

SHORT REPORT

Risk of fatal and non-fatal occupational injury in foreign workers in Spain

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Study objective: In the past decade, Spain has experienced dramatic growth of its immigrant population. Available information on the occupational conditions of foreign workers is scarce. This study aims to add to this information by describing occupational injuries in foreign workers in Spain.

Design, setting, participants: Data were analysed from the 2003 Ministry of Labour and Social Issues registry of non-fatal and fatal occupational injury in insured workers. The population at risk was estimated from the Social Security Affiliation Registry as of 31 December 2003. Comparing Spanish with foreign workers and also considering age and sex, incidence rates and relative risks, and their confidence intervals at 95%, were calculated within each population group.

Main results: In women and in men, and in every age group, foreign workers had an increased risk of non-fatal and fatal occupational injury compared with Spanish workers. The differences were especially notable in foreign women workers and in older workers.

Conclusions: Many factors probably combine to cause the differences found in this study. Better data collection on the situation of foreign workers is needed to understand these facts and apply appropriate public health solutions.

In the past decade, Spain has experienced dramatic growth of its immigrant population. In 1991, the national census counted 350 000 foreign nationals living in Spain, a number that jumped to over 1 500 000 in 2001.¹ The most recent municipal registry data suggest that this growth is continuing in the present.²

However, this growth and the resultant heightened public consciousness has not been accompanied by more abundant or enriched information regarding the circumstances in which these new arrivals find themselves in Spain. In contrast with other European countries, Spain has comparatively little experience with managed migration. Between February and May of 2005, the ruling government took a significant step, permitting the normalisation of almost 700 000 immigrants who, although they did not have normalised immigration status, could prove residence in Spain and had a labour contract.³

Given the magnitude of this immigration, and its possible social and occupational consequences, it is important to have more concrete information on the workplace conditions this population experiences. In 2003, the most recent year for which data are currently available, the Ministry of Labour and Social Issues added the variable nationality to its registry of occupational injury for those affiliated with the Social Security system (insured workers). This variable permits, for the first time, the comparison of workplace injury and death

between Spanish national and foreign workers, one key element in understanding the conditions of workers.

METHODS

We obtained records of the non-fatal and fatal occupational injuries notified to the Ministry of Labour and Social Issues for the year 2003⁴ as Spanish, or those born in Spain, and foreign workers, for anyone with a nationality other than the Spanish. Furthermore, each registry was then examined for sex and age. We estimated the population at risk from data from the Social Security Affiliation Registry as of 31 December 2003.⁵ We calculated the incidence rates and relative risks, and their confidence intervals at 95% within each population group, using Spanish workers as the base reference.

RESULTS

In women and in men, and in every age group, foreign workers had an increased risk of both non-fatal and fatal occupational injury when compared with Spanish workers. These differences were especially notable in foreign women workers, who showed a risk over five (95%CI 5.38 to 5.48) or six (95%CI 3.62 to 9.62) times higher of non-fatal and fatal injury, respectively, than their Spanish counterparts. Additionally, older workers, especially those in the 55 and older age group, seem to have especially dangerous experiences, reaching risks of non-fatal injury (95%CI 14.65 to 15.22) and fatal injury (95%CI 10.46 to 20.82) almost 15-fold higher than Spanish workers of the same age (table 1).

DISCUSSION

The results of this study show considerably higher risks for occupational injury and death for foreign workers in Spain than for their native counterparts, and show the urgent need for improvement in relevant data collection and study of the factors involved in creating these differences. Our results are similar to those found in other contexts using nationality or ethnicity.^{6–9}

This study was limited by the fact that our data include only insured workers, which surely excludes many foreign workers in informal working positions. Additionally, because of data limitations, we were not able to examine occupational injury or death by area of origin, occupational sector, or by sex within each age group, which would have added nuance to the information garnered.

Despite these limitations, this study is important in that it can serve as a reminder that Spain's immigration situation, in a context of continued global migration, requires information to drive appropriate actions that meet the needs of foreign workers. Such knowledge is currently limited by available data in Spain. Previous studies in other contexts have suggested that foreign workers are disproportionately represented in the most dangerous jobs,^{6–8} and that within those jobs are often relegated to the most hazardous tasks.^{6–7} One study found that the number of occupational injuries and

Table 1 Incidence rates and relative risk (RR) of non-fatal and fatal occupational injury in Spanish and foreign workers by sex and age. Spain, 2003

	Spanish workers			Foreign workers			RR	95% CI
	Injuries‡	Population at risk	Incidence rate*	Injuries‡	Population at risk	Incidence rate*		
Non-fatal								
Sex†								
Men	600839	7684149	78	154413	510451	303	3.9	3.9 to 3.9
Women	171286	5264014	32	41855	237086	177	5.4	5.4 to 5.5
Age groups (y)§								
<25	148680	1649995	90	34384	97905	351	3.9	3.9 to 3.9
25 to 34	253592	4095577	62	68212	331423	206	3.3	3.3 to 3.4
35 to 44	186344	3482109	54	49991	217591	230	4.3	4.3 to 4.3
45 to 54	125061	2430629	51	30967	81571	380	7.4	7.3 to 7.5
>55	58448	1278970	46	12714	18630	682	14.9	14.7 to 15.2
	Spanish workers			Foreign workers			RR	95% CI
	Injuries‡	Population at risk	Incidence rate¶	Injuries‡	Population at risk	Incidence rate¶		
Fatal								
Sex†								
Men	1014	7684149	13.2	299	510451	58.58	4.4	3.9 to 5.1
Women	85	5264014	1.61	23	237086	0.97	6.0	3.6 to 9.6
Age groups (y)§								
<25	102	1649995	6.18	39	97905	39.83	6.4	4.3 to 9.4
25 to 34	255	4095577	6.23	86	331423	25.95	4.2	3.2 to 5.3
35 to 44	265	3482109	7.61	83	217591	38.14	5.0	3.9 to 6.4
45 to 54	279	2430629	11.48	71	81571	87.04	7.6	5.8 to 9.9
>55	198	1278970	15.48	43	18630	230.81	14.9	10.5 to 20.8

* Incidence rate per 100000 workers. †Population totals include 300 persons not classifiable by sex (totals not shown). ‡ 19689 (2%) eliminated for not including nationality. §Population totals include 1140 not classifiable by age (totals not shown). ¶Incidence rate for 1000 workers.

deaths in foreign workers diminished with time of residence in the new country and approached that of native workers.⁹ This may suggest that language abilities and workplace and host society culture play a part in injuries at work, both in relevant safety training and in day to day communication at the job site.⁹ It could also suggest that with time, foreign workers can move on from the most dangerous jobs.

It seems logical to believe that such migrant specific factors could help to describe the experiences of foreign workers in Spain and thus the startling differences found in this study. However, we lack information on length of time of residence, language skills, and education, ethnic characteristics, work duties, salaries, and use of health programmes and services. When this information is collected, it is often not uniform

across different information sources, which impedes its use. Furthermore, we have almost no information about unrecorded foreign workers. Because good public policy depends of good information, such dependable data and reporting mechanisms are vital to our ability to properly advocate for and meet the needs of foreign workers within a public health framework.

Occupational health in general deserves a more central place in our thoughts about health, but it seems that the health of foreign workers requires even more attention than that of native populations. Permitting normalisation and work permission for immigrants, as the Spanish government did this year, is a step forward, but it is not enough. At the very least, these workers should not work at heightened health risk compared with their Spanish coworkers. As Dong⁷ points out, excess occupational injury and death tend to involve known hazards with acceptable controls; the challenge is then to make those controls work in a complex, multicultural framework. Scandalous differences in occupational injury and death like the ones suggested in this study must occupy a larger portion of the public health and social welfare debate. After all, an improvement in the occupational health of foreign workers contributes to overall population health, the goal toward which all of us work.

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What is known on this subject

- Increasing migration is a reality in industrialised countries, and has social and occupational consequences both for the immigrants themselves and for the country of arrival.
- Studies in other contexts have shown higher rates of non-fatal and fatal occupational injury in ethnic minorities and by race.

What this paper adds

This paper uses the first available data on nationality in non-fatal and fatal occupational injury in Spain, and calls attention to important differences and the need for further study into the working conditions of Spanish and foreign workers.

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THE JECH GALLERY

Young adults' reluctance to seek help and use medications for mental distress

Epidemiological data suggest young adults are a group least likely to seek help when suffering from mental disorder.¹ This is of public health concern in the context of high rates of suicide and deliberate self harm among this age group.² In a recent cross sectional survey of mental distress and help seeking in young adults aged 16-24 years,³ we found fewer than 10% of respondents with probable mental disorder⁴ had recently consulted a GP. The picture was drawn on a questionnaire returned as part of this survey by a young woman reporting severe symptoms and a suicide attempt. She described her experiences of seeking help as: "tried to speak to people, got passed around, got drugged", and was trying to self manage her symptoms, having withdrawn from medical services. In common with other respondents, her reluctance to seek help was in part motivated by a strong desire to avoid medication. Her picture was accompanied by the message: "For anyone whose job it is to help others, genuine heartfelt compassion, empathy, sympathy are needed along with the ability to not just hear but *really listen*....don't just prescribe pills as if it were eenie, meenie, minee mo, which pill shall we give a go?" Such data contribute a lay perspective to debates about drug treatments for depression and the need to reduce their use in young people.⁵

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