

## Guest Editorial

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# Work Practice in Australia

The centenary of federation of the Commonwealth of Australia was celebrated in 2001. In 100 years Australia has grown from a population of 3.8 million to 19.4 million people who live on an island continent approximately the same size as the 48 mainland states of the USA (7.7 million square km). We have moved from a predominantly Anglo-Celtic society, where 95% were born in Australia, the United Kingdom or Ireland, to one of the world's most multicultural societies where 16% have been born elsewhere [4]. At the end of the 20th century the ethnic origins of Australia's population consisted of 70% Anglo-Celtic, over 18% European, 6.5% Asian, 2.5% Middle Eastern and 2% Indigenous (Aboriginal and Torres Strait Islander) [4].

Australia has become a very urbanised country whose population hugs the coast. At the start of the 20th century 41% of Australians lived in rural areas. This dropped to only 14% at the start of the 21st century. Almost 70% of the population lives within 20 km by road of the coast and 83% within 50 km [4]. While the images of long white beaches are accurate, the 'bronzed Aussie' has been replaced by people wearing hats, sunglasses, SPF 30+ sunscreen, and shirts to protect them from the sun.

The type of work undertaken has also undergone a profound change over the last century. The emphasis has moved from primary industries to the tertiary sector; from the image of the laconic "cocky" (farmer) in the bush or the "swaggie humping his bluey" (a swagman carrying his bed-roll and belongings), to the urban professional accessing the internet in a city office. In the early 1900s almost a third of Australian workers were employed in the agricultural sector. By the end of the 1990s this had fallen to 4.3%. In 1996 the manufacturing industry employed 12.5% of the workforce, with 42.9% in tertiary services and 38.4% employed in information services [4].

At the end of 2001 there was a 64% labour force participation rate (73% for males and 56% for females) [1]. Of the 9.3 million people employed in 2001, more

than one in four (27%) was working part-time. This is an increase from less than 10% in 1966 [4]. The increase in part-time employment has been accompanied by changes in working hours (e.g., weekends, evenings, etc.) and less job security.

There has also been a change in the way issues of workplace safety, health and rehabilitation are addressed. At least one in 12 workers is injured in the course of their employment each year in Australia [2]. During 1998–1999 there were 268,000 reported workers' compensation claims in Australia, of which over 111,000 resulted in fatality, permanent or temporary disability with an absence of at least one week [3,7]. It has been estimated that only half of the people injured at work actually apply for workers' compensation, with the consequence of severely underestimating the actual occurrence of work-related injuries [2].

When including indirect costs, work-related injuries and diseases in Australia were estimated to cost \$22 billion (AUD) in 1995–1996 [2]. The trend in other countries is similar. The high number of occupational injuries and the high cost of workers' compensation and rehabilitation around the industrialised world have stimulated efforts to develop effective prevention strategies and rehabilitation approaches. The various states and territories of Australia have addressed these issues through changes in occupational health and safety legislation and regulations (e.g. [9]), and the development of workplace-based rehabilitation programs (e.g. [8, 10]).

This special issue of *WORK* is devoted to the work being conducted in Australia in the area of occupational health, safety and rehabilitation, and the broader understanding of the concept of 'work' amongst Australians. The articles included in this issue reflect the goals of *WORK* – prevention of injury or disability, assessment of individual needs and rehabilitation when necessary.

David O'Halloran begins by giving us an historical overview of Australia's oldest and largest provider of vocational rehabilitation services, CRS Australia. This

historical perspective not only reflects what has occurred in CRS Australia, but also demonstrates how occupational rehabilitation in Australia has progressed from being predominantly centre- or clinic-based in its approach, to being strongly workplace-based in the provision of services to workers. Today this emphasis is reflected in all occupational rehabilitation services, whether provided by the private or public sectors.

Michael Deen, Libby Gibson and Jenny Strong provide us with a national overview of work practice by occupational therapists in Australia. The results of this survey clearly indicate the importance of workplace-based services in occupational therapy work practice and the anticipated increase in the delivery of prevention, assessment and workplace-based services.

The success of occupational rehabilitation is dependent on appropriate and relevant assessments such as functional capacity evaluations (FCEs) and workplace-based assessments. Several authors address issues associated with work-related assessments.

Studies of the reliability and validity of work-related assessments have been shown to be lacking in many areas and are areas of concern for clinicians [5,6]. This is addressed by two studies presented in this issue. Libby Gibson and Jenny Strong report on an expert review of the Gibson Approach to FCE, presenting the results of a content validity study. Nicola Tuckwell, Leon Straker and Tanya Barrett present a test-retest reliability study on nine tasks of the Physical Work Performance Evaluation. These studies provide users of these assessments with increased confidence in their use and contribute to knowledge in this area.

Before reliability or validity can be established however, it is necessary to understand what needs to be assessed. Kylie Bootes and Christine Chapparo present the findings of a qualitative study to determine what information was utilised by occupational therapists who assess the work capacity of people with traumatic brain injury in the workplace. This article provides one of the few studies that examines the assessment of cognitive operations required for work and combines this with a workplace-based focus.

While it is necessary to consider the reliability and validity of the assessments used, it is also necessary to ensure that the clinicians conducting the assessments are competent. Given that there may be a range of health professionals who conduct work-related assessments, government bodies, such as WorkCover NSW, are developing competency standards to ensure that the benchmarks for effective performance of work-related assessments are clearly communicated. Jamie Travis

presents the development of cross-disciplinary competency standards for work-related assessments within WorkCover NSW.

The prevention of injury and promotion of health and safety at work is part of occupational health and safety (OHS) legislation in all states and territories of Australia. The establishment of health and safety committees in the workplace and/or the appointment of elected health and safety representatives are believed to foster employee participation and consultation in the workplace. Nadine Milgate, Ev Innes and Kate O'Loughlin review the literature in this area to identify the factors that impact on the effectiveness of OHS committees and representatives.

Finally, we step back to consider the broad issue of 'work'. What is it and what does it mean? Children and those of retirement age are generally considered to spend their time engaged in play or leisure activities, however, there tends to be minimal consideration of the meaning of work in their lives. Christine Chapparo and Elizabeth Hooper explored six-year-old children's perceptions of work in their school day and found that the children had well-developed ideas about what is work. At the other end of the age continuum, Anne Hillman and Christine Chapparo report on the role of work in the lives of retired men following stroke. Work, as perceived by the study participants, was found to continue beyond retirement and the advent of disability. Recommendations are made to include work in rehabilitation even beyond retirement.

These exciting studies, reviews and reports represent only some of the wide range of highly professional work and scholarly activity that is being conducted in Australia. I am very pleased to be able to present this to readers of *WORK*, and I thank the editor, Dr Karen Jacobs, and the contributing authors for their enthusiastic support for this issue.

*Ev Innes*  
Guest Editor  
Faculty of Health Sciences  
University of Sydney  
P.O. Box 170  
Lidcombe, NSW 1825  
Australia  
Tel.: +61 2 9351 9209  
Fax: +61 2 9351 9197  
E-mail: E.Innes@fhs.usyd.edu.au

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