

Productivity Commission Inquiry into the Workplace Relations Framework

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Dear Commissioners,

Thank you for the opportunity to respond to the Workplace Relations Framework public inquiry. In light of the Commission's requirement to 'recommend policies to maximise the wellbeing of the community as a whole' ¹ (pg 15), we raise a significant gap in the inquiry – the impact of the changing labour market and employment regulation negotiations on workers' health. Poor health in workers disrupts both productivity and prosperity, and serves as a major impost on the nation's health budget; hence a lack of consideration of health will have serious unintended consequences that are critical to this inquiry.

Work and health – opportunities and challenges

Work plays a powerful role in shaping the health and lives of workers². Workplace relations legislation that promotes greater fairness for workers and good quality working conditions is likely to protect the mental and physical health of the workforce³. An important working condition that impacts health is working time. **Working time (long, unpredictable, non-standard hours) is now acknowledged as a major impediment to time for healthy eating, physical activity and sufficient sleep** ^{4,5}, which in turn are the responsible behavioural risks lying behind major preventable chronic diseases, including obesity⁶. The national economy loses \$8 billion per year from obesity alone, with productivity losses accounting for 44% of this total and health system costs amounting to 24%. A further loss to the Australian economy comes in the form of higher social welfare payments due to the greater likelihood of obese people receiving unemployment benefits⁷. These figures do not include conditions associated with obesity, including Type 2 diabetes, cardio-vascular disease and some cancers, or the cost of lost well-being borne by obese individuals most recently estimated to be \$50 billion⁸. Whilst there are multiple and complex barriers to healthy eating and physical activity, working time is part of the mix; and **there is clearly a need for additional regulations to protect and promote the health of workers.**

Health and working time conditions – the evidence

1. Casualised work forces are at increased risk of health problems due to low incomes that limit access to food, particularly healthy food ⁹
2. Split shift and shift workers are missing out on sleep and/or have poor quality sleep, which is detrimental to health ¹⁰
3. Long work hours are associated with occupational injuries and accidents, psychological ill-health, musculoskeletal disorders and unhealthy behaviours¹¹, including poorer eating habits¹². These long hour workers are therefore at a higher risk of obesity, heart disease, diabetes, cancer and mental health problems ^{13 14 15}.
4. High work time loading and pressure impacts leisure time and exercise^{16–18}. Similarly, time poverty, work stress and long work hours has been found to be connected to unhealthy

- lifestyles; time poor individuals are less likely to engage in active travel such as walking or cycling to work^{17,19,20}.
5. Insecure employment is negatively associated with self-reported health, depression, anxiety and lower levels of physical activity^{16,21–23}.
 6. Increasing work intensity (having to do more in less time) increases the risk of anxiety and depression in women workers¹¹.
 7. Time poverty is linked to poor eating habits¹², with work time ‘spill over’ into personal time associated with lower fruit and vegetable intake²⁴. Job stress and long work hours cause individuals seek out convenience food, which is usually less healthy than food prepared at home¹⁹.
 8. Individuals with low job status, poor job conditions, high work demands, low control at work, and high levels of work-life stress are less likely to have a healthy diet^{19,24–27}. This has knock on effects to children, rates of childhood obesity and serious health consequences throughout the lifespan^{28,29}.
 9. Households with members working non-standard hours experience difficulties in synchronizing schedules protective of health: meal planning, shared meals, physical activity with another person^{30–31}.
 10. For the more than 10 per cent of Australian employees who are contractors, and not covered by the Fair Work Act, there is high likelihood of long hours with no minimum conditions³². This group is particularly at risk of the inferior health behaviours experienced by both long hour workers and those in insecure employment.

Conclusions:

Working time arrangements are becoming more diverse³³, and feeling pressured at work and reconciling work and non-work commitments is a major challenge for many Australian households, and especially for female workers³⁴. Notably around 10% of the workforce have multiple jobs and commuting times are increasing in the capital cities³⁵, adding to the experience of job strain. These changes are underway as the regulations that moderate the impact of working on holidays and weekends are under pressure. However, **we would urge that consideration be given to the longer term consequences of working time arrangements on the community; especially the removal of regulations that limit hours, provide a premium for working unsociable hours and provide stability to working time arrangements.** Innovations in working time arrangements may come at a longer-term community cost. Currently there is an inquiry being conducted by the WA parliament on the mental health of mining sector workers on fly in fly out contracts; this was precipitated by publicity surrounding a number of suicides involving fly-in fly-out workers³⁶. **The problems of reconciling work and care arrangements for working families have been highlighted, and we would ask for consideration to be given to the consequences of the further erosion of working time regulations for community health.** When people work during a 24-hour period, for how many hours and with what rhythms and regularity, matters for routine healthy behaviour adoption. Changes to workplace relations frameworks and associated legislation should take into account their effects on workers’ ability to maintain their own health through adequate nutrition, exercise and sleep. (Re)negotiating awards and enterprise agreements should include healthy behaviour minimum standards, alongside OHS standards. To advance the development of such standards, we suggest public health experts advise relevant authorities, including Fair Work Australia. On this point, authors of this submission at the National Centre for Epidemiology and Population Health at the Australian National University have a multifaceted research program that examines the impact of time on physical and mental health, with a key focus on the role of work. We are available for oral presentations and consultation with the Commission to support work in this area.

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