the various occupations varies widely; they are mainly non-manual workers (60-64%) and middle management (43%), more rarely foremen (10%), skilled manual workers (17%), senior management or fishermen (17%). Whilst the number of women in the distribution, financial or other service sectors in each case equals the number of men, there are two men to every woman in agriculture and fishing and in manufacturing, and four men to every woman in the other sectors (energy/water/extractive, metal manufacturing, construction, transport and communication).

Particular perceptions and opinions regarding safety and health at work derive from these employment characteristics. Subjectively, women are less exposed to risks, since they use fewer dangerous items of equipment (71% never use them, in contrast to 46% for their male colleagues). They consider there is less danger to their health (46.3% say none at all against 32.3% for men) and also consider their risk of accidents to be less (4% consider themselves very much in danger compared with 14% of men).

In addition, they have less experience of occupational disease or industrial accidents; 26% know an affected colleague (46% for men) and fewer have been ill or injured (7.8% compared with 17.7% for men).

In the light of these figures it is understandable that women are less involved in the inner workings of management and take little part in health and safety, and also that fewer of them know who is responsible for safety (57% against 62%), participate less in training (24% against 30%) and give their opinion less often (50% against 59%).

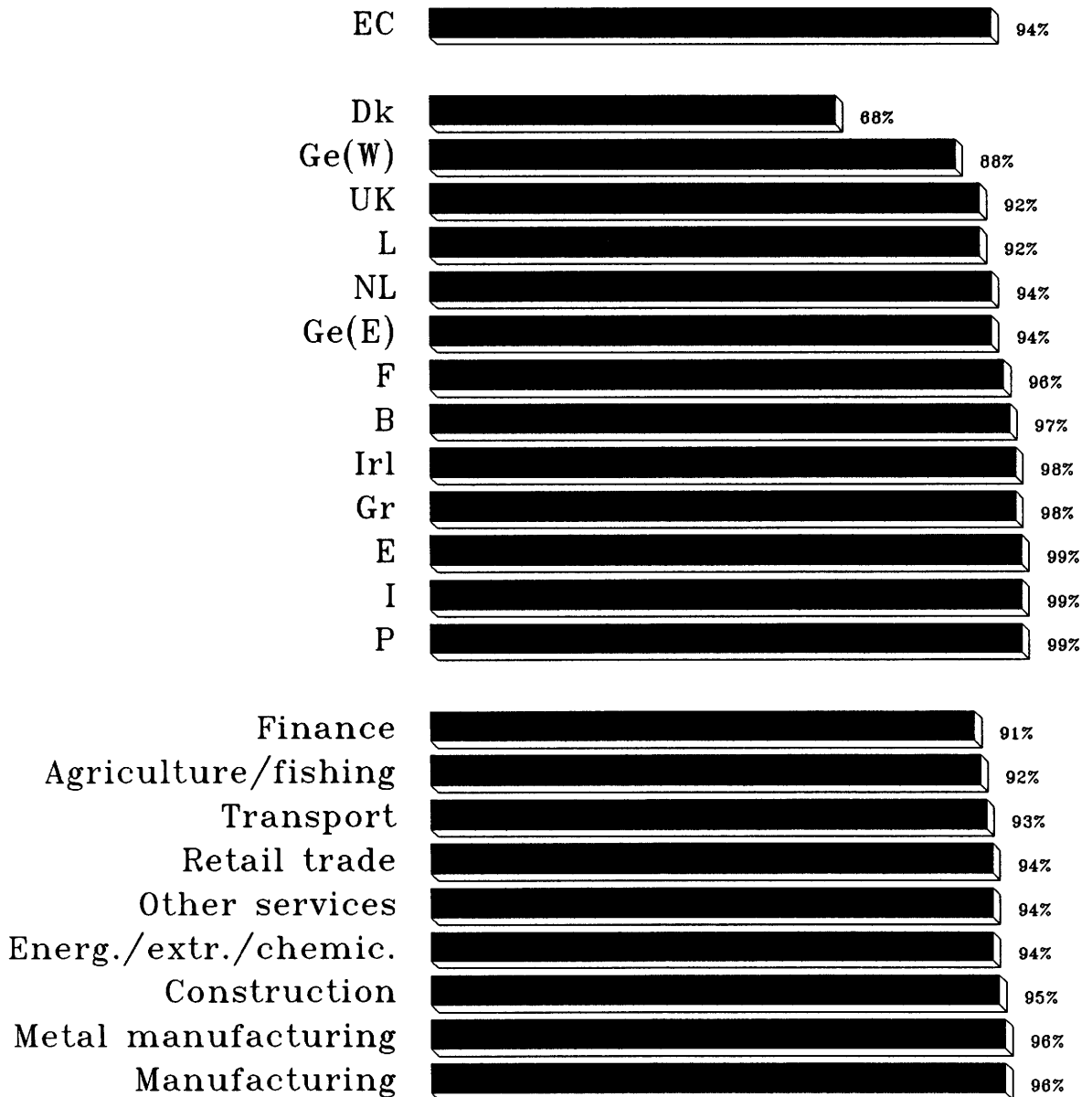
They agree with their male colleagues on the frequency of industrial accidents in their country (84% against 83%), but consider them less frequent in their own company (frequent or very frequent - 13% for women, 23% for men). While they agree on the benefits of common legislation (95% against 94%), women do not see its impact quite so positively (55% against 62%) and fewer women than men wish to have information on Community activities in this field (63% against 69%).

2.6 GENERAL REMARKS

With regard to the new Germany, the question arose as to whether to present the results in differentiated form for the former FRG and ex-GDR or whether to present results for the unified Germany. In view of the results and, particularly, of the significant divergences on some subjects, it was considered preferable to present data relating to health and safety at work by separating the five new Länder from the old ones. Pooling the results would not only have been less precise but would also have risked giving an "average" and meaningless view of two realities which differ in certain respects.

In general, the percentages and proportions quoted in the texts and tables are calculated with reference to the number of people replying to the question. Non-responses and "don't knows" have been left out. For completeness, however, these have been included in the tables in the Annex.

Those in favor of Community-level legislation



3. PRESENTATION OF REPLIES BY SUBJECT

3.1 THE ROLE OF THE EUROPEAN COMMUNITY

3.1.1 Would you be for or against the application of common legislation in all the countries of the European Community concerning safety, hygiene or health at places of work? Would you be: for - very much/for - to some extent/against - to some extent/against - very much? (A32)

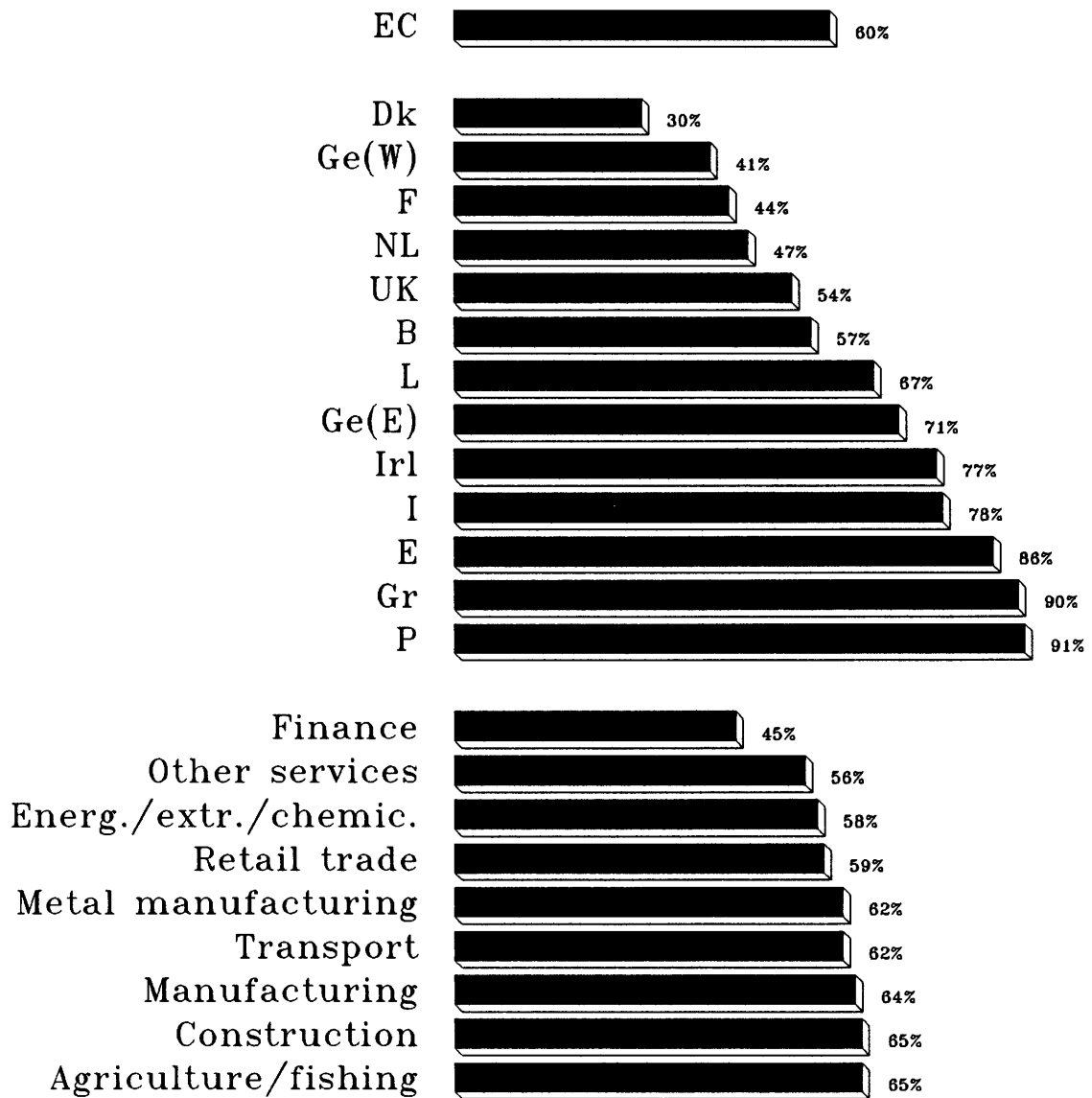
Would workers be in favour of the development of a common health and safety policy?

Yes, since 94% of those who had an opinion said they were in favour of common legislation (52% very much, 42% to some extent).

Very high percentages of people in favour are found everywhere, both at country and sector level, reaching 98 or 99% in some countries. One characteristic is a significant proportion of workers very much in favour of a common policy: Portugal (59%), Italy (69%), Spain (67%) and Greece (77%). Only the Danes adopt a more moderate position: 14% are to some extent against common legislation, 18% very much against. However, this still leaves 68% in favour. Their attitude is probably explained by the fact that national safety and health standards are very high. They are no doubt concerned that any common standards adopted would be inferior to their own. However, it should be noted that, being minimum requirements, Community standards can only improve the situation in a given country.

The fairly high percentage of "don't knows" (7%) should be noted.

Community legislation will improve my situation (% of respondents in agreement)



3.1.2 Here is a statement that some people have made about this subject. Could you tell me whether you agree strongly with this statement, agree slightly, disagree slightly or disagree strongly? COMMUNITY LEGISLATION WILL IMPROVE MY OWN HEALTH AND SAFETY CONDITIONS AT THE PLACE WHERE I WORK (A34)

Do Europeans feel that Community legislation could have a direct and specific effect on their personal situation?

The majority of them hope so, since 60% say they share this opinion, 19% of them strongly. However, the reply "agree slightly" was, with few exceptions, the one most often chosen in all categories. In Greece (40%) and Portugal (50%) the choice "agree strongly" was dominant. In Denmark, 46% of the people disagree strongly with the opinion expressed.

The Portuguese (91%), Greeks (90%) and Spaniards (86%) are particularly hopeful. In contrast, the majority of Danes feel that there would be no direct effects from Community legislation. Having high national health and safety standards, they no doubt fear (wrongly) that these new standards would be less strict than their own.

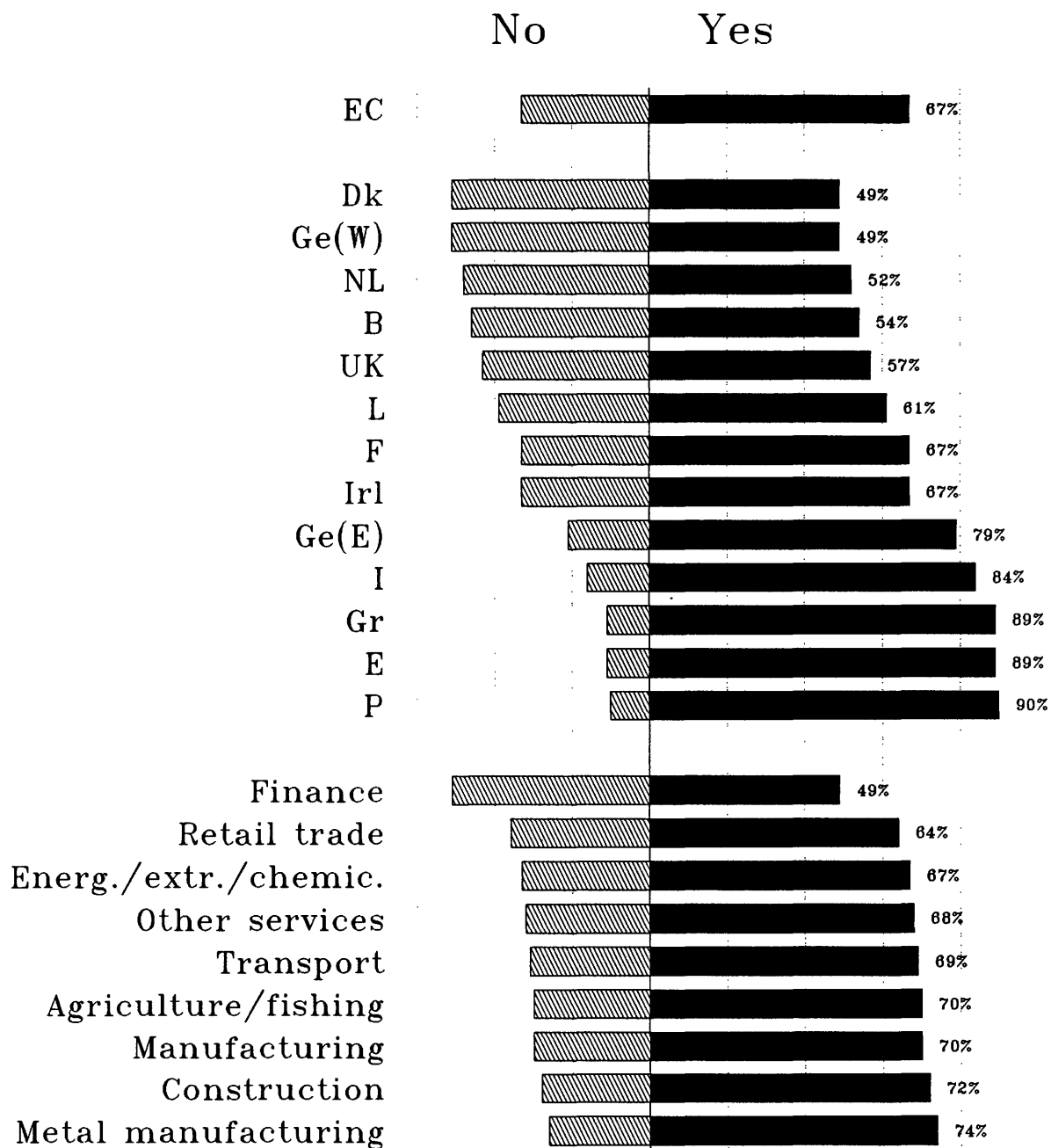
A slight majority of the French (56%), Dutch (53%) and West Germans (59%) disagree with the opinion stated.

There are therefore two groups of countries with very different positions.

Variations between activity sectors are considerably less marked. All results except those for the financial sector are around average. It should be noted, however, that respondents in the "risk" sectors, which are most dissatisfied with regard to prevention, are those who place most hope in common legislation (agriculture (65%) and construction (65%)).

The number of those undecided, at 18%, is considerable.

Wishes to have more information on EC activities



3.1.3 Would you like to receive more information on the actions of the European Community concerning the protection of workers in companies and institutions such as yours? (A31).

Do Europeans consider themselves sufficiently informed about what the European Community is doing in the field of health and safety?

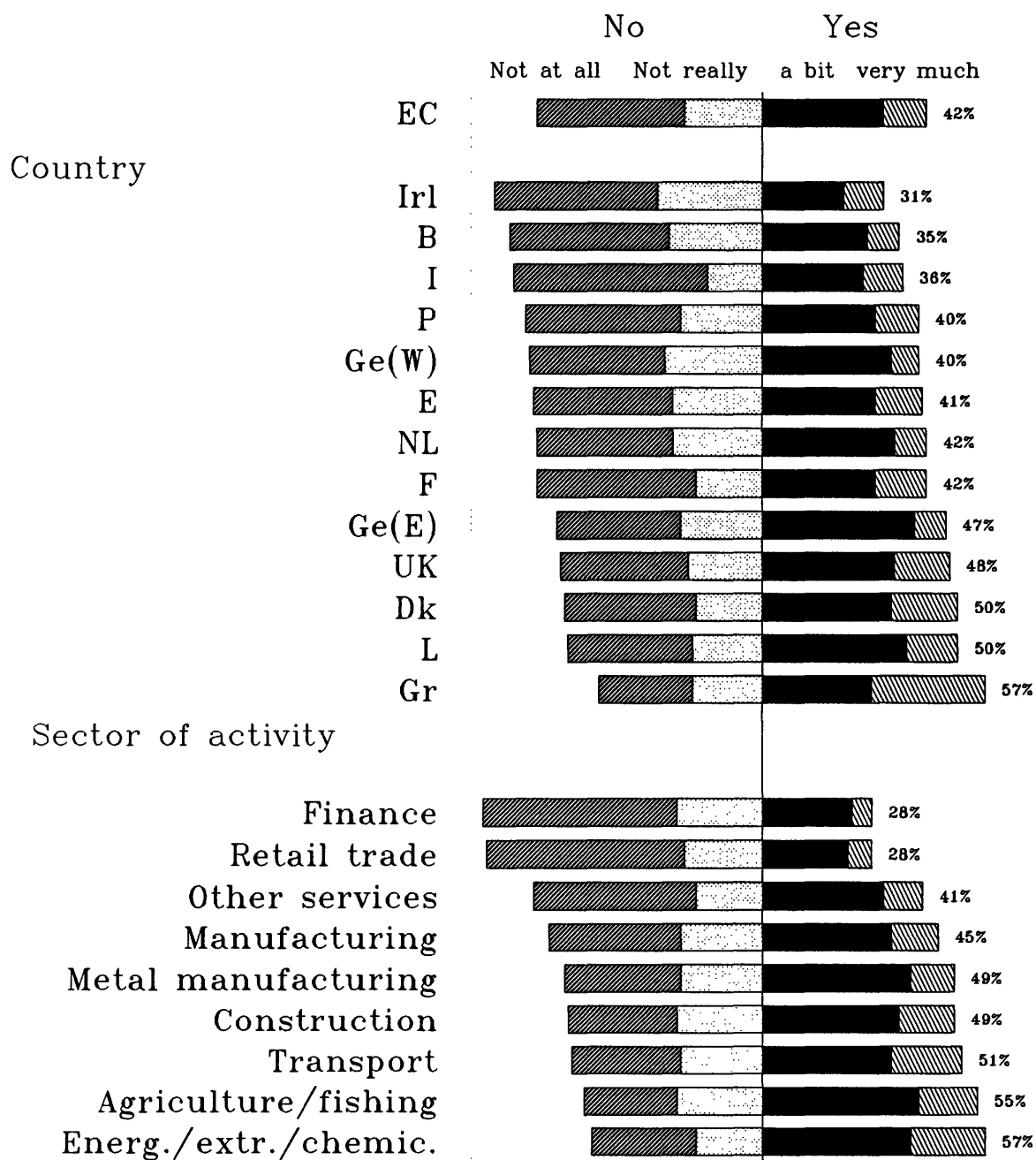
67% of people would like more information, but the spread of results is very significant, particularly at Member State level.

A high proportion of Portuguese (90%), Spaniards (89%) and Greeks (89%) want to know more, while only one in two Danes, Germans from the ex-GDR and Dutch want more information. Are they better informed and/or less interested?

In general, there is less demand for information in the tertiary sectors than in the primary and secondary sectors but, being in less danger, they perhaps feel less concerned (for example, the result for the financial sector was 49%).

10% of those asked had no opinion on the question.

Do you feel your professional activity affects your health ?



3.2 PERCEPTION OF RISKS

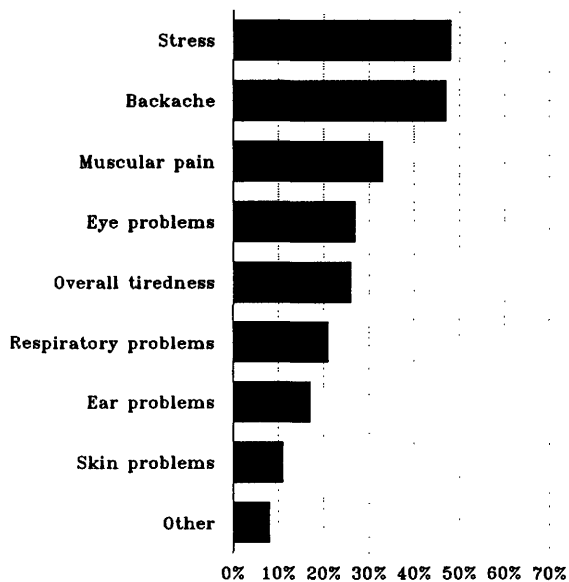
3.2.1 Would you say that your professional activity affects or could affect your health? (A6)

It is interesting to see whether workers make any connection between work and illness on their own account.

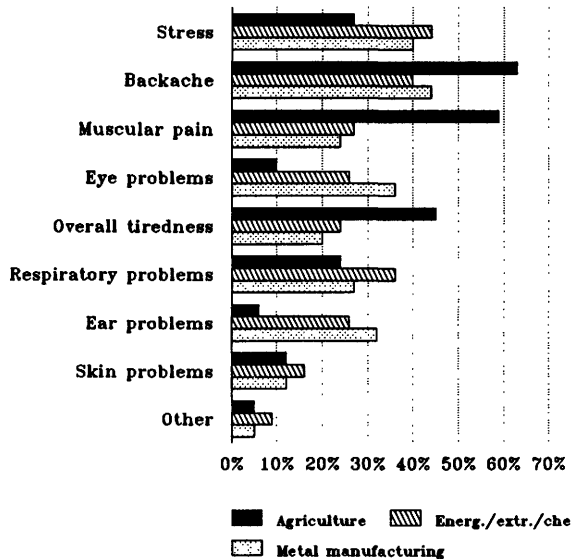
The table shows, by country and by sector of activity, that the risk is not perceived to the same extent by all. 42% of European workers consider that their professional activity affects or could affect their health. But this impression is more widespread in Greece (57%), Luxembourg (50%) and Denmark (50%). Belgium (35%) and Ireland (31%) register less concern, as do workers in the tertiary sector (36%) with the exception of transport and communications (51%). The other sectors in which there is considerable concern are agriculture (55%) and energy/extractive/chemical (57%).

While those who are concerned generally consider that their health could be affected "a bit", there are some sub-groups where the proportion answering "yes, very much" is well above the European average (11%); the Greeks (29%) and the energy/extractive/chemical (19%) and transport and communications (18%) sectors.

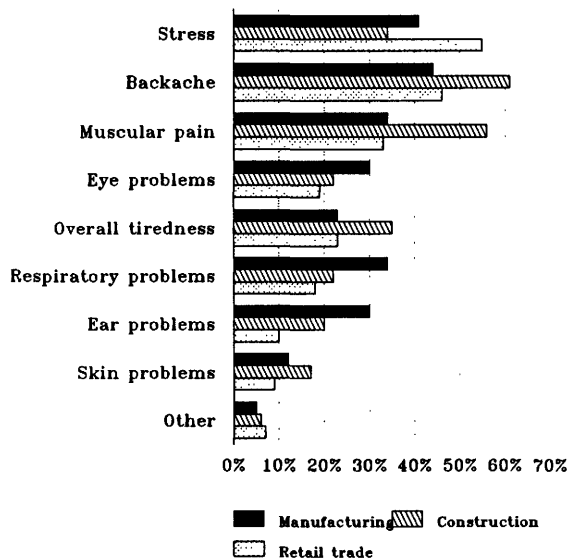
Complaints EC total



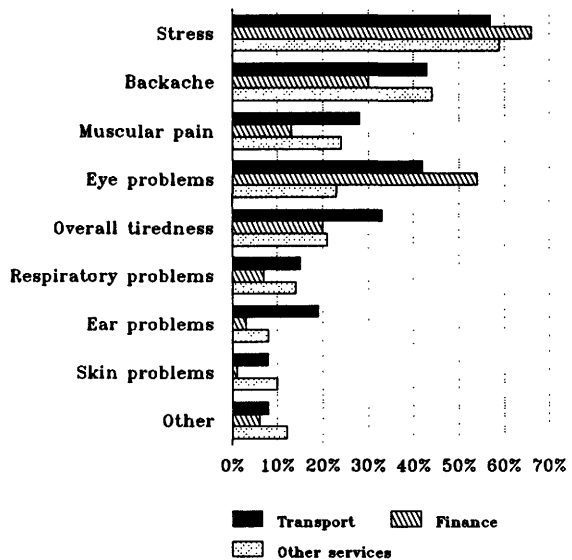
Agriculture/fishing Energy/extr./chemical Metal manufacturing



Manufacturing Construction Retail trade



Transport Finance Other services



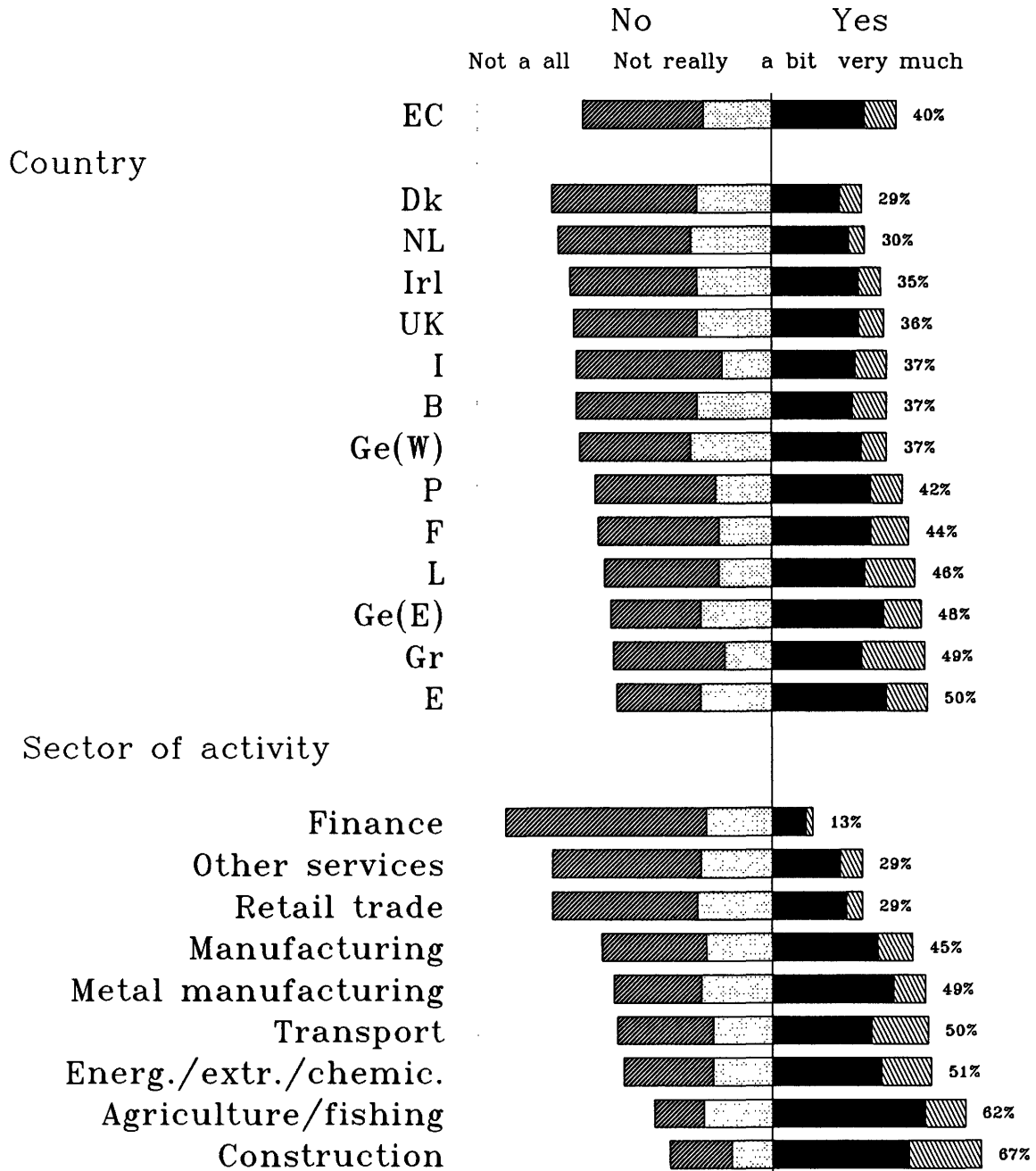
3.2.2 In which way(s) does your work affect your health? (A7)

What are the fears of those who consider their health threatened? Can clear distinctions be made between sectors? Are there complaints which are common to all?

Two types of pathology stand out when the results are considered as a whole: stress (48%) and backache (47%). Beyond that, the health problems mentioned vary between sectors. These are examined in turn below.

- Agriculture and fishing: problems which may be linked to the significant physical burdens associated with these activities; backache (63%), aching limbs (59%) and general tiredness (45%). On the other hand, few complain of stress (27%).
- Construction: complaints are very similar to those for agriculture, no doubt for the same reasons; backache and aching limbs, general tiredness, but to a lesser degree. However, there is more stress.
- Metal manufacturing: apart from backache and stress, which are around the average for the population, workers in this sector complain of eye (36%) and ear (31%) problems.
- Energy/extractive/chemical; around the European average for stress and backache, but more specific complaints about breathing difficulties (36%).
- Manufacturing: apart from stress and backache, which are average, a variety of complaints show up which can be explained by the diverse nature of this sector; two of them, those linked to noise pollution and breathing difficulties (each approximately 30%), are well above the European average.
- Distribution/retail trade/catering: a significant proportion of complaints linked to the physical aspects of the work; backache (45%), aching limbs (33%), but primarily stress (54%).
- banking/finance/insurance: the highest level for stress (65%) and eye strain (54%), probably explained by working on screen and on paper.

Do you consider that there is a risk of accidents in your work ?



- Transport and communications: stress, backache, general tiredness and eye strain.
- Other services: high level of stress (57%) and an average level of backache.

Overall, stress is a significant factor for workers in the tertiary sector, well ahead of eye problems and backache, while agricultural and industrial workers emphasise more physical problems, which vary widely depending on the activity.

3.2.3 Do you think that your work makes you run the risk of accident or injury? (A8)

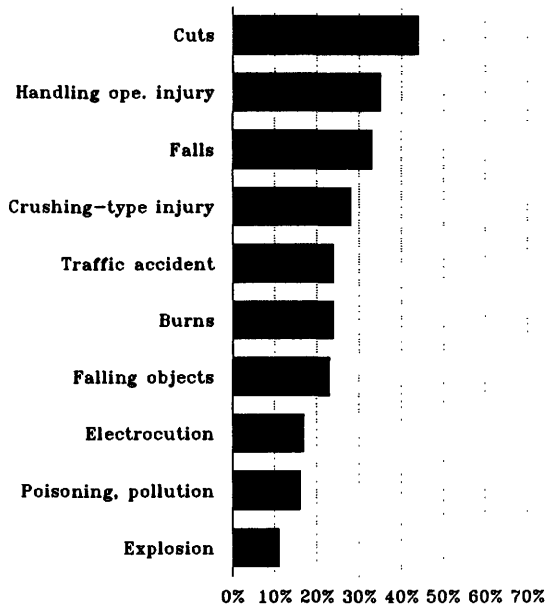
Some occupations are synonymous with a risk of accidents, while others are not. How do the persons concerned actually perceive the danger?

40% of European workers feel their work exposes them to a risk of accident, and more than a quarter of them consider the risks to be high. It is significant, however, to examine the results by country, and, especially, by sector.

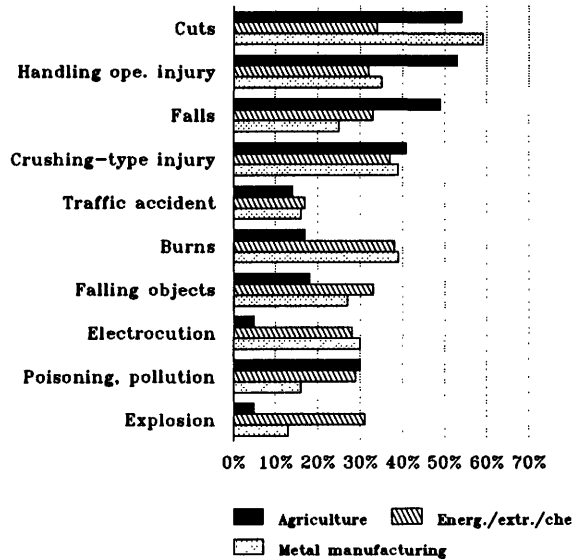
Spain (50%), Greece (49%) and the five new German Länder (48%) are the three regions in which the feeling of risk is most pronounced. But there is a much clearer contrast between sectors. The risk is seen as very acute in construction, where two thirds of workers feel there is a risk (1 in 4 consider it very significant). The agricultural sector considers itself to be only slightly less at risk (62%). Within the tertiary sector, transport stands out with a level of 50%, while other results vary between 13% and 29%.

With regard to the risks of accidents, the agricultural and industrial sectors are clearly more concerned, although no area of activity considers itself free from danger.

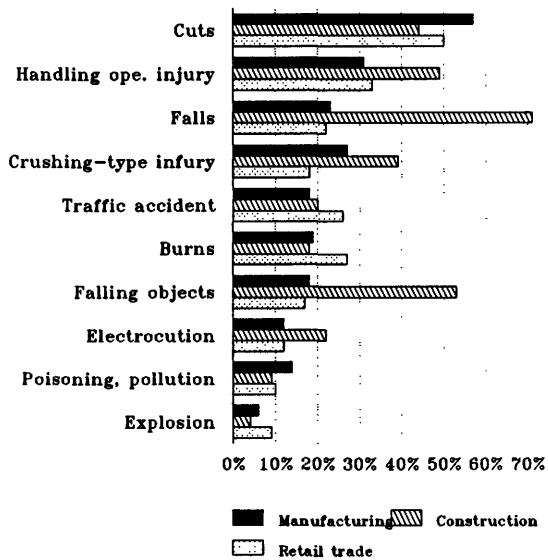
**Risks quoted
EC total**



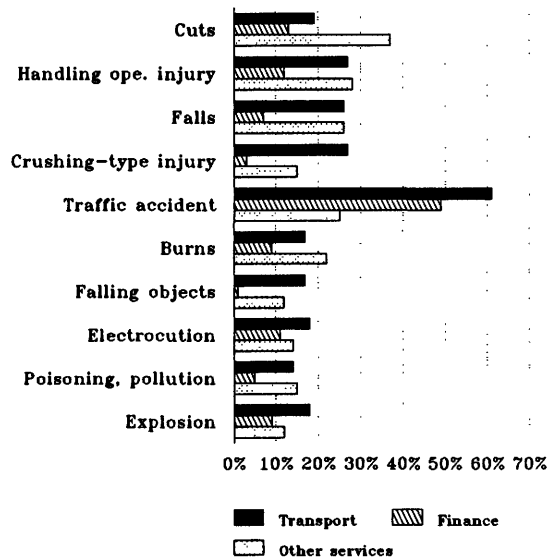
**Agriculture/fishing
Energy/extractive/chemical
Metal manufacturing**



**Manufacturing
Construction
Retail trade**



**Transport
Finance
Other services**



3.2.4 What kind of risks do you run at work? (A9)

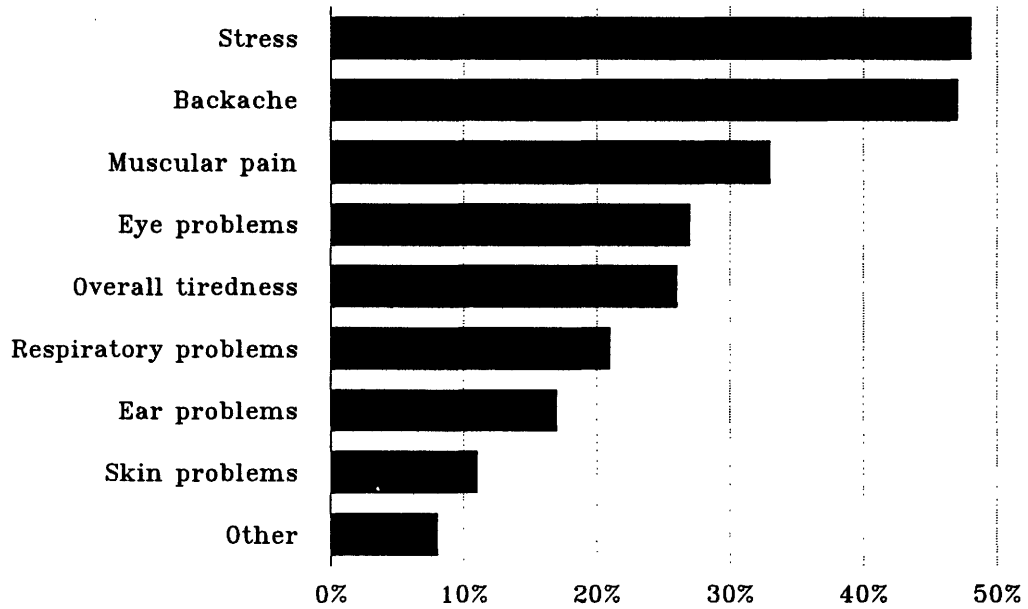
What is behind the concept of "accident risk"? It is interesting to know the dangers referred to by workers from various sectors in order to express differences in the approach to health and safety problems.

The diversity of risks is highly significant because, among the 12 possible choices, 10 were chosen by more than 10% of workers who say they run a risk, where several choices were possible. Cuts (44%), injuries while handling heavy objects (35%) and falls (33%) headed the list.

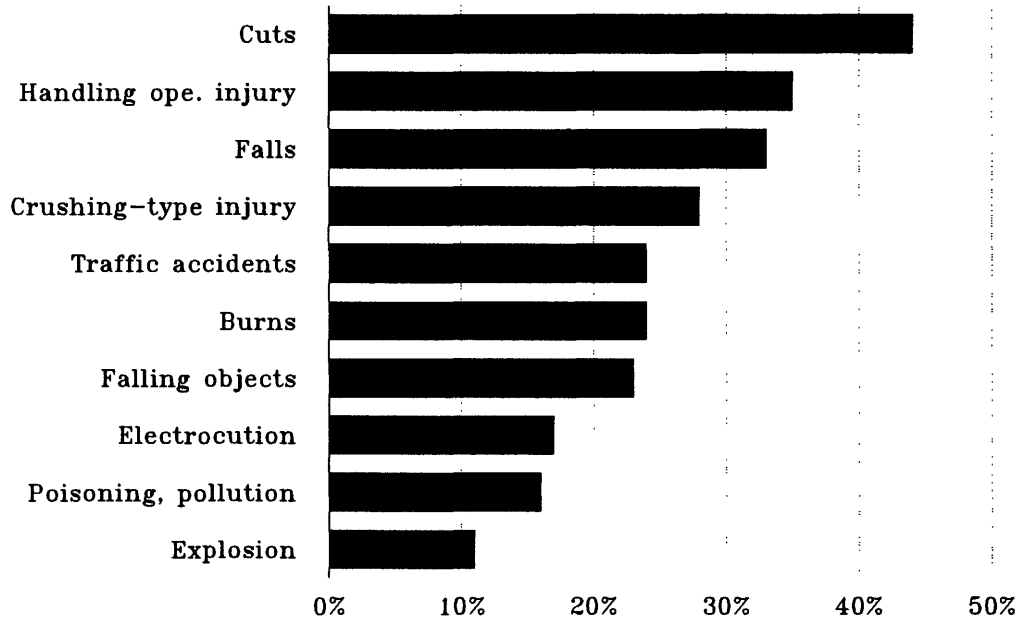
But what dangers threaten in particular sector of activity? It must be borne in mind that only approximately 60% of people in the primary sector, 50% of those in the secondary and as little as 30% of the tertiary replied. Results correspond to the proportion of people who mentioned the existence of those risks.

- Agriculture and fishing: cuts, falls and injuries while handling heavy objects are mentioned by 50% of people, while 41% mention crushing. The proportion for poisoning is double that for the population as a whole, probably due to the pesticides and fertilizers used on holdings.
- Energy/extractive/chemical: apart from traffic accidents, nearly one person in three mentions all other risks, indicating that the dangers in this sector are significant but also very varied.
- Metal manufacturing: the main risk is of cuts (59%), followed by burns (38%) and crushing (37%). Electrocution is quoted more often than for the population as a whole.
- Manufacturing: apart from cuts, which are frequently mentioned (57%), concerns match those of the population as a whole.
- Construction: apart from the "classical" complaints, two fears predominate: falls (71%) and falling objects (53%).
- Retail trade/distribution/catering: more than half fear cuts and burns.

For EC Complaints



Risks quoted



- Transport and communications: the risk of traffic accidents dominates (61%). All other risks, apart from that of explosion (18%), are below average.
- Finance: being less concerned with accident risks, it is not surprising that workers mention few risks, with traffic accidents predominating (49%).
- Other services; the risks mentioned correspond to the average for the population as a whole.

If there were one type of accident which would be of concern to workers from all sectors, it would be linked to the handling of heavy objects, since this is the only one mentioned by at least 25% of people in each sector (except for financial services).

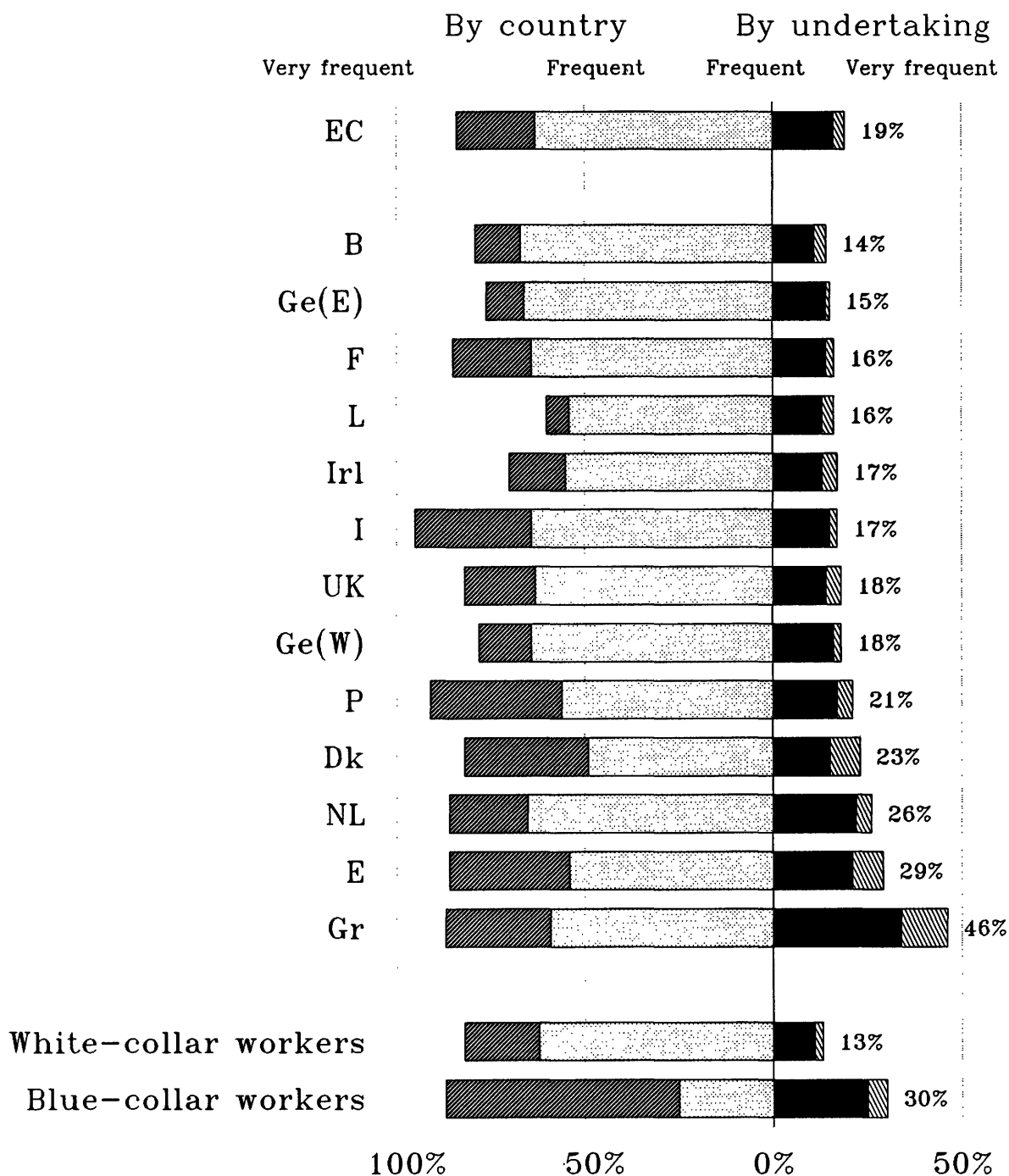
* *

* *

* *

The health problems and risks mentioned by respondents result in a highly structured table of current problems in the field of health and safety at work. Priority at all levels of responsibility must be given to prevention or cure.

Subjective frequency of accidents and illnesses



3.2.5 Do you think that work-related illnesses and accidents at work are very common/common/rare/very rare in your country? (A26)

Europeans are aware of the significance of health problems linked to occupational activity, since 84% consider them to be frequent or very frequent. This pattern is repeated in the various countries, with only Luxembourg (60%) and Ireland (70%) having a lower figure. When the replies for manual (blue-collar) workers and white-collar workers are looked at separately, the percentages are found to be fairly close to the average.

It should be noted, however, that of those blue-collar workers who consider this sort of problem to be frequent, two thirds judge it to be very frequent. This is not surprising, since this category covers those sectors most exposed to the risk of accidents and occupational diseases.

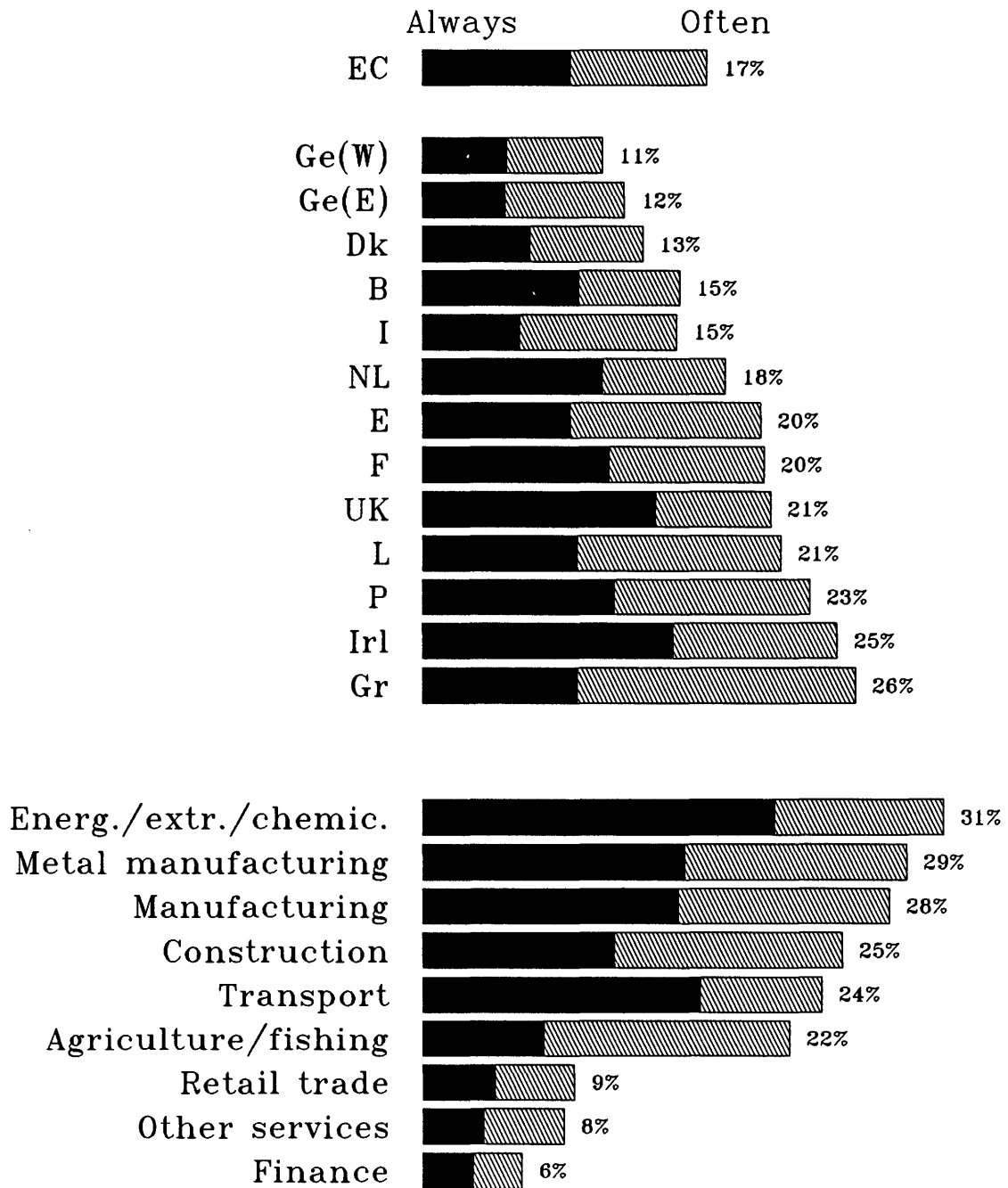
3.2.6 And at your workplace, do you think that work-related illnesses and accidents are very common/common/rare/very rare? (A27)

What is the effect for the respondent of moving from a more remote frame of reference, the country, to a more personal one: his own workplace?

Collecting the answers to the two questions on the same table and comparing them, it can be seen that, when referring to their own company, only 19% consider health or safety problems arising from professional activity to be frequent or very frequent. When referring to their country, the figure is 84%. The results vary little from one Member State to another; from 14% for Belgium to 29% for Spain. Greece, with 46%, is an exception. Even among blue-collar workers, only 30% consider the problem to be significant in their company.

This surprising result appears to show that, where health and safety in general are concerned, the vast majority are aware of and recognise the problem. At a more individual level, people do not appear to be greatly affected; is this a result of the reduction of scale? A perceptive bias? For a better understanding of the answers given to this question, the following questions will try to determine the actual significance of accidents and illnesses in order to find out if we are witnessing a psychological denial of the problem or whether there are more specific elements giving that impression.

Use of dangerous equipment



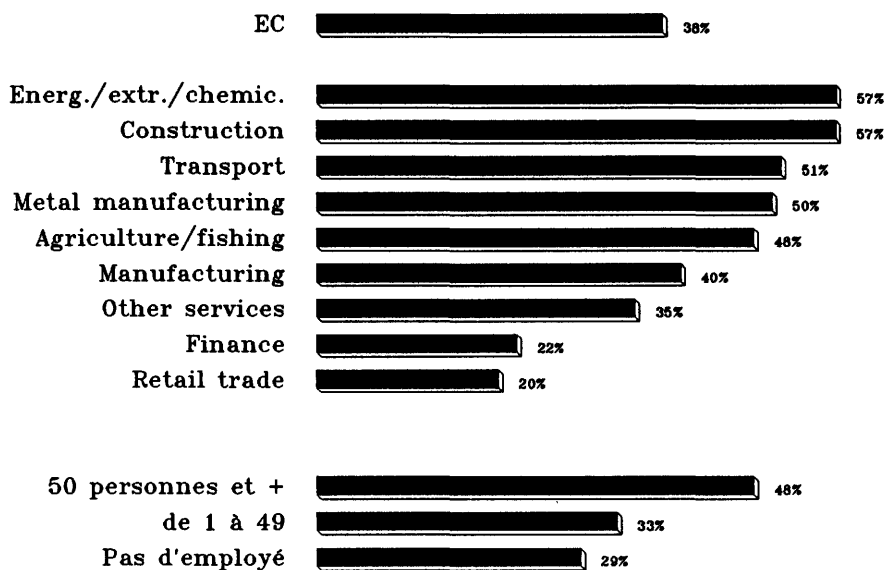
3.3 INCIDENCE OF OCCUPATIONAL DISEASES AND INDUSTRIAL ACCIDENTS

3.3.1 Do you use any machines, installations or equipment which could be dangerous? (A5)

When examining safety at the workplace, the use of dangerous equipment is an aspect which must be studied in order to give a more specific dimension to the concept of risk. The efforts of legislators and those responsible for prevention also concentrate on this aspect. Even retaining only that percentage of people who use a potentially dangerous item of equipment more than three quarters of the time, the results are striking: 16.9% of European workers are concerned.

Differences between countries or between sectors are also significant. While one West German in 10 is almost constantly involved with such equipment, the figure is only one in four in Ireland and Greece. The differences between activity sectors are even more pronounced, ranging from 5.9% for the financial services sector to 30.9% in the energy/extractive/chemical sector. There is a very clear separation between the services sector (with the exception of transport and communications) and the agricultural and industrial sectors, where exposure is very high.

Do you know a colleague who has had an accident or illness



3.3.2 Do you know any colleagues who suffer from work-related illness or who have had an accident at work? (A15)

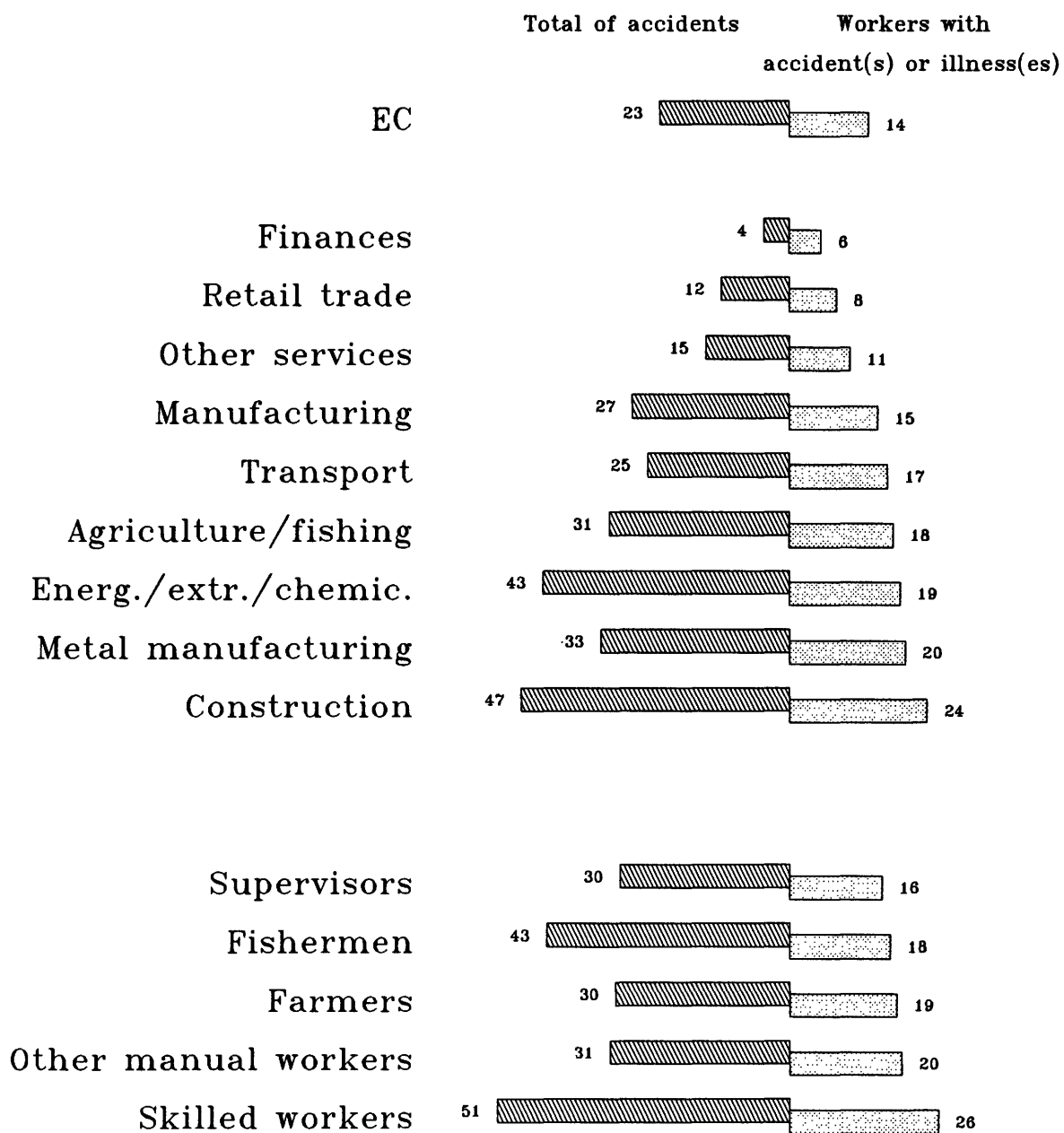
The aim here is to gain an idea of "real experience" of work-related illnesses and accidents at work suffered by people within their working environment.

Once again, a breakdown by sectors of activity highlights the disparities between the primary and secondary sectors on the one hand and the tertiary on the other.

The breakdown by company size is also interesting.

38% of European workers know a colleague who has had an accident at work or an occupational disease, but variations between sectors are important: from 20% positive responses in the retail trade sector to 57% in construction and energy/extractive/chemical. This confirms that these, together with transport and communications (51%) and metal manufacturing (50%), are sectors with significant risks. The agricultural sector, with 48%, is also noteworthy if the often small size of holdings is borne in mind, which tends to work against personal knowledge of colleagues who have been affected. This latter idea is also confirmed by the breakdown by company size: the larger the company, the greater the proportion of people who know someone who has had an accident or illness. It is possible, however, that other factors could affect this apparently simple result, for example the fact that industrial companies are often large.

Estimated total number of accidents per 100 people Workers with accident or illness



3.3.3 Do you yourself have, or have you had, any work-related illness or accident? (A17)

This question provides specific information, since it shows the extent to which the people questioned have had direct personal experience of an accident at work and/or a work-related illness. The European average is 14%, but the breakdown by sector confirms that not all are affected to the same degree. The construction sector heads the list with 24%, followed by the various industrial sectors together with agriculture and transport (all with figures between 15 and 20%). At the other extreme, the figure for the financial services sector is 6%. Examining the results for various manual occupations confirms that these are the workers most affected, particularly skilled workers (26%).

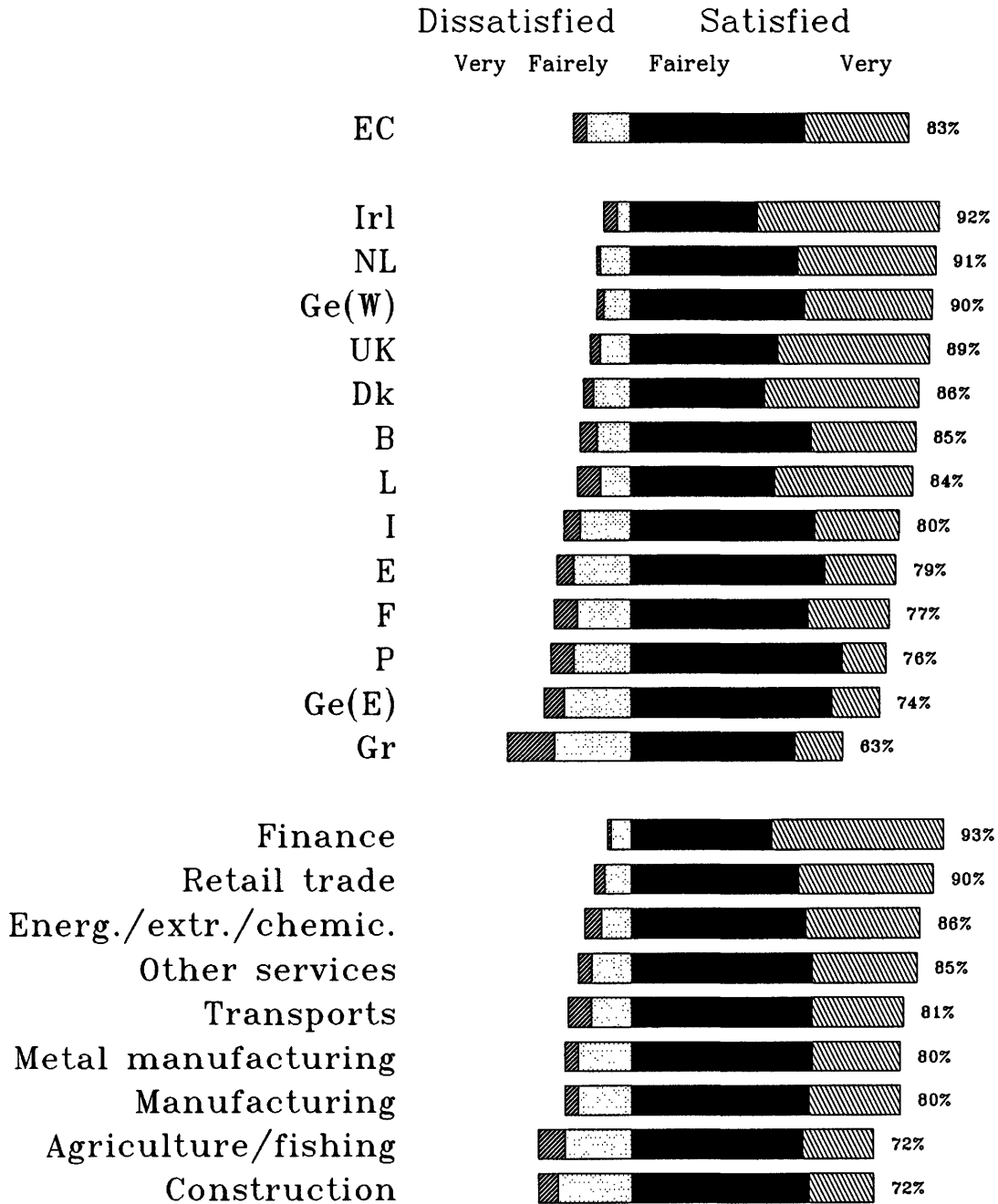
3.3.4 How many accidents at work have you had that resulted in stopping work for more than one week? (A18)

We are interested here in accidents serious enough to require at least one week's absence from work, and particularly in their number. This allows us to estimate a number of accidents per 100 people for each sector and for the various manual occupations. It does not, however, mean that each accident relates to a different person.

Two series of results are presented; an estimate of the number of accidents at work per 100 people, calculated on the basis of the replies, and the percentage of respondents stating that they have had at least one work-related accident or illness. As a result, it is shown that, in some sectors, not only are accidents and illnesses more common than in others but that, in addition, some people have repeat accidents. This is the case in the construction sector, where 47 accidents per 100 people were recorded for the 24 persons per 100 who had suffered an accident and/or illness. This conclusion is also valid for the energy/extractive/chemical sector, fishermen and skilled workers.

There is little tendency towards repeat accidents in the tertiary sector (including transport), but they are slightly more prevalent in the other manual sectors and occupations, even though these suffer a significant number of accidents.

Satisfaction with measures taken to ensure safety



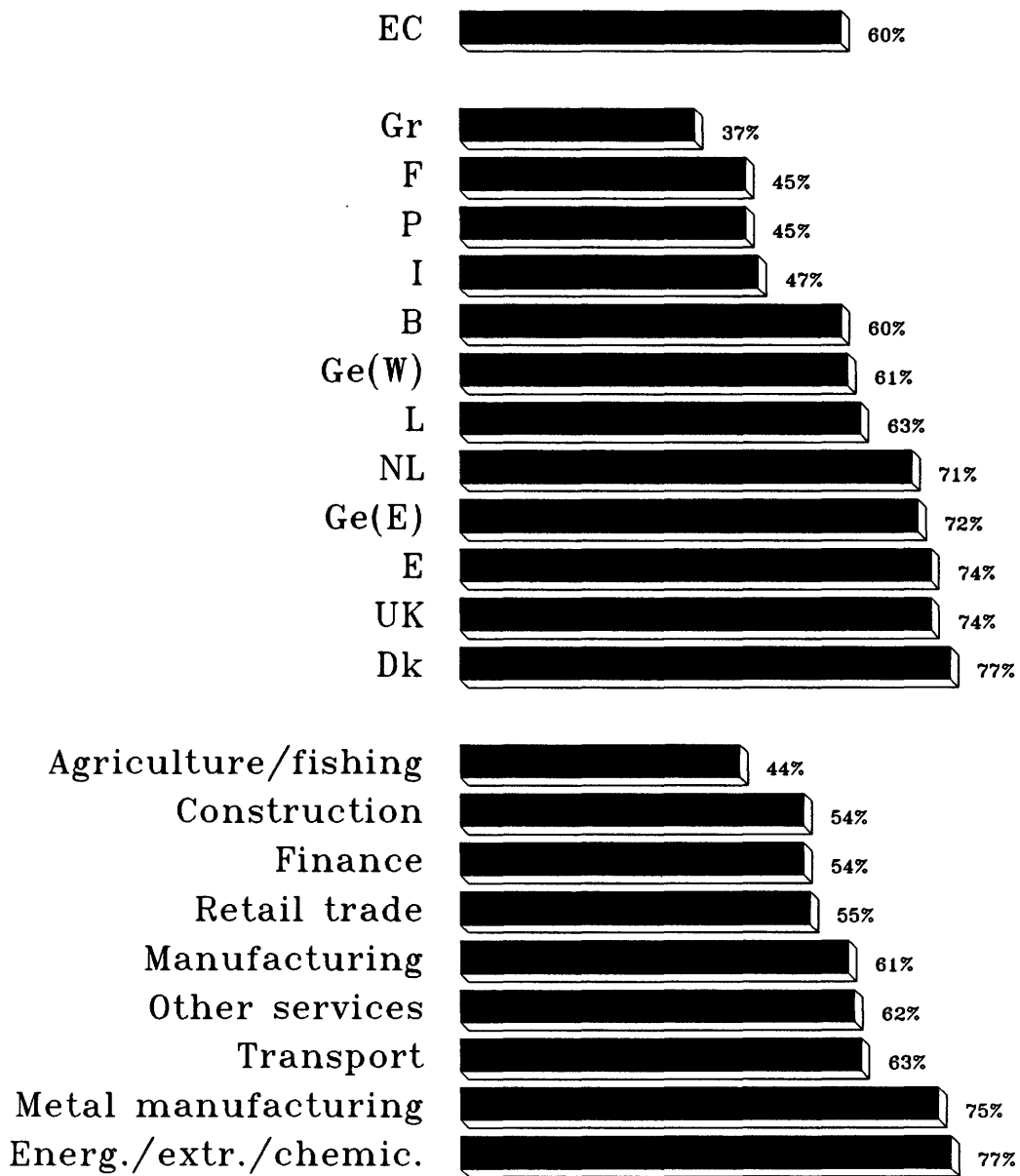
3.4 PREVENTION AND RESPONSIBILITIES

3.4.1 How satisfied are you with the actions taken to ensure the safety, hygiene and health of people at your current place of work? Are you very satisfied/quite satisfied/quite dissatisfied/very dissatisfied? (A19)

Do the people asked have the impression that something is being done to protect them? It appears so, since 83% of them say they are satisfied or very satisfied. When the results are examined by sector of activity, the result is that all, even those most exposed to risk, said that they were largely satisfied. Construction workers (72%) were least happy. Given that one person in four in this sector has had an accident or work-related illness and that 56% know a colleague who has, this divergence between the level of satisfaction and the risk run is interesting.

When the spontaneous explanations generally given for accidents are considered, it is seen that "human error", personal negligence on the part of the victim, is often quoted. Organisational causes are disregarded. Following this reasoning, general preventive measures ought to be enough, since the main cause cannot be influenced. This could partly explain the significant proportion of satisfied respondents. On the other hand, workers say they are satisfied (49%) rather than very satisfied. It could be that they are happy with the measures already taken, which does not, however, prevent them expecting more measures in the future. With regard to countries, the same general level of satisfaction is found, with a particularly high percentage of very satisfied people in Denmark (46%) and Ireland (54%). Greece alone (63%) has a lower level, but the questions show that this country is particularly interested in, if not preoccupied with, safety and health problems.

Do you know someone responsible for safety and health ?



3.4.2 Do you know any person who is responsible for safety, hygiene or health where you work? (A21)

It is useful to know whether there is an identifiable person on site responsible for safety, hygiene and health. This is a major objective in the field of prevention.

60% of the working population said that they knew such a person. But the differences between countries, sectors or companies of different sizes may be significant.

Countries:

Denmark, the United Kingdom and Spain have a very high percentage of affirmative replies (approximately 75%). For Greece (37%), France (45%) and Portugal (45%) the percentage is significantly lower.

The differences may be explained, at least in part, by legal differences connected with the size of companies and the structure of economic activities in each country.

Sectors of activity:

In high-risk sectors such as energy/extractive/chemical and metal manufacturing three-quarters of the people know somebody responsible for health and safety. In agriculture (44%) and construction (54%), however, which are also high-risk sectors, this is not the case.

Size of companies:

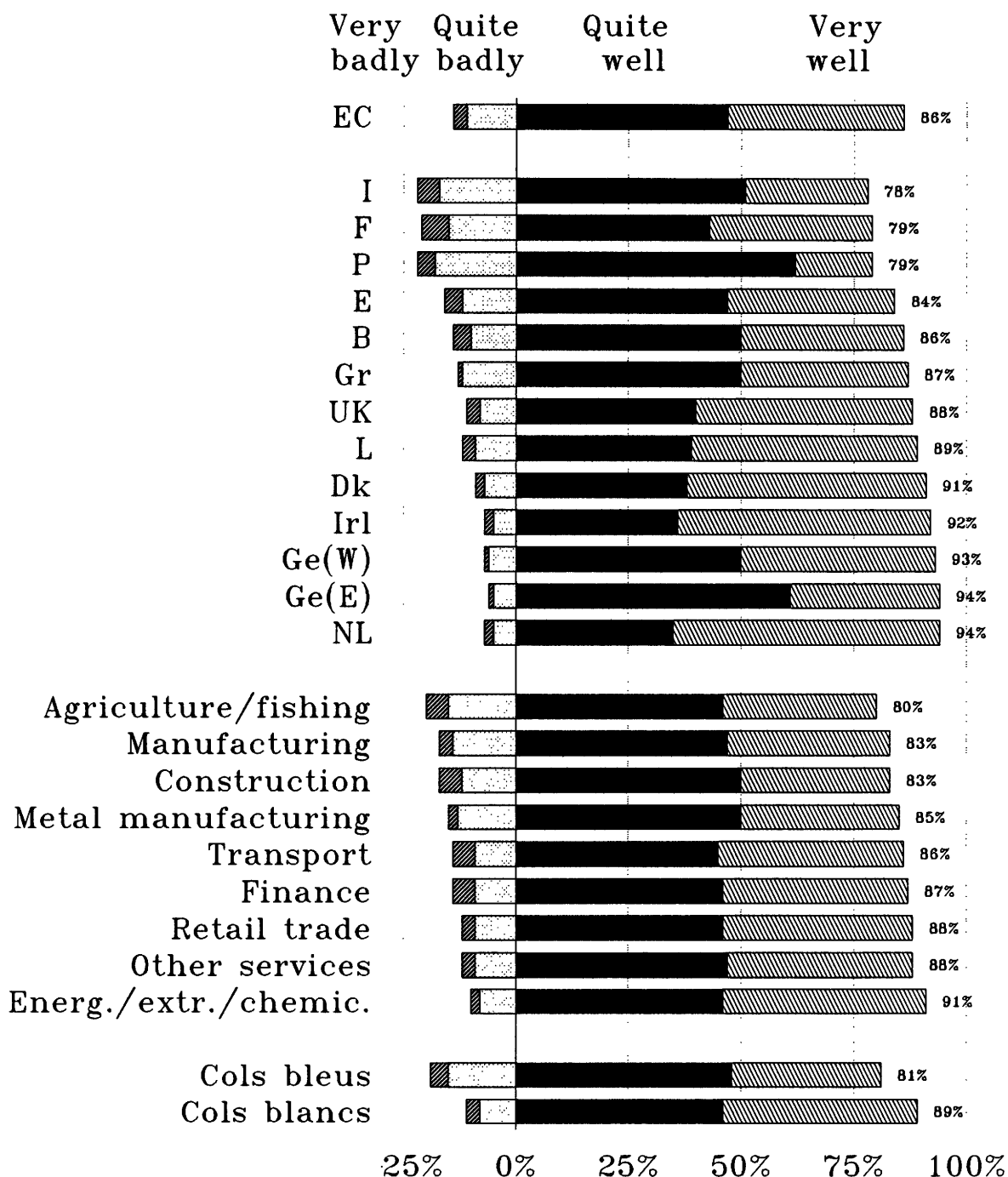
The larger the company, the higher the percentage of people who know such a person.

It should be noted that, while not knowing the person responsible for health and safety at work does not necessarily mean that there is no such person, it could at least indicate that his role has not been highlighted.

The table shows that some sub-groups are more likely to know a person responsible for health and safety:

- working in the energy/extractive/chemical or metal manufacturing sectors, or having a certain nationality, improves the chances of knowing such a person;
- in contrast, working in a family company or in the agricultural sector are less favourable situations. The position of Greece in this respect is revealing, since its agricultural sector employs one person in four and 40% of companies are family-sized.

Do you feel well informed about risks and prevention



3.4.3 Would you say you are very well informed, quite well informed, quite badly informed or very badly informed about risks resulting from the use of instruments or products which you handle in your job? (A22)

Do workers feel that they know precisely the risks inherent in the instruments and products they use and what protective measures to take?

39% consider themselves very well informed, 47% quite well informed.

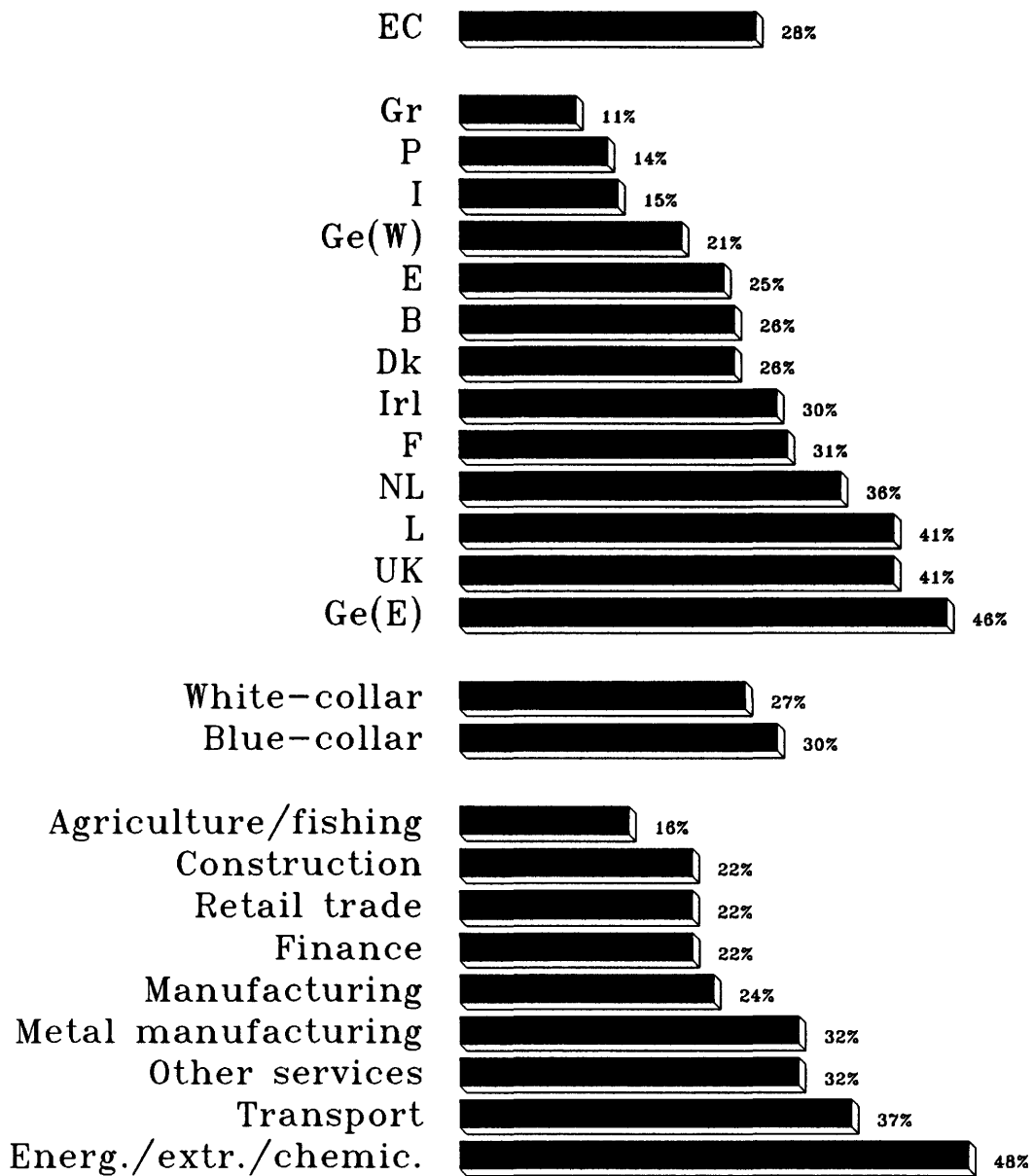
As with question A19 in 3.4.1 (satisfaction with health and safety measures taken in the company), there is a very high level of satisfaction here (86%). It is noteworthy that, even where there are numerous accidents, workers consider themselves well informed.

Apart from a very clear degree of overall satisfaction with the level of information, it should be noted that the results by country vary from 78% for Italy to 94% for the Netherlands. In addition, in most countries which are above the European average, the proportion of "very well informed" people is greater than that of "quite well informed", emphasising the difference between these countries and those below the average.

With regard to sectors of activity, there are four points to be made:

- the various tertiary sectors are well informed, including transport and communications, where legislation in the field of safety and prevention is highly developed;
- in the primary and secondary sectors, where risks are greater, respondents are less informed of the dangers and of preventive measures relating to the instruments or products which they used;
- the energy/extractive/chemical sector stands out in that workers there are the best informed; there are significant risks but prevention policy is more prominent;
- overall, manual workers consider themselves less well informed (81%) than non-manual (white-collar) workers (89%) although they are clearly more exposed.

Participation in health and safety training

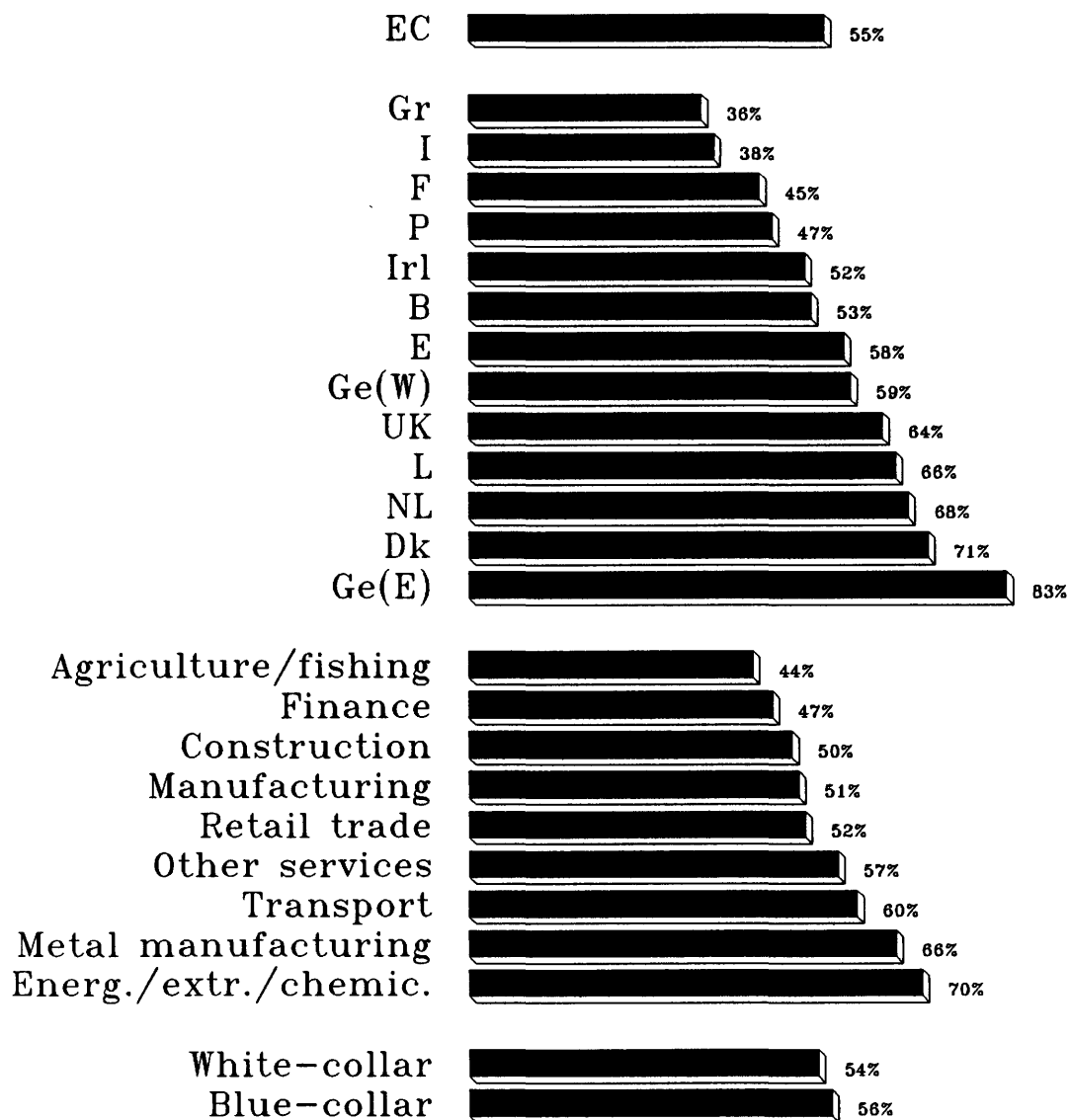


3.4.4 Have you had a training course concerning safety, hygiene or health, for your current job? (A23)

28% of European workers say they have received such training.

There are wide disparities between countries and sectors, reflecting differences in national and sector-based legislation. Thus, 46% of Germans from the five new Länder and 41% of the British give positive replies, compared with only 11% of Greeks, 14% of Portuguese and 15% of Italians. There are hardly any differences between white-collar and blue-collar workers; there are some however, at sector level. Where risks are significant, workers are less well trained, particularly in agriculture and construction. The situation in the transport sector is better, with 37% of people having had training. The energy/extractive/chemical sector is in the lead, with 48% of workers replying positively. This appears to confirm the idea that more measures are taken to improve health and safety in high-risk sectors (see question A22). Overall, the table relating to health and safety training shows up several disturbing features.

Possibility of participating in health protection and safety



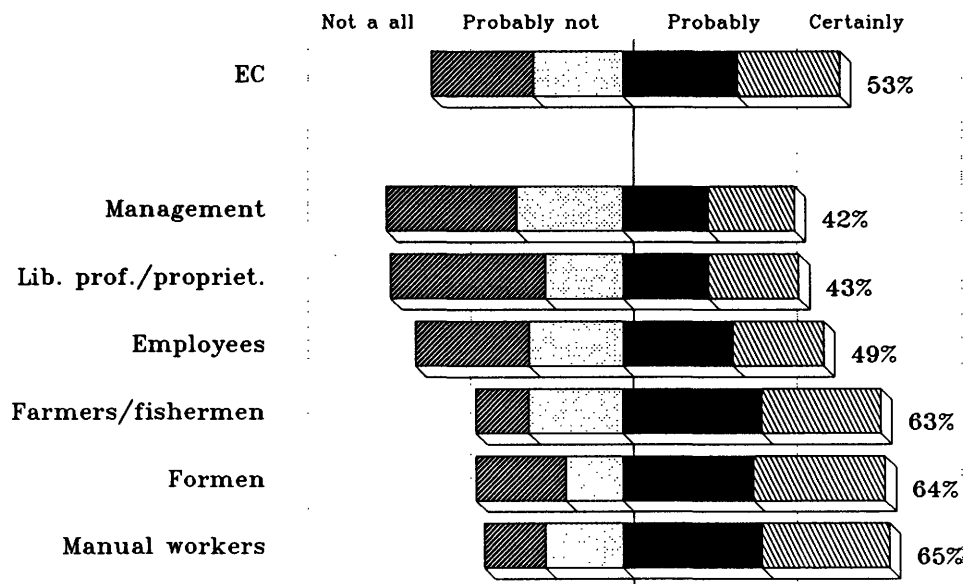
3.4.5 Have you ever had the chance to give an opinion or make suggestions about improving safety, hygiene or health standards at your workplace? (A24)

Does the worker have a chance to take part in prevention and protection at his place of work? It is well known that the degree of cooperation often determines the effectiveness of prevention. Legal provision is often made for this.

The European average is 55% positive replies, but with significant national and sectoral disparities. The Greeks (36%) and Italians (38%) appear to have few opportunities to participate in comparison with Germans from the five new Länder (83%) and Danes (71%). There are hardly any differences between white-collar (non-manual) workers and blue-collar (manual) workers.

On the other hand, ratings for the various activity sectors vary from 44% for agriculture to 70% for the energy/extractive/chemical sector. As with questions A22 and A23, which are also concerned with information and prevention, this sector again has the best results, supporting the hypothesis that there is an active policy to encourage health and safety. Workers in other high-risk sectors have fewer opportunities to contribute, particularly in agriculture (44%) and construction (50%).

**Improving safety and health
increases the respondent's
efficiency at work**



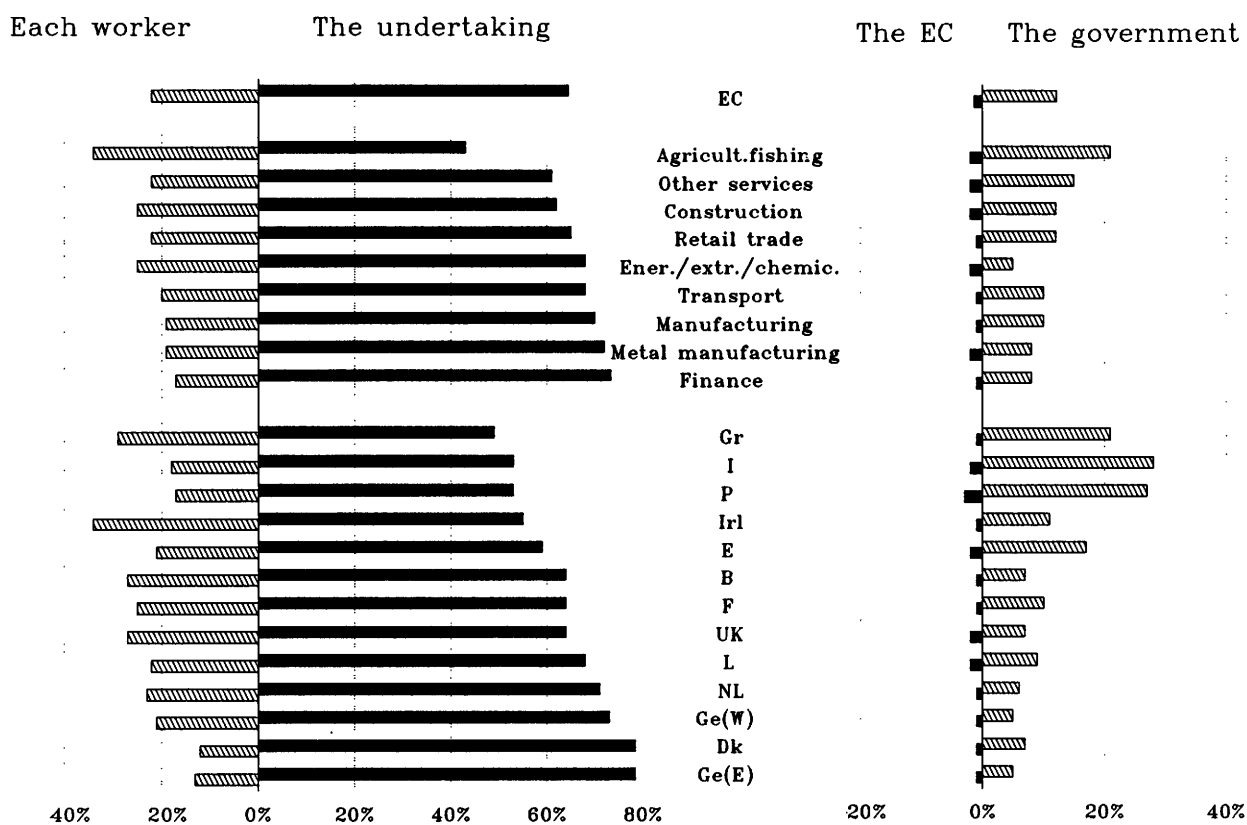
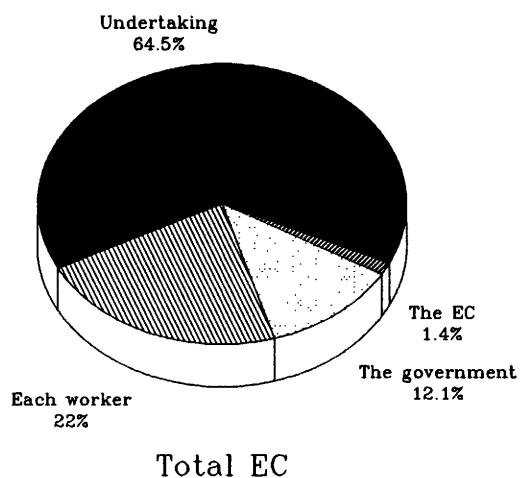
3.4.6 Do you think that an improvement of safety, hygiene and health standards at your place of work would also help you to do your work more efficiently? (A20)

Do workers consider that both the economic and safety and health requirements of their work are compatible or linked?

53% of Europeans considered that there was a fairly positive link between safety and efficiency in their work.

A breakdown of replies by occupation shows that management, the liberal professions, proprietors and employees are all clearly below the European average. All manual workers are clearly above the average. On a comparative basis, blue-collar workers generally have jobs which put their health and safety at greater risk; a majority think that increased safety is compatible with and a factor in favour of efficiency. White-collar workers, with less dangerous jobs, mostly think that there is no positive link between the two. It is understandable that, being at little risk to begin with, they do not consider themselves greatly influenced by any improvement in safety, particularly where their efficiency is concerned.

Main person or body responsible for prevention



3.4.7 In your opinion, who should mainly be responsible for reducing the number of accidents at work and work-related illnesses? (One choice among four possibilities) (A28)

Who is seen as being primarily responsible for prevention at work? 64.5% of the people asked think it is the company, 22% think that each worker is responsible, 12.1% choose the government and 1.4% the European Community. Each of the choices is examined below.

The company (64.5%)

All sectors of activity agree that it has a central role. In the agricultural sector, however, the proportion is only 43%; more people choose a body other than the company. This must be seen in conjunction with the fact that the agricultural sector contains a large number of small undertakings or family holdings. The concept of a company or undertaking as an active body is less widespread. It is thus easier to place the responsibility elsewhere. The same factor may explain why Greece, Italy, Portugal and Ireland also place less responsibility on the company; these countries are the ones with the highest number of family businesses and holdings.

Each worker (22%)

This is clearly a less frequent choice. Only the agricultural sector, Greece and Portugal exceed this figure to any extent, reaching approximately 30%. On the other hand, for the Danes and the Germans from the five new Länder the scores are only 12% and 13% respectively.

Workers do not appear to consider themselves the main persons responsible for preventing accidents and occupational diseases.

The government (12.1%)

Few people assign responsibility to the government. The agricultural sector, Greece, Italy and Portugal are the only ones where the percentage exceeds 20%.

The European Community (1.4%)

On the whole, Europeans do not consider that the Community can have a direct effect on the number of accidents and occupational diseases.

4. ANALYSIS OF POPULATION PROFILES

4.1 PRESENTATION OF RESULTS IN PROFILES

As seen in the thematic analysis of the questions, the opinions of certain population sub-groups on health and safety are particularly interesting. These include the risk sectors, SMEs, young people and national populations.

Producing a synopsis of the characteristics of these population sub-groups is tantamount to a comparison with the "average" European replies, with differences expressed as percentages.

To achieve a more finely tuned approach to the data obtained as a whole, it is useful to have a number of indicators which can be used as a basis for a synopsis of information. Population sub-group profiles can thus be created and compared, with greater emphasis on the most important aspects.

4.2 INDICATORS

Annex B contains the compilation method and complete results. At this point we shall refer only to the use made of the indicators in the profiles and the meaning to be given to them.

4.2.1 Subjective risk

This is based on the replies to the following questions:

- "Would you say that your professional activity affects or could affect your health?"
- "Do you think that your work makes you run the risk of accident or injury?"

It thus combines the threats perceived to health and safety in a single indicator of the degree of risk perceived subjectively by workers. The percentage corresponding to the highest indicator is used for profiles, i.e. that which covers those persons who feel most at risk, in that they see their professional activity as a threat to their health and safety.

4.2.2 Experience of industrial accidents and occupational diseases

This takes in the replies to three questions:

- "At your workplace, do you think that work-related illnesses and accidents are numerous or not?"
- "Do you know any colleagues who suffer from work-related illnesses or who have had an accident at work?"
- "Have you yourself suffered from a work-related illness **or had an accident at work?**"

An overall index of experience of occupational diseases and industrial accidents was computed on the basis of these three questions, which address different aspects: incidence at the workplace, incidence among colleagues and personal incidence. Cumulative percentages of the levels of the "average experience" and "wide experience" indicators are used for the profiles. This corresponds to the percentage of persons working in an environment where industrial accidents and occupational diseases are frequent enough for them to have multiple experience thereof.

4.2.3 Level of information and training

This uses the replies to three questions:

- "Do you know any person who is responsible for safety, hygiene or health where you work?"
- "Have you had a training course concerning safety, hygiene or health, for your current job?"

- "Would you say you are well or badly informed about risks resulting from the use of instruments or products which you handle in your job?"

In this way it is possible to establish an indicator of the overall level of development of information and prevention. Only cumulative percentages of the levels of the "average and high" indicator, corresponding to the best informed and best trained workers in the field of prevention, are used for the profiles.

4.3 OTHER VALUES USED TO PREPARE PROFILES

4.3.1 Use of dangerous equipment

On the basis of the replies to the question on the use of dangerous equipment, only the percentage of persons who use such equipment for more than a quarter of their time, i.e. frequently, is taken.

4.3.2 Satisfaction with prevention measures at the workplace

The percentage of respondents who said they were quite or very satisfied with the action taken to reduce accidents and diseases at their place of work is used for the profiles.

4.3.3 Possibility of participation

The proportion of persons who replied that they have had a chance to give an opinion or make suggestions about improving health and safety is taken for the profiles.

4.3.4 Safety: efficiency factor

The percentage of workers who think that an improvement of health and safety at their place of work could probably or would definitely help them to do their work more efficiently is taken for the profiles.

4.3.5 Responsibility

Profiles are established using the results for the question "Who should be responsible for improving safety and health?" i.e. the percentage of replies selecting the company, government, European Community and each worker (questions 28A and 28B, the percentage relating to both questions together).

4.3.6 In favour of EC legislation

The proportion of persons who are to some extent or very much in favour of common legislation concerning health and safety in the twelve Member States is taken for the profiles.

4.3.7 Improvement of the situation by EC legislation

The percentage of respondents who agree slightly or strongly with the statement that Community legislation concerning health and safety will improve their own situation is taken.

4.3.8 Health risks

The persons who think that their work may affect their health selected from 10 types of health problem those which they felt concerned them the most.

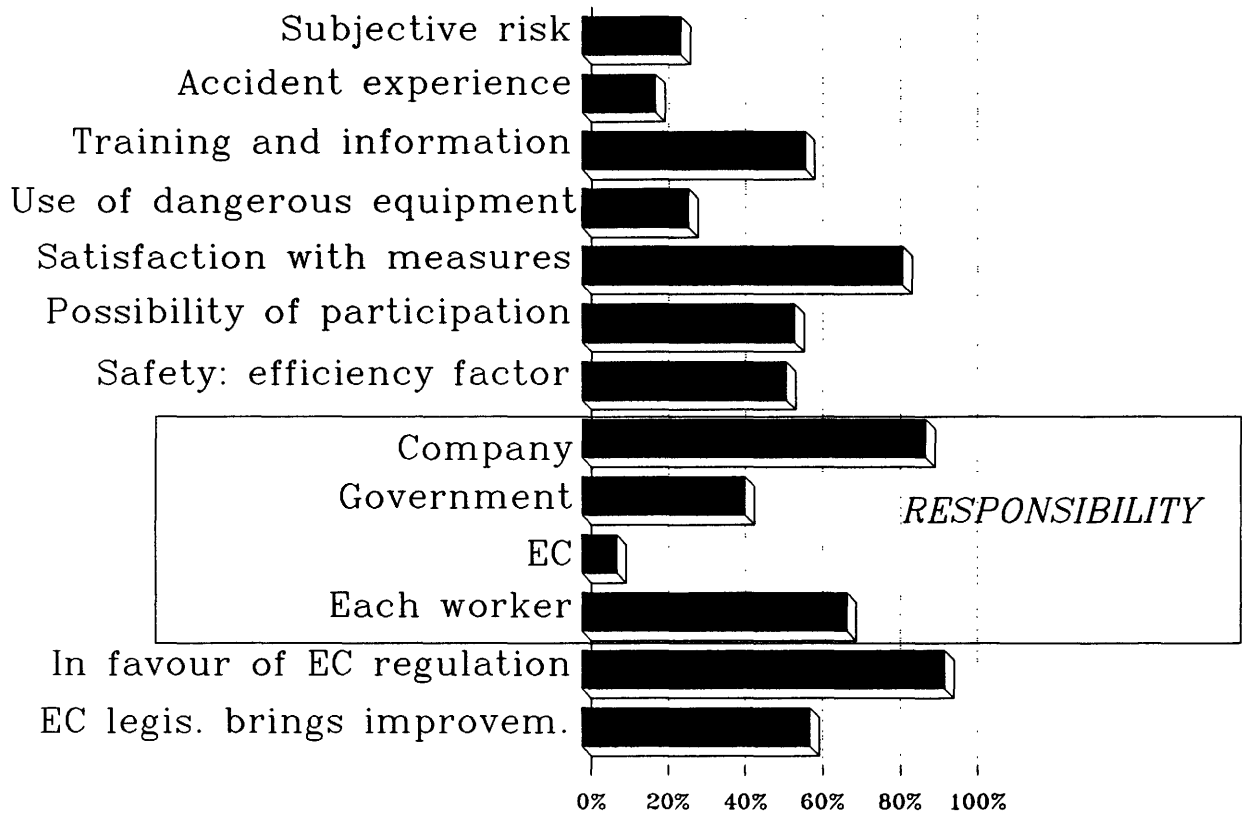
The diagram shows the five most commonly selected pathologies and the proportions of respondents who selected them. A sixth category groups together the remaining choices, cumulating their percentages.

4.3.9 Safety risks

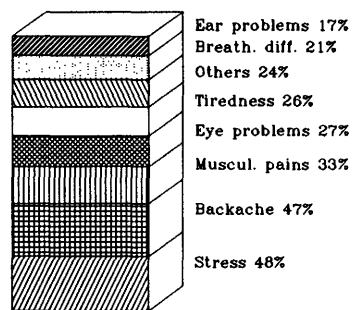
The workers who feel that their work involves risks to their safety selected from 12 accident risk categories those which concerned them the most.

The diagram shows the percentages for the most commonly selected risks, together with the cumulative percentage for the remaining seven risks grouped together as "Others".

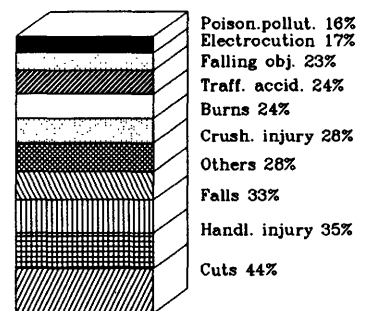
General profile



Health risks



Safety risks



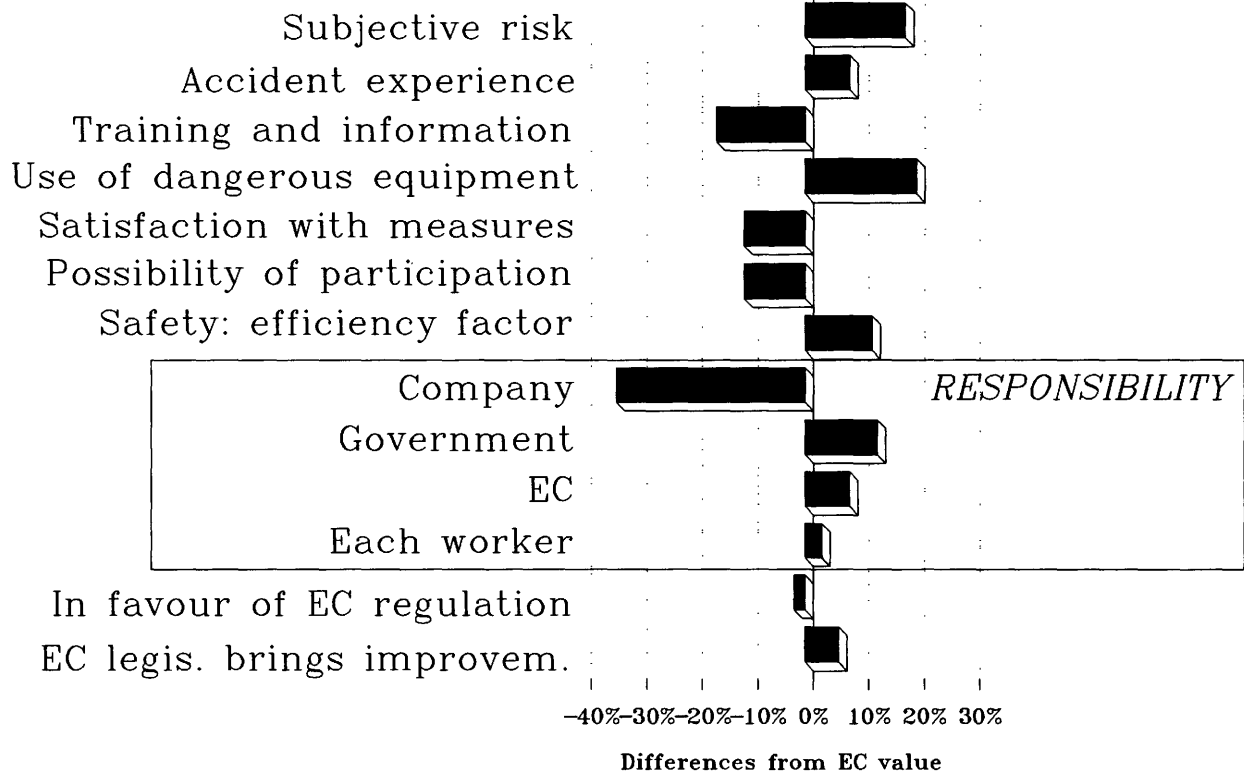
4.4. PRESENTATION OF PROFILES

The profile characteristics are highlighted on the basis of the differences they exhibit in relation to the position of the total population on the various subjects.

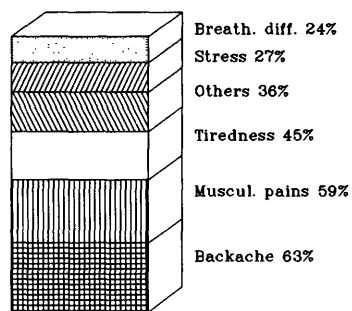
European profile : reference values

One European in four has the impression that his work represents a threat to his health and safety, and one in five has some experience of industrial accidents and occupational diseases. Furthermore, 28% of workers frequently use dangerous equipment. Health and safety are therefore without doubt matters of substantial concern to respondents. Whilst there is a considerable degree of satisfaction with the preventive action taken, there is less satisfaction when more precise aspects are addressed. Only slightly more than 50% of workers are satisfied with the risk and prevention training they have received and with their scope for participating in their company's prevention policy. The same proportion feels that improving preventive measures is a factor in improving work efficiency. When workers are asked who must first of all take action to reduce industrial accidents and occupational diseases, the company easily comes in first, followed by workers and the government. The European Community is far behind, with hardly any respondents giving it direct responsibility for improving the situation at the workplace. However, the vast majority of workers are in favour of Community legislation on health and safety and a majority (though a smaller one) think it will have a direct impact on their working conditions. Finally, the health problems most commonly indicated are back problems and stress, followed by muscular pain and eye problems. Many different safety risks receive frequent mention. Cuts, falls and handling operation injuries are the most common problems.

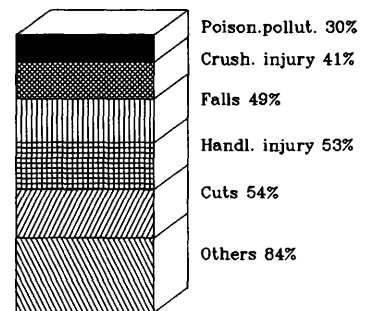
Sector profile Agriculture and fishing



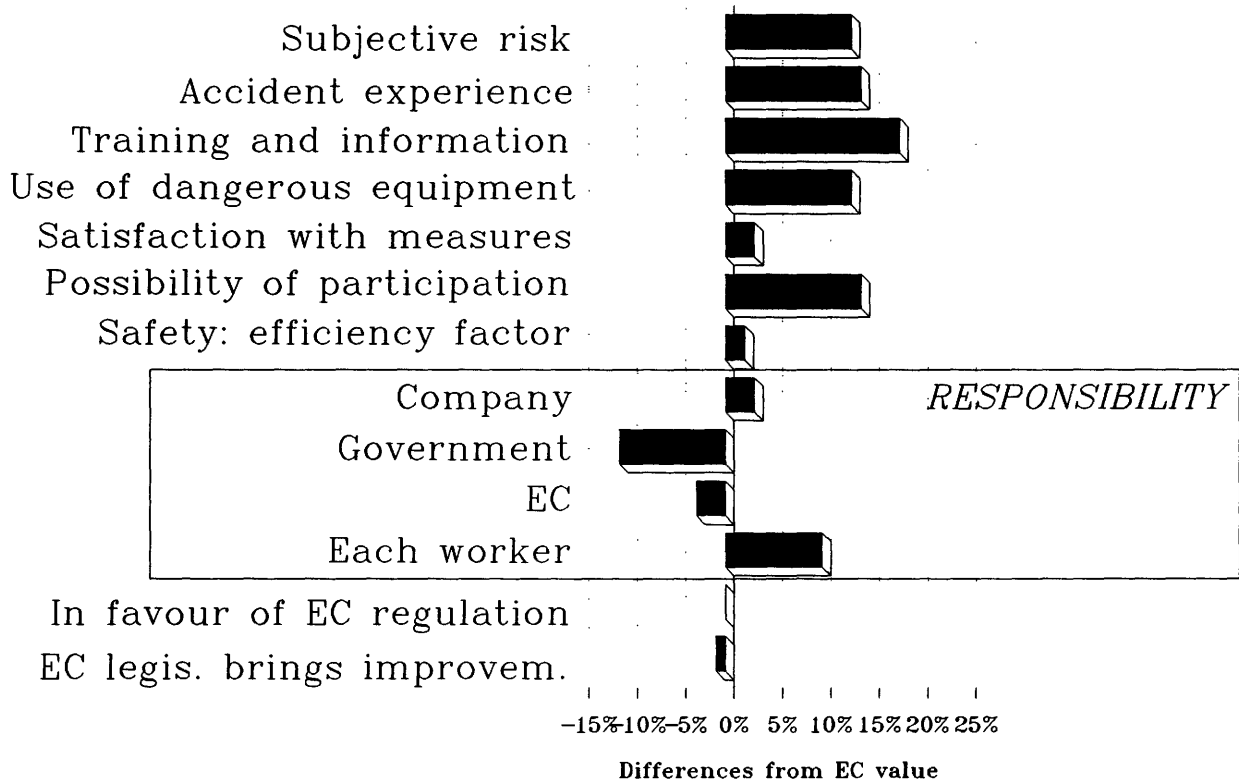
Health risks



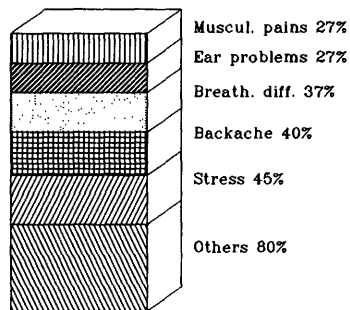
Safety risks



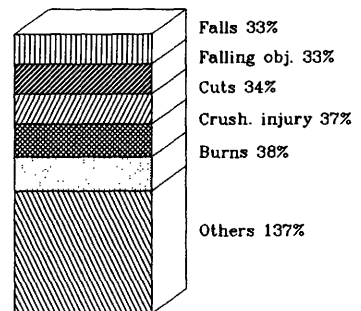
Sector profile Energy/extractive/chemical



Health risks



Safety risks



4.4.1. Activity sector profiles.

1. *"Agriculture and fishing"*.

The agricultural sector is characterised by a high level of risk (all indices concur) and a below-average degree of satisfaction with information, the scope for participating in prevention policy, and the preventive action taken.

Far fewer workers in this sector than in other sectors think that the company is mainly responsible for prevention. The tendency is to place the responsibility on the government and workers. Like the average European, they are very much in favour of Community legislation. Two thirds of them think it could have a positive effect on their own situation. Many also think that improved safety makes for greater efficiency.

The risks linked to a high level of physical activity receive the most mention. The figures for the problems cited most frequently are generally above average. Stress comes near the bottom of the list. Poisoning receives a high score, probably because of the use of health-endangering products in this sector (fertilisers, plant-protection products).

2. *"Energy/extractive/chemical"*

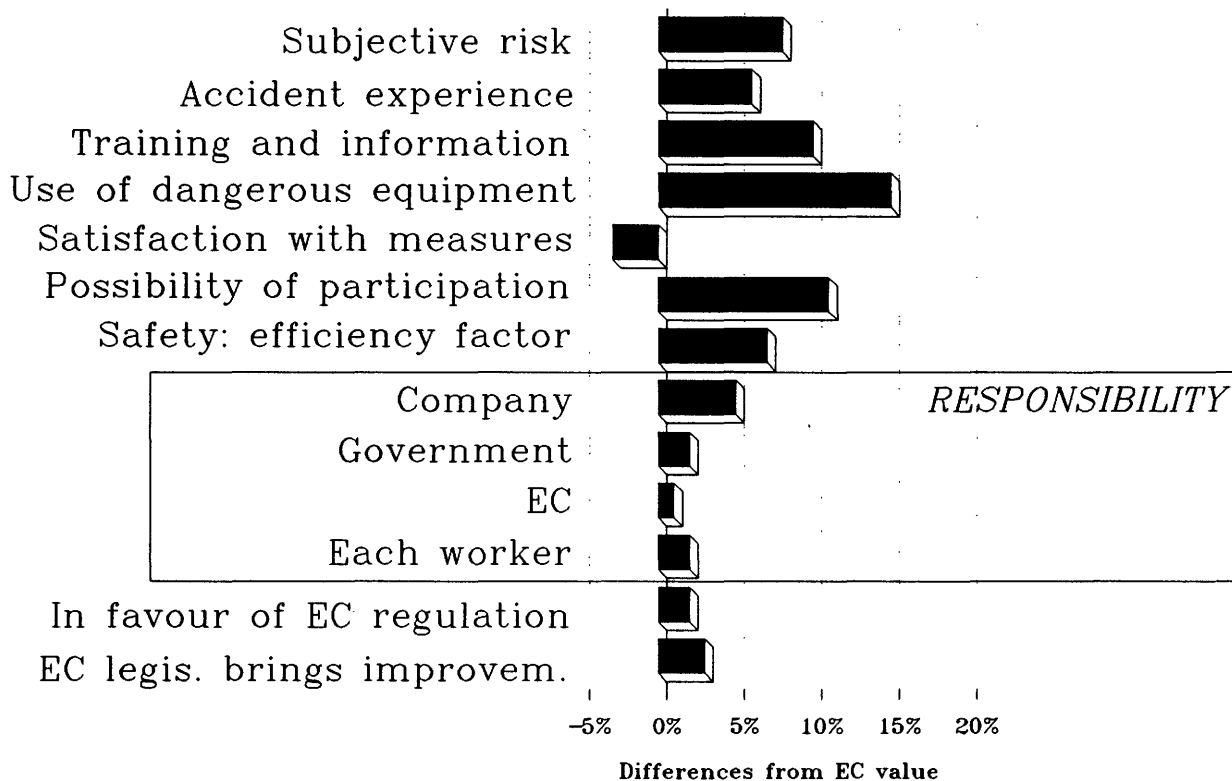
Whilst the workers in this sector feel that it involves major risks, they are also more satisfied than the average with the access to information and the scope for participating in prevention policy.

Responsibility for reducing accidents and occupational diseases is placed more on the company and workers, and less on the government and the European Community.

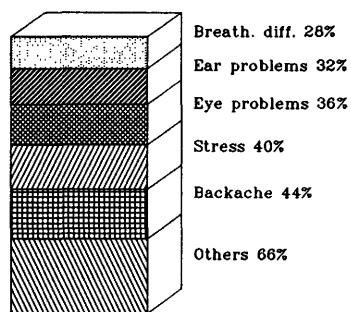
Health risk figures remain close to the average, except for ear problems and breathing difficulties, which are by far the most commonly mentioned problems.

Safety risk ratings are generally higher than the average. Burns, crushing and falling objects are selected more often than the dangers most commonly named overall. The dangers seem to be numerous, but specific to these areas of activity.

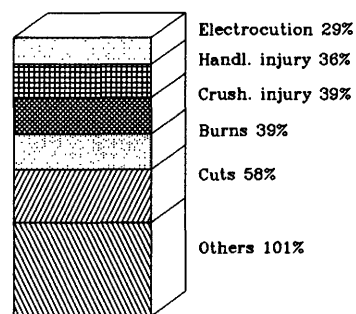
Sector profile Metal manufacturing



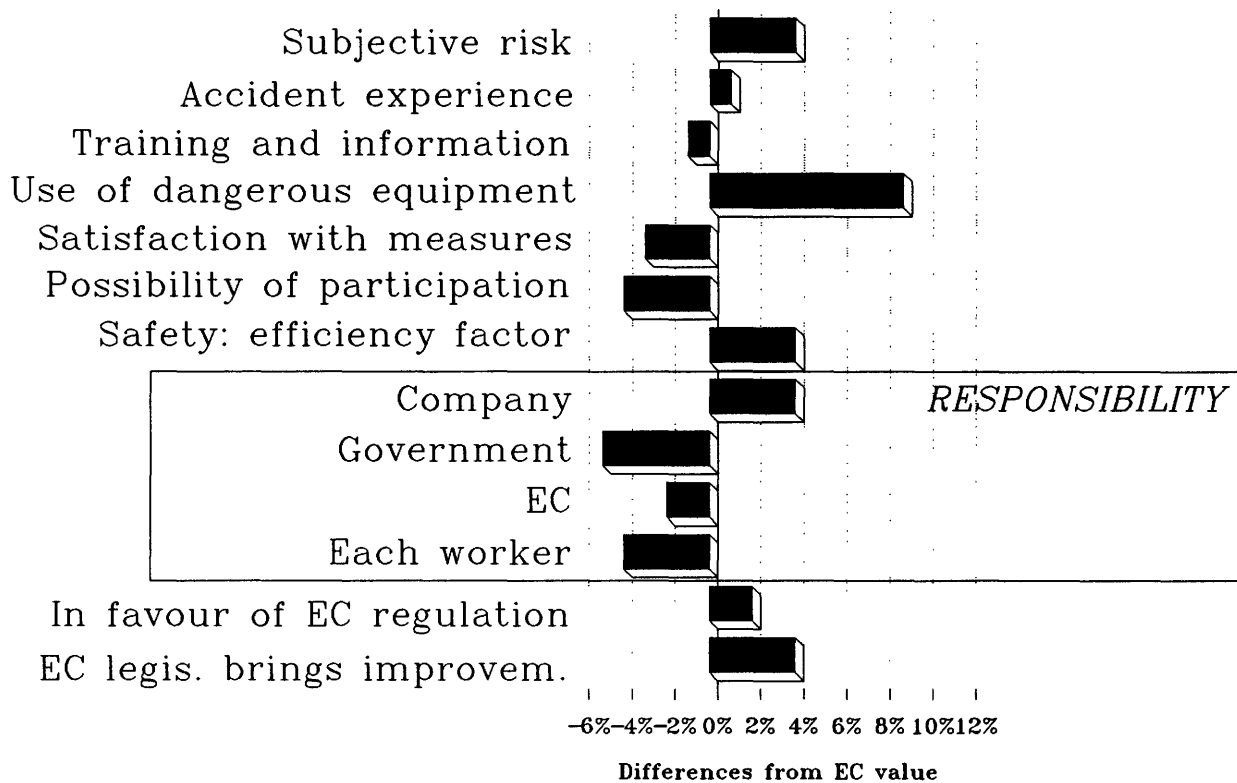
Health risks



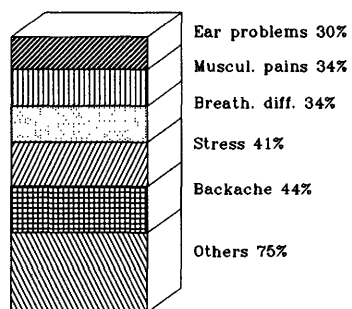
Safety risks



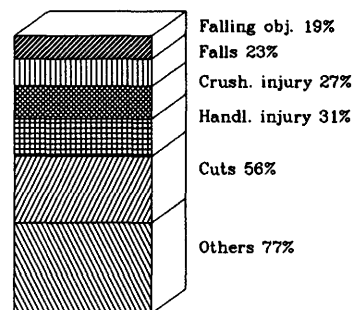
Sector profile Manufacturing



Health risks



Safety risks



3. *"Metal manufacturing"*

This sector is perceived as being fairly dangerous, particularly with regard to equipment. Workers are fairly satisfied with the information they receive and the scope for participating in prevention policy. More than the average think that improving health and safety protection will have a positive impact on their efficiency.

The ideas of workers in this sector regarding responsibility for prevention match those of the general population. Similarly, attitudes to Community legislation and its direct positive effects on work are close to the average.

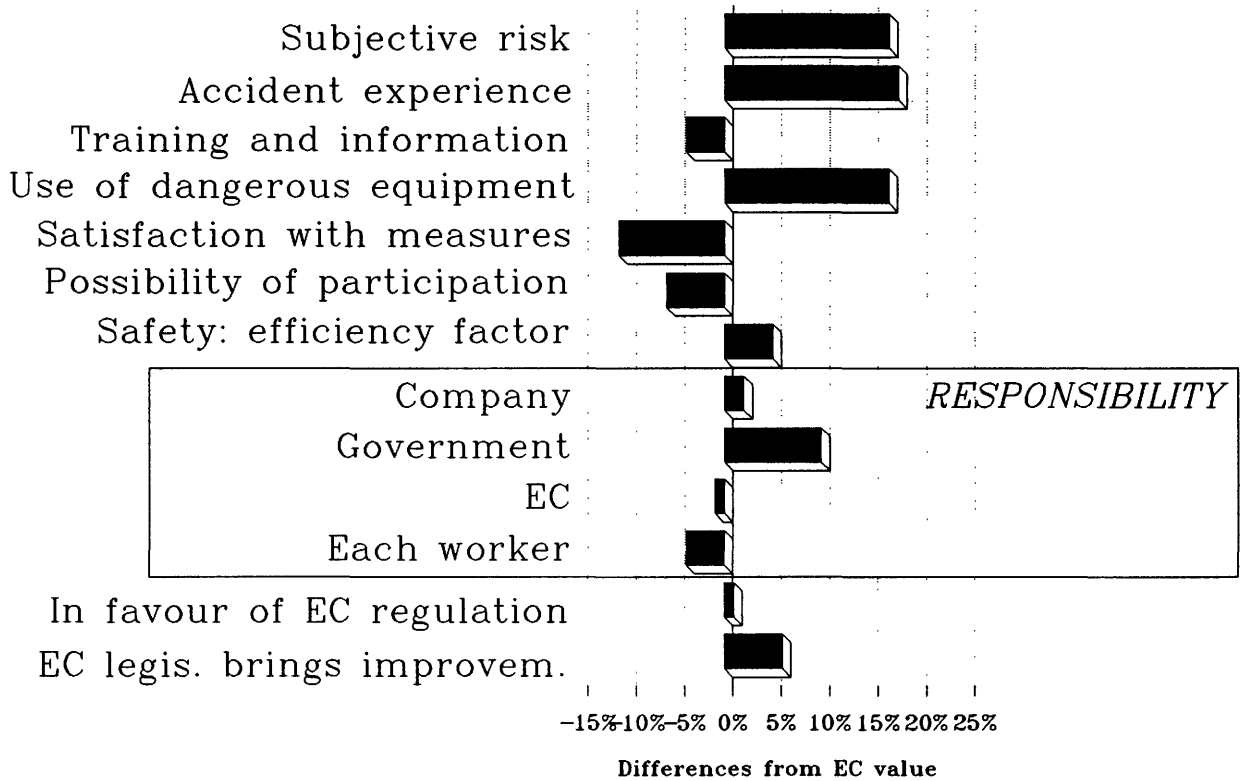
The health risks listed concur with the European average, although two problems stand out: eye and ear problems. Safety risks are cited more often (European average risks, plus electrocution).

4. *"Manufacturing"*

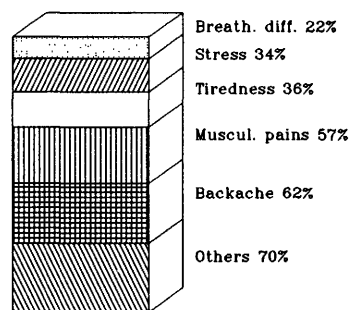
Whilst there is a considerable amount of dangerous equipment in this sector, generally speaking, the perception of risk is less marked than in the other industrial sectors. All indices differ only slightly from those for the total population. Manufacturing workers are slightly less satisfied with the various aspects of prevention and slightly more convinced of the existence of a positive link between safety and efficiency. With regard to responsibility for health and safety policy, they are somewhat more likely to choose the company, and somewhat less likely to choose the other three possibilities. Their attitude towards Community legislation is similar to that of the average European.

Concerning health risks, there is nothing special apart from breathing difficulties and ear problems, which are by far the most common problems. All safety risks are below average, except for cuts, which are by far the most commonly reported danger.

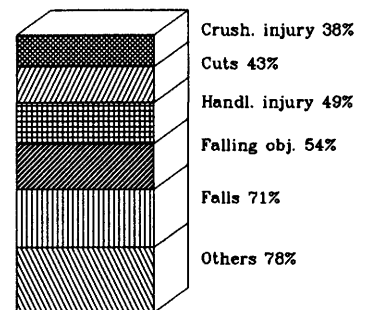
Sector profile Construction



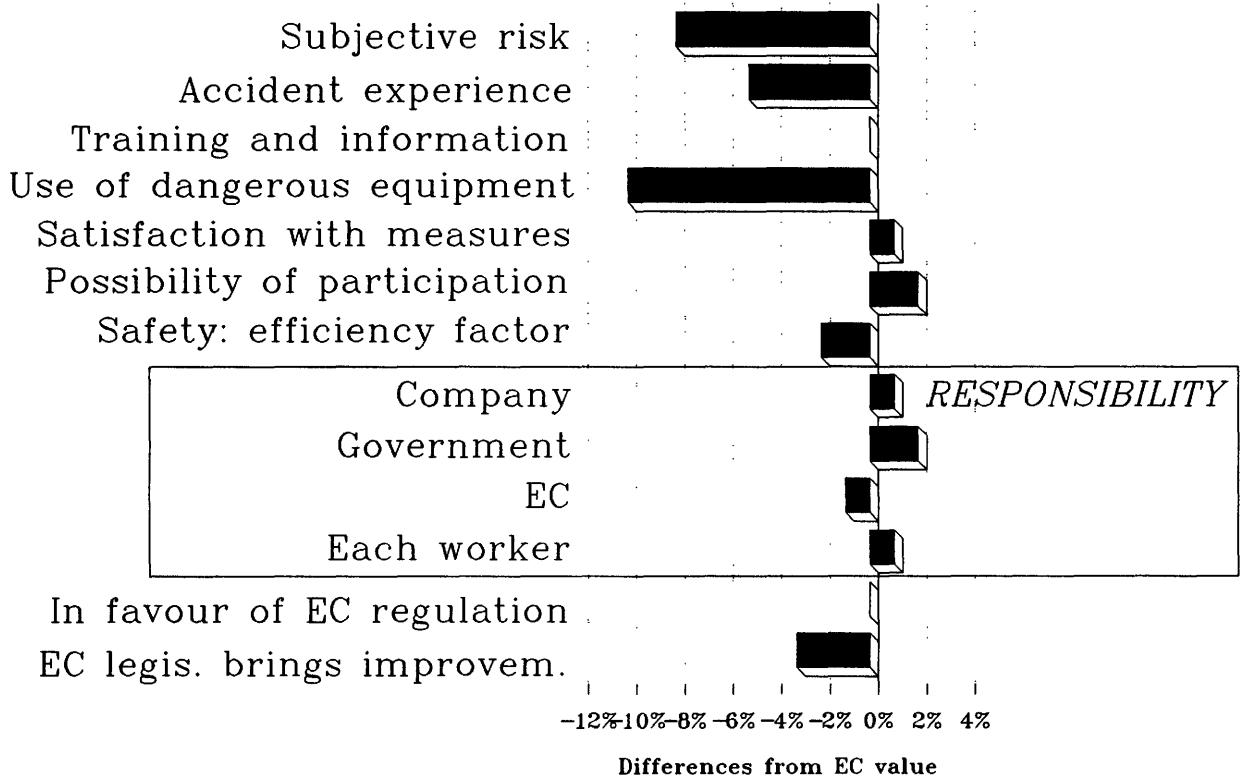
Health risks



Safety risks



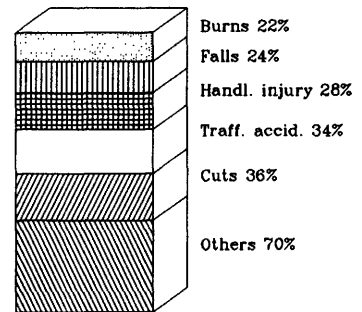
Sector profile Other services



Health risks



Safety risks



5. "Construction"

This sector presents a very high level of risk, with the three relevant indices well above the average. The indices relating to the various aspects of prevention (information, action taken, participation) are below the European level, indicating less satisfaction.

The percentages of favourable opinions concerning the positive links between safety and efficiency, Community legislation and the direct effects thereof on an individual's work are fairly close to the European levels.

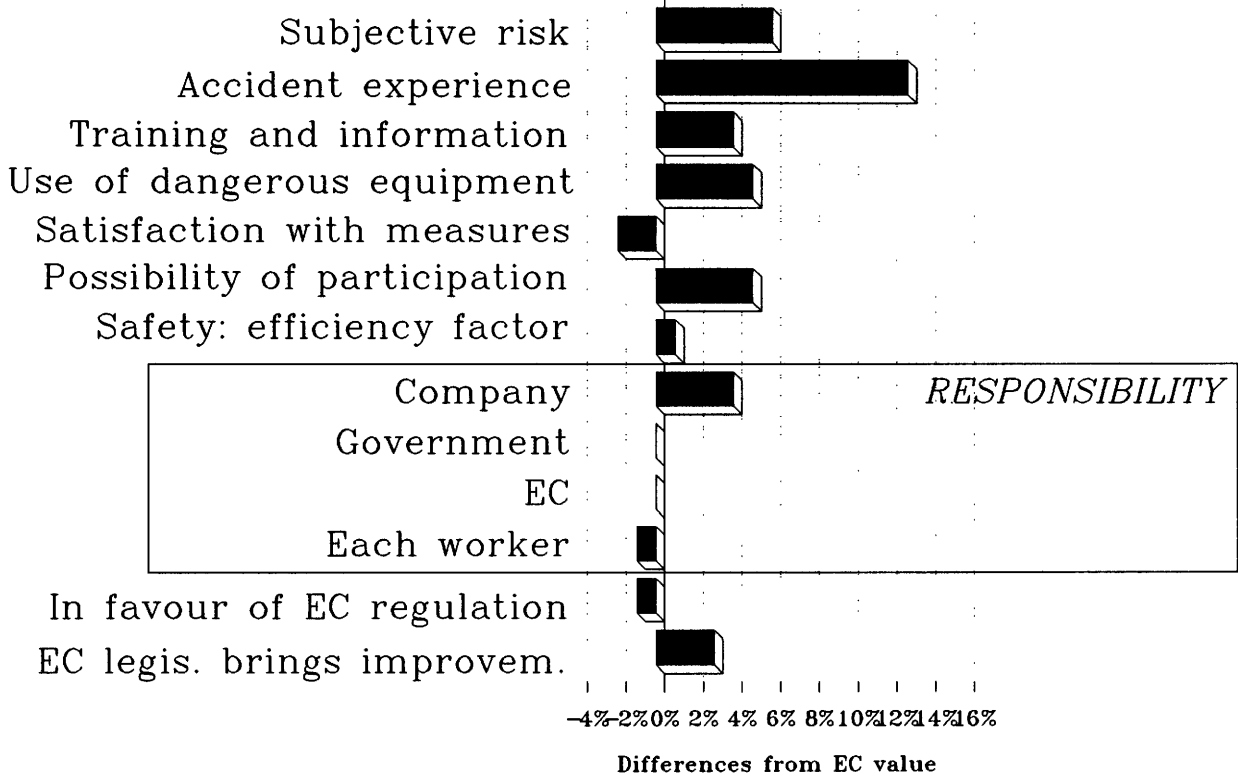
Regarding responsibility for health and safety, workers first of all name the company, followed by the workers themselves - although the government is named more often than usual.

Three types of health risk are mentioned much more frequently than the average: backache, muscular pains and general tiredness, all three of these being linked to intense physical activity. Stress, on the other hand, plays a minor role. Amongst dangers, falls and falling objects are twice as high as the European averages, and the other three risks are amply in evidence.

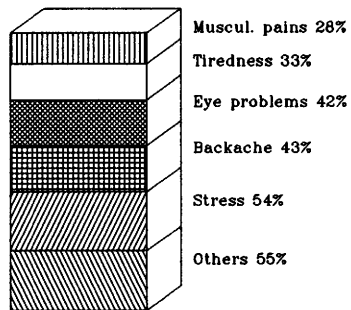
6. "Services"

The level of risk in this sector, where there is less dangerous equipment, seems to be lower. All other results are close to those for the total population. The majority of workers are satisfied with what is done in the field of prevention (particularly the measures taken). Almost half the respondents think that Community legislation may have a direct influence on their work and that an improvement in safety may bring about an improvement in efficiency. Companies are given the main responsibility for action in the field of health and safety with workers in second place, followed by the government and finally the European Community. The percentages for the most frequently cited health risks are below the average, except for stress, which is generally dominant. The same applies to dangers, with the exception of traffic accidents, for which the percentage is on the high side.

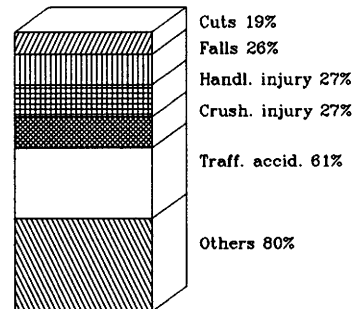
Sector profile Transport



Health risks



Safety risks



7. "Transport"

It seems that this sector may be regarded as presenting a level of risk which is slightly higher than the average. Workers' contacts with occupational diseases and industrial accidents are particularly significant. All other results are very close to the average. Workers are fairly satisfied with the various aspects of prevention, and a majority think that there is a positive link between safety and efficiency and that Community legislation could have a direct effect on their personal situation. They are also to a large extent in favour of common legislation on health and safety.

On the health risks side, stress, eye problems and tiredness are cited more frequently than the average. The five most common fears are the same as for the total population, but in a different order.

As for the dangers, traffic accidents are the main cause for concern. Mention of the remaining safety risks is well below average, with the exception of crushing.

4.4.2. Country profiles

1. Belgium

A Belgian's perception of the level of risk and his opinion concerning prevention are very close to those of the average European.

The idea of Community legislation in the field of health and safety is very well accepted in Belgium, even if certain doubts remain as to its concrete effects.

There is one peculiarity as regards responsibility for safety: fewer Belgians than the average expect the government to play a major role in prevention.

2. Denmark

Whilst a Dane's perception of the level of risk concurs with that of the average European, he is much more satisfied in respect of prevention.

Regarding prevention, Danes look more towards the company and workers, expecting less from the government. One aspect is striking: the Danes are not particularly disposed towards Community legislation and express major doubts as to its positive effects. They seem to fear that it may have a negative impact on Danish legislation, which is particularly demanding as regards health and safety; this means they do not appreciate the fact that Community legislation establishes only minimum requirements and does not exclude higher standards.

3. Germany (former West Germany)

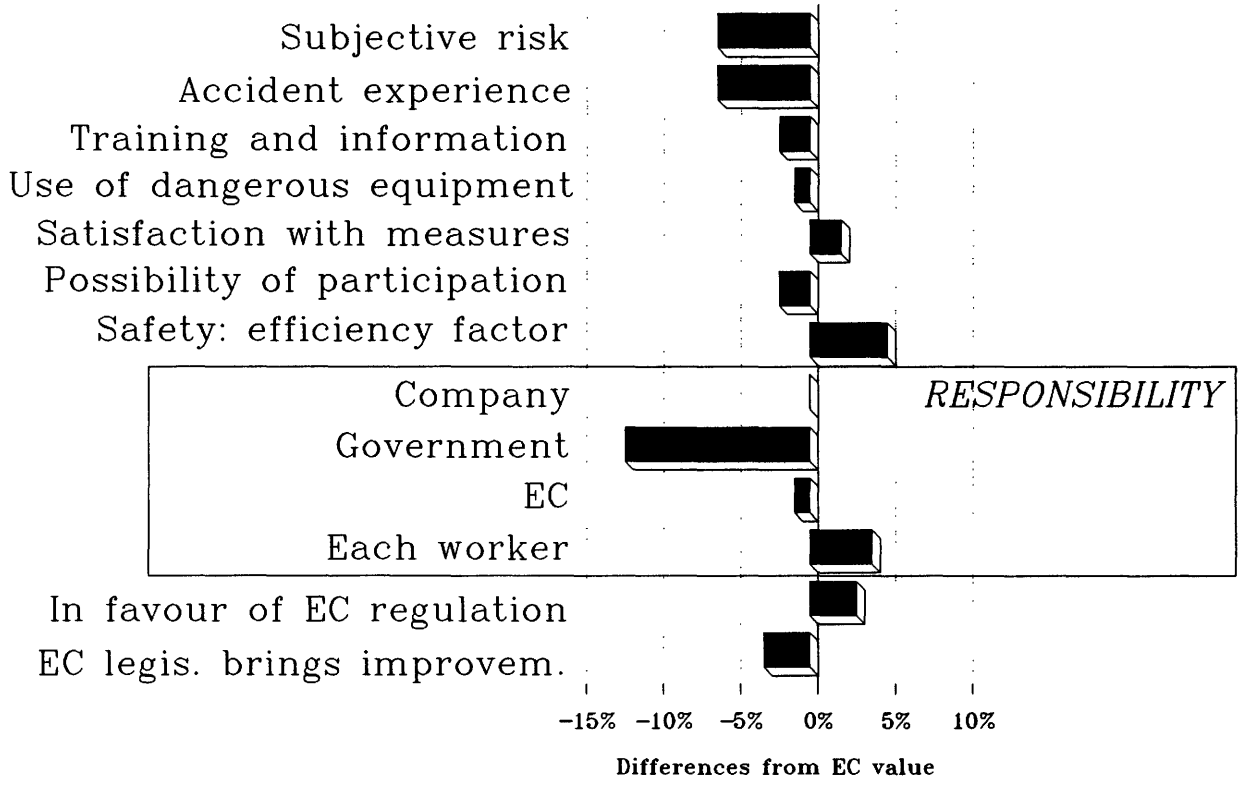
Germans in the "old" Länder perceive the risk as being slightly smaller than does the average European, and they seem somewhat more satisfied with prevention.

A majority of workers do not think that improving safety can have a positive effect on work efficiency.

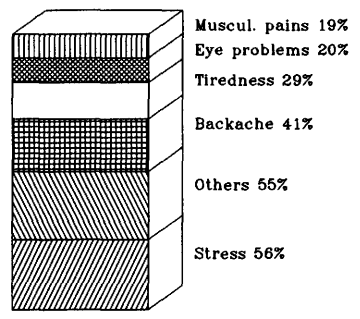
Even though they are broadly in favour of the harmonisation of health and safety legislation, only a minority believes that it can have a concrete effect on the work of individuals.

Germans tend to place responsibility for prevention on the company or workers rather than the government or European Community.

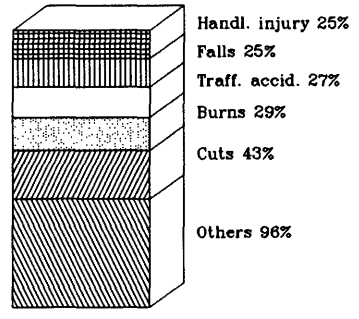
Country profile Belgium



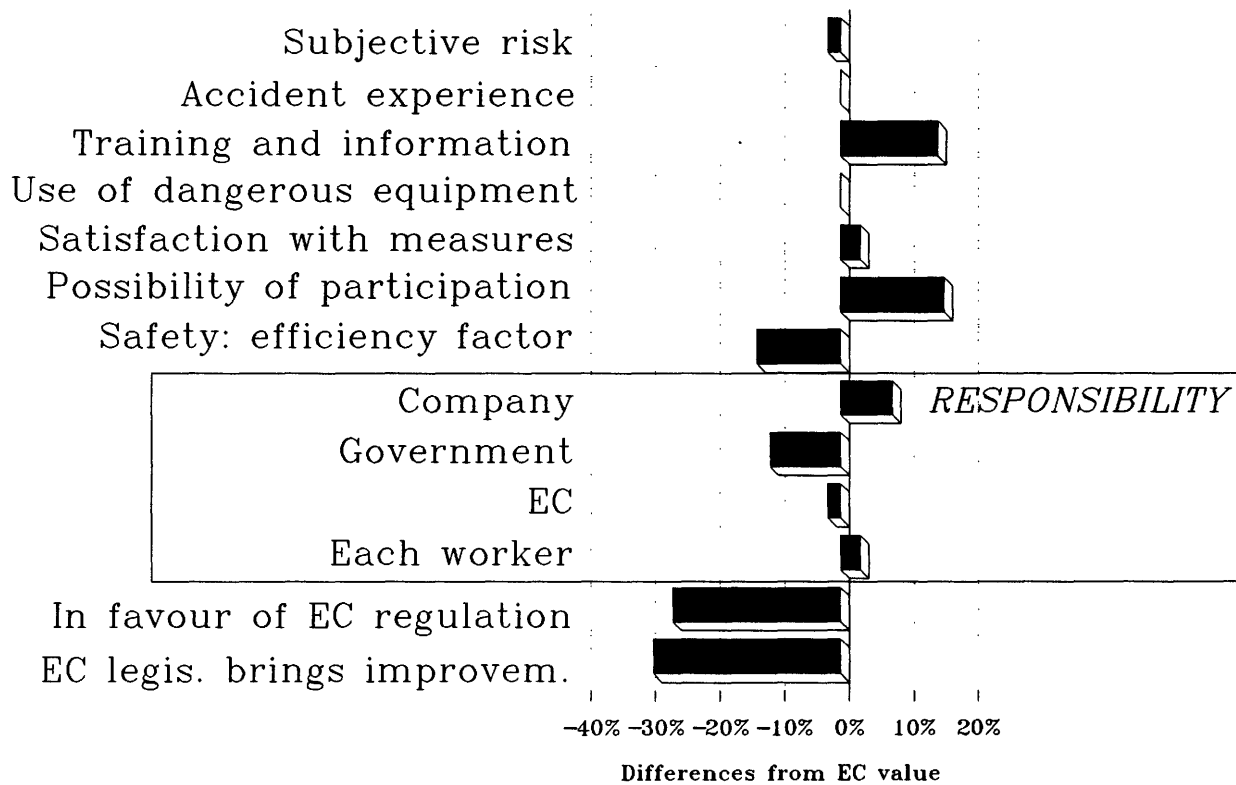
Health risks



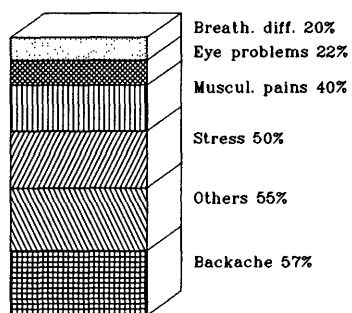
Safety risks



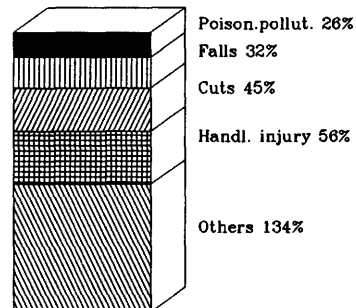
Country profile Denmark



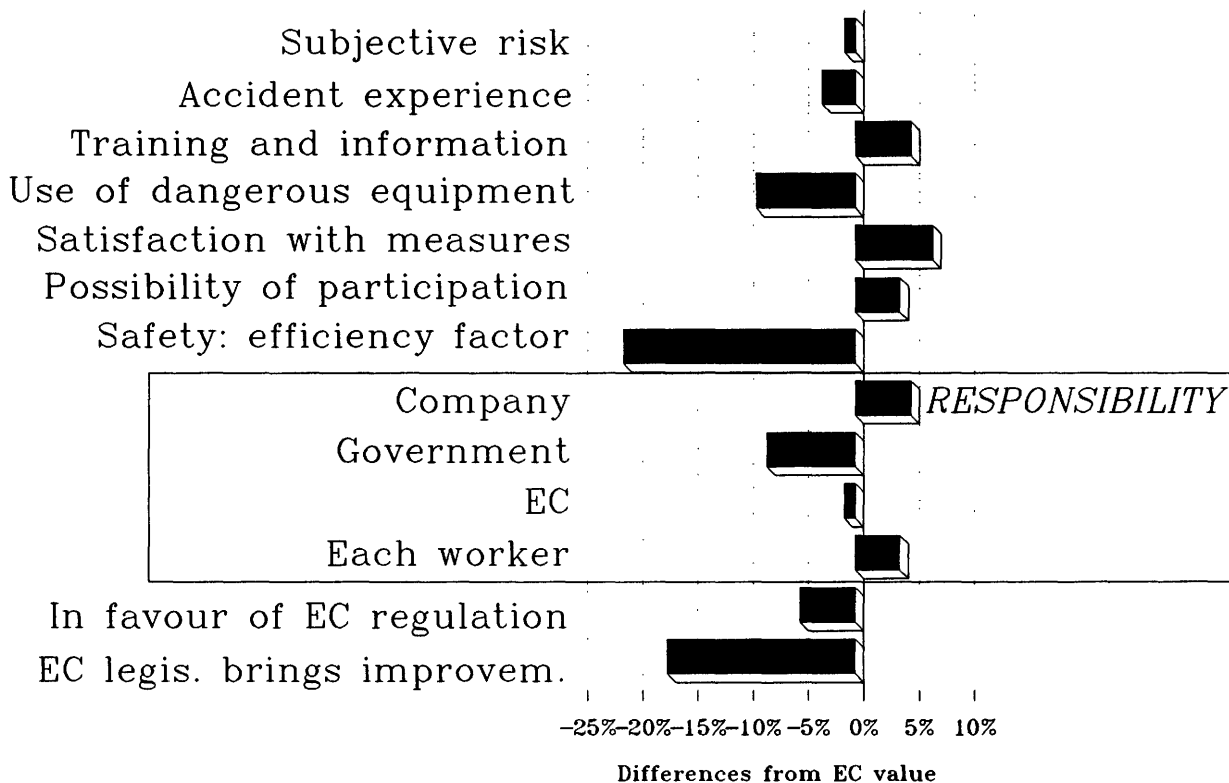
Health risks



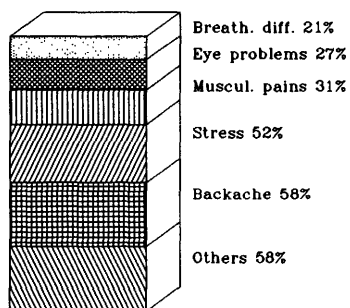
Safety risks



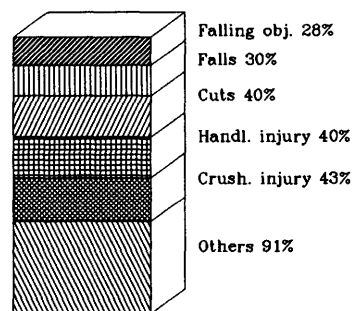
Country profile Germany (West)



Health risks



Safety risks



4. Germany (ex-GDR)

Germans in the five new Länder perceive the level of risk in a fairly similar manner to the average European, but are more satisfied with prevention (particularly information and participation). A majority of workers think that an improvement in their safety could boost their efficiency.

They are generally in favour of common legislation in the field of health and safety, and more of them than the average think that it could have a direct effect on their work. The number of Germans in the former GDR who think that the company and workers should be responsible for prevention is above average, whilst the number who prefer to make the government and European Community responsible is below average.

5. Greece.

Greeks present a number of contrasts. They perceive the level of risk as being very high and on the whole are not satisfied with prevention. A considerable proportion of Greek workers think that improving safety will have a positive effect on efficiency.

Nearly all Greek respondents favour common legislation on health and safety, and a very large majority also think it may have concrete effects on their own situation.

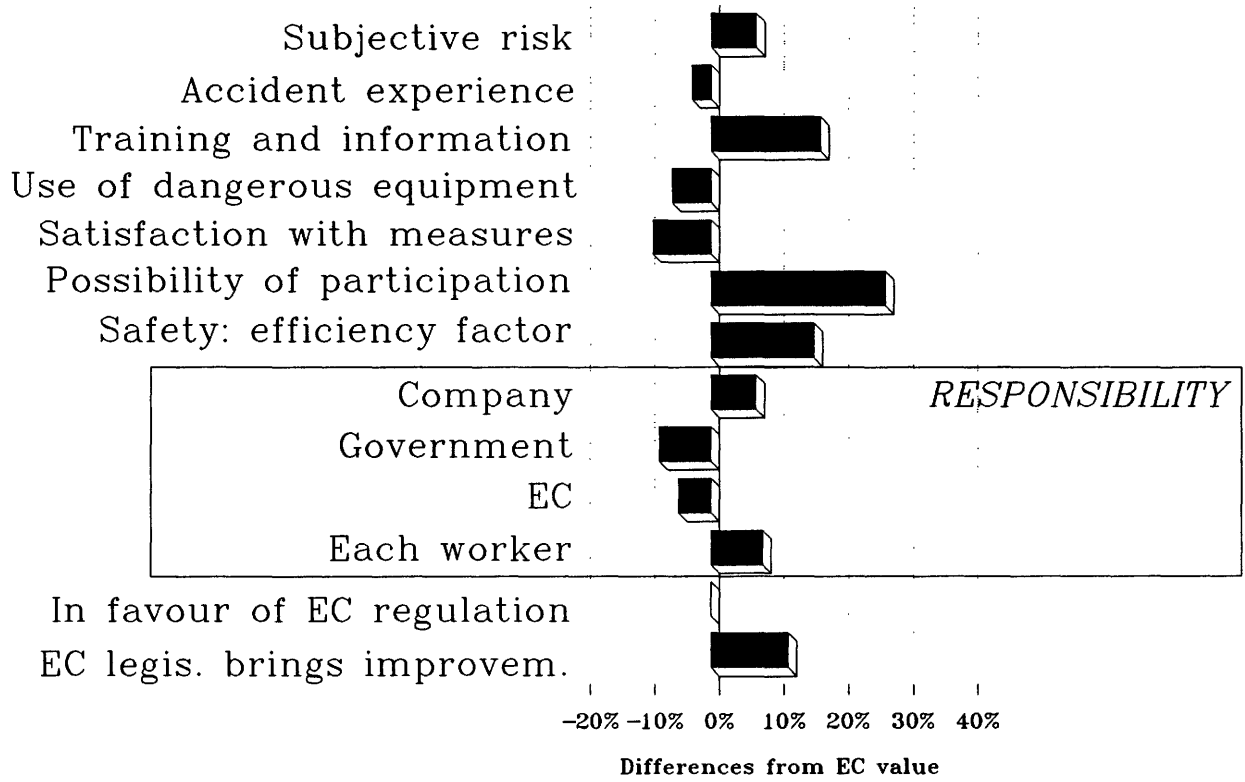
When allocating responsibility for prevention, fewer Greeks than average choose the company and workers (although these remain the most popular choices), whilst more than average look to the government and European Community.

6. Spain

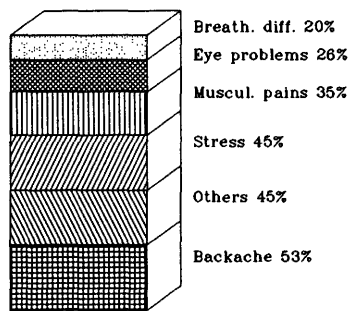
In relation to the European, the Spaniard's perception of the level of risk is slightly higher, but so is his satisfaction with prevention. The majority of workers in Spain think that improving safety could increase efficiency. Virtually all are in favour of harmonising health and safety legislation. A particularly high proportion also believe that such legislation is likely to have a direct impact on their own situation.

When Spaniards are asked who should assume responsibility for prevention, the most common reply is the company; the number who nominate workers is lower than the average, whilst the number choosing the government is higher than the average.

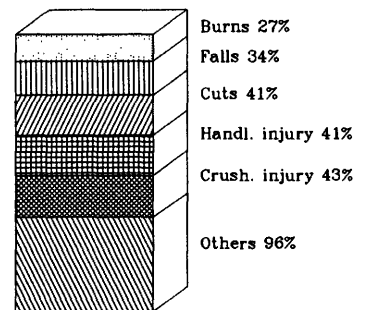
Country profile Germany (East)



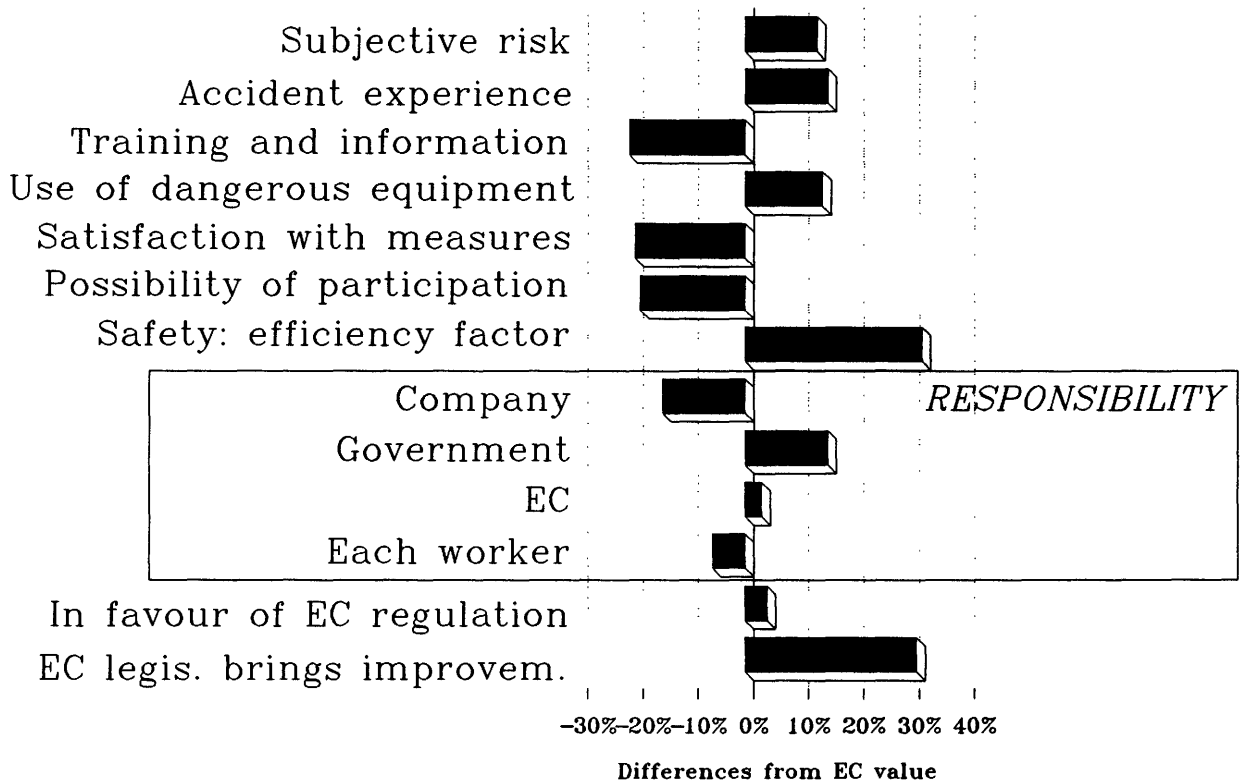
Health risks



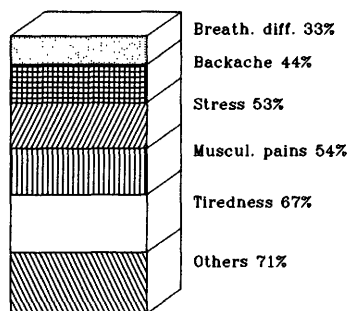
Safety risks



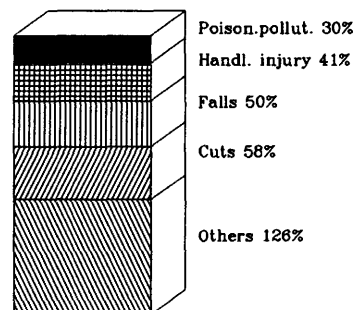
Country profile Greece



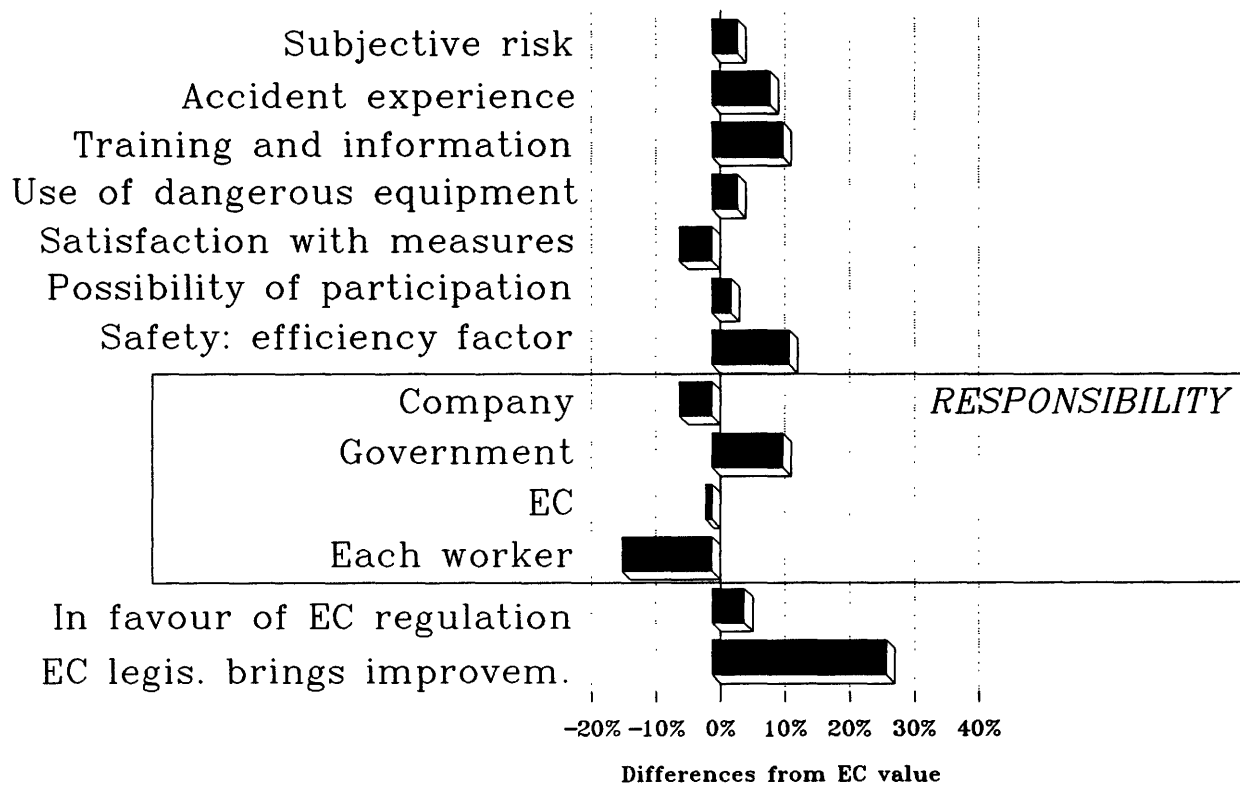
Health risks



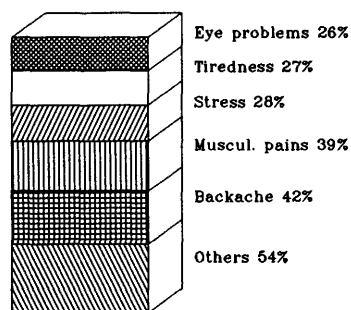
Safety risks



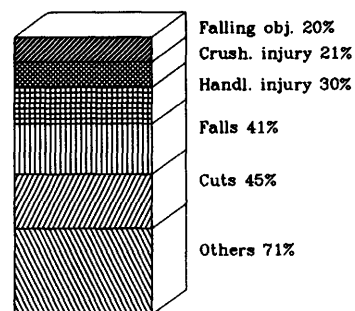
Country profile Spain



Health risks



Safety risks



7. France

The Frenchman's perception of the level of risk is very close to that of the European, but the Frenchman is less satisfied than the European with prevention.

A very large number of workers favour the idea of Community health and safety legislation, without being convinced that it will have concrete effects on their work. The majority think that improved safety increases efficiency.

The French consider that it is mainly the company and workers which have to play a central role in prevention, rather than the government.

8. Ireland

Whilst the Irish differ from the average European concerning the level of risk perceived, which they assess as being lower over all (despite a higher presence of dangerous equipment), there is a greater degree of agreement between the two groups regarding prevention.

A very large majority of workers in Ireland are well-disposed towards the idea of Community legislation in the field of health and safety. A large number also think that such legislation is likely to have a direct impact on their work. When asked who should be responsible for prevention, the Irish first of all nominate the company (although slightly less than the average rating) and workers. They expect less in this field from the government and the European Community.

9. Italy

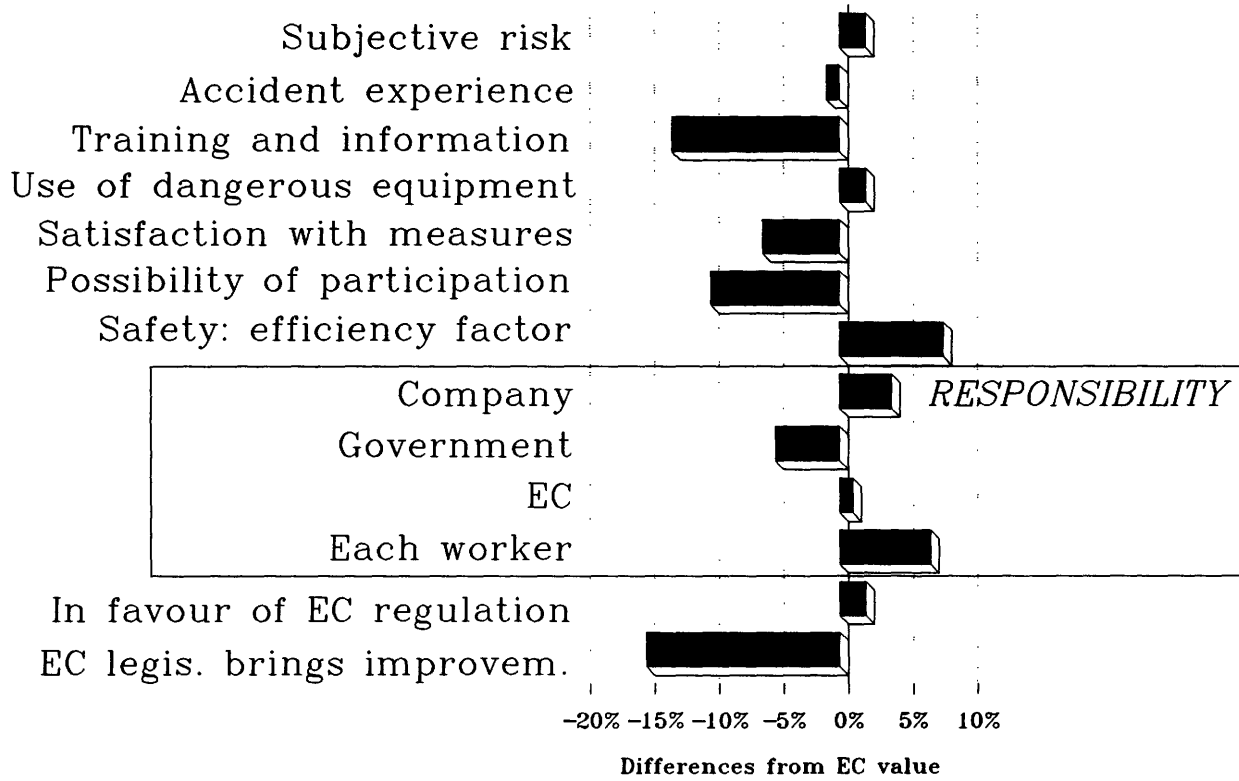
Whilst Italians are quite close to the average European in terms of the level of risk perceived, they are less satisfied with prevention.

The majority of workers in Italy believe that improving safety could lead to greater efficiency.

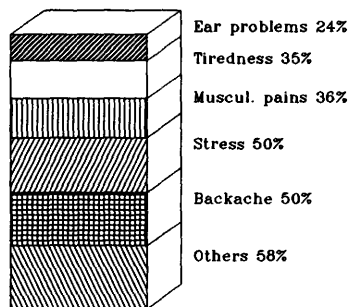
Almost all are in favour of harmonising health and safety legislation, and a large majority think that this could have a positive effect on their working conditions.

As regards responsibility for prevention policy, Italians first of all select the company (though less than the average). The government is nominated more than workers (percentage well above average for the former, well below average for the latter).

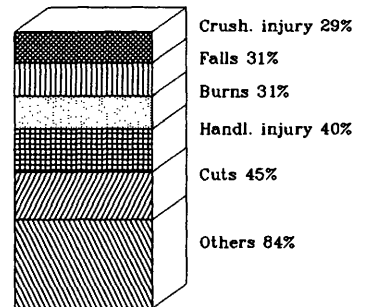
Country profile France



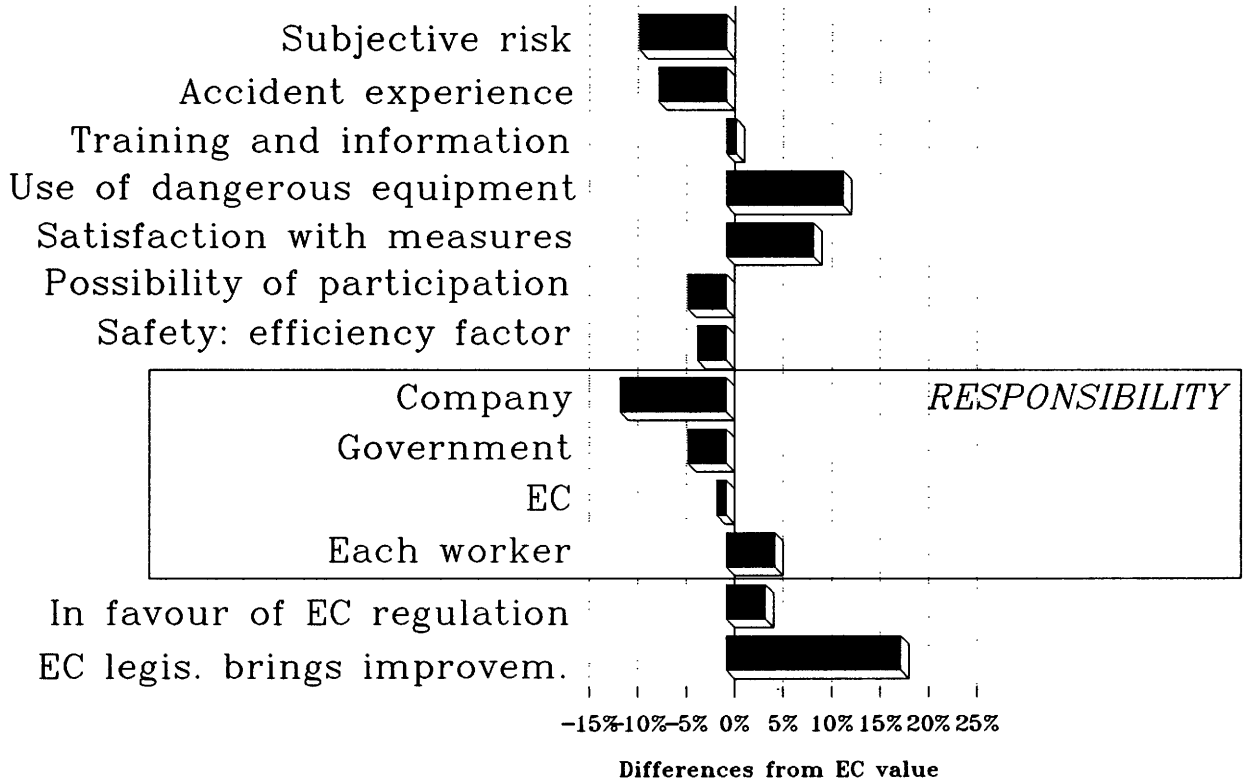
Health risks



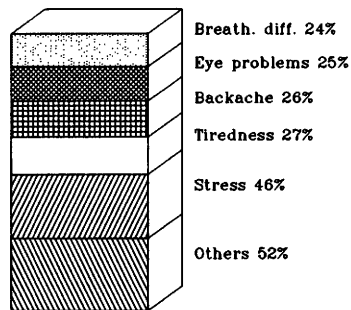
Safety risks



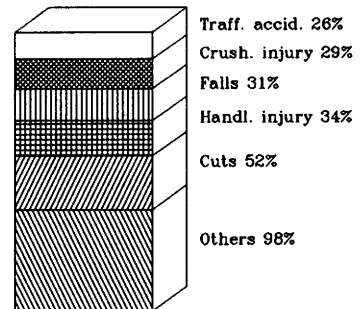
Country profile Ireland



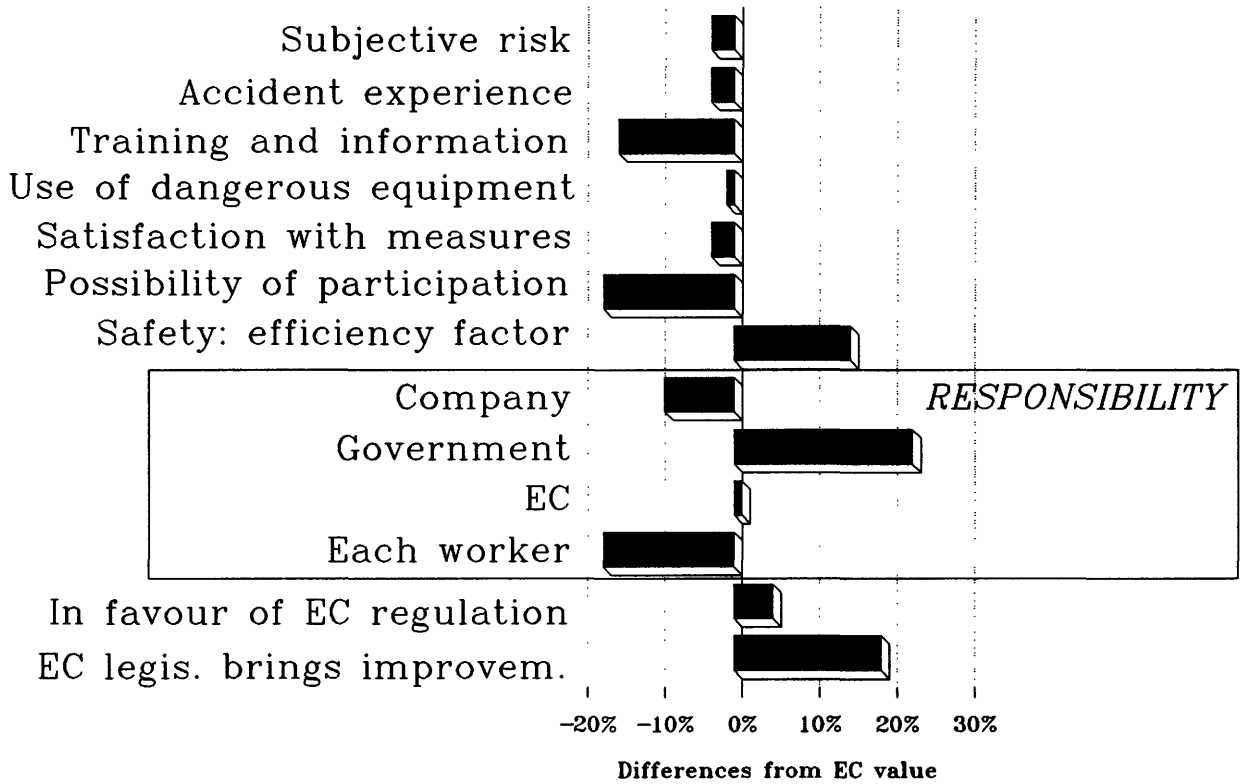
Health risks



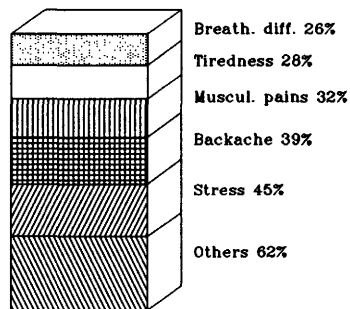
Safety risks



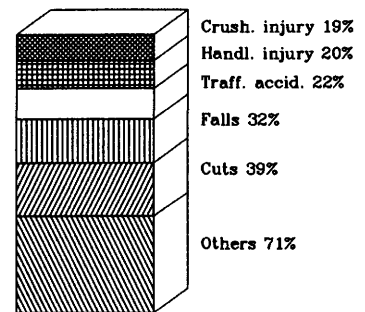
Country profile Italy



Health risks



Safety risks



10. Luxembourg

Opinion in Luxembourg is close to the European average concerning the level of risk perceived, whilst the degree of satisfaction with prevention is slightly higher. The idea of Community health and safety legislation is well accepted by workers in Luxembourg, a majority of whom think that it could have a direct effect on their working conditions.

The company comes in first place as far as allocation of responsibility for prevention is concerned, followed by the workers. Far fewer respondents nominate the government (below average, as is the figure for the company) or the European Community.

11. Netherlands

In overall terms, the Dutch tend to agree with the average European on risk perception, but are more satisfied than the average with prevention.

Only a minority of workers in the Netherlands think that improving safety might have a positive effect on work efficiency.

Furthermore, whereas a very large majority are receptive to the idea of Community health and safety legislation, only one in two believe that it could have a concrete effect on their own situation.

More than the average think that the company and workers should be responsible for prevention policy, with fewer than the average opting for the government and the European Community.

12. Portugal

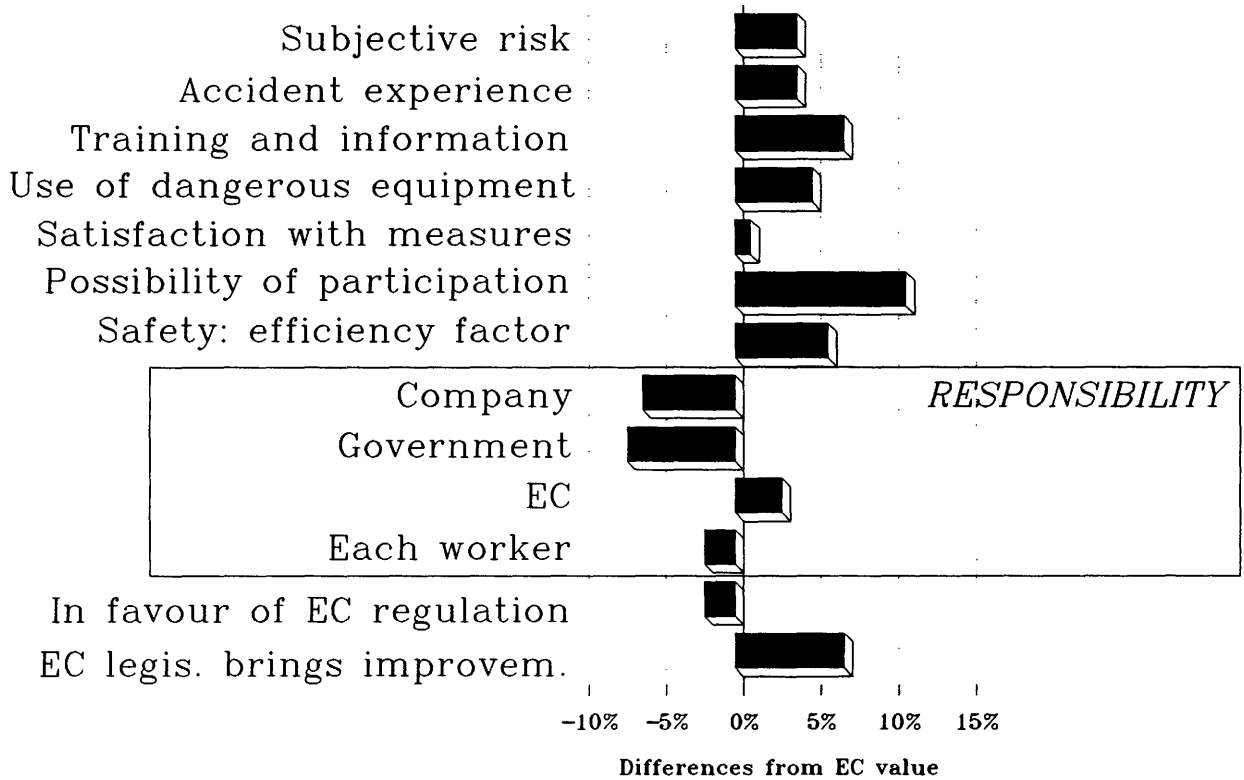
Portuguese respondents agree with the average European about the level of risk perceived, but are markedly less satisfied with prevention.

Many workers in Portugal think that improving safety could also improve efficiency.

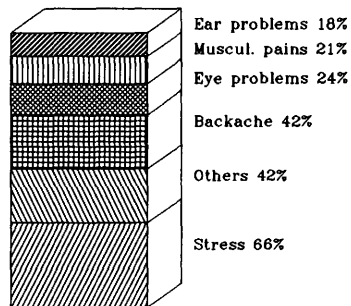
Nearly all are in favour of harmonising health and safety legislation, and a very large number also think that common legislation could have a real impact on their own situation.

As regards responsibility for prevention policy, the Portuguese first opt for the company (though the figure is slightly below the European average) and the workers, but they do have above-average expectations from the government and European Community.

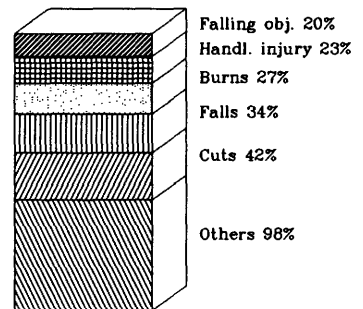
Country profile Luxembourg



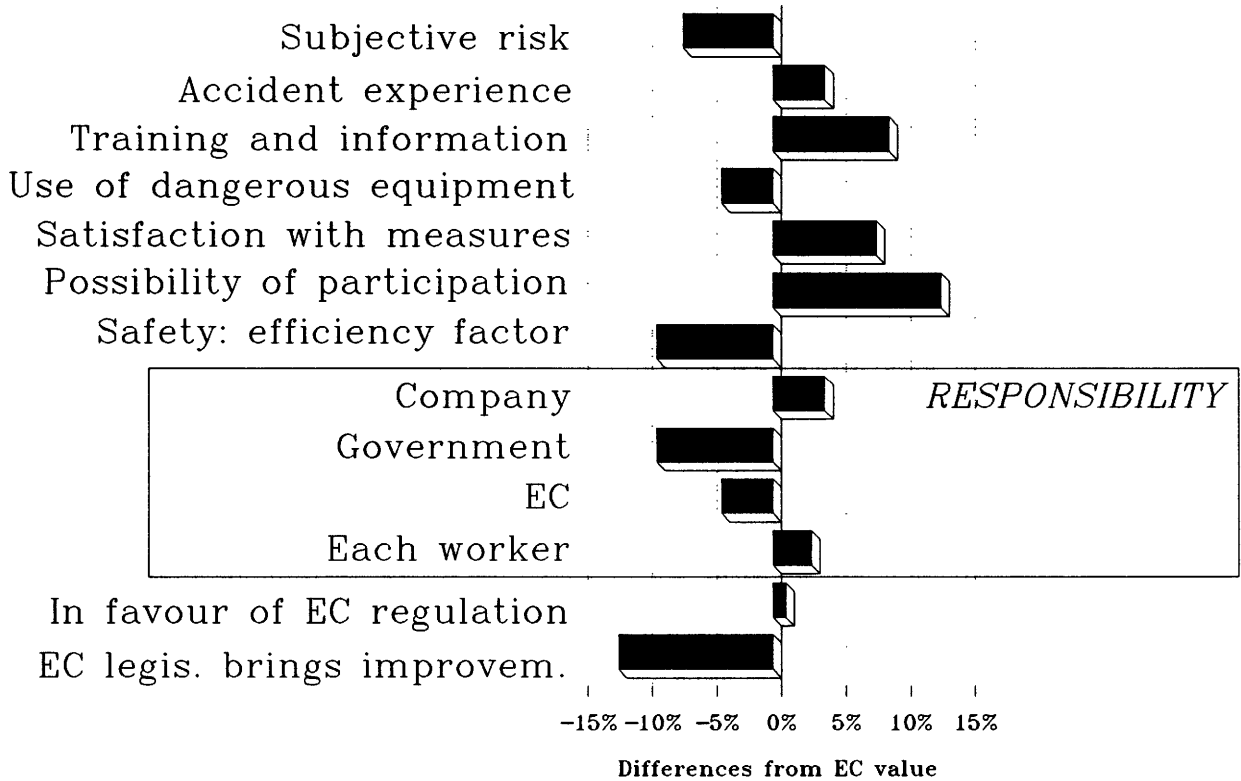
Health risks



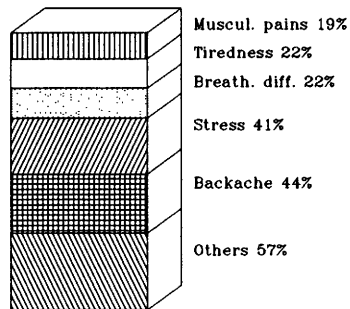
Safety risks



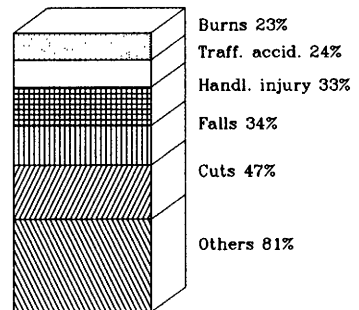
Country profile Netherlands



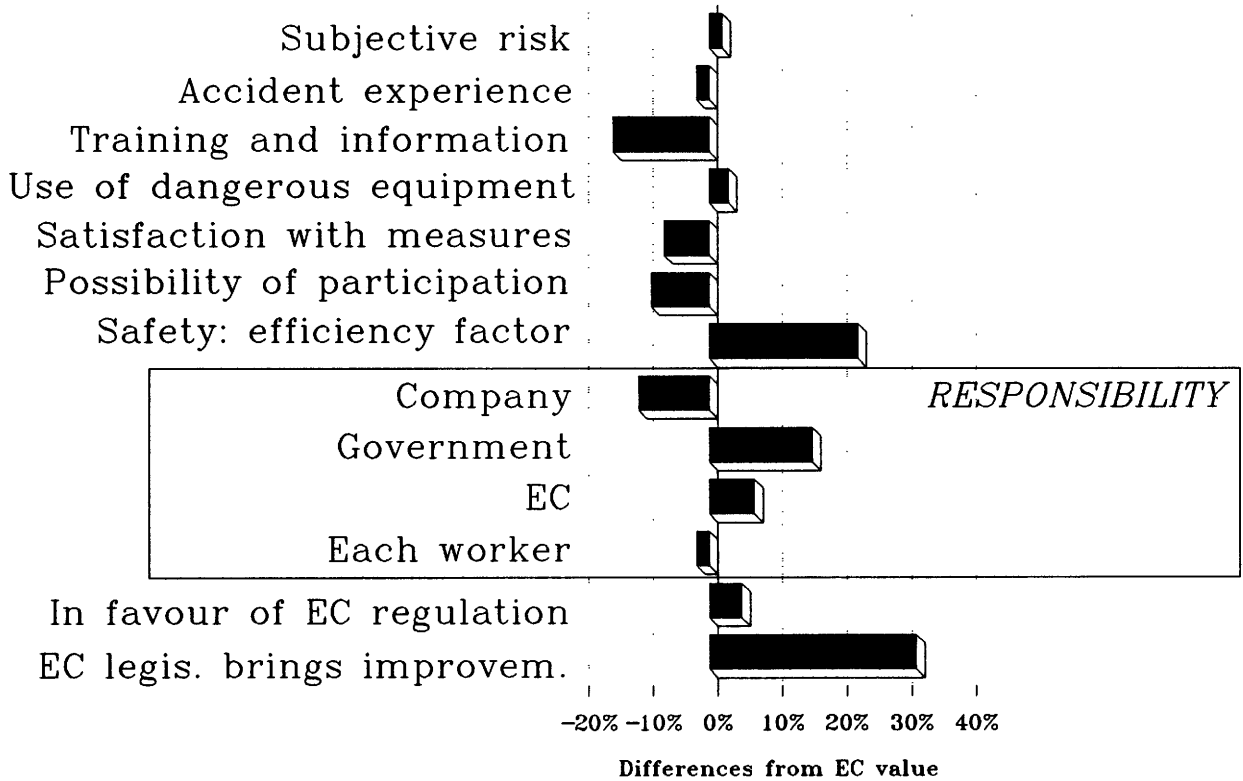
Health risks



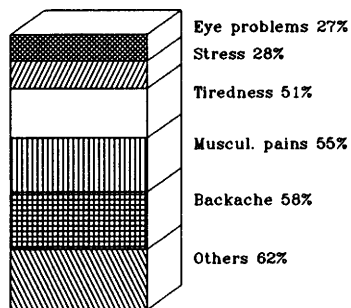
Safety risks



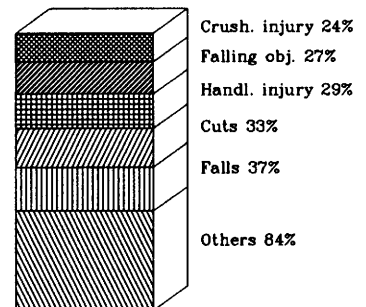
Country profile Portugal



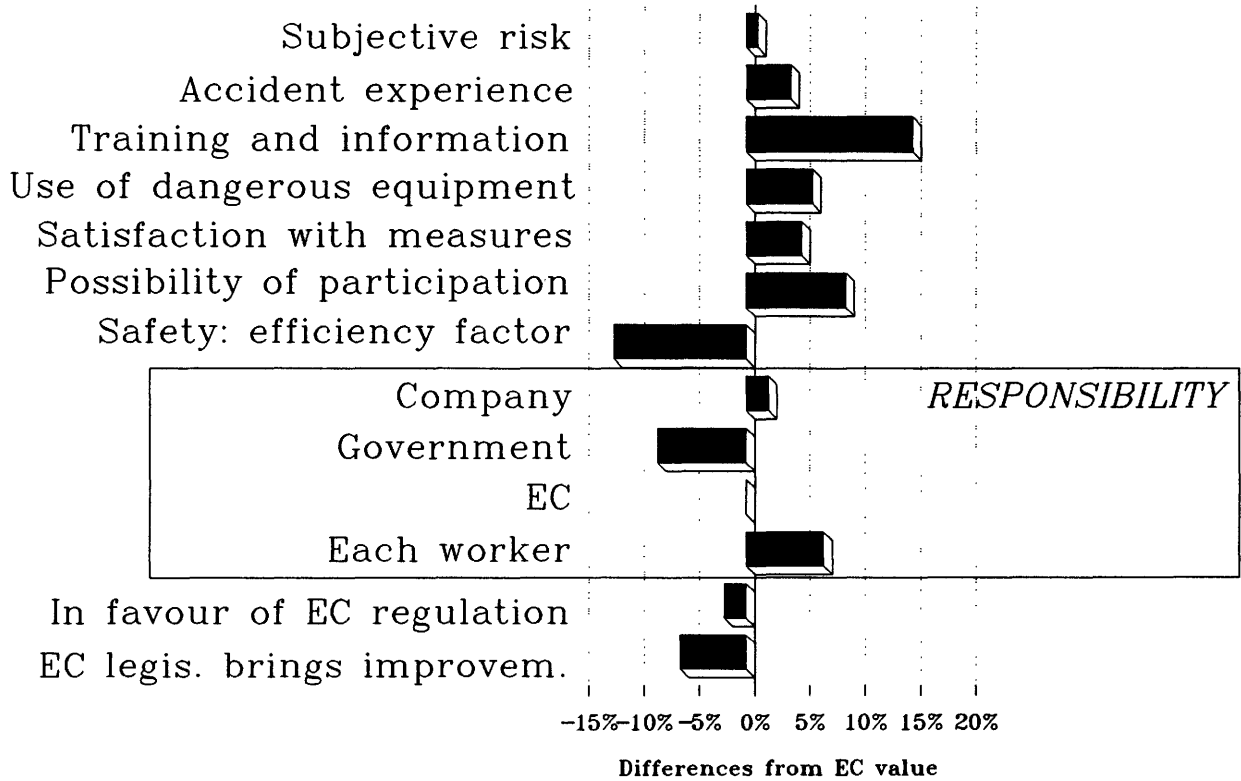
Health risks



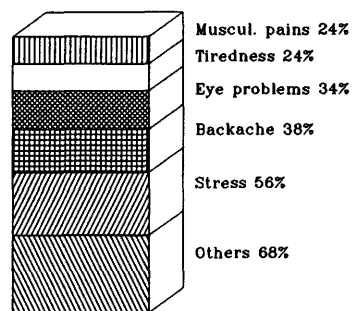
Safety risks



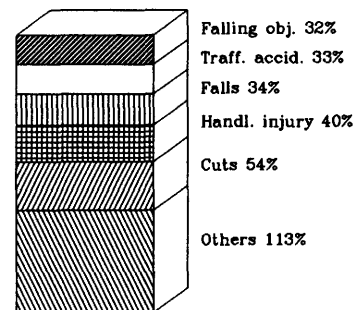
Country profile United Kingdom



Health risks



Safety risks



13. United Kingdom

On the whole, UK respondents tend to be close to the European average concerning the level of risk perceived, but they are more satisfied than the average European with prevention.

Only a minority of UK workers think that improving safety can improve work efficiency.

The idea of harmonised health and safety legislation is welcomed by a very large number of workers, and a slight majority thinks that Community legislation might have a concrete effect on their own working conditions.

When asked who they think should bear the main responsibility for prevention, most respondents go for the company, followed by workers (slightly above average). Fewer nominate the government, and even fewer the European Community.

4.4.3. Profiles of companies as a function of their size

1. Companies with a single worker

Single workers on the whole do not seem to perceive their activity as involving special risks (the three indices are almost the same as the European averages). Their attitude is noticeably different on the subject of prevention: a majority of six out of ten are fairly dissatisfied with information and the scope for participation in the field of health and safety. Although they are satisfied with the action taken, they are somewhat less so than the total population.

They are very much in favour of common legislation, though not many feel that it can have a direct positive effect on their work (results similar to those for the total population). Their allocation of responsibility for prevention policy is different in that the company, workers and the government are all selected by 60% of respondents, and the Community almost doubles its average score. This means that there are considerable discrepancies from the average results (company and government nominated by far fewer and far more respondents respectively).

Three health fears are mentioned much more frequently than by the population as a whole, namely backache, muscular pains and tiredness. Stress is below the average. As far as dangers are concerned, four out of five are those which are most cited on average, generally with higher percentages here. The fifth, poisoning, is also mentioned more often than it is on average.

2. Small companies (1 - 9 employees)

Workers in small companies do not seem to perceive a particularly high level of risk in their work (all three indices are slightly below the average). On the whole they are as satisfied with prevention as the average European. A large majority are satisfied with the action taken, and one in two is satisfied with information and the scope for participation in the field of health and safety.

On the other side of the coin, only a minority think that improving safety could have a positive effect on their efficiency.

Whilst prevention is most frequently seen as the responsibility of the company, the percentage is still less than the average. Workers come in second place, but are nominated more frequently than by the population as a whole. The government comes in third place, followed by the European Community. Workers' attitude to Community health and safety legislation is fairly standard, with most in favour of harmonisation, but fewer think that it will have a direct effect on their work. Health fears are very similar to those admitted to by the population as a whole, to within a few percentage points. Backache is the most common complaint.

The situation regarding safety fears is the same. Cuts are the most frequently mentioned danger.

3. Companies with 10 - 50 employees

The figures here are almost identical to those for the total population. The only exception concerns the choice of parties responsible for prevention. These workers do not perceive a particular level of risk in their work. A very large number of them are satisfied with the preventive measures taken, but fewer are satisfied with the scope for participation and information in the field of health and safety.

Slightly more than half think that improved safety would be conducive to an improvement in their efficiency.

Most respondents are in favour of harmonised health and safety legislation, although fewer (six out of ten) think that common legislation can have a direct impact on their own situation.

Their health fears are identical to those of the total population, with almost identical percentages. Stress and backache are the main problems.

The situation with regard to dangers is the same, i.e. both risks cited and percentages are very similar to the averages. Cuts are the most common fear.

4. Companies with more than 50 employees

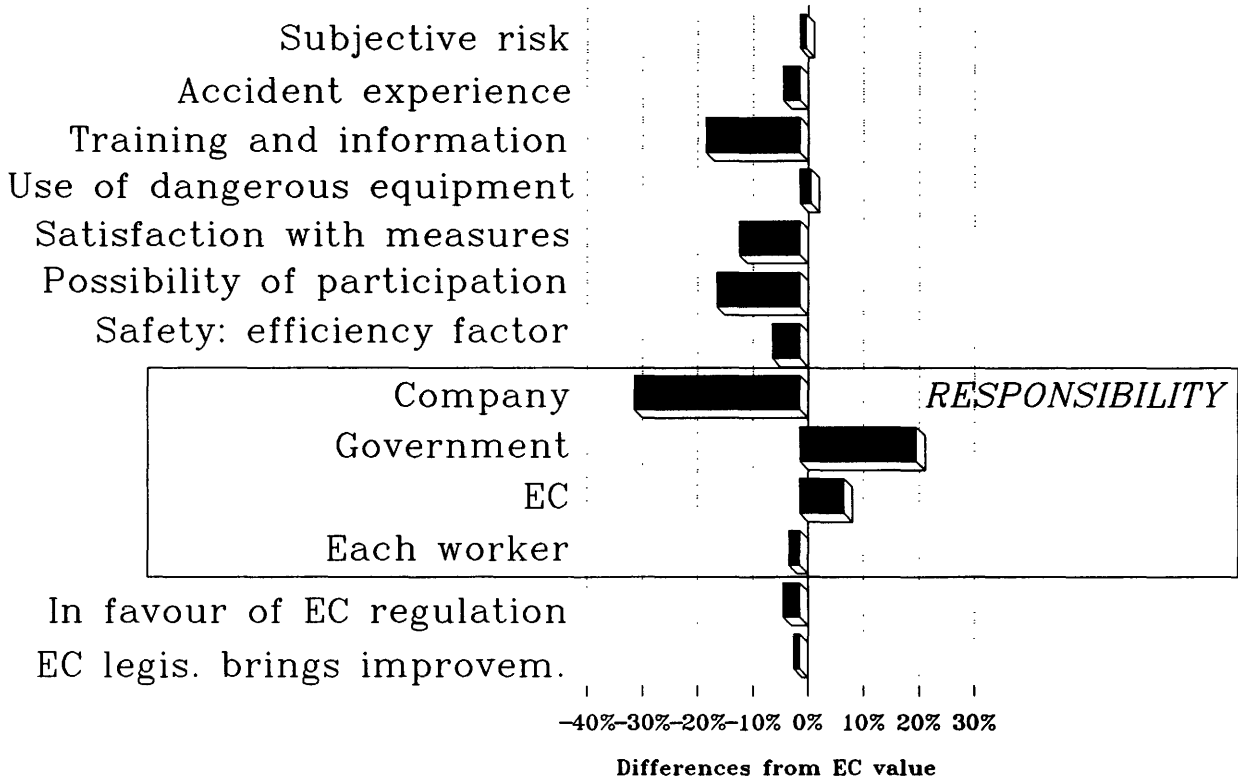
Workers in these companies have a slightly above-average risk perception.

A large majority of respondents are satisfied to some extent with the preventive measures taken. The degree of satisfaction concerning information and the scope for participation in the field of health and safety is well above average.

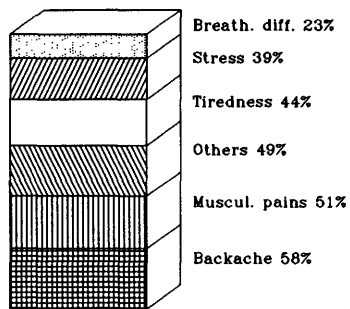
Six out of ten think that an improvement in their safety could make them more efficient in their work. The company is the most frequent choice as the party who should be responsible for prevention, with a higher than average percentage, which also applies to workers, who are in second place. The government comes in third place, the figure being lower than for the total population, followed finally by the European Community.

Respondents' feelings regarding Community legislation are similar to those of the population as a whole: a very large percentage are in favour of common legislation, but only six out of ten think that it could have a tangible effect on their own work. On the whole, these workers express the same health and safety fears as the total population, with very similar percentages. Stress and backache are the main health problems, and cuts are the main danger.

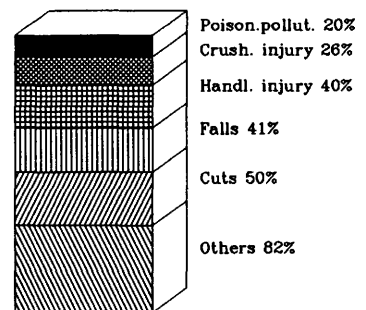
Profile by company size single worker



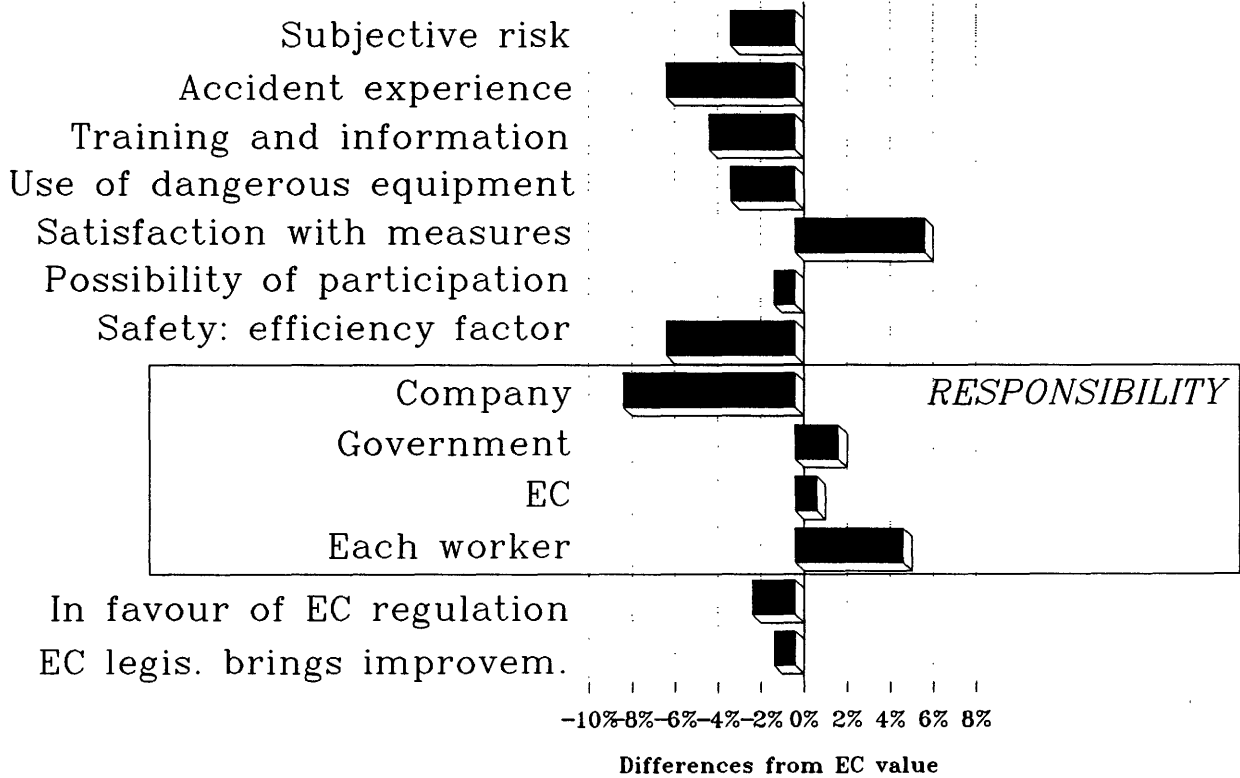
Health risks



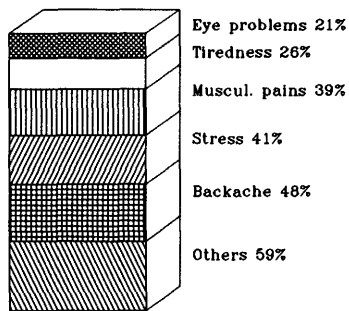
Safety risks



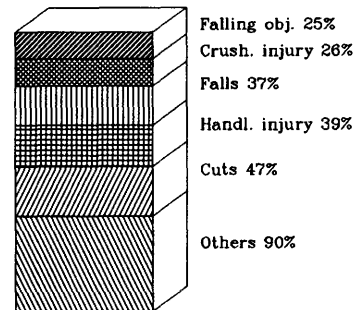
Profile by company size 1 - 9 workers



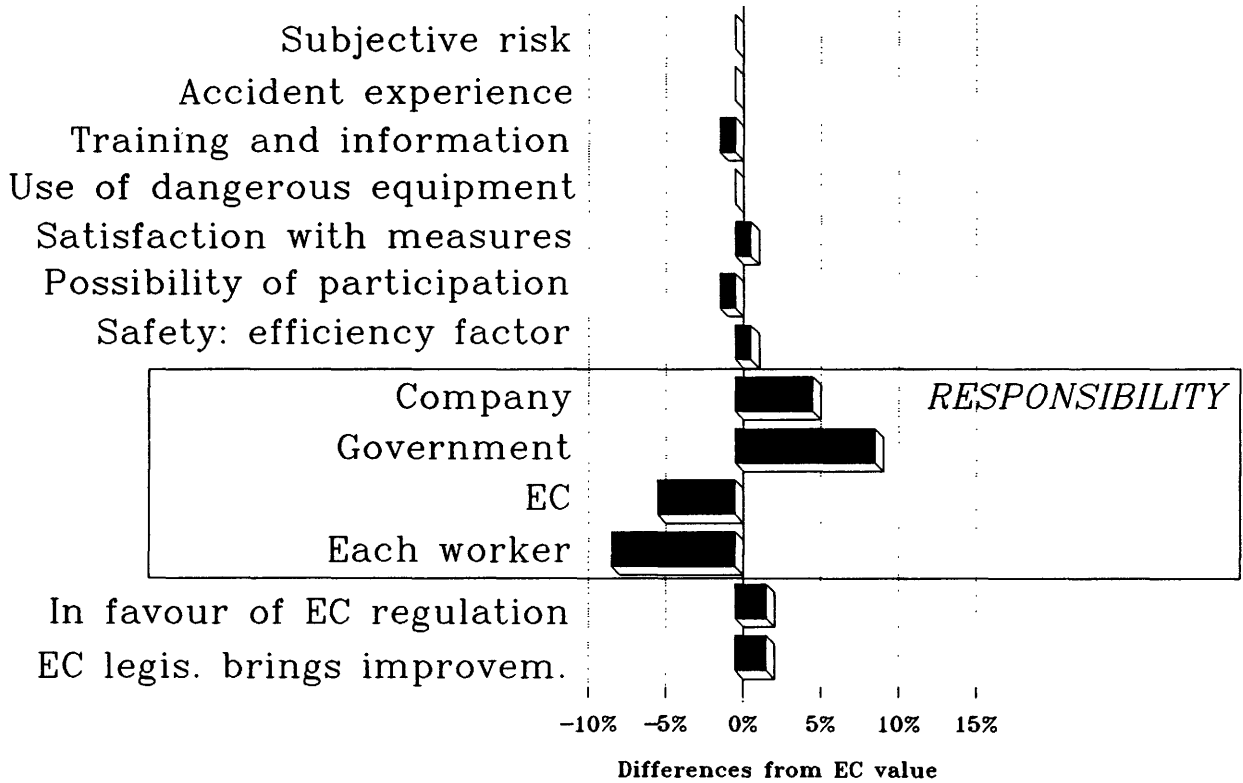
Health risks



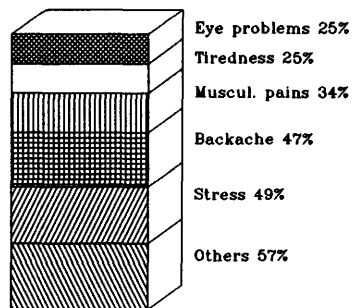
Safety risks



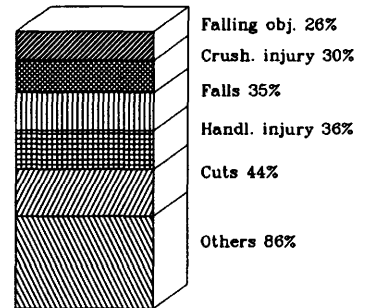
Profile by company size 10 - 49 workers



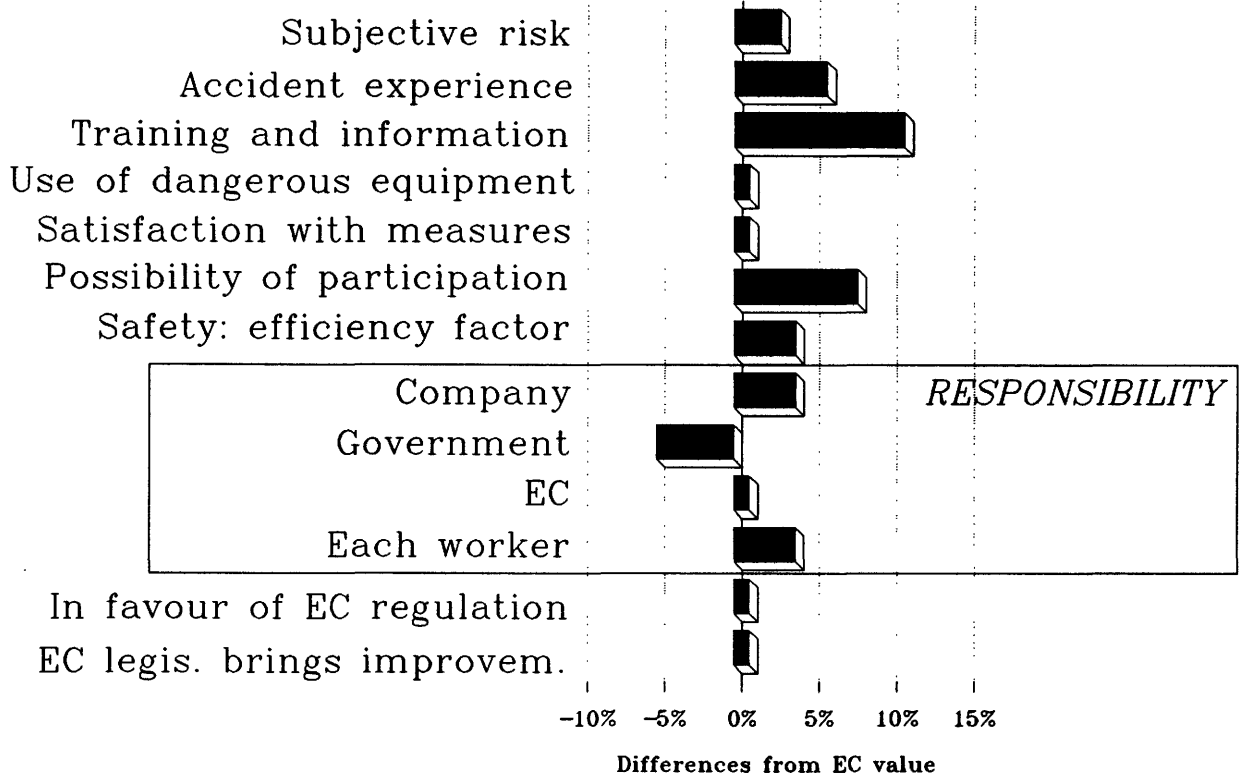
Health risks



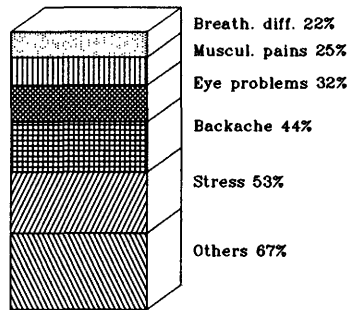
Safety risks



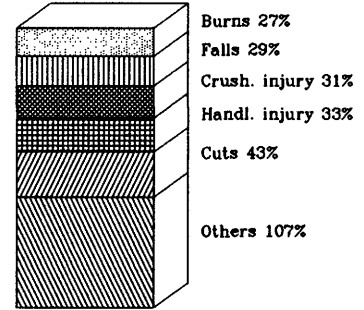
Profile by company size 50 or more workers



Health risks



Safety risks



4.4.4 Profiles by occupation

1. *Self-employed and liberal professions*

The level of risk in these occupations is lower (the three indices are below the average).

In the field of prevention, one person in two tends to be satisfied with information and the scope for participation. A much greater proportion are satisfied with the measures taken. Only a minority think that improving safety would have a positive impact on their efficiency.

Regarding responsibility for health and safety problems, the company is the most often selected alternative, though much less so than in the case of the total population. Workers, the government and the European Community follow in that order. The attitude to Community legislation is very similar to the average European attitude, namely very much in favour of legislation itself, though with doubts as to its direct effects on work. The risks mentioned are very similar to those referred to by the population as a whole: stress and backache lead the health risks, while cuts, falls and handling operation injuries are the main safety risks.

2. *"Blue-collar" workers*

Manual workers seem to have generally dangerous occupations (the three risk indices are above the average). Generally speaking, their satisfaction with prevention is around average (though below average in respect of measures taken).

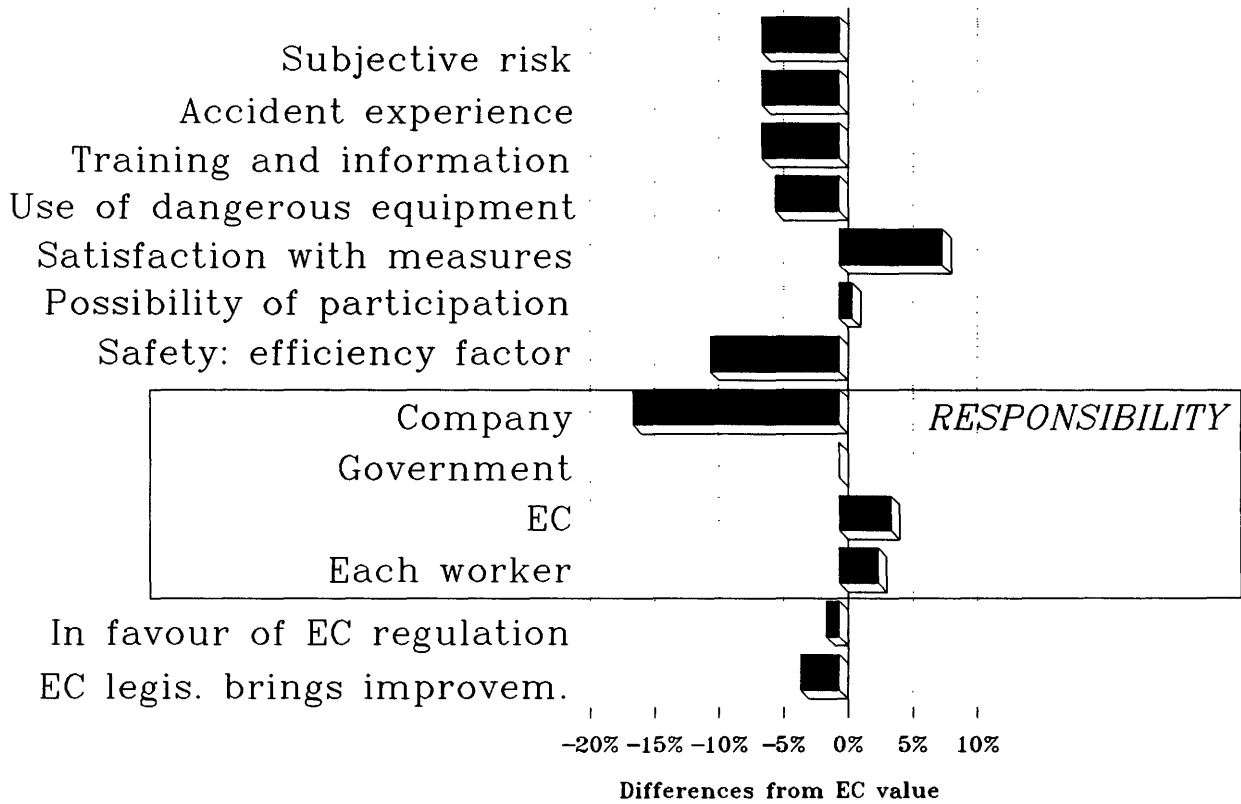
The number who believe that improving safety would have a positive effect on their efficiency is well above the average. Regarding the direct effects of Community health and safety legislation, the figure is slightly below average.

This group's idea of who should mainly be responsible for prevention policy is similar to that of the total population: company, workers, government, European Community.

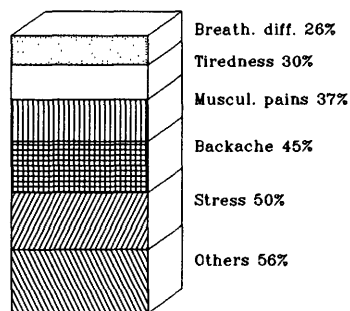
The most frequently mentioned health risks are somewhat specific: backache comes first, stress is named less frequently, and the figures for muscular pains, ear problems and breathing difficulties are above the average. The dangers cited differ little from those named by the total population, although the percentages are higher.

Profile by occupation

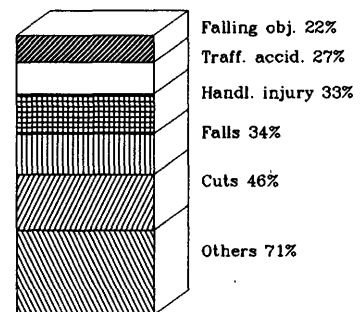
Self-employed and liberal professions



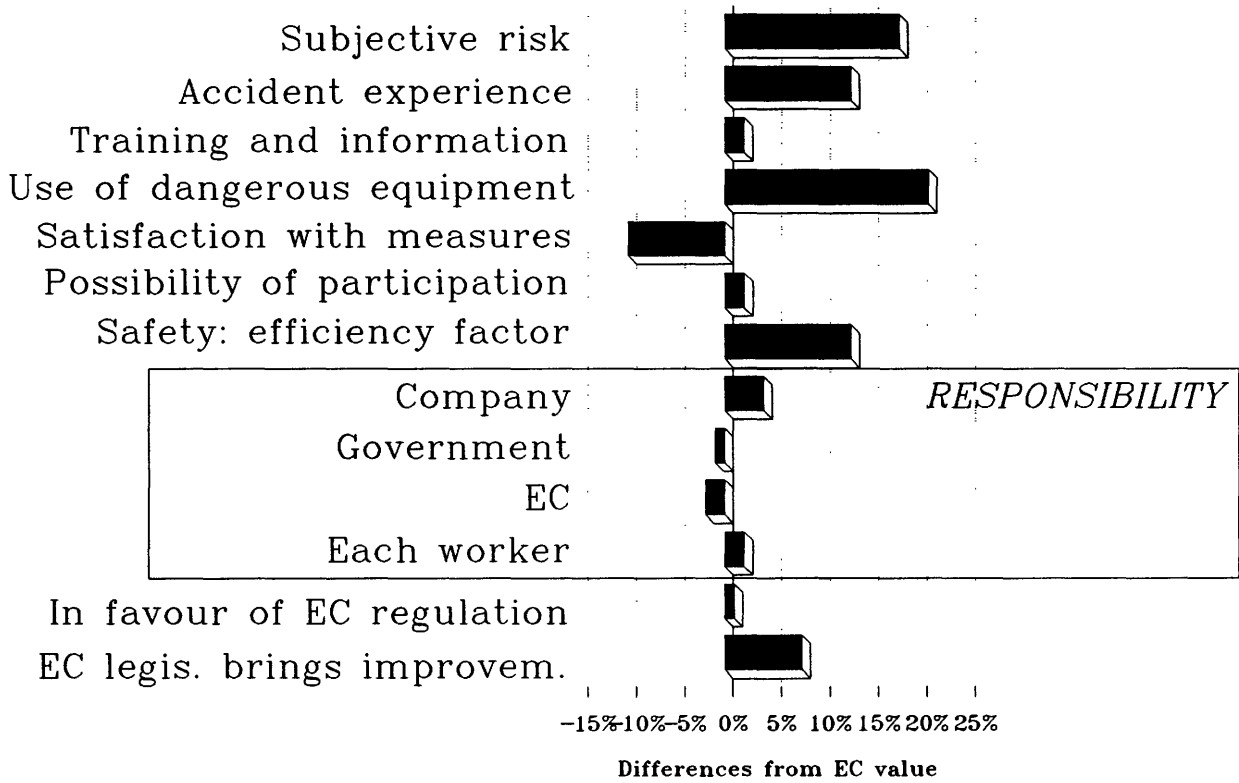
Health risks



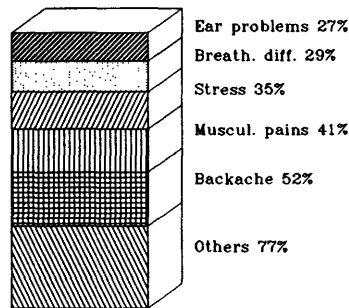
Safety risks



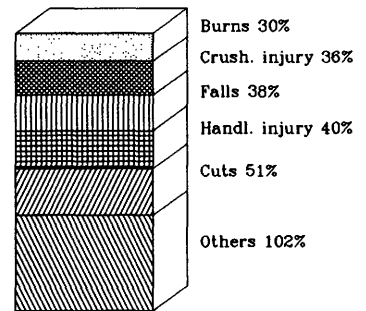
Profile by occupation Blue-collar workers



Health risks



Safety risks



3. *"White-collar" workers*

Non-manual workers seem to have occupations which present far fewer risks than the average (the three risk perception indices are well below the average levels).

Foremen tend to be satisfied with the various aspects of prevention, particularly the measures taken (the figures are slightly above those for the total population).

The majority feel that improving safety will have little or no effect on their efficiency. Although they are very much in favour of common safety legislation, barely half of the respondents expect it to have specific effects on their own work.

Their idea of who should be responsible for reducing accidents and illnesses is very close to that of the total population. The company remains in first place. Workers come next, though with slightly fewer mentions. The government is named somewhat more often, and the figure for the Community is around the same.

The main health risk for this group is stress (cited by two out of three respondents). The other problems are mentioned less often, and are all well below the average figures, with the exception of eye problems.

The situation regarding dangers is identical, with each one being named by few respondents. The results are well below the European percentages, with the exception of traffic accidents.

4. *Foremen*

The profile of foremen is special, in that some results differ significantly from the European averages.

They seem to perceive their occupations as involving a high level of risk (the three risk indices are well above the average), but they also express much more satisfaction with prevention: around three quarters of them are satisfied with information in the field of health and safety, and even more are happy with the preventive measures taken.

The percentage of foremen who think that improving safety could have a positive effect on their efficiency is also significantly higher than the European average.

Foremen, in the same way as the total population, think that the company should be primarily responsible for prevention. In second place they name the workers (with a percentage slightly above average), followed by the government and the European Community.

Foremen are very widely in favour of harmonised health and safety legislation (percentage close to the European average), and nearly 60% think that common legislation could have a direct impact on their own activity.

The health risks they name are also particular. A very large percentage are affected by stress, whilst the five other most common problems are all named by around one person in four. The percentages affected by back, muscular and eye problems are below the average, whilst ear problems and breathing difficulties are above the average. The safety risks named apply very broadly. Whilst on the whole they are the ones which are mentioned most often by the total population, four out of five reach levels well above the European percentages. Cuts and falls are the most common complaints.

5. Young people aged between 15 and 24

The profile of young people barely differs from that of the standard European. Variations from the average results are small, the only exception being the scope for participation, which is below the average.

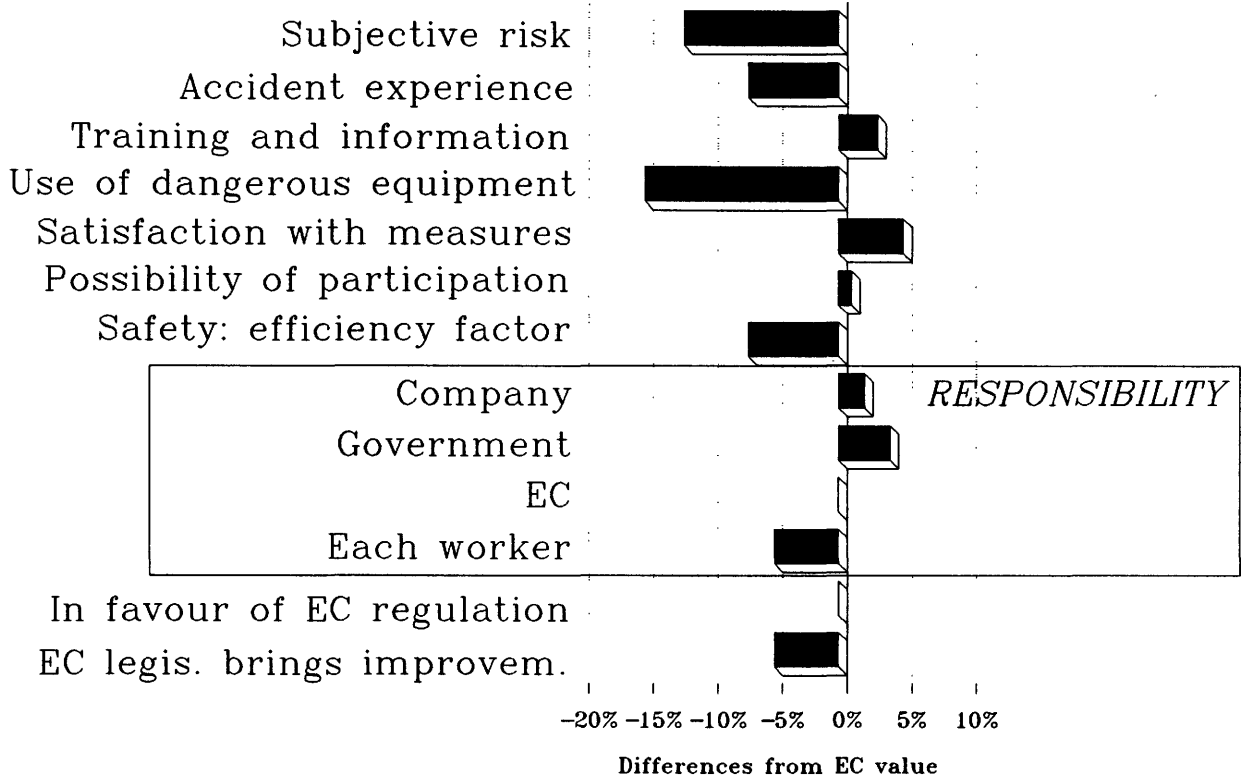
People under 24 years old do not seem to have a particular feeling that their work presents risks. As regards prevention, they are very satisfied with the action taken, and a small majority say they are happy with information on this subject, although less than half are satisfied with the scope for participation in implementing preventive measures in their companies.

A very large number are in favour of Community legislation, but only around 60% expect it to have a positive impact on their own work. Their ideas concerning responsibility for prevention at work are similar to those of the total population, with the company being named most often.

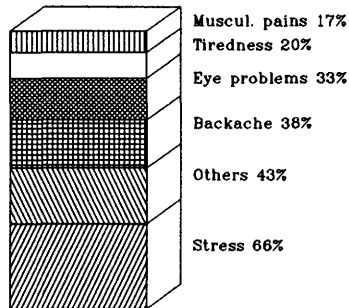
The health risks named most frequently are very similar to those selected by the total population, although the figures are generally slightly higher, at least for the first five risks. Only stress is below the average.

The dangers receive frequent mention, the figures for all five being above the European percentages. The most common ones are cuts and handling operation injuries.

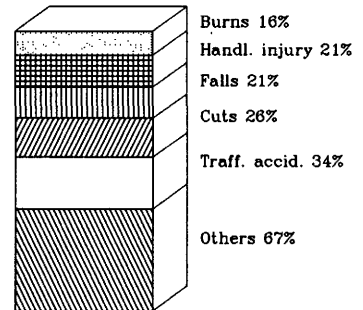
Profile by occupation White-collar workers



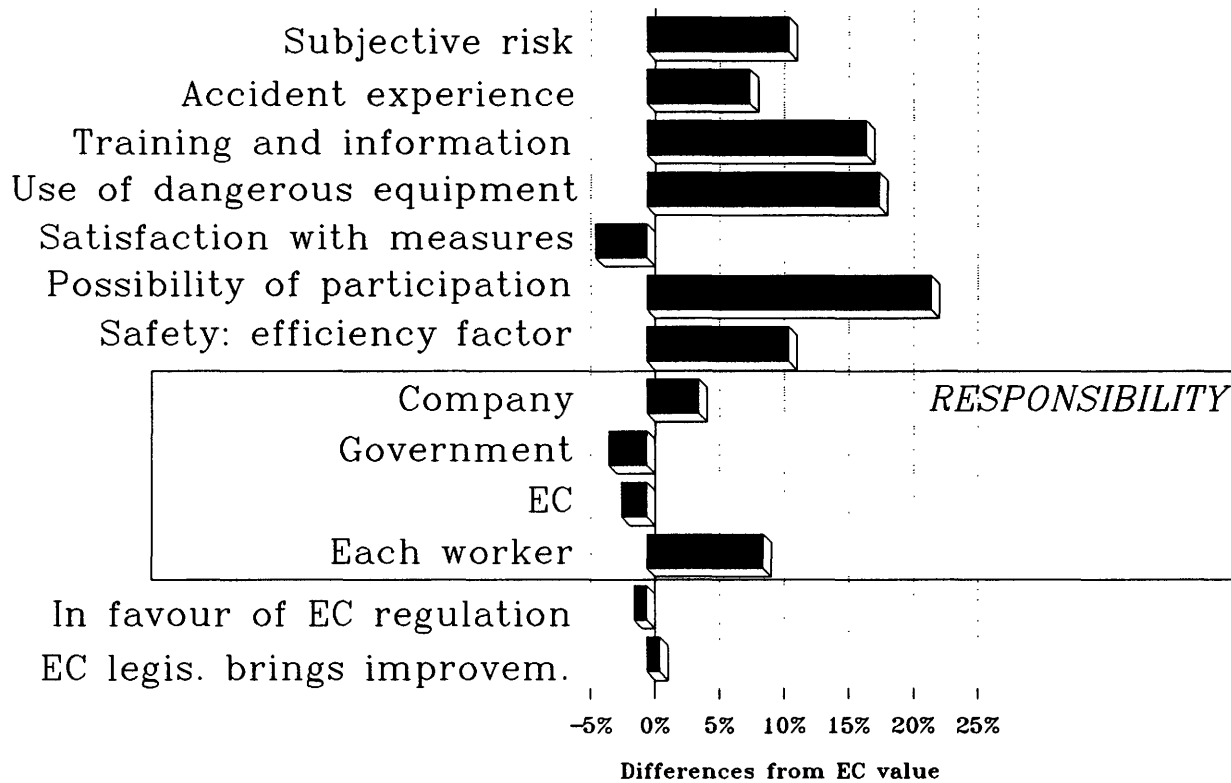
Health risks



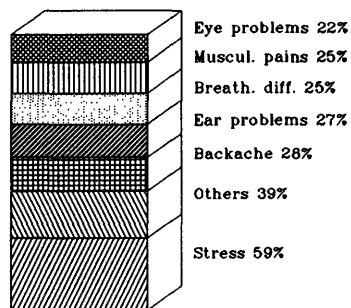
Safety risks



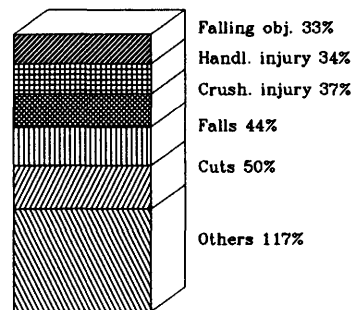
Profile by occupation Foremen



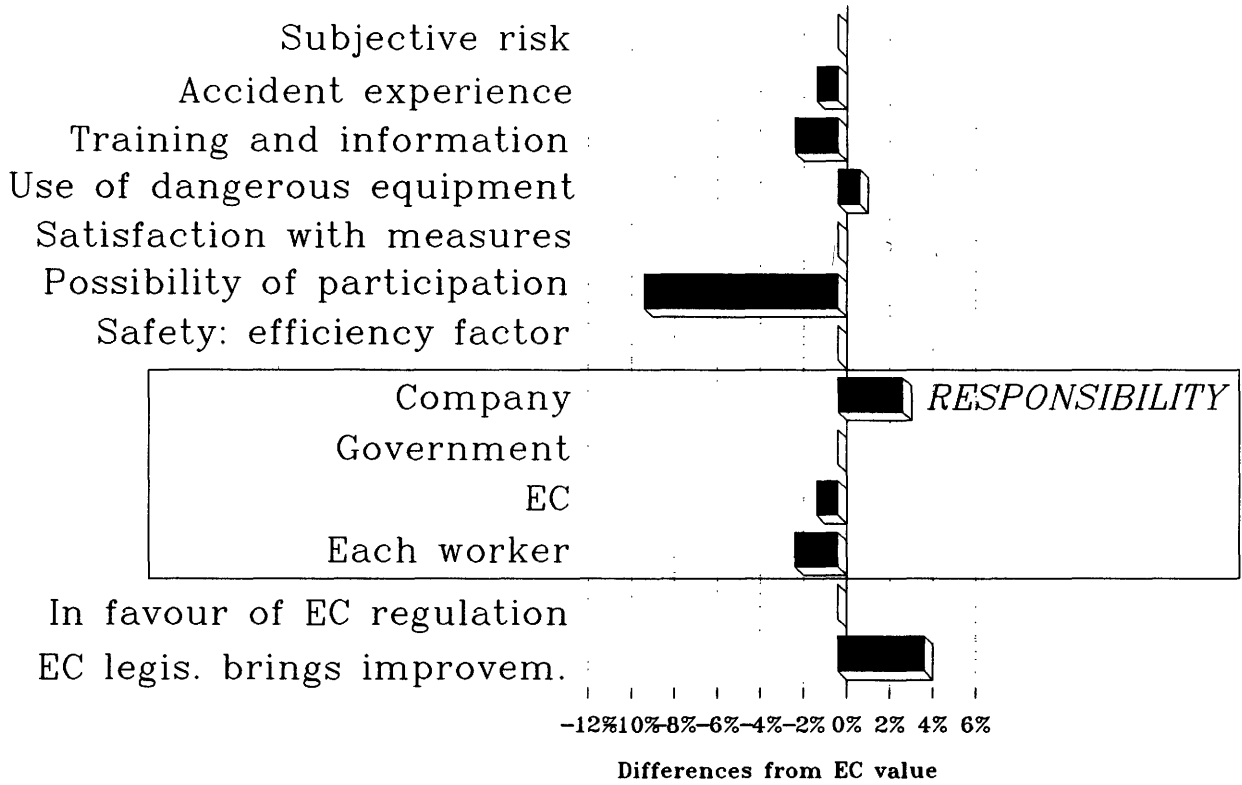
Health risks



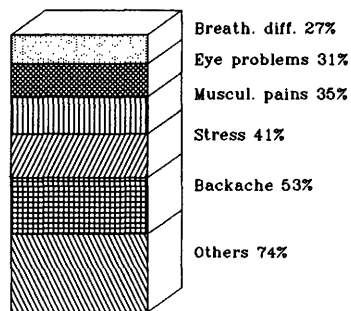
Safety risks



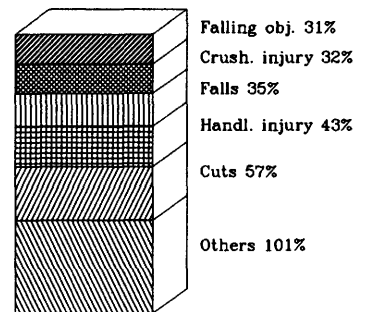
Profile of young people (aged 15 - 24)



Health risks



Safety risks



5. DETERMINING FACTORS FOR THE REPLIES

Up to this point, an examination of profiles has allowed a detailed picture to emerge of divergencies from the average which are characteristic of the various sectors of the working population and, in particular, of the trends observed in the different sectors of activity and occupations in each of the twelve Member States or in companies of different sizes.

Along the way, the consistency of some types of convergence has enabled some specific conclusions to be drawn.

Apart from this detailed review and the specific conclusions drawn from it, is it possible to draw any general conclusions with regard to the determining factors for the replies obtained?

For example, is it possible to conclude that the differences between countries are equally marked for all questions and all indicators?

Or to conclude that the differences between sectors of activity transcend the differences between countries?

In addition, specific differences between countries, for example, have often been noted: but it has not been known whether this was a national effect or whether there were other underlying reasons for these divergences, such as the structure of activities or the sizes of companies in the countries in question.

It should be noted right away that the various analyses carried out in order to answer these questions have had the aim of drawing up a detailed report with plenty of light and shade, rather than resorting to shock phrases or startling announcements.

The following lessons can be drawn:

- Some factors have a crucial effect on most of the questions and indicators relating to experience of health and safety at the workplace, while others have little or no effect. The most crucial is without doubt the national factor, while age is first among the generally non-determining factors.

- Among the determining factors, activity sector, occupation and company size are significant, sometimes more so than the national factor; in contrast to the latter, their impact on some questions or indicators is selective rather than having a uniform effect on the whole.

Thus the sector of activity is an important factor in the perception and experience of risks and of accidents, the use of equipment and information received relating to protection. On the other hand, with regard to satisfaction with measures taken and attitude to European legislation it is the national factor which dominates.

- While the impact of the national factor is evenly distributed, i.e. at a level which makes it possible to draw comparisons between questions, varying contrasts are shown up according to the nature of those questions. In other words, differences which show up between countries from one question to another are not successive versions of the same contrast but, on the contrary, form specific tables where the relative positions of countries are redistributed each time.

On the other hand, contrasts between activity sectors or occupations in different questions result in a relatively coherent and harmonised table of disparities enabling an overview of risk sectors as set out in Chapter 4.

- Among the non-determining factors, apart from age, the position on the "opinion leadership index" is noteworthy, as is the more or less favourable attitude towards the European Community.

It should be stressed here that a more or less favourable attitude to the application of common legislation on safety, hygiene and health at work, together with the more or less strongly held conviction that health and safety conditions will improve under common European legislation, do not reflect an attitude which is largely in favour of the European Community, but reveal a positive attitude specifically related to health and safety legislation.

With this in mind, the following conclusions may be cautiously put forward.

Firstly, nationality is an important factor; it determines the replies to questions, and there appear to be almost as many tables of replies as there are countries. The specific factors reported are not, however, in any way opposed to Community aspirations - on the contrary -, in so far as it is the Member States where the situation is apparently less favourable who place the most hope in Community legislation.

Secondly, where the reporting of risks, working conditions and preventive measures taken is concerned, activity sectors and occupations are very important determining factors. Over and above national differences, therefore, sectors of activity and occupations seem to have their own identity, organised into several coherent tables. Reference can therefore be made to the agricultural sector or to construction for the Community as a whole. However, once particular attention is paid to people's actual experience of situations (satisfaction, attitudes to legislation, etc.), national differences are more significant.

6. CONCLUSION

The spring 1991 Eurobarometer comprised approximately 20 questions dealing with safety, hygiene and health at work. Applied to a representative sample of the national working population of the Community, it was subject to detailed analysis with the particular aim of more closely describing people's perception of this subject at European level, and in order to prepare for the European Year of Safety, Hygiene and Health at Work in 1992.

In the course of the analysis various partial conclusions have emerged, giving rise to the idea that, since there are significant convergences, each topic should be analysed, or attention should be given to particular sub-groups. Any attempt to summarise would only have a reducing effect. On a more modest scale, therefore, the conclusion will highlight various points.

6.1 A CURRENT CAUSE FOR CONCERN

The change towards a service economy, the automation of industrial processes, which significantly reduces physical effort and direct contact with dangerous substances or equipment, the fact that some activities notorious for their poor working conditions have almost disappeared and the ever increasing scope of national and Community rules and regulations are factors which could make it easy to forget the problems of safety and health at work or at least make it easy to believe that they now hardly ever arise.

This is not the case, however. The majority of working Europeans have an awareness of safety and health at work. Two out of five consider themselves at risk, while one in four thinks that his health and safety could be affected by his occupational activity. Even if not directly affected, four fifths consider occupational accidents and industrial diseases to be frequent or very frequent in their country, while two fifths know a colleague who has had an accident or illness.

Despite the increasing dominance of service activities, which represent nearly 60% of all employment, a significant proportion of European workers still use on a daily basis equipment and machinery which they consider potentially dangerous (27% say that they spend more than one quarter of their time working with such equipment). This certainly explains the importance of legal protection for such use.

While these topics affect all European workers to various degrees, increased awareness is linked more to the sector in which they work (agriculture, construction and some industries) and to their occupation (foreman, factory worker) than to nationality.

This topic is a realisation of the specific social character of Europe and of the social dimension of the single market, which 69% of Europeans consider to be a good thing.

6.2 THE COMPANY: A DRIVING FORCE IN PREVENTION

The subject of health and safety is particularly widely discussed at workplaces. It rarely figures in public debate, while the company is considered to bear the main responsibility for prevention. This is where the person responsible for health and safety (who is only known to two workers out of three) ought to be. It is also the place where one in five receives health and safety training and where workers are informed of the risks, to their general satisfaction (78%).

In general, the European worker considers that it will ultimately be economically profitable for the company to bear the responsibility for prevention, since nearly 50% consider that improved health and safety conditions will help them to work more efficiently. This proportion naturally increases in those sectors where conditions are worse.

The obvious corollary to the importance of the company is that the outlook for isolated workers and sectors or economies dominated by small and medium-sized companies, who do not have the same resources for prevention, is bleaker: less information, less training and less participation by workers.

6.3 VARIED SITUATIONS

A number of questions in the survey gave rise to contrasting responses according to the specific characteristics of each sector and of the respondent's occupation; health and safety problems are polymorphous in nature. They are linked to specific work situations which have their own risks and prevention methods, both technical and organisational.

Profiles of sub-groups often showed up specific fears; for example:

- management staff refer to stress;
- office employees to back problems or to eye strain in front of a screen;
- the agricultural worker to his physical load (fatigue, muscular pains, backache) and his fear of pesticides;
- the construction worker to his fear of falling and of falling objects.

6.4 DETERMINING FACTORS FOR THE REPLIES

The entangling of sub-groups is significant. It has been seen that "country", "activity sector", "occupation" and "company size" are interdependent, and there has been an attempt to unravel the tangle of possible explanations.

Unfortunately, there is no simple answer.

While these four factors frequently appear as part of the explanation and others (such as age or opinion leadership index) hardly occur at all, it is very difficult to draw conclusions. It should be remembered, however, that nationality always appears to be mentioned, and differences between countries from one question to another are not successive versions of the same contrast but, on the contrary, form specific tables in which the relative positions of countries are redistributed each time. This can be seen in the national population profiles; there is no dominant organisation of replies which is repeated from one Member State to another. Each country therefore has a particular view of the problem according to its history, legislation, culture, etc., and this, as we shall see later, goes hand in hand with the aspiration for harmonisation at European level.

On the other hand, while differences between nationalities are not repeated, contrasts between activity sectors or occupations result in a relatively coherent and harmonious table of disparities.

6.5 RISK SECTORS

In general, the agricultural and industrial sectors claim to run the greater risks, which is not surprising. When agriculture and construction are considered, however, regular shortcomings emerge; there are significant risks, and information and, frequently, protection are lacking. The public authorities are expected to take more responsibility for improving conditions.

In the energy/extractive/water/chemical sector, on the other hand, where the risks are equally significant, there appears to be a more positive attitude towards responsibility for prevention; there is more information and more satisfaction with the measures taken than in the population as a whole, and more trust in the company - and especially in each worker - to improve conditions.

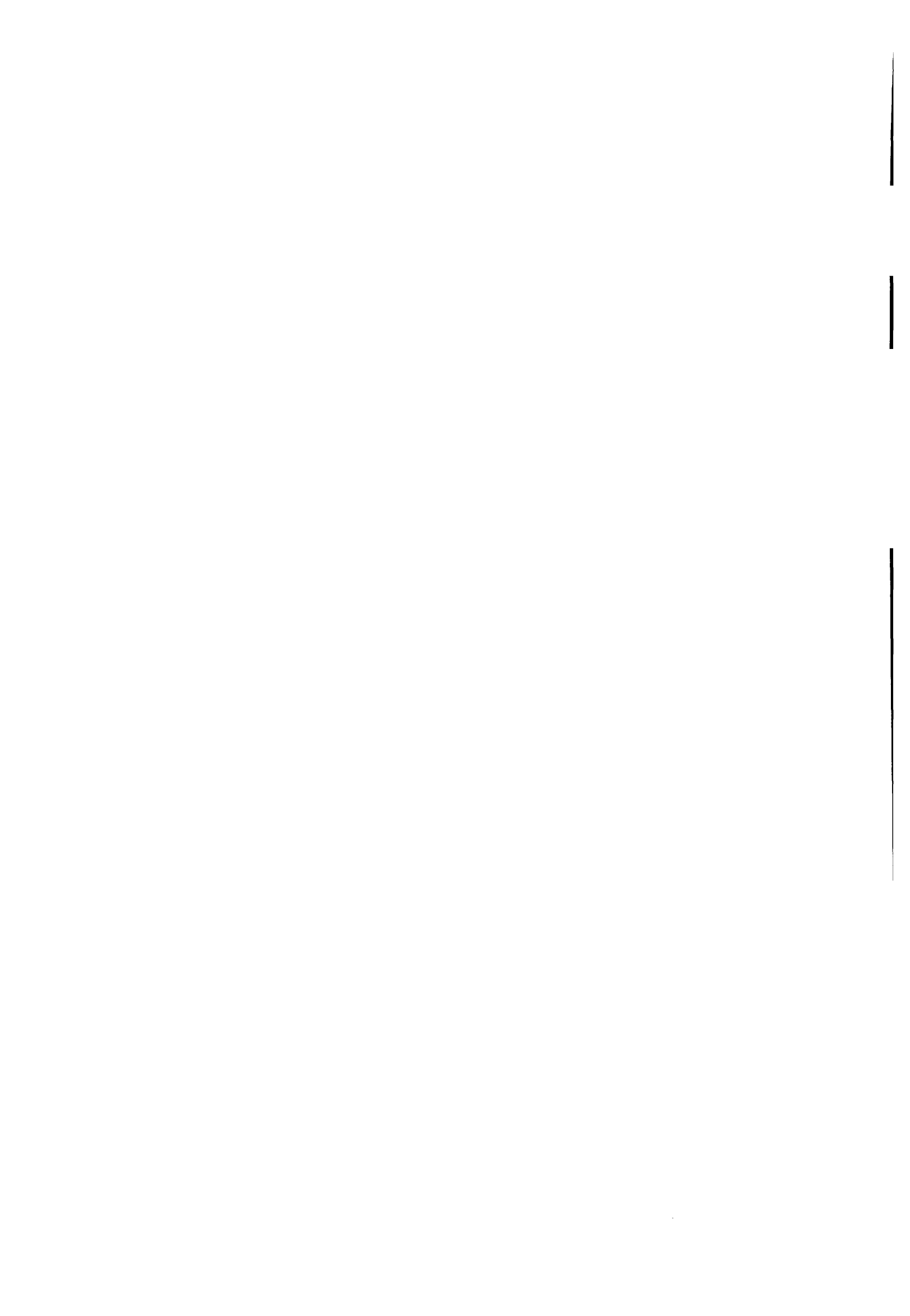
6.6 A COMMUNITY DIMENSION

The Member States have decided to provide the Community with common legislation concerning minimum safety and health requirements to be observed in all countries. This in no way prevents those Member States who wish to do so from drafting more stringent texts.

Nearly nine out of ten Europeans are very much or to some extent in favour of common legislation.

Where they have an opinion on this legislation, two out of three Europeans believe it will improve their situation. The more unhappy they are with their own legislation, the greater the numbers of people with this view. It should be added that nearly seven out of ten wish to have more information on Community activity in this area.

This desire and this hope for Europe could merely reflect a general attitude in favour of the Community. But it does not, because there is no connection between these questions and those posed elsewhere in the Eurobarometer which reveal the general attitude to the Community.



ANNEXES

A. TECHNICAL SPECIFICATION

Between March 4 and April 22, 1991, INRA (EUROPE) carried out the 35.A wave of the STANDARD EUROBAROMETER, on request of the COMMISSION OF THE EUROPEAN COMMUNITIES.

INRA (Europe) is a European Network of Market and public Opinion Research agencies, co-coordinated by the European Co-ordination Office (E.C.O.), Avenue R. Vandendriessche 18, B - 1150 Brussels.

The results of the Eurobarometer are made available through the Unit "Surveys, Research, Analyses" of the DG ICC of the Commission of the European Communities. All requests for further information should be addressed to Mr. Karlheinz REIF, DG X - ICC - SRA, "Eurobarometer, Rue de la Loi 200, B-1049 Brussels.

All Eurobarometer data are stored at the Zentral Archiv (Universität Köln, Bachemer Strasse, 40, D-5000 Köln 41). They are at the disposal of all institutes members of the European Consortium for Political Research (Essex), of the Inter-University Consortium for Political and Social Research (Michigan) and all those interested in social science research.

1. DETAILS ON SAMPLING

In all 12 countries of the European Community, in total 12819 citizens of the respective nationalities, aged 15 and above who are in active employment, were interviewed in face-to-face, in their private residence. The specific target of people in active employment was constructed by oversampling in EB35.0 about 500 respondents of the same target per country (250 in Luxembourg, 500 in East-Germany and 500 in West-Germany). The resulting total sample (EB35.A) is as given in the next table.

COUNTRY/PAYS	NUMBER OF RESPONDENTS (unweighted)
Belgique	1,029
Danemark	1,161
Deutschland (ex-BRD)	1,141
Deutschland (ex-RDA)	1,354
Ellas	868
Espana	938
France	1,093
Italia	936
Ireland	894
Luxembourg	492
Nederland	871
Portugal	952
Great Britain	1,090

<u>TOTAL</u>	12,819

The basic sample design applied in all Member States is a multi-stage, random (probability) one. In all Member States a number of sampling points was drawn with probability proportional to population size, for a total coverage of each Member State, and to population density.

For doing so, the points were drawn systematically from all "administrative regional units", after stratification by individual unit and type of area. They thus represent the whole territory of the Member States according to the EUROSTAT-NUTS II and according to the distribution of the national, resident population in terms of metropolitan, urban and rural areas.

In each of the selected sampling points, a starting address was drawn, at random. That starting address formed the first of a cluster of addresses. The remainder of the cluster was selected as very Nth address by standard random route procedures from the initial address.

In Great Britain, a full random selection of respondents was applied, using electoral registers as sampling basis.

In each household the respondent was selected amongst those in active employment according to a random procedure, such as the first birthday method or the KISJ-grid. At every such address up to 2 recalls were made to achieve an interview with that respondent. The maximum number of interviews per household is one. All interviews were taken face to face.

2. REALISATION OF THE FIELDWORK

COUNTRY	FROM :	TO:	TOTAL POPULATION (X.000)
Belgique	04/03	22/04	3,483
Danemark	10/03	22/04	2,683
Deutschland (ex-BRD)	08/03	15/04	26,999
Deutschland (ex-RDA)	08/03	16/04	8,531
Ellas	07/03	21/04	3,657
Espana	07/03	23/04	11,709
France	11/03	19/04	21,505
Ireland	10/03	25/04	21,101
Italia	07/03	17/04	1,091
Luxembourg	04/03	25/04	152
Nederland	04/03	23/04	5,910
Portugal	08/03	16/04	4,453
United Kingdom	06/03	20/04	25,660

EC12			136,934

In all member States, fieldwork was conducted on the basis of detailed and uniform instructions prepared by the European Co-ordination Office (ECO) of INRA (EUROPE).

3. COMPARISON BETWEEN SAMPLES AND UNIVERSES AND WEIGHTING OF THE DATA

For each of the countries a comparison between the samples and a proper universe description was carried out. This Universe description was derived from the Labour Force Survey 1988.

For all EC-members-countries a national weighting procedure, using marginal and intercellular weighting, was carried out based on this Universe description. As such in all countries, minimum sex, age, region NUTS II and size of locality were introduced in the iteration procedure. For some countries extra variables were added, when considered necessary.

For international weighting INRA (EUROPE) applies the Official figures as published by EUROSTAT in the Regional Statistics Yearbook of 1988. The total population figures for input in this post-weighting procedure are listed above.

4. ADMINSTRATIVE REGIONAL UNITS

BELGIQUE

Hainaut
Limbourg
Namur
Flandre Orientale
Flandre Occidentale
Liège
Luxembourg
Brabant Flamand
Antwerpen
Bruxelles
Brabant Wallon

DANMARK

Hovedstadsområdet
Sjælland, Lolland-
Falster, Bornholm
Fyn
Jylland

DEUTSCHLAND

Schleswig Holstein
Hamburg
RB Braunschweig
RB Hannover
RB Lüneburg
RB Weser-EMS
Bremen
Düsseldorf
Köln
Münster
Detmold
Arensberg
Darmstadt
Giessen
Kassel
Koblenz
Trier
Rhein Hessen-Pfalz
Saarland
Nordwürttemberg-
Stuttgart
Nordbaden-Karlsruhe
Südbaden-Freiburg
Südwürttemberg-
Tübingen
Oberbayern
Niederbayern
Oberpfalz
Oberfranken
Mittelfranken
Unterfranken
Schwaben
Berlin-West
Berlin-Ost
Rostock
Schwerin
Neubrandenburg
Potsdam
Frankfurt/O.
Cottbus
Magdeburg
Halle
Erfurt
Gera
Suhl
Dresden
Leipzig
Chemnitz

ELLAS

Kentriki Kai Dytiki
Makedonia
Thessalia
Anatoliki Makedonia
Thraki
Anatoliki Sterea Kai
Nisia
Peloponnisos & Kytiki
Sterea
Ipeiros
Kriti
Nisia Anatolikou Aigaiou

ESPANA

Andalucia
Aragon
Asturias
Balears
Canarias
Cantabria
Castilla-La Mancha
Castilla-Leon
Cataluna
Extremadura
Galicia
Madrid
Murcia
Navarra
Pais Valenciano
Pais Vasco
La Rioja

FRANCE

Ile de France
Champagne-Ardennes
Picardie
Haute Normandie
Centre
Basse Normandie
Bourgogne
Nord/Pas-de-Calais
Lorraine
Alsace
Franche-Comte
Pays de la Loire
Bretagne
Poitou-Charentes
Aquitaine
Midi-Pyrénées
Limousin
Rhône-Alpes
Auvergne
Languedoc-Roussillon
Provence-Alpes-
Côte d'Azur
Corse

ITALIA

Valle d'Aosta/Piemonte
Liguria
Lombardia
Milano
Trentino
Veneto
Friuli-Venezia-Giulia
Emilia
Toscana
Marche
Umbria
Lazio
Molise e Abbruzzi
Campania
Puglie
Basilicata
Calabria
Sicilia
Sardegna

IRELAND

Dublin
Rest of Leinster
Munster
Connaught/Ulster

LUXEMBOURG

Centre
Sud
Nord
Est

NEDERLAND

Groningen
Friesland
Drente
Overijssel
Gelderland
Utrecht
Noord-Holland
Zuid-Holland
Zeeland
Noord-Brabant
Lumburg
Flevoland

PORTUGAL

Norte
Centro
Lisboa e vale do Tejo
Alentejo
Algarve
Azores
Madeira

UNITED KINGDOM

GREAT BRITAIN
Cleveland, Durham
Cumbria
Northumberland,
Tyne & Wear
Humberside
North Yorkshire
South Yorkshire
West Yorkshir
Derbyshire,
Nottinghamshire
Leicestershire,
Northamptonshire
Lincolnshire
East Anglia
Bedfordshire,
Hertfordshire
Berkshire,
Buckinghamshire,
Oxfordshire
Surrey,
East/West Sussex
Essex
Greater London
Hampshire, Isle of Wight
Kent
Avon, Gloucestershire,
Wiltshire
Cornwall, Devon
Dorset, Somerset
Hereford & Worcester,
Warwickshire
Shropshir, Staffordshire
West Midlands(contry)
Cheshire
Greater Manchester
Lanashire
Merseyside
Clwyd, Dyfed,
Gwynedd, Powys
Gwent,
M-S-W Glamorgan
Borders, Central, Fife,
Lothian, Tayside
Dumfries-Galloway,
Strathclyde
Highlands, Islands
Grampian

NORTHERN IRELAND

5. CO-OPERATING AGENCIES AND RESEARCH EXECUTIVES

INRA (EUROPE) - EUROPEAN COORDINATION OFFICE SA/NV
 Jean QUATRESOOZ - Dominique VANGRAEYNEST - Eric MARLIER
 18, AVENUE R. VANDENDRIESSCHÉ,
 1150 BRUSSELS - BELGIUM
 Tél. ++/32/2/772.44.44 - Téléfax ++/32/2/772.40.79

BELGIQUE	SOBEMAP MARKETING 5/32 PLACE DU CHAMP DE MARS B - 1050 BRUXELLES	MS Martine GONTY fax.++/32 251432 34	tel.++/32 250852 11
DANMARK	OBSERVA TOLDBODGADE, 10 DK - 1253 COPENHAGEN K.	MR Erik CHRISTIANSEN	tel.++/45 33931740 fax.++/45 33130740
DEUTSCHLAND	SAMPLE INSTITUT PAPENKAMP, 2-6 D - 2410 MÖLLN	MS Doris SIEBER	tel.++/49 4542 8010 fax.++/49 4542 801 201
ELLAS	KEME Ippodamou Street, 24 GR - 11635 ATHENA	Mr Leonidas LEONIDOU	tel.++/30 1 701 80 82 tel.++/30 1 701 69 65 fax.++/30 1 701 78 37
ITALIA	PRAGMA srl Via Salaria, 298a I - 00199 ROMA	Ms Adelaïde SANTILLI	tel.++/39 6 86 80 18 tel.++/39 6 88 48 057 fax.++/39 6 85 40 038
ESPAGNA	ICP - Research Princesa, 22-3 izda E - 28015 MADRID	Ms Carmen MOZO	tel.++/34 2 247 67 08 tel.++/34 2 247 67 09 fax.++/34 1 559 22 63
FRANCE	TMO Consultants 22, rue du 4 septembre F - 75002 PARIS	Ms Isabelle CREBASSA	tel.++/33 1 47 42 34 81 fax.++/33 1 47 42 44 74
IRELAND	LANSDOWNE Ltd 12, Hatch Street IRL - DUBLIN 2	Mr Roger JUPP	tel.++/353 1 61 34 83 fax.++/353 1 61 34 79
LUXEMBOURG	ILRES 6, rue du Marché aux Herbes L - 1728 LUXEMBOURG	Mr Louis MEVIS fax.++/352 46 26 20	tel.++/352 47 50 21
NEDERLAND	NIPO "Westerdokhuis" Barentzplein, 7 NL - 1013 NJ AMSTERDAM	Mr Martin JONKER	tel.++/31 20 24 88 44 fax.++/31 20 26 43 75
PORTUGAL	NORMA Av.5 de Outubro, 122 P - 1000 LISBOA	Mr Lopes DA SILVA	tel.++/351 1 76 76 04/8 fax.++/351 1 77 39 48
GREAT BRITAIN	M.A.I. Evelyn House 62, Oxford Street UK - LONDON W1N 9LD	Mr Mark MORRIS	tel.++/447 1 436 31 33 fax.++/447 1 436 76 34

B. INDICATORS

Method for formulating indicators

1 SUBJECTIVE RISK

Formulated on the basis of each person's replies to the following questions:

- Would you say that your professional activity affects or could affect your health?
 - Yes, very much
 - Yes, a bit
 - No, not really
 - No, not at all

- Do you think that your work makes you run the risk of accident or injury?
 - Yes, very much
 - Yes, a bit
 - No, not really
 - No, not at all

A negative reply (c or d) to both questions gives an indicator value of zero.

A negative reply (c or d) and a positive reply (a or b) gives an indicator value of one regardless of the sequence of replies.

Two positive replies (a or b) result in a value of two.

Results

- Zero No subjective risk 44.2%
corresponding to persons who consider that their occupational activity affects neither their health nor their safety.
- One Average subjective risk 30.1%
corresponding to workers who consider that their occupation affects either their health (16.3%) or their safety (13.8%).
- Two High subjective risk 25.7%
characteristic of those who consider that their occupational activity affects their safety and their health.

III LEVEL OF INFORMATION

This used the replies given to three questions.

- Do you know any person who is responsible for safety, hygiene or health where you work?
Yes
No

- Have you had a training course concerning safety, hygiene or health for your current job?
Yes
no
Don't know

- Would you say that you are ...
very well informed
quite well informed positive reply

quite badly informed
very badly informed negative reply
don't know

about risks resulting from the use of instruments and products which you handle in your job?

The indicator is calculated for each person, resulting in a value between zero and three according to the number of positive replies given to the three questions.

Zero information level "zero"
One information level "low"
Two information level "average"
Three information level "high"

Results

Information level "zero" 12.6%

These people knew nobody responsible for safety, had received no safety training and considered themselves quite badly or very badly informed.

Information level "low" 29.6%

For 76% of this group the only positive reply was to the question "Are you well informed?"

Information level "average" 37.9%

83% of the workers who gave only one negative reply gave it to the question "Have you had a training course?"

Information level "high" 20%

People in this group knew somebody responsible for safety, had had a training course and considered themselves quite well or very well informed.

C. QUESTIONNAIRE

- A.5. Do you use machines, or equipment that could be dangerous ?
All of the time
Almost all the time
Around 3/4 of the time
Around half of the time
Around 1/4 of the time
Almost never
Never
DK
- A.6. Would you say that your professional activity affects or could affect your health ?
Yes, very much
Yes, a bit
No, not really
No, not at all
DK
- A.7. (If very much or a bit in A.6.) In which way(s) does your work affect your health ? (multiple answers possible)
Difficult, tiring for the eyes
Stressful
Tiring/painful for the ears
Muscular pains in the limbs (arms or legs)
Backache
Breathing difficulties (e.g; lack of air/polluted air/dangerous substances)
Overall tiredness, work that is too tiring
Skin problems
Personal problems at the workplace
Other
DK
- A.8. Do you think that your work makes you run the risk of accident or injury ?
Yes, very much
Yes, a bit
No, not really
No, not at all
DK
- A.9. (If yes, very much or a bit at A.8.) What kind of risks do you run at work ? (multiple answers possible)
Explosion
Poisoning/polluted environment
Cutting yourself
Burning yourself
Drowning
Falling
Being crushed
Hurting yourself by carrying heavy weights
Electrocution
Falling objects
Traffic accidents (excluding travelling to and from work)
Other types of danger
DK

- A.15. Do you know any colleagues who suffer from work-related illness or who have had an accident at work ?
 Yes
 No
 DK
- A.17. Do you yourself have, or have had, any work-related illness or accident ?
 Yes
 No
 DK
- A.18. (If yes at A.17.) How many accidents at work have you had that resulted in stopping work for more than one week ?
- A.19. How satisfied are you with the actions taken to ensure the safety, hygiene and health of people at your current place of work ? Are you...?
 Very satisfied
 Quite satisfied
 Quite dissatisfied
 Very dissatisfied
 DK
- A.20. Do you think that an improvement of safety, hygiene and health standards at your place of work would also help you do your work more efficiently ?
 Definitely
 Probably
 Probably not
 Not at all
 DK
- A.21. Do you know any person who is responsible for safety, hygiene or health where you work ?
 Yes
 No
- A.22. Would you say you are very well informed, quite well informed, quite badly informed or very badly informed about risks resulting from the use of instruments or products which you handle in your job ?
 Very well informed
 Quite well informed
 Quite badly informed
 Very badly informed
 DK
- A.23. Have you had a training course concerning safety, hygiene or health, for your current job ?
 Yes
 No
 DK
- A.24. Have you ever had the chance to give an opinion or make suggestions about improving safety, hygiene or health standard at your workplace ?
 Yes
 No
 DK

- A.26. Do you think that work-related illnesses and accidents at work are (in your country)
- Very common
 - Common
 - Rare
 - Very rare
 - DK
- A.27. And at your workplace, do you think that work-related illness and accidents are
- Very common
 - Common
 - Rare
 - Very rare
 - DK
- A.28. a) Still concerning accidents at work and the protection of health at the workplace, who should mainly be responsible for reducing the number of accidents at work and work-related illnesses ? (one answer only)
- b) And who else ? (multiple answers possible)
- The company
 - The government
 - The European Community
 - Each worker
 - DK
- A.31. Would you like to receive more information on the actions of the European Community concerning the protection of workers in companies and institutions such as yours ?
- Yes
 - No
 - DK
- A.32. Would you be for or against the application of commun legislation in all countries of the European Community concerning the safety, hygiene or health at places of work ? Would you be ... ?
- For - very much
 - For - to some extent
 - Against - to some extent
 - Against - very much
 - DK
- A.34. Here is a statement that some people have made about this subject; Could you tell me whether you agree strongly with this statement, agree slightly, disagree slightly or disagree strongly ?
- COMMUNITY LEGISLATION WILL IMPROVE MY OWN HEALTH AND SAFETY CONDITIONS AT THE PLACE WHERE I WORK
- Agree strongly
 - Agree slightly
 - Disagree slightly
 - Disagree strongly
 - DK

D. TABLES OF RESULTS

Question A1

What is the main activity of your company (factory, office,) in which you are working ?

%	Activity			Size between			Sex		Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	
TOTAL	940	4220	7340	1706	5411	4494	7629	4871	2118	4850	4149	1383	12500
Agriculture, fishing	100	0	0	29	6	2	8	7	4	5	9	17	8
Energy, extractive, chemical	0	15	0	1	3	10	7	3	4	5	5	4	5
Metal manufacturing	0	31	0	1	7	18	14	4	9	11	11	9	11
Manufacturing	0	32	0	7	11	13	11	11	14	10	11	8	11
Construction	0	23	0	6	11	4	11	3	9	8	7	9	8
Retail trade, catering	0	0	29	31	21	8	14	22	23	16	16	14	17
Transport and communications	0	0	12	4	6	9	9	3	6	8	7	6	7
Banking and finance	0	0	12	4	8	7	6	8	8	8	6	6	7
Other services	0	0	47	18	28	29	20	39	23	28	29	27	27

%	Member State													
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK
TOTAL	1000	1000	1000	2000	1000	1000	1000	1000	1000	1000	500	1000	1000	1000
Agriculture, fishing	3	6	5	5	6	27	14	7	16	10	4	5	21	2
Energy, extractive, chemical	7	3	7	8	9	4	3	4	4	3	11	4	4	5
Metal manufacturing	8	7	16	16	14	3	9	9	6	9	3	7	5	10
Manufacturing	10	10	10	11	11	12	12	9	11	12	13	11	17	10
Construction	6	7	7	7	9	6	9	8	8	9	3	5	9	8
Retail trade, catering	18	16	17	15	10	18	22	17	19	21	21	15	17	16
Transports and communications	7	7	6	6	6	7	5	6	5	6	7	10	4	11
Banking and finance	8	108	8	6	2	4	5	9	8	4	12	11	3	10
Other services	32	34	25	27	34	19	21	31	24	27	28	33	33	28

Question A5

Do you use machines, or equipment that could be dangerous ?

%	Activity			Size between			Sex		Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	
Always	7	15	5	5	8	12	11	5	11	10	7	7	9
Often	14	12	5	9	8	8	11	4	8	9	10	7	8
Sometimes	15	13	7	15	11	9	13	6	10	10	11	11	10
Almo. nev.	25	18	14	16	17	16	18	14	15	18	16	15	16
Never	27	41	67	54	57	54	46	70	55	53	57	58	55
Average	31	32	13	19	20	24	27	12	23	22	20	18	21

%	Member State													
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK
Always	9	6	5	5	5	9	9	11	14	6	9	10	11	14
Often	6	7	6	6	7	17	11	9	9	9	12	7	11	7
Sometimes	11	15	8	8	9	16	12	10	14	12	11	6	8	12
Almo. nev.	16	16	16	17	19	15	17	16	13	19	16	15	16	14
Never	56	56	64	63	59	43	51	53	46	54	50	58	52	51
Average	20	19	14	14	16	31	24	24	30	20	25	21	26	26

Question A6

Would you say that your professional activity affects or could affect your health ?

% Activity	Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	
Very much	15	13	9	12	9	13	14	7	11	12	11	10	11
A bit	39	35	27	25	30	34	33	27	30	32	31	27	31
Very little	21	21	19	19	20	19	20	19	19	20	20	19	20
Not at all	23	30	43	43	40	32	32	46	39	36	37	41	37

% Member	State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Very much	8	17	7	7	8	29	12	13	9	10	13	8	11	13	11
A bit	26	33	33	34	39	28	29	29	21	26	37	33	28	33	31
Very little	24	17	25	25	21	18	23	17	26	14	18	22	20	18	20
Not at all	39	34	34	34	31	24	36	41	40	50	31	34	39	32	37

Question A7

In which way(s) does your work affect your health ? (multiple answers possible)

% Activity	Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	
Eyestrain	10	29	28	19	23	32	26	29	31	27	25	25	27
Stressful	27	40	59	39	45	53	47	51	41	51	51	41	48
Ears probl.	6	28	10	8	15	20	20	10	19	15	17	16	17
Muscular pains	59	35	26	51	36	25	32	33	35	29	32	47	33
Backache	63	47	43	58	48	44	43	55	53	45	45	50	47
Breathing	24	30	14	23	20	22	25	13	27	20	21	18	21
Overall tiredness	45	25	23	44	26	21	26	26	26	24	24	39	26
Skin problems	12	14	9	13	10	12	12	10	16	11	9	11	11
Personal problems	3	4	6	4	4	6	5	6	6	6	5	3	5
Other	1	6	10	5	9	8	8	8	7	8	8	8	8
DK	1	1	0	0	1	0	1	0	0	1	1	1	1

% Member	State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Eyestrain	20	22	27	27	26	29	26	23	25	25	24	18	27	34	27
Stressful	56	50	52	51	45	53	28	50	46	45	66	41	28	56	48
Ears probl.	14	12	18	17	16	13	10	24	11	17	18	15	20	14	17
Muscular pains	19	40	31	32	35	54	39	36	19	32	21	19	55	24	33
Backache	41	57	58	57	53	44	42	50	26	39	42	44	58	38	47
Breathing	18	20	21	21	20	33	19	14	24	26	14	22	22	23	21
Overall tiredness	29	16	15	14	10	67	27	35	27	28	14	22	51	24	26
Skin problems	7	15	12	11	9	14	12	5	11	8	6	9	11	18	11
Personal problems	6	6	4	4	3	9	4	8	4	6	1	4	3	5	5
Other	10	6	9	8	7	6	9	8	7	6	7	11	6	8	8
DK	1	0	0	0	1	0	1	1	1	0	0	2	1	1	1

Question A8

Do you think that your work makes you run the risk of accident or injury ?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Very much	13	14	7	10	9	11	14	4	11	10	10	9	10			
A bit	49	38	22	31	29	32	36	19	28	31	29	29	29			
Very little	22	19	22	21	21	21	20	24	21	21	22	19	21			
Not at all	15	28	47	27	39	36	30	52	40	37	41	41	38			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Very much	11	7	8	9	12	20	13	12	7	10	16	5	10	8	10
A bit	25	22	29	30	35	29	37	32	28	27	30	25	32	28	29
Very little	23	24	26	25	23	15	23	17	24	16	17	25	18	23	21
Not at all	39	47	36	34	29	36	27	39	40	47	36	42	38	39	38

Question A9

What kind of risks do you run at work ? (multiple answers possible)

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Explosion	5	11	12	5	9	15	12	6	15	11	10	6	11			
Poison. Pollut.	30	15	12	20	13	17	17	12	16	16	15	16	16			
Cutting	54	50	36	50	45	43	44	45	57	44	40	38	44			
Burning	17	27	22	18	24	27	25	20	29	23	23	18	24			
Drowning	6	2	3	4	3	2	3	1	2	3	2	3	3			
Falling	49	39	24	41	36	29	36	27	35	31	36	34	33			
Crushing	41	35	17	26	28	31	31	17	32	27	28	28	28			
Handl. op. inj.	53	38	28	40	38	33	35	37	43	34	32	39	35			
Electrocution	5	22	14	9	15	22	19	9	20	17	15	15	17			
Falling objects	18	33	14	15	25	25	26	14	30	21	21	23	23			
Traffic accid.	14	18	34	20	24	26	29	10	20	25	27	20	24			
Other	14	14	26	15	19	21	16	29	21	20	19	15	19			
DK	2	0	1	1	1	0	1	1	0	1	1	1	1			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Explosion	13	12	10	10	10	10	8	12	11	5	16	14	10	19	11
Poison. Pollut.	18	26	14	14	15	30	11	12	14	16	17	19	15	19	16
Cutting	43	45	40	40	41	58	45	45	52	39	42	47	33	54	44
Burning	29	23	23	24	27	18	19	31	24	16	27	23	16	26	24
Drowning	2	4	1	1	1	6	5	2	2	2	3	6	4	3	3
Falling	25	32	30	31	24	50	41	31	31	32	34	34	37	34	33
Crushing	22	20	43	43	43	19	21	29	29	19	18	14	24	23	28
Handl. op. inj.	25	56	40	40	41	41	30	40	34	20	23	33	29	40	35
Electrocution	15	24	17	17	17	16	12	18	23	8	11	12	16	26	17
Falling objects	23	22	28	27	24	28	20	17	23	15	20	17	27	32	23
Traffic accid.	27	19	23	24	25	15	18	25	26	22	19	24	22	33	24
Other	22	33	22	21	19	10	13	25	17	17	14	29	24	13	19
DK	1	0	0	0	0	1	0	2	0	0	0	3	1	1	1

Question A15

Do you know any colleagues who suffer from work-related illness or who have had an accident at work?

% Activity	Size between				Sex			Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
Yes	44	48	30	27	33	47	45	25	34	38	39	32	37
No	48	49	67	67	65	51	52	71	62	59	58	61	60
DK	6	2	2	5	2	2	2	3	3	2	2	4	3

% Member	State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Yes	30	36	37	38	39	40	40	37	25	35	41	36	29	40	37
No	65	63	58	58	59	58	58	59	70	62	56	59	67	57	60
DK	3	2	3	3	1	2	1	4	3	3	3	4	3	1	3

Question A17

Do you yourself have, or have had, any work-related illness or accident ?

% Activity	Size between				Sex			Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
Yes	18	19	10	11	13	17	18	8	13	13	15	16	14
No	80	80	88	87	86	82	81	91	86	86	84	81	85
DK	1	1	1	1	1	1	1	1	1	1	1	1	1

% Member	State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Yes	10	10	6	7	10	16	18	14	8	12	22	18	12	24	14
No	88	89	93	92	90	84	82	83	89	87	76	79	88	74	85
DK	1	1	1	0	0	0	0	3	2	1	2	3	1	0	1

Question A18

How many accidents at work have you had that resulted in stopping work for more than one week ?

% Activity	Size between				Sex			Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
One	45	42	44	39	43	43	43	43	43	45	42	41	43
Two	14	22	17	17	18	20	20	13	15	20	18	20	19
Three	21	12	7	20	10	8	12	7	7	9	12	17	11
Four	6	5	3	3	5	4	5	1	6	2	5	7	4
Five	2	2	2	1	2	2	3	0	2	2	3	2	2
Six et +	1	6	3	5	3	5	5	2	4	4	4	5	4
Average	1.9	2.1	1.5	1.9	1.7	1.9	2.0	1.2	1.6	1.7	1.9	2.1	1.8

% Member	State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
One	54	45	42	47	58	56	39	46	46	51	41	41	50	35	43
Two	17	10	21	19	15	21	19	12	12	17	18	20	19	14	19
Three	10	5	12	11	9	6	12	4	4	22	17	9	11	5	11
Four	8	1	5	4	2	5	4	0	0	5	3	6	5	2	4
Five	2	3	1	3	7	6	1	1	1	3	1	3	2	2	2
Six et +	2	3	6	5	4	6	4	5	4	2	2	9	5	3	4

Question A19

How satisfied are you with the actions taken to ensure the safety, hygiene and health of people at your current place of work ? Are you... ?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Very satisfied	17	25	33	29	32	27	27	32	30	28	29	30	29			
Quite satisfied	41	52	48	37	49	52	50	47	50	50	48	45	49			
Dissatisfied	15	16	9	8	11	14	13	10	13	12	12	10	12			
Very dissatisf.	6	5	3	4	3	5	5	3	4	4	4	4	4			
DK	19	3	5	19	4	2	5	6	3	5	7	9	5			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Very satisfied	28	44	38	33	14	13	20	22	51	22	38	39	12	42	29
Quite satisfied	48	38	51	52	59	45	55	47	36	49	40	48	59	42	49
Dissatisfied	9	10	8	10	19	21	16	14	4	13	8	8	16	9	12
Very dissatisf	4	3	2	3	6	13	5	6	4	5	6	1	6	2	4
DK	8	2	2	2	2	8	5	11	4	11	8	4	6	2	5

Question A20

Do you think that an improvement of safety, hygiene and health standards at your place of work would also help you do your work more efficiently ?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Definitely	25	26	21	21	21	27	25	20	22	26	22	20	23			
Probably	30	28	23	22	25	26	27	23	28	26	25	20	25			
Probably not	17	19	21	16	21	20	19	21	21	19	20	22	20			
Not at all	13	20	26	22	25	23	21	27	23	22	24	25	23			
DK	14	6	8	16	7	4	7	8	7	7	8	10	8			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Definitely	23	17	10	14	29	50	26	29	22	32	29	19	38	17	23
Probably	28	21	19	23	36	32	34	26	24	26	27	22	32	21	25
Probably not	22	22	31	29	20	7	17	14	16	12	20	21	14	23	20
Not at all	14	35	32	27	8	7	16	20	31	16	18	31	9	33	23
DK	10	5	7	7	5	4	7	11	6	13	7	6	7	3	8

Question A21

Do you know any person who is responsible for safety, hygiene or health where you work ?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Yes	43	66	58	37	55	72	61	56	57	60	61	55	59			
No	55	34	40	57	44	27	38	42	43	39	37	42	39			
No answer	2	1	2	5	1	1	1	2	1	1	2	3	2			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Yes	58	77	61	63	71	37	72	45	56	47	62	71	45	70	59
No	39	23	38	36	28	64	26	54	42	53	36	29	55	25	39
No answer	3	0	1	1	1	0	2	0	3	0	2	0	0	5	2

Question A22

Would you say you are very well informed, quite well informed, quite badly informed or very badly informed about risks resulting from the use of instruments or products which you handle in your job?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Very well	31	35	36	33	36	37	36	34	31	35	38	38	35			
Quite well	42	46	41	39	43	44	43	42	47	43	41	40	43			
Quite badly	14	12	8	9	9	10	10	9	11	10	8	8	10			
Very badly	4	3	3	3	3	3	3	3	3	3	3	3	3			
DK	7	5	10	13	8	6	7	11	8	8	9	8	8			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Very well	30	50	41	39	31	34	35	32	52	24	45	46	15	43	35
Quite well	41	36	47	49	57	47	45	37	33	45	35	27	56	36	43
Quite badly	8	6	6	6	5	11	12	13	5	15	8	4	16	7	10
Very badly	4	2	1	1	1	1	4	5	2	4	3	1	3	3	3
DK	13	5	4	4	5	7	4	13	7	12	8	21	8	5	8

Question A23

Have you had a training course concerning safety, hygiene or health, for your current job ?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Yes	15	29	27	16	23	36	29	24	25	29	27	25	27			
No	82	69	70	79	75	63	69	73	73	70	70	70	70			
DK	1	1	2	3	2	1	2	2	2	1	2	3	2			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Yes	25	26	21	26	46	11	25	30	29	15	40	34	13	40	27
No	70	73	76	72	53	89	74	67	67	85	56	61	84	58	70
DK	3	1	2	1	1	0	1	3	3	1	4	5	2	0	2

Question A24

Have you ever had the chance to give an opinion or make suggestions about improving safety, hygiene or health standard at your workplace ?

%	Activity			Size between				Sex				Age				EC
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55	55+	12			
Yes	41	56	52	37	52	61	56	47	44	55	54	51	52			
No	52	40	42	52	44	36	39	47	51	40	41	42	42			
DK	6	3	4	7	7	3	4	5	4	4	4	5	4			

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Yes	48	69	55	60	80	36	56	43	48	37	61	61	44	61	52
No	42	38	38	34	17	62	40	45	45	60	31	28	51	35	42
DK	7	5	5	5	3	2	3	5	5	3	8	11	4	1	4

Question A26

Do you think that work-related illnesses and accidents at work are (in your country)

%	Activity			Size between Sex				Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
Very common	23	20	20	24	20	20	21	19	18	21	20	21	20
Common	53	59	58	52	59	59	58	58	58	59	59	54	58
Rare	9	14	14	9	13	15	13	13	14	13	14	14	13
Very rare	2	1	2	2	2	1	2	1	2	1	1	1	2
DK	11	6	7	11	6	5	6	8	8	6	9	9	7

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Very common	10	32	14	13	9	27	30	19	13	29	5	19	31	17	20
Common	58	61	61	61	60	56	51	60	50	59	48	60	50	57	58
Rare	17	19	19	19	21	12	11	13	19	4	34	12	6	15	13
Very rare	1	1	1	2	2	1	3	2	8	1	2	1	2	1	2
DK	12	5	5	5	7	4	6	6	8	7	11	8	11	8	7

Question A27

And at your workplace, do you think that work-related illness and accidents are ?

%	Activity			Size between Sex				Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
Very common	4	5	3	2	3	4	4	2	3	3	4	3	3
Common	27	19	12	17	12	19	18	11	15	16	14	14	15
Rare	37	43	35	25	37	43	40	34	37	39	38	38	38
Very rare	27	30	46	46	45	31	34	48	40	38	40	40	39
DK	3	3	4	7	3	2	3	5	4	3	3	3	4

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Very common	3	7	2	2	1	11	8	2	3	2	3	4	4	4	3
Common	11	15	16	15	14	33	20	14	12	14	13	21	16	13	15
Rare	38	35	37	39	46	27	37	36	33	32	41	42	38	42	38
Very rare	41	39	41	40	36	27	33	43	45	46	39	28	37	36	39
DK	5	3	3	3	2	2	2	4	6	6	4	6	4	2	4

Question A28

Still concerning accidents at work and the protection of health at the workplace, who should mainly be responsible for reducing the number of accidents at work and work-related illnesses ? (one answer only)

And who else ? (multiple answers possible)

%	Activity			Size between Sex				Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
The company	70	93	89	75	90	94	89	89	93	90	89	80	89
The government	43	39	44	44	44	40	42	43	42	90	42	41	42
The EC	10	9	9	9	9	10	10	8	8	43	9	8	9
Each worker	68	72	67	67	68	71	69	68	67	10	70	69	69
DK	14	5	6	12	6	4	6	7	5	68	7	9	6

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
The company	89	97	94	94	96	74	84	93	79	80	83	93	78	91	89
The government	30	31	34	34	34	58	53	38	38	65	35	34	59	34	42
The EC	8	7	8	7	4	12	8	10	8	10	12	5	16	9	9
Each worker	73	72	73	74	76	63	54	76	74	51	67	72	67	76	69
DK	4	6	4	4	2	10	10	5	12	10	17	7	9	4	6

Question A31

Would you like to receive more informatipon on the actions of the European Community concerning the protection of workers in companies and institutions such as yours ?

%	Activity			Size between Sex				Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
Yes	63	65	58	59	60	63	63	57	59	64	60	55	61
No	26	27	32	31	30	29	28	33	30	27	31	35	30
DK	9	8	9	9	9	8	8	10	10	8	9	9	9

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Yes	47	46	41	47	70	85	86	61	60	76	56	47	86	53	61
No	41	47	42	37	19	11	11	30	29	15	35	43	10	41	30
DK	10	7	16	15	11	4	6	8	10	9	9	10	4	4	9

Question A32

Would you be for or against the application of common legislation in all countries of the European Community concerning the safety, hygiene or health at places of work ? Would you be ...?

%	Activity			Size between Sex				Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
For-very much	47	50	47	48	45	52	51	43	40	49	50	51	48
For-rather	32	39	39	35	42	37	36	43	46	39	36	35	39
Against-rather	7	3	5	3	5	5	5	4	4	4	5	5	4
Agai.-ver. muc	0	1	1	1	1	2	2	1	1	1	1	1	1
DK	12	6	7	11	7	4	6	9	9	6	6	7	7

%	Member State													EC	
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P		UK
For-very much	45	25	35	37	46	73	63	43	58	66	47	46	54	45	48
For-slightly	42	39	45	45	42	20	30	44	29	29	37	44	38	41	39
Against-sligh.	3	13	9	8	5	2	1	3	2	1	5	4	1	5	4
Agai.-ver. mul	17	1	1	0	1	0	2	1	0	3	1	0	2	1	1
DK	8	7	9	9	6	5	5	9	10	5	9	5	7	5	7

Question A34

Here is a statement that some people have made about this subject; Could you tell me whether you agree strongly with this statement, agree slightly, disagree slightly or disagree strongly ?

COMMUNITY LEGISLATION WILL IMPROVE MY OWN HEALTH AND SAFETY CONDITIONS AT THE PLACE WHERE I WORK

%	Activity			Size between Sex				Age				EC	
	Agr	Ind	Ser	1	<49	50+	M	F	<25	<40	<55		55+
Agree strongly	22	16	14	17	15	15	17	13	13	13	15	18	15
Agree slightly	28	36	32	29	34	34	35	29	38	38	31	29	33
Disagree slightly	15	20	19	14	19	21	18	21	20	20	19	15	19
Disagree strongly	11	11	16	14	14	14	14	14	10	10	16	16	14
DK	21	16	18	24	17	14	15	22	19	19	18	18	17

%	Member State														
	B	DK	DW	D	DO	Gr	E	F	IRL	I	L	NL	P	UK	12
Agree strongly	8	5	7	9	16	47	33	8	29	19	19	10	41	13	15
Agree slightly	35	20	28	31	42	32	41	26	32	41	32	31	35	32	33
Disagree slightly	21	21	31	28	17	6	7	21	10	11	16	17	5	23	19
Disagree strongly	13	39	17	15	6	3	6	22	8	6	10	29	2	16	14
DK	21	11	16	17	18	12	13	25	20	23	24	12	16	12	17

Question

Overall, do you think that the completion of the Single European Market in 1992 will be - for people like you - a good thing, a bad thing, or neither a good nor a bad thing ?

1st col : EB35 results

2nd col : change from EB34

	B	DK	D		GR	E	F	IRL	I	L	NL	P	UK	EC12+	
	West				East										
A good thing	47 +3	46 +2	45 0	46 -2	46-10	58 +4	59 +2	40 -2	63 +7	70 +2	43 +4	47 -2	60 +6	40 0	51 0
A bad thing	8 0	13 -2	13 +5	11 +5	6 +5	9 +3	6 +3	9 +1	8 0	4 0	19 +3	8 +2	4 -1	12 +1	9 +2
Nei.good, n.bad38	+1	36 +3	30 -4	30 -1	32 +9	23 0	23 -4	43 0	22 -2	17 -1	32 -4	37 +3	24 -1	41 +6	31 0
Don't know	8 -4	5 -3	12 0	13 -2	16 -4	10 -6	12 -1	7 +1	7 -5	9 -1	6 -4	8 -3	12 -4	7 -8	10 -2

Question Autumn 1990

The Council of Heads of States and Governments of the European Community has adopted a declaration which constitutes a "Community Charter of Fundamental Social Rights", i.e. a set of common principles in all member countries concerning the rights and responsibilities of workers and employers. Do you think such a declaration is a good thing or a bad thing ?

Question Spring 1991

The European Community has undertaken to link a social dimension to the Single European Market. This consists of a common basis of rules and regulations on the rights and responsibilities of workers and employers in all Member States. Do you think such a European social dimension is a good thing or a bad thing ?

1st col. : EB35 results

2nd col : Change from EB34

	B	DK	D		GR	E	F	IRL	I	L	NL	P	UK	EC12+	
	West				East										
Good thing	65 +9	56 +5	65 -1	67 0	75 +5	78 +6	78+24	64 +1	73 +2	75 -1	63+12	74 -1	77+12	60+11	69 +2
Bad thing	5 -1	19 -1	7 +3	6 +2	3 +1	4 +3	2 +1	7 +1	7 +5	2 0	6 +4	6 0	2 +1	17 +9	7 +3
Nei.good,n. bad20	+4	11 -2	12 -3	11 -3	9 +2	8 -1	6 -6	16 -2	7 -2	10 +1	15 -2	10 +1	11 +2	12 +4	11 +1
Don't know	10-12	14 -2	15 +1	14 -1	13 -7	11 -7	14-18	14 +1	12 -5	12 -2	16-13	10 0	10-11	11 -2	13 -3

Breakdown of occupations by sex

	Men	Women
Farmer	60,2	39,8
Fisherman	83,0	17,0
Liberal profession	72,4	27,6
Proprietor	66,8	33,2
Qualified employee	66,9	33,1
Senior management	83,1	16,9
Middle management	56,7	43,3
Office employee	40,1	59,9
Non-office staff	35,5	64,5
Foreman	89,9	10,1
Skilled worker	82,5	17,5
Other manual workers	56,8	43,2

Distribution of economic activity sectors by country

	PRIMARY	SECONDARY	TERTIARY
B	3,2	31,4	65,4
DK	5,8	27,1	67,1
D(W)	4,5	40,5	55,0
D	4,8	40,8	54,3
D(O)	6,2	42,1	51,7
G	26,6	25,4	48
E	14,3	32,5	53,2
F	7,2	30	62,8
IRL	15,8	28,6	55,6
I	9,8	32,3	57,9
L	3,5	29,2	68,6
NL	4,9	26,5	68,6
P	21,2	34,6	44,2
UK	2,4	32,8	64,8
EC 12	7,5	33,8	58,7

Distribution of respondents by company size and by country.

	0	1 - 4	5 - 9	10 - 49	50 - 499	500 +
B	15,0	11,0	7,4	23,2	27,5	15,9
DK	5,5	11,4	10,4	31,2	26,4	15,2
D(W)	5,6	12,1	10,9	23,5	27,1	20,8
D	5,0	11,9	10,6	24,2	27,6	20,7
D(O)	2,5	10,9	9,8	26,7	29,5	20,6
G	40,3	16,6	9,3	17,9	10,7	5,1
E	24,8	17,5	11,0	23,5	13,4	9,8
F	16,5	13,6	9,5	20,5	21,9	18,0
IRL	26,5	17,7	10,7	21,1	17,4	6,6
I	25,0	17,8	9,4	21,0	16,2	10,4
L	8,9	9,8	11,0	19,3	23,7	27,3
NL	8,1	9,3	9,8	24,9	30,3	17,6
P	26,7	23,7	12,1	17,6	13,0	7,0
UK	10,1	10,5	11,3	22,7	28,6	16,8
EC12	14,7	13,7	10,3	22,6	23,0	15,7

Distribution of respondents by company size and activity sector

	0	1 - 4	5 - 9	10 - 49	50 - 499	500 +
Nace 00: Agriculture and fishing	54,8	18,7	6,1	9,2	9,5	1,7
Nace 10/20: Energy/chemical/extractive	1,4	3,7	4,3	16,8	27,4	46,4
Nace 30: Metal manufacturing	1,7	5,3	4,7	21,4	33,2	33,7
Nace 40: Manufacturing	9,1	11,4	9,8	25,0	32,6	12,1
Nace 50: Construction	10,5	18,3	13,9	35,4	15,9	6,0
Nace 60: Retail trade, catering	26,0	23,6	14,8	17,5	14,7	3,4
Nace 70: Transport and Communications	8,7	9,0	11,2	20,7	24,1	26,4
Nace 80: Banking and finance	8,7	13,8	12,0	27,0	21,0	17,5
Nace 90: Other services	9,9	11,8	10,6	26,0	25,8	15,9

Distribution of activity sectors by sex

	Men	Women
Nace 00: Agriculture and fishing	7,7	7,2
Nace 10/20: Energy/chemical/extractive	6,5	2,6
Nace 30: Metal manufacturing	14,4	4,3
Nace 40: Manufacturing	10,8	10,6
Nace 50: Construction	10,8	2,6
Nace 60: Retail trade, catering	13,9	22,3
Nace 70: Transport and Communications	9,4	3,4
Nace 80: Banking and finance	6,4	8,1
Nace 90: Other services	20,1	38,8

CONTENTS

SYNOPSIS

SUMMARY

NOTE

1. INTRODUCTION	3
2. CONTEXT OF THE STUDY AND OF THE RESULTS	7
2.1 "1992"	7
2.2 The social dimension.....	7
2.3 Distribution of activity sectors within each Member State of the Community	9
2.4 Breakdown of companies according to size in each Member State.....	11
2.5 The position of women in the sample, and features of the results.....	11
2.6 General remarks	14
3. RESENTATION OF REPLIES BY SUBJECT.....	17
3.1 The role of the European Community.....	17
3.1.1 Would you be for or against the application of common legislation in all the countries of the European Community concerning safety, hygiene or health at places of work? Would you be: for - very much/for - to some extent/against - to some extent/against - very much? (A32)	17
3.1.2 Here is a statement that some people have made about this subject. Could you tell me whether you agree strongly with the statement, agree slightly, disagree slightly or disagree strongly? Community legislation will improve my own health and safety conditions at the place where I work (A34).....	19
3.1.3 Would you like to receive more information on the actions of the European Community concerning the protection of workers in companies and institutions such as yours? (A31).....	21
3.2 Perception of risks.....	23
3.2.1 Would you say that your professional activity affects or could affect your health? (A6)	23
3.2.2 In which way(s) does your work affect your health? (A7)	25
3.2.3 Do you think that your work makes you run the risk of accident or injury? (A8)	27
3.2.4 What kind of risks do you run at work? (A9)	29
3.2.5 Do you think that work-related illnesses and accidents at work are very common/common/rare/very rare in your country? (A26).....	33

3.2.6	And at your workplace, do you think that work-related illnesses and accidents are very common/common/rare/very rare? (A27).....	33
3.3	Incidence of work-related illnesses and accidents at work	35
3.3.1	Do you use machines or equipment that could be dangerous? (A5)	35
3.3.2	Do you know any colleagues who suffer from work-related illnesses or who have had an accident at work? (A15).....	37
3.3.3	Do you yourself, or have you had, any work-related illness or accident? (A17).....	39
3.3.4	How many accidents at work have you had that resulted in stopping work for more than one week? (A18).....	39
3.4	Prevention and responsibilities	41
3.4.1	How satisfied are you with the actions taken to ensure the safety, hygiene and health of people at your current place of work? Are you very satisfied/quite satisfied/quite dissatisfied/very dissatisfied? (A19)	41
3.4.2	Do you know any person who is responsible for safety, hygiene or health where you work? (A21)	43
3.4.3	Would you say you are very well informed, quite well informed, quite badly informed or very badly informed about risks resulting from the use of instruments or products which you handle in your job? (A22).....	45
3.4.4	Have you had a training course concerning safety, hygiene or health for your current job? (A23)	47
3.4.5	Have you ever had the chance to give an opinion or make suggestions about improving safety, hygiene or health standards at your workplace? (A24).....	49
3.4.6	Do you think that an improvement of safety, hygiene and health standards at your place of work would also help you to do your work more efficiently? (A20).....	51
3.4.7	In your opinion, who should mainly be responsible for reducing the number of accidents at work and work-related illnesses? (one choice among four possibilities) (A28).....	53
4.	ANALYSIS OF POPULATION PROFILES	54
4.1	Presentation of results in profiles.....	54
4.2	Indicators	54
4.2.1	Subjective risk.....	54
4.2.2	Experience of industrial accidents and occupational diseases.....	55
4.2.3	Level of information and training.....	55

4.3	Other values used to prepare profiles.....	56
4.3.1	Use of dangerous equipment	56
4.3.2	Satisfaction with prevention measures at the workplace	56
4.3.3	Possibility of participation.....	56
4.3.4	Safety: efficiency factor	56
4.3.5	Responsibility	57
4.3.6	In favour of EC legislation	57
4.3.7	Improvement of the situation by EC legislation.....	57
4.3.8	Health risks	57
4.3.9	Safety risks	57
4.4	Presentation of profiles.....	59
4.4.1	Activity sector profiles.....	62
1	"Agriculture and fishing"	62
2	"Energy/extractive/chemical"	62
3	"Metal manufacturing"	65
4	"Manufacturing".....	65
5	"Construction"	68
6	"Services"	68
7	"Transport"	70
4.4.2	Country profiles	71
1	Belgium	71
2	Denmark	71
3	Germany (former West Germany).....	71
4	Germany (ex-GDR).....	75
5	Greece.....	75
6	Spain.....	75
7	France.....	79
8	Ireland.....	79
9	Italy	79
10	Luxembourg.....	83
11	Netherlands.....	83
12	Portugal	83
13	United Kingdom	88

4.4.3 Profiles of companies as a function of their size	89
1 Companies with a single worker	89
2 Small companies (1-9 employees)	89
3 Companies with 10-50 employees	90
4 Companies with more than 50 employees	91
4.4.4 Profiles by occupation	96
1 Self-employed and liberal professions	96
2 "Blue-collar" workers	96
3 "White-collar" workers	99
4 Foremen	99
5 Young people aged between 15 and 24	100
5. DETERMINING FACTORS FOR THE REPLIES	104
6. CONCLUSION	107
6.1 A current cause for concern	107
6.2 The company: a driving force in prevention	108
6.3 Varied situations	108
6.4 Determining factors for the replies	109
6.5 Risk sectors	110
6.6 A Community dimension	110
ANNEXES	113
A. METHOD	114
1 DETAILS ON SAMPLING	114
2 REALISATION OF THE FIELDWORK	115
3 COMPARISON BETWEEN SAMPLES AND UNIVERSES AND WEIGHTING OF THE DATA	115
4 REGIONAL ADMINISTRATIVE UNITS	116
5 CO-OPERATING AGENCIES AND RESEARCH EXECUTIVES	117
B. INDICATORS	118
1 SUBJECTIVE RISK	118
2 EXPERIENCE OF INDUSTRIAL ACCIDENTS AND OCCUPATIONAL DISEASES	119
3 LEVEL OF INFORMATION	120
C. QUESTIONNAIRE	121
D. TABLES OF RESULTS	124



COMMISSION OF THE
EUROPEAN COMMUNITIES

Directorate-General for Employment,

Social Affairs and Education

Health and Safety Directorate

Unit V/E/5 – European Year

Bâtiment Jean Monnet – C4

BP 1907 – L- 2920 Luxembourg

Tel. (+) 352 43 01 46 34; Fax (+) 352 43 01 49 75