



## ETU OHS NEWSLETTER

JUNE 2006

### WORKPLACE STRESS

**TRAINING DATES**  
**OHS—CONTACT**  
**TANYA AT EEIT**  
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**INITIAL 5 DAY**

August 9,10,15,16,17  
November 5,16,21,22,23

**1 DAY REFRESHER**

June 14,  
July 11,  
August 8,  
September 12,  
October 10,  
November 14

**OHS Reps Meetings 2006**  
**10am—12pm**

**28th June**—Melbourne  
**26th July**—Trades and Labour  
Portland  
**30th August**—Melbourne  
**27th Sept**—Trades and Labour  
Shepparton  
**25th October**—Melbourne  
**29th November**—ETU Geelong  
**December tbc**—Melbourne

Stress across all aspects of life seems to have increased, particularly in the workplace. Workplace stress is a major contributing factor in a range of physical and mental health problems affecting workers today.

With the mental health and wellbeing of workers at risk the need to change workplace practices to reduce workplace stress is a necessity, employers must communicate with their employees and work together in redesigning jobs to reduce the workload and give them a greater say in how the work gets done through job rotation, manning levels, time factors etc.

A Vic Health report has shown that approximately **7.7 million** Australians spend one quarter to one third of their waking lives at work. The cost of workplace injury and disease has been estimated at over **\$7 Billion** per year nationally. The report shows evidence that job stress is a substantial contributor to the work related problems including, mental illness; cardio-vascular disease (CVD) ie heart attack and angina; depression; and musculoskeletal disorder (MSD)

The study took a sample group of 1101 working Victorians and found the following results:

- Women are more likely to experience high job stress than men.

- There is more stress on younger males and females in low skill jobs than older workers in high skill jobs.
- Job Stress is attributed with up to one-third of CVD in Men and one-third of Depression in Women.

Some of the main reasons there is a high level of stress at work include, management style; work overload and pressure; lack of job control; and unclear work roles.

#### Job Insecurity

Job stress is measured with a combination of the previous items and called Job Strain.

The investigators combined job strain with job insecurity to create a new measure called Job Pressure.

Extremely high Job Pressure has the ability to increase depression in workers by 14 times and anxiety by 13 times.

This highlights the substantial health risks of the rising trend of combined exposures to job stress and job insecurity.

International studies have shown that in the UK, stress related disorders account for an estimated 60% absenteeism. Also that 7-16 percent of CVD in men can be due to job stress.

This can rise to 35% for men with long-term exposure to low job control.

VicHealth sought to identify the most effective interventions. A systems approach would include Primary, Secondary and Tertiary intervention at an individual level.

#### Primary Preventive interventions are proactive.

- Aim to prevent the occurrence of illness in healthy individuals.
- Identify sources of stress in the workplace.
- Make changes in work pacing and job redesign.
- Formation of Health and Safety Committees.

#### Secondary interventions are beneficial.

- Aim to modify an individual's response to stressors.
- Stress management classes.
- Muscle relaxation or meditation skills.

These secondary interventions neglect the sources of job stress.

#### Tertiary interventions are reactive.

- Aim to minimise the effects of stress-related problems after they have occurred.
- Treatment or management of symptoms or disease.
- Counselling and rehabilitation.

The last two come under the banner of Stress Management, and clearly the best outcome would be number one

#### Prevention.

For the full report go to:  
[www.vichealth.vic.gov.au/workplacestress](http://www.vichealth.vic.gov.au/workplacestress)

## MATERIAL SAFETY DATA SHEETS

It is the employer- occupier of a workplaces' duty under Section 21.1 and 21.2 of The Occupational Health and Safety Act 2004 to identify hazards and assess and control the risks arising from the storage and handling of Hazardous Substances, in consultation with Occupational Health and Safety Reps and/or employees who are likely to be affected by the Hazardous Substance, regarding:

- Hazard identification, risk assessment and risk control.
- Induction, information and training.

- Any proposed changes likely to affect their health or safety arising from the Hazardous Substance.

There are OHS (Hazardous Substance) Regulations, these are currently under review and are due for release mid next year in line with the provisions of the OHS Act 2004.

The Code of Practice for Hazardous Substances require an employer-occupier to obtain the current version of the Material Safety Data Sheet (not more than 5 years old) from the manufacturer or first supplier on or before the

first time the Hazardous Substances are supplied.

Copies of all current MSDS must be kept in a register that is regularly maintained at a convenient location where the Hazardous Substances are stored and must be readily accessible to all employees and emergency service personnel.

All employees must be trained on the purpose of MSDS, what information to look for and their location.

A MSDS is not to be confused with a product specification sheet, a MSDS should be

written in English and provide information about the possible hazards of the substance, potential health effects from exposure, how to work safely with the substance and information on the safe storage, handling and disposal.

Other reference material :

National Code of Practice for the Preparation of Material Safety Data Sheets 2<sup>nd</sup> Edition 2003

Australian Standards HB 9-1994 Occupational Personal Protection

## WORKPLACE BULLYING

Workplace bullying is "repeated, unreasonable behavior directed toward an employee or group of employees that creates a risk to health and safety".

There are a range of psychological and physical illnesses and injuries that can be caused by exposure to bullying in the workplace.

Psychological injuries including conditions such as anxiety disorders, depression, social phobia and other stress conditions.

Some Psychological conditions might appear as physical symptoms such as skin disorders, hypertension, digestive problems, ulcers, headaches and sleep disturbances such as insomnia.

An employer is required by the OHS Act to eliminate or so far as is reasonably practicable, to reduce the risks to employees health and safety caused by bully-

ing in the work place.

The employer should implement through consultation a policy dealing with Equal Employment Opportunities. The policy should cover a broad range of issues including bullying, harassment and sexual harassment . The policy should create awareness and develop hazard identification and risk control measures as well as ensuring that all workers including management are

trained in the provisions of the policy.

In the first instance a bullying incident should be reported to the employer, so that the appropriate resolution procedures can be implemented. Any party involved with the alleged incident may call in a Worksafe Inspector at any time.

## RF ISSUES

The International and Australian standards have radiofrequency (RF) exposure limits based on a "whole body" threshold electromagnetic energy (EME) exposure of four watts/kg. Exposure to energy from RF signals above this threshold has been experimentally demonstrated to produce adverse health effects.

To ensure the protection of people and the community, a number of safety factors have been applied to the whole body threshold. For trained technicians working with RF technology, a safety factor of 10 is incorporated for exposure levels, and for members of the general public, a further safety

factor of 5 is incorporated (meaning the whole body threshold is divided by 10 and 50 respectively). Thus the current Australian ARPANSA Standard stipulates that members of the general public are exposed to no more than 0.08 watts/kg.

Dean Mighell (Secretary ETU)

has publicly stated that the ETU has concerns in relation to RF exposure to ETU members, and that exposure should be eliminated.

Whilst the ARPANSA standard might have specified those levels as being acceptable, it doesn't mean that in the future the same will be true.