

European Agency for Safety and Health at Work

EUROPEAN RISK OBSERVATORY



LITERATURE STUDY ON MIGRANT WORKERS

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1. INTRODUCTION

1.1 Background of the report

Increasing mobility of workers is one of the growing demographic changes worldwide and it is likely that migration will increase in the next decade.

The aim of this report is to provide an overview of the most important issues relating to the occupational safety and health (OSH) of migrant workers.

Special attention is paid to the following questions:

- Is the number of migrant workers (still) growing, and is their OSH status getting worse/better? (+/- last 5 years)
- Does the current state of scientific knowledge justify the need for a more in-depth Agency project?
- Are there any specific OSH issues that should be prioritised for this group?

1.2 Definition of migrant workers

According to the definition used by many of the EU Member States, migrants can be viewed as EU nationals staying in an EU-25 country of which they are not nationals (citizens). In this perspective, people coming outside the EU-25 (non-EU or third country = a country that is not a member of the Union) are immigrants. The difference is based on right to entry or free movement in the EU Member States. It has to be pointed out though that both terms, migrants and immigrants, are used interchangeably in this literature review.

Both groups, migrant and immigrant workers cover a wide range of people with different reasons for migration and skills levels. Obviously not all migrant or immigrant workers are "at risk" regarding their OSH. Migration can bring career opportunities which can enhance the general well-being of migrants, or it can sometimes involve a degree of deskilling and downward social mobility, and can be associated with potential health problems, especially in situations where departure has involved trauma. [1] For example, migrant workers' knowledge of the language of their host country is one of the major issues that may affect their safety and health at work (see "Language skills" section below).

1.3. Methodology

The focus of the literature survey was on recent European literature (mainly over the last 5 years). The keywords were translated to the national language of the authors in order to carry out the national literature study. English was used as a search language in the other EU-countries.



The main keywords used in the study were

- migrant workers, immigrant workers, foreign workers

combined with e.g.

- occupational
- health, stress, mental health
- safety
- work, job, workplace
- working conditions
- work-related risks, hazards, effects, accidents
- psychosocial factors, human factors, harassment, bullying
- unemployment

The only search limitation was that there had to be a clear link to OSH issues.

The databases used were:

- Medline OEM-subset
- Rilosh
- OSHline
- Nioshtic and Nioshtic2
- CISDOC
- EBSCO
- OSH –ROM
- Ricerca ISPESL (Data base Istituto Superiore per la Prevenzione e la sicurezza del Lavoro)
- CBUC - (Data base del Consorci de Biblioteques Universitàries de Catalunya)
- Labourline (Data base European Trade Union Technical Bureau for Health and Safety)
- REBIUN – Net of University libraries of Spain, France, Portugal, Ireland and UK.
- NLM Gateway (includes: MEDLINE/PubMed, TOXLINE Special, LocatorPlus, MedlinePlus, ClinicalTrials.gov, DIRLINE, Genetics Home Reference, Meeting Abstracts, HSRProj, OMIM, and HSDB).
- CIS-ILO
- PsyINFO
- Google
- www-pages of the National Institutes of OHS

Books, reports, working papers and articles were covered in the literature surveys. Also selected Agency Focal Points were asked for support.



2. OVERVIEW ON MIGRATION IN DIFFERENT EU COUNTRIES

2.1 European migration history

The overview on European migration history is mostly based on the literature review done by Wren and Boyle [1] on migration and work-related health in Europe to SALTSA programme¹. In their report they use White's [2] classification of migration waves, according to whom the post-1950 international migration to Europe can be divided into three distinct waves: labour migration, family reunification and post-industrial migration. Although there is considerable overlap in timescales and place-specific anomalies exist when different countries are compared, they do correspond to a broad pattern.

Labour migration

The 1950s and 1960s was a period characterised by mass migrations of predominantly single males seeking unskilled employment. Migrant-receiving societies adopted different policies towards labour migrants, from permanent settlement in Sweden, the UK and the Netherlands, to a temporary settlement system in Germany. This period was marked also by a growing geographical diversity of migrant origins. For example, Britain received migrants from its former colonies whereas Sweden, with no significant colonial linkages, received migrants from countries in Europe's rural periphery. Mass labour migration came to an end during the early 1970s when e.g. 1973 oil crisis, made it unwanted.

Family reunification

During the later part of the labour migration period, some of the host countries created legal rights for migrant workers to reunify their families. As a consequence entirely different gender and age groups (women and children) became migrants. As an impact they formed visibly distinctive communities in most major European cities, congregating mainly in inner city slums and poorer housing areas than the original labour migrants had stayed in. This meant establishment of ethnic minorities at the bottom of the social hierarchy, a factor which had implications for their health and well-being. Family reunification is still an ongoing process and within some migrant communities, strong ties have been maintained with the countries of origin.

¹ <http://www.arbetslivsinstitutet.se/saltsa/en/default.asp>



Post-industrial migration

The third and the more diverse wave of international migrants started in the 1980s. As a consequence of still deepening structural economic inequalities at global scale, there is currently a growing polarisation between highly skilled migrants and poor dispossessed migrants such as illegal migrants. Ageing and high early retirement of the workforce, as well as low birth rate in the Western European countries, have in some countries led to a situation where (im)migrant workers are necessary for their economies.

Skilled migrants

There are three main channels of skilled worker movement: the international labour markets of multinational companies; contract work organised by companies to meet skills absent in developing countries; and employment organised by recruitment agencies [3].

A migration group which has recently received special attention is the one made up by seasonal workers. Increasingly, seasonal workers are being recruited by agencies to fill temporary labour shortages in some areas, working for a limited period of up to three months on work visas. Many seasonal workers come, for example, to Italy, Austria, Germany, Greece and Norway from Balkan and Baltic countries, Poland, Africa and Asia. The temporary "labour tourism" occurs typically during the summer months and primarily in sectors such as agriculture, catering, construction and manufacturing.

Undeclared workers

At the other end of the economic spectrum are illegal migrants, whose full extent is unknown. Already in 1991 the International Labour Organisation (ILO) estimated that there were around 2.6 million undocumented non-nationals in Europe [4] and the amount has increased since then. It is estimated [5] that the nine largest former EU15 Member States have between 4.4 and 5.5 million illegal migrants. Transposing these figures to the EU25 would give an estimate of between 6 to 8 million undocumented migrants.

Illegal migration is a particularly important issue for Southern European countries such as Italy, Spain and Greece, where the numbers of illegal migrants are relatively high. As mentioned by the European Foundation for the Improvement of Living and Working Conditions [127], this may be due to the low density of trade unions, particularly among immigrants, and the economic benefits for employers to hire illegal immigrant workers. These represent significant obstacles to the legalisation of the workers' position, a situation which is insufficiently controlled by existing labour inspections and that leads to worse working conditions for undeclared migrant workers. On the other hand, undeclared work is less common in Northern Europe, where informal economies are less developed, labour forces more unionised and comprehensive registration systems prevent black market employment occurring on a significant scale. There are some serious health concerns for undeclared workers, who often do not have access to health care services or lack the legal protection mechanisms for employees in dangerous occupations.

Refugees

As a result of increasing political unrest, refugees are currently one of the most substantial sources of new migrants to Western Europe. The characteristics of refugees vary



considerably and in some cases refugee migration can be a selective process which favours skilled migrants. A serious problem in this group might be deskilling which affects both psychological and physical health.

2.2. Current situation in EU Member States

Intra-EU migrants

The recent trend has been a significant increase in intra-EU migration. This growth is clearly associated with the EU integration, especially with the free movement for people on a unified labour market. In this sense, 2006 was the European Year of Workers' Mobility² and the upward trend is expected to continue. At this moment, the EU Member States are in a transition period as far as the free movement of workers is concerned. Transitional periods limit the free movement of workers from the Member States that joined the EU on 1 May 2004, except Malta and Cyprus.

There are differences in the policies allowing free movement of the "new" EU-10 nationals to work in the "old" EU-15 countries. The UK, Ireland and Sweden allowed EU-10 migrants to enter and work after these countries joined the EU. Finland, Portugal and Spain have allowed free movement after 1 May 2006, but the rest of the EU-15 countries still have restrictions. However, after 2009 these Member States must request an authorisation from the Commission if they want to maintain their national constraints for a further two years – but only if they are experiencing serious disturbances in their respective labour markets. This requirement has to be "objectively justified". From 2011, complete freedom of movement for workers from the Member States which joined in May 2004 is guaranteed. [6]

Intra-EU migration occurs at a range of skills levels, from the highly skilled to the unskilled. The mobility patterns are variable, but movements are largely temporary in nature. Approximately 1.5% of EU-25 citizens lived and worked in a different Member State from their country of origin. This proportion has not changed significantly for the last 30 years. [7] However, the origin has changed and for example, while in the 60's Spanish people went to work to Germany, France and Belgium, currently Polish and Czech citizens go to Spain.

Non-nationals living in the EU Member States

According to official national statistics (annual Labour Force Surveys, LFS) and Eurostat [8] it is estimated that the total number of non-nationals (both migrants and immigrants) living in the EU in 2004 was around 25 million, just below 5.5 percent of the total

² http://ec.europa.eu/employment_social/workersmobility_2006



population. The largest numbers of foreign citizens reside in Germany, France, Spain, the UK and Italy.

The data for the period 2000-2004 indicate that the non-national population varied from less than 1 percent of the total population in Slovakia to 39 percent in Luxembourg, but in the majority of countries the figure was between 2 and 8 percent. In all EU Member States, except Luxembourg, Belgium, Ireland and Cyprus, the majority of foreigners are citizens of non-EU-25 countries. The number of citizens from the 10 New Member States residing in the EU-15 is very small: around 0.2 percent of the total population of the EU-15, the largest proportion in Germany – around 0.6 percent.

Between 1990 and 2004, in most countries the percentage of foreign citizens either did not change significantly or it increased. Latvia was the only country with a significant decrease (around five percentage points from 1998 to 2004).

The most significant growth was observed in Luxembourg, Spain, Cyprus, Greece, Ireland and Austria. This was due to an increase in the population from outside the EU-25, except for Luxembourg, where an increase in the number of EU-15 citizens was dominant. Regularisation programmes had a significant effect on the size of non-national populations in Greece, Italy, Portugal and Spain.

The citizenship structures of foreign populations in the EU Member States vary greatly (Table 1). As well as geographical proximity, the composition of the largest non-national population groups in each country strongly reflects their migration history.

Table 1.- National and non-national population in the EU Member States around 2004 and 1990. (Source: Eurostat 2006)

	Year	Nationals (1000)	Non-nationals (1000)	Non-nationals %	Largest group of non-nationals (country of citizenship)	Year	Nationals	Non-nationals	Non-nationals
						(1000)	(1000)	%	
Belgium	2004	9 536	860	8.3	Italy	1990	9 067	881	8.9
Czech Republic	2004	10 016	195	1.9	Ukraine	1990	10 327	36	0.3
Denmark	2004	5 126	271	5.0	Turkey	1990	4 985	151	2.9
Germany	2004	75 190	7 342	8.9	Turkey	1990	74 267	4 846	6.1
Estonia	2000c	1 096	274	20.0	Russia	1990	:	:	:
Greece	2004e	10 149	891	8.1	Albania	1990	9 979	142	1.4
Spain	2004	39 426	2 772	6.6	Ecuador	1990	38 428	398	1.0
France	1999c	55 258	3 263	5.6	Portugal	1990	53 055	3 597	6.3
Ireland	2002c	3 585	274	7.1	United Kingdom	1990	3 426	81	2.3
Italy	2004	55 898	1 990	3.4	Albania	1990	56 338	356	0.6
Cyprus	2002c	625	65	9.4	Greece	1992	577	26	4.2
Latvia	2004	1 804	515	22.2	Russia	1998	1788	671	27.3
Lithuania	2001c	3 450	34	1.0	Russia	1990	:	:	:
Luxembourg	2004	277	174	38.6	Portugal	1990	270	109	28.7
Hungary	2004	9 987	130	1.3	Romania	1995	10 199	138	1.3
Malta	2004	389	11	2.8	United Kingdom	1990	352	6	1.6
Netherlands	2004	15 556	702	4.3	Turkey	1990	14 251	642	4.3
Austria	2004	7 375	765	9.4	Serbia and Montenegro	1990	7 211	434	5.7
Poland	2002c	37 530	700	1.8	Germany	1990	:	:	:
Portugal	2003p	10 169	239	2.3	Cape Verde	1990	9 819	101	1.0
Slovenia	2004	1 951	45	2.3	Bosnia and Herzegovina	1995	1 942	48	2.4
Slovakia	2004	5 350	30	0.6	Czech Republic	1990	:	:	:
Finland	2004	5 113	107	2.0	Russia	1990	4 953	21	0.4
Sweden	2004	8 500	476	5.3	Finland	1990	8 071	456	5.3
United Kingdom	2003	55 636	2 760	4.7	Ireland	1990	55 043	2 416	4.2

c - Census data; e - Estimated figures; p - Provisional data.

More recent Eurostat data from the first quarter 2006 (Table 2) reveal a similar picture but with an increasing share of non-nationals in certain EU Member States, such as Spain,



Austria, Cyprus, Luxembourg, Portugal and the UK. As it has been pointed out above, in most of these countries, except Luxembourg and Cyprus, immigrants from non-EU25 countries make up the biggest group, the greatest shares being reported in Spain (7.4%) and Austria (7%).

Table 2.- Percentage shares of non-national population in the EU27, by origin (EU25 or not), first quarter 2006. (Source: Eurostat 2006)

	% of non-EU25 citizens within total	% of non-nationals from EU25 within total	% of non-nationals within total
EU27*	3	1.4	4.4
Austria	7	2.8	9.8
Belgium	2.6	5.3	7.9
Bulgaria	0.2	n.a.	0.2
Cyprus	5.7	5.9	11.6
Czech Republic	0.4	0.3	0.7
Germany	5.9	2.8	8.7
Denmark	2.6	1	3.6
Estonia	16.2	n.a.	16.2
Greece	4.5	0.5	5
Spain	7.4	1.3	8.7
Finland	0.9	0.6	1.5
France	3	1.8	4.8
Hungary	0.4	0.1	0.5
Ireland	n.a.	n.a.	n.a.
Italy	n.a.	n.a.	n.a.
Lithuania	0.5	n.a.	0.5
Luxembourg	3.1	36.3	39.4
Latvia	0.9	n.a.	0.9
Malta	1.5	1.1	2.6
Netherlands	2.4	1.3	3.7
Norway	2.1	1.8	3.9
Poland	0.2	0.1	0.3
Portugal	2.4	0.3	2.7
Romania	n.a.	n.a.	n.a.
Sweden	2.1	1.7	3.8
Slovenia	0.4	0.1	0.5
Slovakia	n.a.	0.1	0.1
UK	3.5	2.2	5.7

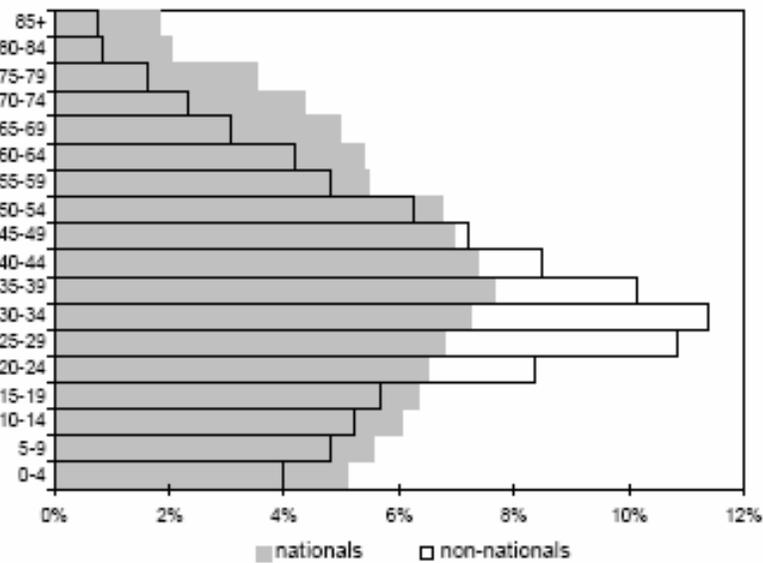
*EU27 based on available country data.

**For Luxembourg data refer to 2005.



There are considerable differences in the age structures of national and non-national population in the EU15 (Figure 1). The foreign population is dominated by young adults aged 20 to 39. Another significant difference is that the elderly population, aged 65 and over, is much higher among the nationals. Available data on the relative proportions of males and females among non-nationals indicate that the share of males is significantly higher than in the total population in some countries.

Figure 1.- Nationals and non-nationals by age in the EU Member States 2002



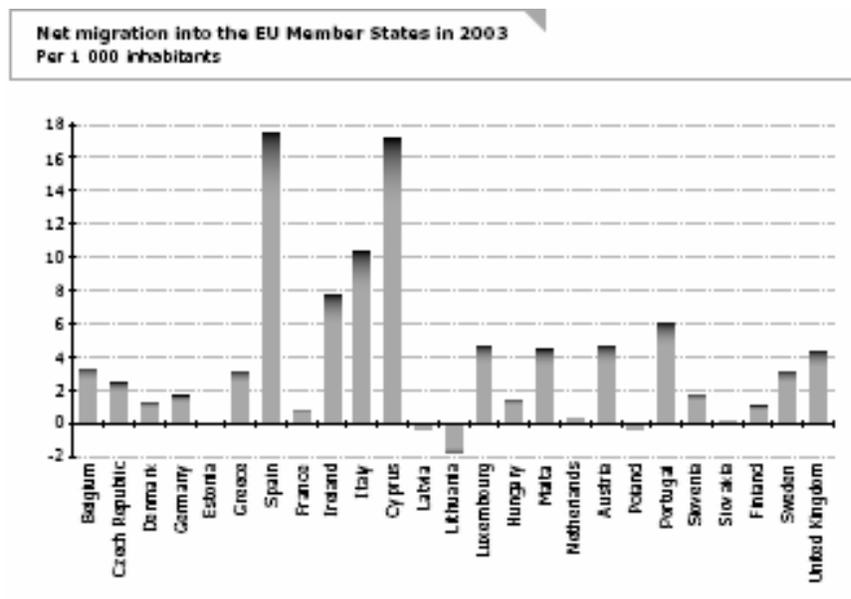
(Source: Eurostat 2006)

Net migration in the EU-25 Member States

Net migration means the difference between immigration into and emigration from a given area during a period of time. Net migration is negative when the number of emigrants exceeds the number of immigrants. Since most countries do not have accurate figures on immigration and emigration, or do not have figures at all, net migration is generally estimated on the basis of the difference between population change and natural increase between two dates (in Eurostat, it is then called net migration including corrections).

Total net migration into the EU25 Member States increased from 1,707,000 in 2002 to 2,092,000 in 2003. The scale of net migration varies markedly between the Member States, with Spain, Italy, Germany and the UK accounting for 83% of the net inflow of migrants in 2003 (Figure 2). All the EU15 Member States recorded positive net migration, whereas Latvia, Lithuania and Poland recorded negative net migration. [9]



Figure 2.- Net migration into the EU Member States in 2003

(Source: Eurostat 2005)

2.3. State of migration in some of the EU Member States

Migration has become an important issue in the debates in the EU Member States. Changing economic and demographic trends have drawn attention to the phenomenon of migration as a solution, among others, for the ageing population of the OECD countries, the shortage of workers for precarious jobs and for the increasing competition brought about by globalisation. There is a tendency to open doors for highly-skilled workers or for specific sectors where there is a shortage of labour, but the need for low-skilled workers is not yet acknowledged in all Member States [10].

Member States vary considerably in the way they conceive the integration of third-country nationals and in the extent to which they have developed and implemented integration policies. Some countries have a long experience in this area whereas others have just started developing national policies.

Since the EU Member States are in a different situation concerning their migration history and their current state of play, some country examples are presented next to describe the different experiences. In the following paragraphs, France, Belgium, Germany and Luxemburg represent the traditionally migrant-receiving countries; Finland and Ireland, the new migrant-receiving countries; Poland a migrant-sending country; Spain, Italy and Greece immigrant-receiving countries.



France

France has a long history of immigration as a result of its colonial history and the labour market context. In the 19th century, the migration flow involved people from neighbouring countries like Italy, Spain, Portugal, Belgium and Poland. A decrease in immigrant flows took place during the economic recession after 1930. After the Second World War (WWII), the French government recognised the need of foreign workers for the reconstruction of the country. "Culturally compatible" migrants (i.e. Europeans) were preferred to Africans or Asians, but there was a shortage of European migrants and the growing level of prosperity was consequently addressed with immigrants from France's current and former colonies. During the mid-seventies, France began to tighten its immigration policy, trying to stimulate immigrants to return home. However, there was no ban on European immigrants, asylum seekers or immigrants working in certain occupations. Consequently the foreign population stabilised. [11]

Statistical evidence shows that over the last twenty years immigrants functioned as a "shock absorber" during economic crises, providing flexibility to businesses. Immigrant workers took a direct hit from massive job losses, reporting twice as high an unemployment rate than that of nationals. [11]

Belgium

In Belgium, migration is not a new phenomenon as it started back in the fifties. The first wave took place after WWII, in the process of reconstruction of the country. In the sixties, activities shifted to heavy industry in general (i.e. construction, harbours, and textile) and the countries of recruitment at that time were Italy, Spain, Greece, Morocco and Turkey. Bilateral agreements were set up concerning work permits and social security. There was a halt in immigration flows in 1974, following the economic crisis. Some 10,000 persons were "regularised", becoming the so-called "first generation" migrants. This raises an additional challenge, as these workers are ageing and, hence, they also belong to the category of "older workers". [12]

During the nineties, a new type of migrants reached Belgium: asylum seekers and refugees. Very recently, with the opening of the European borders, labour migrants, especially from Poland, are arriving in the country. The Belgian government is currently considering the selective immigration of highly skilled workers. [12]

Germany

In the 1960s, the demand for manpower rose considerably in Western Germany. The main reasons for this stemmed from the aid received from the Marshall Plan (1947-1951) [13], the positive development of the market economy and the overall favourable economic conditions. At the same time, the influx of Eastern Germans stopped, young people remained longer than before in the educational system and early retirement went up.



To respond to this new situation, Germany signed recruitment agreements for "guest workers" with several countries: Italy, Spain, Greece, Turkey, Morocco, Portugal, Tunisia and Yugoslavia [14]. The countries of origin and Germany agreed that the best solution to tackle the problem of a shortage of workforce would be a temporary and limited stay of the foreign workers in Germany [15], who would regularly be replaced by new incoming workers (so called rotation principle) [16].

Since the late 1960s, foreign workers started to stay permanently in Germany, accompanied by their family members. This development was also in the interest of German employers because moving in the families assured the stay of their qualified workforce. Nevertheless, following the oil crisis in the early 1970s, the German government decided to stop the recruitment of more foreign workers.

Nowadays migrants, defined as European citizens (EU-25), are allowed to stay and work in Germany [17]. Their access to the labour market is easy for them in comparison with immigrant workers (people coming from so called third countries), as the latter need to have their residence and work permits [18].

Luxembourg

Luxembourg has known immigration during the whole 20th century. It has been an important factor in the economic and social development of the country. This immigration consisted mostly of white, European migrants and integration was not a problem. This situation changed towards the end of the 1990s, when asylum seekers arrived. They were not allowed to work, which created a different atmosphere and reaction compared with previous migrants as the population was used to migrants who were employed in the numerous positions created in the past, not to asylum seekers who were not active in labour market. [19]

Up to the end of the 1990s immigration was not considered a problem by the public opinion but the contrary. The economy flourished and this resulted in a situation where there were more jobs than workers available in the country. But unemployment increased and the official discourse changed, leading to a public debate on immigration which is thus quite recent in Luxembourg and mainly centred around the ageing of the population and therefore with the pension system, more so than in any other country. The immigration of highly qualified people is not mentioned in the official discourse: it simply takes place, without difficulty. [19]

Finland

Until 1980-1990 Finland was a migrant-sending country and thus, (im)migrants are quite a new "phenomenon" in the country. During the 1970s and 80s, refugees from Chile and Vietnam moved into Finland and, already in the 1980s, the amount of foreign citizens started to increase slowly, mostly with the influx of people from Sweden who were former Finnish citizens or their relatives. In 1990s the amount of foreigners increased when the Ingrain Finns returnees got permission to move to Finland. At the same time asylum seekers from Somalia and Yugoslavia started to enter the country. The amount of foreign



workforce is currently increasing, with most migrants coming from Russia, Estonia, Sweden, Somalia, Yugoslavia and Iraq. [20]

The government is presently discussing about a new immigration programme, one of whose aims is to promote work-related immigration. [21]

Ireland

During the past 300 years approximately ten million people have left Ireland to find an improved economic situation or better opportunities abroad [22; 23]. Apart from the return of emigrants and their descendants, there was rather emigration than migration into Ireland until the end of the 20th century [24]. However, the number of non-nationals in the Irish labour market has grown significantly over the past few years: during the period from 1998 until 2005 the proportion of non-nationals in employment has risen from 3% to 8% of all workers employed in Ireland [25].

As Ireland has never been a traditional country of immigration, legislation and policies on the issue were rather under-developed until relatively recently. They are mainly concerned with regulating entry both into the country and the labour market and up to now very little attention has been paid to the rights and integration of labour migrants. [24] The labour immigration policies are among the most liberal in the EU: less than 4% of the work permit applications were refused between 2001 and 2003. [26] Moreover, until April 2003 local employers had been able to legally recruit an unlimited number of non-EEA as they wished [27].

Opinion polls show that, on the one hand, most Irish people believe that foreign workers influence the Irish economy and society in a positive way. On the other hand, many think that the presence of migrant workers makes it harder for the native workers to get jobs and believe that migrants are pushing down pay and working conditions. This might be a reason why 41% of the native workers think that there are now enough foreign workers and no more should be admitted to come. A large majority even want to reintroduce work permits for workers from the new EU Member States. [28]

Poland

Poland has been known as a country from which people have traditionally left to work abroad. In Poland net migration is negative (greater emigration out of the country than immigration into the country) and the 2004 value (- 9,400) was the highest during the last three decades. The volume of inflow is expected to grow further in the coming years [29].

In spite of a considerable outflow of people, Poland is also considered an attractive labour market for many foreigners, particularly after the EU enlargement [30]. According to national statistical data [31], in 2004 the highest numbers of work permits for foreigners in Poland were granted to citizens from Ukraine, Vietnam, Belarus and Germany. In 2004, national statistics registered above 6,000 foreigners employed mainly in education, manufacturing and trade and repair, and concerning their geographical distribution, the majority of foreign workers were registered in one single province (Mazowieckie) [29].



Spain

Spain has experienced one of the major and most intensive growths in the number of foreigners in the EU in the last years. In 2004, the INE (Instituto Nacional de Estadística) [32] calculated that there were over three million immigrants. According to the Permanent Observatory for Immigration [33] almost two million had residence permit and 1.2 million were included in the social security system. By nationality, the largest group of migrant workers comes from Morocco, but workers from Latin America represent almost half of the non-national workers.

In order to integrate themselves legally in the Spanish labour market, people coming from countries that are not members of the European Economic Space need to have both work and residence permits. Only under these conditions can immigrants enter the Spanish labour market with all the legal and labour guarantees.

Most immigrants have a job although a significant part of them work without a contract and, hence, do not have regular access to the benefits of the social security system, safety and health activities etc. The proportion of immigrants who work without a contract has grown from 2% in 2000 to 23% in 2004 and many of them have found their job through friends, relatives or immigrants of the same nationality. [34] In 2005 there was a regularisation process that intended to reduce the number of illegal immigrants and those working without a contract.

Italy

Italy has the fourth largest immigrant population of all the EU countries. Regular foreign residents are approximately 1.5 million, or 2.5% of the total population [35]. The main groups of immigrants come from Morocco, Albania, the former Yugoslavia, the Philippines and the United States. It has to be borne in mind that these data have been elaborated taking into account documented immigrants only. The great diversity in the countries of origin of the immigrants is a characteristic of Italian immigration and this trend is currently increasing [36]. The Italian government has recently announced that it will grant a legal residence permits to hundreds of thousands of undocumented immigrants working in the country and will open its job market to thousands more from the new EU Member States [37].

Greece

For a long time, from the end of WWII until 1974, Greece was an emigrant country, sending out employees especially as guest workers to West Germany. After 1974, the number of Greeks returning to Greece and those emigrating was nearly equal and until the mid-1980s the population of legal foreign workers in Greece remained stable at about 30,000 [38].

The geopolitical changes in Europe, and more specifically, the end of the eastern European communist regimes, led to great migration flows within Europe and in particular to Greece. The geographical position of Greece and its access to the EU in 1981 made



the country a desired destination to enter the Western world [39]. As a consequence, immigrants flows, especially from Albania, Eastern and Central Europe, the former Soviet Union (e. g. Greek-Pontics) and from Third World countries, entered the country [40]. The government and the country were not prepared for this influx and the current laws and the legalisation procedure were adopted [39].

In 2001 the government approved a new law dealing with issues related to border controls, the provision of channels of legal entry to Greece and the assessment of conditions for naturalisation, which are among the strictest in Europe. [40]

Since Greece was for a long time an emigrating country, the population was very homogenous and even the migration movement in 1922 at the end of the Turkish-Greek war, with an influx of Greeks who lived in Turkey, was not followed by racist consequences, as these migrants had retained their Greek language skills and the Greek national conscience. Economic and social integration was not, however, so quick among immigrants who entered the country in the 1990's and feelings of xenophobia have developed. [39; 40]



3. OCCUPATIONAL SAFETY AND HEALTH OF MIGRANT WORKERS

The International Covenant on Economic, Social and Cultural Rights of the UN, Article 7 states the following: “The States Parties to the present Covenant recognize the right of everyone to the enjoyment of just and favourable conditions of work which ensure in particular: remuneration which provides all workers, as a minimum, with: (a) Fair wages and equal remuneration for work of equal value without distinction of any kind, in particular women being guaranteed conditions of work not inferior to those enjoyed by men, with equal pay for equal work. (b) Safe and healthy working conditions; (c) Rest, leisure and reasonable limitation of working hours and periodic holidays with pay as well as remuneration for public holidays.” [41]

Article 12 of the ILO Migrant Workers (Supplementary Provisions) Convention, 1975 (No. 143) urges States to “guarantee equality of treatment, with regard to working conditions, for all migrant workers who perform the same activity, whatever might be the particular conditions of their employment”. [41]

The majority of the studies on occupational health and safety among foreign workers do not separate migrants from EU Member States from non EU immigrants. Both terms are often used interchangeably and therefore, in the next paragraphs the terms migrant and immigrant workers refer to all those who are not native workers. Also the terms foreign workers and non-nationals are used interchangeably when they are used in the original study.

3.1. Position on labour market

Employment and access to the labour market

Discrimination in access to the labour market is an issue that is raised in a number of reports and individual studies in several countries. It seems that (im)migrant workers often have a higher unemployment rate than that of native workers. However, as stressed by [127], there are also remarkable differences among immigrants according to sex, country of origin and duration in the host country. In this sense, there are two groups who suffer a particularly negative situation: young people and women. The ILO has collected figures on the number of migrants and unemployment that show that in all countries foreign workers have higher unemployment rates than the total workforce (Table 3), and that non-EU migrants have a lower labour market participation rate than EU nationals [42].



Table 3.- Migrant and non-migrant workers in selected OECD countries, 1995 and 2000

Country	Foreign workers (\$'000s)		Total labour force (%)		Unemployment rate 2000-01 (%)				Unemployment ratios	
	1995	2000	1995	2000	Nationals (male)	Foreigners (male)	Nationals (female)	Foreigners (female)	For./nat. (male)	For./nat. (female)
Austria	366	377	9.7	9.8	3.9	8.4	3.9	8.6	2.2	2.2
Belgium	327	266	7.9	8.4	4.6	14.2	7.0	16.5	3.1	2.4
Denmark	54	78	0.2	2.8	3.6	12.2	4.9	7.2	3.4	1.5
Finland	18	34	0.8	1.3	10.0	24.2	11.2	29.9	2.4	2.7
France	1 566	1 571	6.3	6.1	7.1	17.1	10.7	23.9	2.4	2.2
Germany	3 505	3 429	9.1	8.8	7.2	13.4	7.8	11.7	1.9	1.5
Greece	71	163	1.7	3.8	7.2	7.6	16.2	17.6	1.1	1.1
Ireland	42	60	3.0	3.5	4.1	5.1	3.8	6.2	1.2	1.6
Italy	100	246	0.5	1.1	8.0	7.4	13.9	21.3	0.9	1.5
Netherlands	281	298	3.9	3.7	1.9	4.7	2.9	7.0	2.5	2.4
Norway	59	75	2.7	3.2	3.7	5.3	3.4	4.5	1.4	1.3
Portugal	21	104	0.5	2.2	3.1	8.4	5.1	9.6	2.7	1.9
Spain	121	227	0.8	1.4	9.3	12.9	19.8	17.2	1.4	0.9
Sweden	186	205	4.2	4.8	5.5	16.1	4.6	13.0	2.9	2.8
Switzerland	729	717	18.6	18.3	1.3	4.3	2.6	6.4	3.3	2.5
United Kingdom	1 011	1 220	3.6	4.2	5.5	16.1	4.4	7.9	2.9	1.8
Australia	2 139	2 365	23.9	24.5	6.7	6.6	5.8	6.9	1.0	1.2
Canada	2 839		19.2		10.3	9.9	9.5	11.6	1.0	1.2
United States	14 083	17 384	10.8	12.4	4.9	4.4	4.1	5.6	0.9	1.4
Average			6.7	6.7	5.7	10.4	7.5	12.2	2.0	1.8

The number of foreign workers and percentage of the total labour force in selected OECD countries 1995 and 2000, and unemployment rates in 2000 among male and female nationals and foreigners in 2000-01 (Source: OECD: Trends in international migration. Annual report 2002)

Eurostat³ data from 2006 (Table 4) reveal that in most of the countries for which data are available, unemployment is lower among nationals than non-nationals. As far as non-nationals are concerned, the highest unemployment rates generally correspond to immigrants from outside the EU25, except for Cyprus, the Czech Republic and Greece. Concerning economic activity rates there are different results, with countries such as Austria, Belgium, Bulgaria, Germany, Denmark, Poland and Sweden, where non EU25 immigrants record the lowest shares of economic activity rates. However, there is a significant number of countries, such as Cyprus, the Czech Republic, Estonia, Greece, Spain, Hungary, Latvia and Portugal where non EU25 nationals report higher economic activity rates than the overall for the respective countries.

³ It must be taken into account that OECD and Eurostat data, despite referring to the same general topic, are not strictly comparable since the OECD presents data on the foreign-born population and those who are native to the country, while Eurostat collects data on nationals and non-nationals, irrespective of their country of birth.



**Table 4.- Economic activity and unemployment rates, in % shares, first quarter 2006
(Source: Eurostat 2006)**

	Economic activity rates, 15-64 years (%)				Unemployment rates			
	Total	Nationals	Non-nationals from EU25	Non-EU25 citizens	Total	Nationals	Non-nationals from EU25	Non-EU25 citizens
EU27*	69.7	71.2	73.9	67.9	8.9	8.8	10	17.6
Austria	72.2	72.7	76.5	64.8	5.5	4.6	8.5	15.8
Belgium	66.1	66.4	66.4	55.3	8.7	7.9	11	29.9
Bulgaria	61.5	61.5	n.a.	49.1	9.7	9.6	n.a.	n.a.
Cyprus	72.6	71.9	68.9	84.4	5.9	5.7	7.5	7
Czech Republic	70.5	70.4	80.6	78.7	8	8	6.5	5.2
Germany	74.6	75.5	74.8	62.6	11.3	10.3	14.3	24.5
Denmark	80.2	80.7	74.4	63.5	4.5	4.3	n.a.	11.8
Estonia	72.1	71.5	n.a.	75.5	6.4	5.3	n.a.	11.8
Greece	67	66.6	54.5	76.3	9.7	9.8	n.a.	9
Spain	70.4	69.3	69.8	80.6	9.1	8.6	8.2	12.9
Finland	74	74.1	76.2	62.5	8.4	8.2	11.6	23.6
France	69.4	69.8	72.3	57.9	9.6	9.1	8.7	25.7
Hungary	61.4	61.4	69.3	65.3	7.7	7.7	n.a.	n.a.
Ireland	71	n.a.	n.a.	n.a.	4.2	n.a.	n.a.	n.a.
Italy	62.7	n.a.	n.a.	n.a.	7.6	n.a.	n.a.	n.a.
Latvia	69.8	69.7	n.a.	90.4	7.8	7.7	n.a.	n.a.
Lithuania	67.3	67.3	n.a.	66	6.4	6.4	n.a.	n.a.
Luxembourg**	66.6	63	72.2	63.6	4.5	3.3	5.5	12
Malta	59.1	59.1	68.3	52.1	7.8	8	n.a.	n.a.
Netherlands	77	77.6	79.8	54.1	4.5	4.3	5.5	14.9
Norway	77.6	77.9	84.3	61.1	3.9	3.6	n.a.	18.5
Poland	62.8	62.9	60.8	53.7	16.1	16.1	n.a.	n.a.
Portugal	73.6	73.4	71	82.5	7.7	7.5	n.a.	14.1
Romania	62.3	n.a.	n.a.	n.a.	7.8	n.a.	n.a.	n.a.
Sweden	77.7	78.3	77.1	57.9	7.9	7.6	7.7	21.2
Slovenia	70.9	70.9	n.a.	70	6.9	6.8	n.a.	n.a.
Slovakia	68.6	68.6	85.4	n.a.	15	15	n.a.	n.a.
UK	75.3	75.6	77.7	68.4	5.1	4.9	5.8	10.6

*EU27 based on available country data.

**For Luxembourg data refer to 2005.



Unemployment rates differ among different migrant groups, For example, in Finland, a study that compared unemployment among Russian, Estonian, Somalis and Vietnamese workers showed that the highest unemployment rate was among the Somalis, while the Estonians had a similar unemployment rate of that of the Finns. [43]

In France, 40% of the complaints about discrimination at work during recruitment and during career development are linked to ethnic reasons [44]. Studies done in Belgium [45], Switzerland [46; 47; 48] and Austria [49] concentrate on the problem of discrimination of migrants with regard to their access to the labour market as well as wage differences and racism at the workplace.

Building on discrimination in entering the labour market, [127] argues that the growth of self-employment witnessed among immigrants could be interpreted as evidence of improved work opportunities for immigrants or as a 'back-door' that gives access to a otherwise hostile labour market. Similarly on self-employment, [128] remarks that it can constitute an abuse, particularly in some sectors, such as agriculture and construction, when it covers a genuinely dependant employment relationship with the aim to avoid health and safety duties by the employer.

Although no systematic data assessing the discrimination and violations of migrants' rights in Ireland are available, the non-governmental organisations (NGOs), trade unions and the public media persistently report anecdotes about discrimination of migrant workers. This is especially the case when looking at minimum wages and poor employment as well as safety and health conditions of migrant workers employed under the work permit system. [53; 54; 55; 56]

Market segmentation

(Im)migrants are clearly more occupied in certain sectors: on the one hand for high-skilled information technology and professional jobs, on the other hand for the "three D-jobs": dirty, dangerous and demanding [51]. [127] points out that, in addition to labour shortages other factors help to explain the segregation of migrants in less rewarding jobs and sectors, including language (see below) and legal barriers to skilled occupations along with more or less subtle forms of discrimination.

For the "three D-jobs" most common sectors are agriculture and horticulture, construction, health care, households, transport and food sector. Regarding the presence of immigrants in agriculture, [127] stresses that as official statistics refer essentially to legal permanent migration, temporary and undeclared migration flows are not taken into account although these may be particularly relevant in agriculture. Such jobs represent a more easily accessible option for migrant workers, given that natives are often unwilling to accept them. Therefore, there are strong reasons to believe that the actual contribution of migrant workers to the primary sector is higher than the one suggested by official statistics.



Often the work is characterized by high work uncertainty, poor working conditions, part time jobs and low wages [57; 58]. As pointed out by [127], the segregation of migrants into unskilled jobs in the secondary and tertiary sectors brings some negative consequences for them in terms of lower wages, higher occupational instability, more risks of accidents at work and more frequent access to unhealthy occupations. [129] argues that migrants are more likely to be employed in sectors or occupations where there are health and safety concerns and that their status as new workers may place them at added risk due to their relatively short periods of work in the UK and their limited knowledge of the UK's health and safety system.

Studies of the ILO [51] showed that more than one third of the vacancies for semi-skilled jobs were closed to young, male applicants of migrant or ethnic minority origin. This was especially the case in the services sector and in small and medium-sized enterprises. This may well lead to over-qualification of migrant workers, an issue raised by [127 and 128], arguing that the migrant population often comprises individuals with a relatively high level of education who are often recruited into unskilled jobs. As shown by the OECD table below (Table 5), the share of people who are overqualified for their jobs is higher among the foreign-born population than the native one. Therefore, migrant workers benefit from lower returns to education than nationals do.

Table 5.- Over-qualification rates of native and foreign-born population, 2004 (%)

	Native-born	Foreign-born
Austria	10.3	21.1
Belgium	15.6	21.6
Czech Republic	5.2	10
Germany	11.4	20.3
Denmark	10.4	18.6
Greece	9	39.3
Spain	24.2	42.9
Finland	14.3	19.2
France	11.2	15.5
Hungary	6.3	9.7
Ireland	15.7	23.8
Italy	6.4	23.5
Luxembourg	3.4	9.1
Norway	8.4	20.3
Portugal	7.9	16.8
Sweden	6.5	16.1
UK	15.3	17.8

Note: No data for BG, CY, EE, LT, LV, MT, NL, PL, RO, SI and SK.

Source: OECD, 2006



The phenomenon of market segmentation of migrant workers is Europe wide. For example, the analysis of transformational processes in Poland, Slovakia, the Czech Republic and Hungary points to the phenomenon of market segmentation which resulted in the demand for foreign workforce in two market segments: the specialist and the less attractive secondary one. [59]

The Special report of the Ukrainian Parliament Commissioner for Human Rights [60] describes the situation of Ukrainian workers in some countries, such as Poland, the Czech Republic and Hungary. The report emphasises the risks for health and life stating that Ukrainian workers often suffer from violence and are victims of criminal groups. Their semi-legal status, lack of knowledge of law and poor language skills lead to a low position in the social and professional ladder. As pointed out above on over-qualification, even though many of them have a higher education, they are engaged in harvesting fruits and vegetables, on construction sites and in private households.

Language skills

In the literature on migrants and unemployment or the labour situation in general, language is often considered as a barrier or a difficulty for improving safety in the workplace. A study in Luxemburg [61] gives interesting information on this issue.

Luxembourg has three official languages: Luxembourgian, French and German. Almost all Luxembourgish understand, speak and write the three languages. Foreigners living in the country speak mostly French, followed by English, German and Luxembourgian. At first sight, Luxembourgian is the dominant language on the work floor. There are however structural differences according to different segments of the labour market. In the public sector 81% of the employees use Luxembourgian, while in the private sector French and Luxembourgian are spoken in the same amount (40%). English, Portuguese and German are the first language for 1 out of 20 workers in this sector. There are also differences according to nationality. Luxembourgish use mostly Luxembourgian, while foreigners stick to French, Luxembourgian, English, Portuguese, German and Italian. This complex language situation has its consequences for the work processes as such and for safety instructions and training.

The Nordic studies [62; 63] and a report from the UK [64] also show that the appropriate education, language skills and contacts to native population help migrants to get work. Language skills are an important factor in many issues related to the way migrants are viewed at the workplace. Often it is expected that migrant workers can speak the local language well before they can be appreciated equally. However, in the workplaces where people are used to working with colleagues from other countries language skills are not an issue anymore. [61] A Finnish study shows that the importance of language skills is viewed differently among migrants than among native workers: migrant workers believe that their language skills do not affect their work as much as their native co-workers think [63].



Summary

Studies give several explanations for the poor and/or precarious position of the migrant workers on the labour market:

- shortages of local/national labour supply for certain occupations.
- non-Western migrants occupy more low skilled and flexible jobs
- undocumented workforce occupies jobs that require low skills
- poor language skills
- low education
- poor knowledge of the labour market
- less efficient strategies than the native workers to find a job
- difficulties to validate the original qualifications (e.g. university degrees)

It is clear that the life and work situation of people recently arrived to the country is quite different from those who have been born or lived there for a long time. Also the migration context (family reunion, asylum, refugee, undocumented person) will have its influence on the access to the labour market. When a permanent residence is allowed the diversity of jobs will increase but working conditions, in terms of job quality, content or flexibility, do not necessarily improve. The traditional way for migrants to get a job is through temporary work agencies, from where they get monotonous, physically tough jobs with very irregular working hours [64, 65]. As stressed by [130], the precarious employment conditions that migrant workers endure along with their language barriers have made them second class citizens who take up the most dangerous tasks and are exposed to higher risks. Partial data available confirm that migrant workers do not enjoy minimum protection given to all workers in the EU by the Framework Directive.

3.2 Working conditions

Working conditions and features of work

Studies on the working conditions of migrant workers have been carried out in several countries. The relationship between working conditions and health is, however, analysed very seldom.

One general remark to be made when analysing the working conditions of migrant workers is the influence of the sector and occupation that was pointed out in the previous section. This means that, to a certain extent, some of the disadvantageous conditions that migrant workers face, and that are presented in this section, may be explained by the sectors and occupations where they are employed and not only for the fact of being migrants. However, there is evidence that even when taking the sector and occupation factors into account, migrant workers are still discriminated against.



Starting with salaries, many studies show that wages are significantly lower for migrants than natives even when taking into account factors as occupation, education, industry and experience. In the UK, for example, it is reported that immigrant nurses often find that they get significantly lower pay and grades than expected (or promised by their agency) and they end up working as care assistants or cleaners [50]. The ILO report [51] also confirms that wages of migrants are lower than those of native workers, which might be partly due to lower levels of education. Irrespectively of the point raised above on over-qualification, among migrants, 35% of the population between 18-24 years old have lower secondary education and are not in further education and training, while among EU nationals this share is 17%.

However, for wages there might be a dividing line between 'white and non-white' immigrants. A report from the UK points out that while workers from most white immigrant communities have on average higher wages than UK-born whites with the same characteristics, immigrants from all ethnic minority communities have lower wages [52].

Several studies show that working arrangements differ between migrants and native workers. For example, in a German study [67] it was noticed that Turks accepted more often than Germans to do shift work, weekend work, piecework, work at the assembly line and overtime work. This finding is supported by [131], pointing out that migrant workers often work long hours, unsocial shifts and are less likely to have holidays or sick leaves. It is also reported that migrant workers do heavier, more monotonous and more dangerous work, at a higher work pace and that they work more often under their qualification [68]. Non-Western migrants do more often physically demanding jobs than Western people. [129] points out that many of the workers interviewed believed that they were often allocated to the worst shifts, were denied concessions that were available to local workers and had less favourable terms and conditions.

A French study [69] shows that immigrant workers are more and longer exposed to serious occupational risks due to the nature of their work and employment status (interim, part time). The insufficient knowledge of the language, fear of losing their job, lack of training, inexperience and lack of knowledge about their legal rights are factors that contribute to this situation. In line with all these findings, [127] mentions that migrant workers report higher shares than locals of temporary work, lower wages (as mentioned above) and lower training and career advancement options, even though there are limited data in this respect. [129] too mentions little training (also on H&S issues), widespread denial of sick pay and long working hours. Regarding gender, it highlights that women are more likely to report that they have not been given any induction training. They are also more likely to believe that their health, both physical and mental, is being compromised by the work they do and they are more likely to say that they have experienced discrimination at work.

In a Dutch study [70] migrant workers named OSH issues as the most negative aspects in their working conditions: radioactive and dangerous substances, noise, temperature, no security measures and isolated work. Working conditions were described as dirty, demanding and monotonous, with high work pressure and working below their qualifications.



According to the Spanish working conditions survey 2005 [71], which classified workers into five groups in terms of their perception of their working conditions according to 14 factors (such as work pace, control, lack or difficulties of communication, physical load, noise, exposure to chemical products, precarious employment), the group that had the worst perception of their working conditions was the one with the highest proportion of immigrant workers.

In Sweden, migrant workers experienced physical load in their work more often than native workers. Migrants also perceived their work as monotonous more often than natives and had less frequent opportunities to learn new things than their native counterparts. Interestingly, the study also covered second generation migrants, whose experiences did not differ from those of the natives. [72]

Finnish studies too show that migrant and immigrant workers experience their work as monotonous more often than native workers [43; 63]. In a study by Statistics Finland [43] the working conditions of four migrant groups were analysed. According to the study, 35% of Russians, 34% of Vietnamese, 29% of Estonians, but only 9% of Somalis and 17% of Finns perceived their work as monotonous. (Im)migrant workers felt their working tasks as physically demanding only somewhat more often than Finnish workers: 45% of Estonians, 41% of Russians, 40% of Somalis, 46% of Vietnamese and 35% of Finns. The Vietnamese experienced their working tasks mentally demanding clearly less often (24%) than other groups (approximately 50%).

Even though migrant workers reported more often than Finnish workers that their work is not autonomous or interesting, they were satisfied with the contents of their work equally often. Haste, low appreciation, uncomfortable working hours, unclear distribution of working tasks and interpersonal conflicts at work troubled (im)migrant workers less than Finnish workers. [63]

Information on working conditions of migrant workers in some of EU countries, like Cyprus, is rare. Nevertheless, some reports claim working conditions to be poor among migrant workers: The Council of Europe's European Commission against Racism and Intolerance (ECRI⁴) published a report covering the situation in Cyprus in December 2000. The Commission reports that although Cyprus has taken positive steps to combat xenophobia, the rights of immigrant workers are often not respected and the remedies available are not always effective. There have been reports of migrant workers being forced to work extremely long hours, being assigned to duties not provided for by the contract or being dismissed in an unjustified manner. Moreover, cases of sexual harassment and inhuman treatment have been reported among migrant women [73; 74; 75]. It is also added that although a certain minimum wage is granted for migrant workers, a decent standard of living cannot be provided by that amount of money [76; 75].

⁴ http://www.coe.int/T/e/human_rights/ecri/1-ECRI/



Occupational accidents

There are several studies in different European countries, and outside Europe, on occupational accidents among migrant workers. The findings are somewhat contradictory.

For example, in France, some of the older studies mention a higher level of accidents at work during the first two years after arriving in the country. This seems to be mostly linked with the period of familiarisation with the French language. Another hypothesis is that migrant workers take excessive risks to show their "zeal" to work, which can also lead to underreporting of occupational accidents and diseases and an underestimation of their consequences. A higher accident rate was also confirmed by a study of Gliber [69] stating that migrant workers are disproportionately represented in French industrial accident rates: more than 30% of industrial accidents leading to permanent disability happened to non-French workers.

Bearing in mind the limited availability of reliable statistics on OSH for migrant workers in a majority of countries, existing data suggest a higher accident rate for migrant workers. In Slovenia, the data of accidents at work among foreigners are divided into three groups: EU nationals, other than EU nationals and citizens unknown. For example, there were 25 accidents at work among EU nationals, 422 among other than EU nationals and 51 among the foreign workers of unknown citizenships in Slovenia [77]. [127] adds that in Austria some 30% of migrant workers felt particularly affected by accidents and injury risks in the workplace, compared with only 13% of Austrians, while in Italy, in the total active population there is one accident at work for every 23 people, but this proportion increases to one out of 16 for non-nationals. In Italy, [132] reports that fatalities at work have increased among immigrants until 2004 as opposed to the reduction witnessed among Italian nationals. Meanwhile, in Ireland the fatality rate per 100,000 workers is 5.6 among non-nationals, compared with 3.0 for Irish workers, with a particularly high risk in the construction sector.

Also in Spain information regarding the health outcomes for migrants is available for accidents at work. The data [78] include those accidents at work which cause more than 1 day's absence from work (the day of the accident is not included). Also, only workers who are included in the national system of social security are taken into account. Accidents on the way from home to work are not included but any other accident occurred during the working hours is included. In 2004, people from other nationalities than Spanish suffered 6.2% of all accidents at work and 7% of fatal accidents. The percentage of foreign workers was, on average, 6.2% which means that they had slightly more fatal or serious accidents than native workers. INSHT (Spanish National Institute for Safety and Hygiene at Work) data for 2005 [133] reveal that migrant workers suffered 8.4% of all accidents in Spain and 9.9% of fatal accidents, again above their share in the Spanish working population (7.6%). By nationalities -excluding Spanish- people from Morocco suffered 23% of all migrants' accidents in 2005. The sector breakdown of accidents reflects that construction, which employs 22% of migrant workers in Spain, concentrates more than one third (37%) of all migrants' accidents.



2004 data for Spain reveal that the percentage of accidents suffered by temporary contracted immigrants was 73% compared to the overall figure of 53%. Probably due to the high percentage of temporary contracts, the working time in the company prior to the accident was shorter among immigrants than among all workers. More than 50% had been working less than 4 months before the accident. Concerning the occupational distribution of accidents, immigrants are often working on poor qualified tasks: 31% of immigrants' accidents happened to non-qualified workers while the overall percentage was 20% [78]. In line with this, [127] argues that immigrants take up the most hazardous and unhealthy of these unskilled jobs and that data on exposure to risks and accidents at work in relation to migrants are of some concern. [128] states that those with low language skills and vulnerable employment/residency status are at greater risk.

Germany also reports higher rates of occupational accidents among immigrant than among native workers. Immigrants working in the metal processing industry and in the sector of waste treatment, waste materials and cleaning were overrepresented in accident rates [79]. Another study [80] also confirms that twice as many occupational accidents happen to foreign workers than to German ones.

However, in Sweden and Finland the results concerning occupational accidents are somewhat different. For example, a Swedish study at an automobile and truck factory [81] found no support for the view that immigrants are at greater risk than nationals for occupational accidents, while [127] mentions a Swedish study indicating that the amount of work-related accidents is similar among foreigners and nationals. Another Swedish study, however, argues that foreigners are more exposed to strenuous working postures than nationals but that migrant workers experience occupational stress and psychological pressure as less of a problem than native workers. Also preliminary results [82] among bus drivers in Finland show that foreign-born bus drivers were slightly but not significantly more often involved in occupational accidents than Finnish-born drivers. Because of many accident-repeaters among Finnish-born drivers, the accident frequency was higher among Finnish-born drivers than among their foreign-born counterparts.

Occupational accidents among migrants have also been studied in the United States. A study [83] on the deaths of Mexican workers in the United States revealed that Mexicans are 80% more likely than US-born workers to die due to workplace accidents. Moreover the study indicated that the deaths are almost always preventable. Also in the US, [134] argues that immigrant workers are at a higher risk of being killed or injured at work than native workers. This is linked to their likelihood of being employed in high-risk occupations, in the unregulated and informal economy and their fear of reporting workplace injuries. The study mentions that even though foreign-born employment in the US increased by 22% between 1996 and 2000, the share of fatal occupational accidents for this group rose by 43%. Nearly one in four fatally injured foreign-born workers was employed in the construction sector.

Regarding the perception of occupational risks, a research project [84] in the area of Turin in Italy focused on non-EU workers legally employed on large construction worksites and showed that this group did not have a different (lower) perception of risks. However, a positive correlation was found between their attitude towards safety and the role of the



worksite management, the company culture and their legal status in terms of holding a work and residence permit.

As it has been mentioned above, it was found that immigrant workers in precarious personal situations tend to be employed for the heavier or "dirtier" jobs (those jobs Italians do not want to do), especially on smaller construction worksites. Sometimes employers operate on the borderline of legality and take advantage of foreign workers not being informed about labour laws and labour risks. [84] The examination of literature, statistical data and information acquired in the course of the research (questionnaires, focus groups involving immigrants, technical experts, those in charge of worksites, etc.) emphasised the role of information, training and good practices in promoting the safety of immigrant workers and improving their capacity to assess risks. These aspects are particularly important in creating a safety climate and promoting the responsible use of personal protection equipment. [84]

Also in construction, and for Denmark, [135] argues that migrant workers are less aware of existing risks at the workplace and that, in general, they are more concerned about wages than OSH. Some UK studies [128, 131] stress the lack of understandable training and protective clothing and argue that risk assessments bearing in mind migrant workers (cultural differences, language barriers) are hardly done. Underreporting of accidents is also highlighted as a failure by employers and also the unawareness by MW of the requirement to report them. In any case, increased risks are a direct consequence of the lack of adequate enforcement of existing regulations. [129] suggests that migrant workers are not fully aware of what their employer is obliged to do in order to protect their health at work.

Regarding legal requirement, as it was raised by [131], it is essential to bear in mind the legal framework regulating OSH in the sector and the situation of migrants. For instance, in the same conference it was mentioned that migrant workers working in private households in Cyprus (more than 30% of all migrant workers in the country, the biggest sector) are excluded from the Provisions of the Law for Health and Safety 1996-2003.

Summary

Studies suggest that

- working conditions of migrant workers are often more unfavourable than those of native workers: work is more often physically demanding and monotonous, working hours are longer, wages lower and migrant workers tend to do more often shift work than native workers.
- results on occupational accidents are somewhat contradictory; many studies suggest that immigrants' jobs entail higher risks for accidents and that migrants are more often involved in occupational accidents. In those studies where migrants and natives worked in the same jobs and in the same organisations, no differences in occupational accidents were found.



3.3. Social interaction and workplace bullying

Interaction between migrants and native workers at work

In Belgium, a study [85] has been made on the interaction between migrants and locals at the workplace, showing that interaction depends on the kind of professional relationship among workers. Inclusion and integration occur when workers are very dependent from each other to do their job, when they work under the direct control of their nearest superior and when cultural differences are not linked with relevant professional competence and specialisation.

As opposed to this, when certain migrant groups are engaged for specific jobs, separation will show up among the groups. This does not necessarily have to lead to conflicts but rather to "safe" areas, where workers of the same culture feel at ease. In temporary work relationships, where a high degree of autonomy and cultural differences have no contributions to the job, there will be marginalisation and less effort will be undertaken to get into contact with each other. [85]

A specific relationship exists when workers have to work in a team, are dependent from each other for their safety at work and perform their work with a customer and not in the organization. Newcomers will not easily be accepted and they will find it difficult to wholly adapt to the local culture. They will only be accepted in the extent to which they share this local culture. [85]

A Dutch study [70] showed that as far as working at a high pace and relationship with the nearest superior is concerned, there are no big differences between the two groups. Migrants however do not consider the work climate as good as their Dutch colleagues do.

A Finnish study [63] argues that the attitudes of Finnish workers to migrant workers varied across different work units studied. In some work units migrant workers experienced that they were part of the team while in others they were neither greeted nor spoken to and would only be noticed when making mistakes. The experiences also varied among the different migrant groups studied: 45% of Vietnamese felt appreciated whereas only 16% of Russian had the same experience. However, the study shows that the attitudes of Finnish workers towards migrant workers' know-how, conscientiousness and industriousness at work have become more positive during the last years.

The Swedish study [86] showed that the social climate and relationships at the workplace could give rise to special difficulties for immigrant workers, while problems related to physical environmental factors seemed to be less acute.



Bullying at work

In a Finnish study [43], 20% of Finns and 13% of immigrants felt that there were tension and conflicts between Finnish and immigrant workers. 10% of migrants and 1% of Finns reported that Finns behave themselves badly against immigrants. 5% of immigrants and 2% of Finns felt that workmates bully migrants. Immigrants (7%) more often than Finns (1%) reported also that superiors bully immigrants. 11% of immigrants but only 1% of the Finns thought that immigrants were bullied because of their ethnic background.

A study [87] of the Dutch National Office for the Fight Against Discrimination showed that the victims being bullied and not the offenders suffer the negative consequences of filing a complaint. Most respondents in the study lost their job and went through psychological and financial problems. Some other studies from the Netherlands [70; 88] also deal with discrimination. Migrant workers characterized their professional relationships in terms of discrimination, bullying and not accepting the differences in norms and values. In the health care sector, migrant workers felt themselves significantly more often discriminated by managers and colleagues than their Dutch colleagues. According to occupational physicians working with migrant workers, they report communication problems, discrimination and bullying against them (migrant workers) [88].

Regarding the Netherlands also, [127] argues that migrants are more frequently exposed to sexual harassment at the workplace, not only by supervisors or colleagues but also by customers or patients. They feel intimidated by their supervisors or colleagues more frequently than their national counterparts and are subject to physical violence from these sources more often.

In Ireland, [136] analyses discrimination of non-EU immigrants in a variety of fields, including the workplace, and reports that almost one third (32%) of surveyed people holding work permits had suffered from insults or other forms of harassment at work while 21% of those entitled to work reported discrimination in access to employment.

In the UK, studies have raised the question about racial bullying; that is, bullying because of ethnicity. In one of these studies, employees from ethnic minority groups, the biggest of whom were African, Caribbean, Asian (not including Chinese) and Indian, perceived themselves being bullied more often than native employees. In all, 25% of ethnic minority workers, compared with 12% of natives, perceived themselves bullied. Most of the ethnic minority employees (83%) thought that people in their organisation were treated unfairly because of their race, with 57% of their native colleagues also suggesting this to be the case. [89] In another study, those of Asian descent were more likely to be bullied than those considering themselves to be white [90].

The risk of bullying and harassment seems to be high particularly in the health care sector. Approximately 40% of the ethnic minority nurses in the UK had been subject to racial harassment by work colleagues, compared to the overall rate of 10% for all nurses. Over 60% of ethnic minority nurses had been subject to racial abuse by patients compared to 20% of nurses generally. [91]



Employees from Asian or Afro-Caribbean origin report suffering from personally insulting behaviours relatively often [90]. When line managers bully white respondents, the most prominent types of negative behaviour relate to the work or job role, while personalised bullying comes second. This order was reversed for ethnic employees with personalised bullying being most prominent. [92]

Social marginalization

Many sources confirm the negative side effects associated with migration, such as the detrimental impact on family ties and the social marginalisation of the migrant, or even "double social marginalisation" effect when people belong neither to the community of origin nor to the community where they are temporarily staying, earning money ("people on the swing") [59].

Research carried out on short-term economic migrants in Central and Eastern Europe revealed the following risks, pointed out by workers themselves: serious limitations in private life, spare time and isolation. For example migrants who work in child- or elderly-care often have no free day off in a given week. They often spend the whole day in the house of the employer without any possibilities to meet anyone. Meeting their own family has an important emotional value and often short-term migrants move back to their home country, particularly those with small children. Migrants also think that migration can lead to the break up of the marriage. [59]

Summary

Studies suggest that

- the social climate and relations at the workplace could give rise to special difficulties for migrant workers
- the experience of workplace bullying and racial abuse because of ethnicity is more common among non-white and migrant workers than among whites or native workers
- there may be negative side effects, like limitations in private life or social isolation, associated with migration

3.4. Health, wellbeing and job satisfaction

Health

Work and working conditions are important for migrants regarding their integration to the new country and culture. Studies on working conditions and health of the (im)migrant workers have been carried out, but already in the SALTSA-project "Migration and work related health in 2000", it was noticed that the combination of work-related health and



migration is rarely encountered. Still today, health of the migrant is often an own specific theme in the studies, without the link to work and working conditions.

For example, in one study [93] it was found that most of the non-European immigrants to Milan (84.3%) were symptom-free before leaving the country of origin and that allergic and/or asthmatic symptoms appeared after their arrival in Italy. Lifestyle and environmental factors in a western industrialised city favour the development of allergy and asthma symptoms among non-European immigrants. However, the connection to working conditions was not studied.

[127] indicates that in Austria 37% of migrant workers feel affected by poor health conditions at work, compared with only 16% of Austrian workers. [137] points out that several studies find greater levels of musculoskeletal disorders (MSD) among immigrant workers, something probably linked with the type of low status jobs they are likely to be involved in, but there is no convincing evidence on this (see below).

Weiss [94] found that migrant workers going to Switzerland were in the best of health but that after 20 to 30 years in unfavourable working conditions they feel drained and age prematurely. They are even referred as "exhausted migrant" [94; 95].

Several researchers have undertaken investigations about occupational diseases and the health situation in general of (im)migrant workers in Germany. For example, Erdogan and Schneider [96] investigated 2,200 Turkish employees whose occupational diseases were diagnosed between 1995 and 1997. According to the study, Turkish people were mostly working at workplaces with high health risks and physically demanding tasks [67]. The occupational disease which affected Turkish male workers most was noise induced hearing loss (54.2% vs. 39.2% of the Germans), followed by silicosis (18.3% vs. 14.2%), tendosynovitis (5.8% vs. 2.3%), asbestosis (5.6% vs. 10.4%), skin diseases (5.0% vs. 5.4%) as well as "others" (16.9% vs. 30.8%). Furthermore, the process to approve an occupational disease took more time for Turkish than for German workers, which may also be due to linguistic problems. However, the amount of approved damages was comparable in both groups.

In another study [97] health data from the Technical Inspection Agency (TÜV) were used, showing that hearing problems were the most frequent disease category and that these diseases were more common among foreign workers than among Germans (17.4% vs. 14.2%). It was also found that foreign workers suffer from MSDs more than Germans (14.4% vs. 13.0%) and that the next diseases in incidence rates, alimentary and metabolic diseases as well as eye problems, both showed higher percentages for Germans than for foreign workers: 12.4% vs. 15.5% and 11.5% vs. 19.9%, respectively. Cardiovascular diseases are the main cause for mortality in Germany, suffered by 9.7% of the foreign workers but 13.2% of Germans. Comparable high percentages of diseases of the digestion organs and the respiration system occurred among foreign workers and among Germans (about 4 to 5%).

The authors argue that the higher percentages of diseases of the ears and the musculoskeletal system among foreign workers may be explained by their low or no



vocational qualifications and by the fact that migrants do not easily get intellectually demanding work but mostly manual work only. As a result of their lack of vocational training, foreign workers are often forced to carry out physically demanding tasks at very noisy workplaces. Furthermore, the authors add that the risk of health problems also lies in the fear of losing one's own identity by adapting to the foreign culture, fear of unemployment, often poor social conditions (separation of their family, racism, and discrimination) and other cultural backgrounds. [97]

Uske, Heveling-Fischell and Mathejczyk [79] used data from the companies' health insurance fund and revealed an almost two times higher risk of MSDs for (im)migrant workers than for Germans. Especially in the construction industry, MSDs were more common among foreign than among German workers. However, concerning MSDs, [138], in their literature survey of work-related health and safety issues affecting minority groups conclude that research findings are mixed, with a few studies identifying a significant influence of ethnicity on MSDs. They add that some evidence, mostly from the US, exists in ethnic variations in respiratory diseases and cancer in workers exposed to dust and other materials after controlling for gender, age and smoking differences. As reported above by [97], they find that race/ethnicity is linked with hearing problems, while there is conflicting evidence on heart disease/circulatory system diseases.

Swedish studies [98; 86] show that immigrants, when employed, seem less affected by impaired working conditions than native Swedes. Swedes seemed to display a number of psychiatric ill-health factors related to working conditions. Among Swedes, frequent use of 'hypnotics, frequent insomnia, use of antidepressants and a high degree of melancholy' were related to shift work, dissatisfaction with current work and management and a low degree of influence on the situation at work. These associations were not seen in immigrants apart from the risk of frequent insomnia, which, among immigrants, was connected with shift-work. In this sense, immigrants reported higher shift work and less influence on the situation at work than Swedes. [98]

A proper occupational health care, with easy access, is an important factor for the health of migrant workers. Some studies have been carried out on the use of OH care among migrant workers. An Austrian report [58] says that lacking language skills (aggravated by unawareness of the Austrian health care system) are accountable for the fact that migrants tend to make use of health services at a very late stage - something that can contribute to the genesis of chronic diseases.

The Spanish working conditions survey 2005 [71] states that foreign workers visited the medical doctor with work related health problems more often than Spanish workers (20% vs. 13.3%). The main reasons to go to the doctor were very homogeneous between immigrants and nationals (neck pain, backache, upper limb pains and stress) but a further analysis showed that immigrants went to the doctor due to lower limb pain, depression and chronic fatigue more often than nationals.

In the Netherlands the Labour Inspection set up a study [99] in 2001 on the legally required OSH-services in companies. It seems that the bigger the company, the more actively it takes measures for migrant workers, such as religious holiday possibilities,



longer holidays for family visits, different types of food in the canteen and a prayer hall. One in eight companies offered training on other cultures to the managers.

It also became clear that migrant workers are hardly aware of the existence of OSH-services. One factor behind this may be that migrant workers, especially Asians and Africans, are not used to OSH-services as they rarely exist in their home countries. It also seems that migrants do not often take part in the periodical medical check ups because they fear they might be declared unfit. The barriers to go to the occupational doctor are thus very high. [99]

The study also revealed that occupational physicians do not have enough knowledge on the specific risks of migrants because medical surveys are not carried out in an appropriate way. On the other side, low-qualified workers felt that occupational physicians do not treat them respectfully, for example, they do not get sufficient time to tell their story or feel that complaints are not taken seriously. Highly-qualified workers did not experience these problems and they had more confidence in occupational doctors. [99]

Absenteeism

The Dutch study [70] showed that absenteeism of migrant workers was higher than that of locals and that Dutch workers had shorter periods of absenteeism than migrants. Certain hypotheses have been formulated to explain this, such as the extra stress caused by the adaptation to Western norms regarding time behaviour, precarious jobs, different interpretation of authority (e.g. only go back to work if the doctor explicitly says so) and difficulties in reading work and safety instructions, among others.

The study [70] also revealed that coming back to work is not always easy. Managers often do not seem to be convinced that Turkish or Moroccan employees are really ill, and are not very interested in their (worker's) return. The ARBO-services (services responsible for the implementation of regulation on occupational safety and health) limit their tasks to registering and controlling but undertake little to stimulate the return of employees to work. Another study [100] carried out in Belgium also showed that in case of absence and sick leave it takes longer for migrants to return to work than it does for Belgians. Also the number of migrant men in early retirement or on temporary or permanent invalidity leave is higher than among native workers.

A Swedish study [101] revealed that during 1981-1989 migrant workers, especially female migrant workers, had more sickness absence days than native ones. However, when taking into account the number of sickness absence periods no difference was noted. In fact, in some of the years studied, native workers had a higher number of sick leave periods than migrant workers. Sickness absence varied among migrant groups, the highest corresponding to those coming from Southern Europe: Italy, Greece, the former Yugoslavia and Turkey.

The study revealed that the reasons behind absenteeism varied among migrant and native workers. Single women, in both groups, had more sickness absence days than those women who were married or lived together with a spouse. Among men no such



difference was found. Native workers who had children had more sickness absence days than those who had no children. Interestingly, the situation was opposite among migrant workers. Part-time work diminished absenteeism among native women, but increased it among migrant women. Poor working conditions increased absenteeism in both groups. However, migrant men handled the situation better than native men. The conclusion was that the variables used could only explain weakly the differences between native and migrant workers. For example the influence of time lived in Sweden was not known. [101]

Stress, burnout and job satisfaction

Job satisfaction and feelings of work-related stress among (im)migrants have been studied in some countries.

In the UK, [53] argues that a significant association between work related stress and ethnicity exists. Racial discrimination, particularly in combination with gender and ethnicity, was identified as having a strong influence on work stress. As pointed out by [139], Black Caribbean women who had suffered racial discrimination were most likely to report high work stress. Certain work characteristics were also associated with work stress, such as a higher effort-reward imbalance, greater job demand and lower control over work. In line with this, [129] points out that many of the migrant workers interviewed complained of stress at work which they associated with overwork, poor treatment at work, concerns about finances and general fatigue and tiredness. The report assesses discrimination by race, nationality, gender and interaction with supervisors and colleagues. To different extents, results suggest discrimination at work.

A Swedish study [102] found that the rates of burnout among immigrants were almost twice as high as those among Swedes: 9.9% and 5.2 %, respectively. Working conditions, such as excessively high job demands and mobbing (bullying), were related to burnout. However, the specific reasons behind migrant workers' burnout in particular were not studied separately.

The overall stressful life situation of migrants seems to be an important factor. Even though migrants seem to be more often affected by somatoform disorders than natives, Hoffmann-Richter [103] states that this cannot be attributed to the migration process itself but rather to the fact that migrants are more likely to be exposed to acute stress situations in life.

A Finnish study [63] showed that there was no difference in job satisfaction between migrant and Finnish workers. Of the stress reactions, irritability and restlessness were more common among Finns than migrants, while feelings of loneliness were more common among migrants than Finns. In nervousness or fatigue no difference was found. Similarly, in psychosomatic reactions such as difficulties in falling asleep, wakening up at nights or having headaches, stomach cramps or heartburn or dizziness, no differences were found between native and migrant workers.

In a Spanish study [104], the level of job satisfaction of immigrants working in the construction sector was 6.6 (Maximum value: 10), while in the hotels and restaurants



sector it reached 6.7. Immigrants were more satisfied with their bosses than native workers. In both sectors a majority of immigrant workers considered that their working conditions were similar to those of their Spanish colleagues in all aspects. Working hours, dangerous tasks and the use of dangerous products were issues on which greater equality was perceived. On the other hand, social benefits and the options for promotion were aspects that were perceived with less equality. Satisfaction regarding the salary was lower.

Finally, [138] identify several US studies in their literature review indicating that ethnic minorities endure a more negative work environment in terms of criticism and sexual harassment that may lead to stress.

Summary

Studies on the health consequences of work environment and working conditions on migrant workers are very few.

In studies concerning the health of migrant workers

- it has been suggested that immigrants are less affected by impaired working conditions than native workers
- particularly hearing problems and musculoskeletal problems have been found to be more common among migrant workers than among native workers
- it has been shown that migrant workers have more sickness absence days than native workers, but when looking at the periods of sickness absence, the difference disappears
- higher rates of stress and burnout have been reported by non-white or migrant workers than by white or native workers
- results on visiting occupational health care seem to be contradictory in different countries

A comparison of work related health problems between migrant and native workers is often difficult as migrant workers work more often than native workers in sectors, occupations and jobs where working conditions are more strenuous and more often physically stressful.

3.5 OSH of undeclared workers

OSH issues of undeclared workers is an own specific subject, which is not easily approached by studies. For example, accidents that happen in undeclared working situations and false employment status ("false independent workers") are not included in official statistics, meaning that the accident rate is probably even higher than estimated. As raised by [140], this lack of reporting is probably aggravated by the mostly temporary/seasonal nature of this type of employment. Even though there are no data on



working conditions/accidents of illegal workers, incidental info suggests that they are considerably worse off as a result of a lack of supervision.

[129] argues that the poor working conditions of migrant workers are even worse for illegal workers due to fears of dismissal and deportation. It can be expected that those migrant workers with uncertain legal status are unlikely to complain and easy to exploit. It adds that those who were undocumented had a more negative assessment of their work situation than did documented workers and were much more likely to be working below their qualifications. Turning to issues of health and safety, undocumented workers were more likely to rate the job they were doing as carrying major risks and assess the health and safety procedures at their work as unsatisfactory.

In 2004, the Dutch Ondersteunings Komitee Illegale Arbeiders (OKIA) [105] published a book on the social and working conditions of undocumented workers employed in greenhouses in The Hague during two time periods: 1990-1991 and 2001-2002. Two key developments that took place over the 1990s were the increased pressure on farmers to produce at lower costs on the one hand, and the changes in labour and immigration legislation on the other. The Linking Act, which was passed in 1998, stopped undocumented workers' access to formal working relations. This meant that although these workers were still employed, they were no longer registered and therefore ceased to have formal working relations as their employers no longer paid taxes and premiums. Also as of 1998, temporary employment agencies were no longer required to have a license, thus allowing anyone to start one. Thousands of temporary employment agencies were opened and competition amongst sub-contractors offering the cheapest workers at the shortest notice led to an increase in work pace and a downward pressure on wages.

Previously workers used to be hired by a farmer and work an undefined period of time with him/her. But farmers presently hire sub-contractors, who only hire workers who are readily available and quick and that can easily be dismissed because there is always someone else willing to take their place. Work pace has also increased, leading to a situation where workers are more likely to suffer from health complications due to the increased physical efforts. [105]

Other studies [106; 107; 108] also show that illegal immigrants in particular may be recruited, exploited and abused by unregistered agencies and employers, using false promises of good pay, conditions and housing. They may be forced to work extremely long hours, have low pay and substandard accommodation. Because of their precarious situation, people have no choice but to accept these jobs [65].

A comprehensive evaluation of migration in Eastern Europe is particularly complicated by the phenomena of "black economy" as, in general, a large part of foreign labour in Central Europe consists of irregular workers attracted by the black economy. [59]

A Polish study [109] on employment of foreigners in Polish households in 2001-2002 showed that the majority of foreigners employed in households are illegal workers. They are mainly citizens of Ukraine, Belarus and Russia. Illegal immigration is estimated to be several times greater than the number of people working on the basis of individual work



permits in Poland and its neighbouring countries. Illegal workers work mainly on positions that do not require high qualifications: simple jobs on construction sites, farm work, household duties, cleaning, elderly and childcare, etc. They often occupy the lowest market segment and have few rights, if any. These positions are regarded as unattractive by native workers. [110]

Some sources also point out the growing number of migrant sex workers, e.g. from Eastern Europe to Central Europe (Czech Republic, Hungary, Poland), that are threatened by HIV, violence, abuse and social exclusion [111].

Summary

The few studies carried out on OSH issues of undeclared workers suggest that

- undeclared workers are not easily approached by studies, and are likely to be underreported in occupational accidents statistics
- their working conditions are often very poor
- they may be exploited by their employers
- they may not be aware of their rights



4. EXAMPLES OF ACTIONS DIRECTED TO THE MIGRANTS AND MIGRANT WORKERS

The paragraphs below present short summaries of different preventive actions directed to migrants in general and migrant workers in particular. The examples are listed by country, but the list is not exhaustive.

EU-level

The European Agency for Safety and Health at Work has a specific website where it gathers OSH related information on migrant workers, including this literature study http://osha.europa.eu/priority_groups/migrant_workers

The European Foundation for the Improvement of Living and Working Conditions has published an overview of 25 Good Practices all over Europe for the prevention of racism on the work floor. <http://www.eurofound.eu.int/publications/htmlfiles/ef9751.htm>

Belgium

The Migration policy group states in its country report that Belgian authorities are undertaking initiatives to fight discrimination. The policy agreement of the federal government "A creative and supportive Belgium" (July 2003) aims to fight against the discrimination of migrants in the framework of employment.

The Flemish government agreed on a civic integration decree (28 February 2003): starting on 1 April 2004 all adult newcomers registering in a Flemish municipality are obliged to participate in an integration programme. This introductory programme consists of two parts: a training programme and one-to-one study path guidance. The training programme comprises a language course (Dutch), social guidance and career guidance

The Walloon Region has placed the responsibility of integration on the immigrant. In Wallonia, the reception programme includes improved co-ordination of French and literacy courses, the provision of new immigrants with relevant information for their socio-cultural integration, the setting-up of reception and information bureaus in certain municipal authorities and the co-ordination of the various participants involved in the integration process. It emphasises the importance of vocational integration through the adaptation of qualifications and the accreditation of professional competences, the simplification of procedures for obtaining work permits, access to public sector jobs and its plans to set up measures against discrimination in job recruitment.

ORCA, an organisation for undeclared workers, has published a guide [112] about the rights of undeclared workers. A considerable part of this publication is dedicated to health and safety at work. It points out clearly for undeclared workers that they are entitled to



social protection in case of occupational accidents. The guide gives further information on what OSH implies, how the worker can get information and also clear and concrete recommendations for working safely. <http://www.orcasite.be>

Finland

ETMO (Multiculturalism as a resource in a working community) [62] was a two-year project in which 16 workplaces from public and private sector took part. The goal of the project was to study and develop action models to help workplaces to develop their multinational work cultures. The project organised, among others, different kinds of seminars and training sessions for their contact persons in the organisations. Some results showed that the attitudes of native workers towards their migrant colleagues improved [63]. <http://www.kio.fi/Resource.phx/project/project-etmo/english.htx>

There are lot of different kinds of projects and good practices addressed to migrant workers. In a recent report [113] over 100 projects aimed at migrants are reviewed. In many projects the aim has been to increase the readiness of migrants to get a job. Especially the MoniQ-project [114] is aimed at creating good practices to support employment of migrant workers.

Furthermore, the Occupational Health and Safety Inspectorate has recruited special inspectors to follow up the conditions of migrant workers and monitor the compliance of the Non-Discrimination Act, whose main aim is to safeguard equal treatment and avoid discrimination on the basis of a series of personal characteristics. http://mol.fi/mol/en/03_labourlegislation/02_equality/index.jsp

France

In 2006 the French government launched an action programme to fight discrimination and to promote equal opportunities. The main focus is on employment and work, training and fighting against discrimination.

Various websites deal with diversity in employment, providing information on the rights and duties of current and future employees, such as <http://www.diversite-emploi.com> and <http://emploi.france5.fr/tendances/actu/19139967-fr.php>.

Possible prevention measures mentioned in the report by Becker [115] are the creation of information centres for immigrants to inform them about their rights. Once immigrants arrive in France, they should be examined to see whether there are pre-existing medical hazards. Other necessary actions refer to language training and specific occupational training taking into account language needs.

During the last years France has introduced measures to promote French learning for those migrants who want to acquire French citizenship [116]. In 2004, the government implemented the residency and integration contract, which includes medical examination and language training. This individual contract is aimed at highlighting the mutual responsibilities of the newcomer and the receiving nation.



Recent laws requiring the employer to attain real results in the occupational health and safety of the company's workforce should stimulate the employer to establish an occupational health and safety training adapted to the specific needs of migrant workers.

Luxembourg

ASTI, the Association for Support to Migrant Workers, has set up a project, financed by the European Fund for Refugees, which is directed towards asylum seekers. According to the law, some asylum seekers are allowed to work. <http://www.asti.lu>

Netherlands

The Labour Ministry has published a guide [117] for those who have foreign workers as subordinates in the construction sector. The goal of the guide is to make sure that foreign workers get all the instructions and possibilities to work in a safe way.

On the site of ARBO platform (Platform for organisations working on OSH) obligations and recommendations are given for employers and employees in the field of OSH. The focus is on non discrimination practices. On the employee site it is stated, among others, that language should be taken into account while giving instruction or safety training: http://www.arbo.nl/zorgenwelzijn/overigenzorgenwelzijn/wettenenregels/Personele_inzetenaansprakelijkheid/allochtonen?curwerkgevernemer=werkgever

The Centre for Work and Income (CWI) gives tools for integration. Ethnic minorities looking for a job get an insight into the Dutch labour market. Target groups are the unemployed and employers. <http://www.cwinet.nl/nl/minderheden/index.asp>

The National Office for the Fight against Discrimination (LBR = Landelijk Bureau ter bestrijding van Rassendiscriminatie) interviewed young workers and employers on their experiences with each other and on possible solutions for the problems they encounter. Afterwards both parties were brought together in order to discuss the issues with each other, not against each other.

The refusal of migrant apprentices is a problem in the Netherlands. Therefore specific training has been developed for apprentices to cope with discrimination on the work floor. This project stems from the idea that not only managers should be informed on the problems linked with racism and discrimination, but also that awareness needs to be raised among potential victims in order to learn how to deal with it. <http://www.lbr.nl/>

Spain

In Spain there are many programmes and projects for the integration of immigrants [118]. Many of them are aimed at helping immigrants to integrate in society and particularly in the labour market as well as keeping them informed of their rights (both on social and labour issues). The content of the programmes includes language training activities,



occupational training and social and labour guidance, among others. Some programmes also include arbitration between employers and immigrant workers, which contributes to improving the work environment.

As an example of the preventive actions carried out by the OSH authorities, the information campaign (posters and leaflets) designed and distributed by the Instituto de Seguridad y Salud Laboral de Murcia (The Safety and Health Institute of Murcia) can be highlighted [119]. The materials have been translated into several languages (Spanish, Arab, French, English, Ukrainian) depending on the main nationality of the targeted workers and aimed at sectors where the percentage of immigrant workers is very high, such as agriculture and construction. Some of the topics included in the leaflets are rights and obligations on OSH matters, prevention of risk in agriculture and construction tasks, load handling, prevention of heat stroke, chemical safety labels, etc. This documentation has been distributed through employers and workers organisations, professional associations, agriculture associations, and it is available at the Safety and Health Institute of Murcia and on the internet at:

[http://www.carm.es/newweb2/servlet/integra.servlets.ControlPublico?IDCONTENIDO=3608&IDTIPO=100&RASTRO=c721\\$m3607](http://www.carm.es/newweb2/servlet/integra.servlets.ControlPublico?IDCONTENIDO=3608&IDTIPO=100&RASTRO=c721$m3607)

United Kingdom

Concern that migrant workers could be missing out crucial health and safety training because their employers are not providing safety material in any language other than English has prompted the Health and Safety (HSE) and the Trades Union Congress (TUC) to produce new safety information translated into 21 different languages.

"Your health, your safety: A guide for workers" [120] provides information about safety rights at work, the level of safety training that workers should expect from their employers and who they should complain to if they believe their safety being compromised by poor workplace practices. <http://hse.gov.uk/pubns/hse27.pdf>

"Working in the UK: Your rights at work" [121] is a leaflet written by TUC and it is for people going to work in the UK from the new EU Member States. It gives information about workers' legal rights. <http://www.tuc.org.uk/international/tuc-7982-f0.cfm>

Efforts to improve the safety of migrant workers are taken into action. An article [122] published in "Building" warns that building workers who do not understand English should not be employed on dangerous sites and that contractors should assess safety risks on critical activity tasks that rely on effective on-site communication.



5. CONCLUSIONS

5.1 General remarks

A literature study on migration and occupational safety and health faces many kinds of difficulties. The topic -migration, work and health -covers almost every kind of disorder, profession, occupation, branch, type of work and work situation as well as ethnic or national groups. Information about working conditions and work-related hazards of migrant workers is still missing to a large extent. There is available literature on migration, on health, on working conditions and occupational accidents, and some on the links between migration and health and between working conditions and health, but hardly any literature or studies exist which combine all these three aspects.

Apart from very few exceptions, no systematic and comprehensive studies on migration are being carried out in Central Europe. In this sense, no literature source directly addressing OSH in the context of migration has been found in Poland, the Czech Republic, Slovakia, Hungary, Slovenia, Greece, Cyprus, Malta, Lithuania, Latvia or Estonia.

Many reports and studies are quite old. For example, at present there is very little data available on the specific working conditions and accidents at work of immigrant workers in France. Similarly, data on OSH issues and health status of migrant seasonal workers is scarce.

Very few studies distinguish between migrants and immigrants or among different immigrant groups. Some studies talk generally about foreign workers. Problems to carry out research on the foreign workforce are linked to the definition of the sample. For example, in Germany it is difficult to assess who is an (im)migrant because German nationality is linked to "blood" rights. Even people who were born in Germany are not automatically Germans. Thus, second generation (im)migrants are documented as foreigners but lived since their birth in Germany whereas "real" immigrants with German ancestors are seen as Germans.

Also, the nationality of workers is hardly ever registered by prevention workers or medical staff. For example, research on absenteeism and incapacity for work concentrate more on gender, age and socio-economical status than on nationality or ethnicity. Also within vocational training little attention goes out to migrant workers.



It is very hard to find studies where migrant and native workers doing the same tasks in the same organisations and under the same working conditions are studied and compared with each other. Hardly any research projects have been carried out taking into account the influence that migrants' age, gender and time lived in the foreign country have on their perception and experience of their working conditions or their health and wellbeing. One such study is currently taking place in Finland, involving about 200 migrant and immigrant workers and their Finnish workmates (n=600), e.g. bus drivers and social- and health care staff. This study will allow the comparison of different (im)migrant groups and take into account, among others, the time they have lived in Finland as well as their reason for migrating.

It is also worth emphasising that the subject of migrant workers in the context of occupational safety and health is covered in depth, but from a global approach, by the ILO [123; 124]. The report "Towards a fair deal for MIGRANT WORKERS in the global economy" [51] provides interesting results of the Labour Migration Survey (2003) that covered 90 ILO member states, including many European countries. A set of questions of the survey contains topics directly related to OSH. The global interest of the subject of working conditions of migrant workers can be confirmed too by a relatively large number of articles on the subject.

The ILO highlights three important reasons why OSH issues are of specific interest for migrant workers [51]:

1. The high employment rates of migrant workers in high-risk sectors.
2. Language and cultural barriers, which require specific OSH communication, instructions and training approaches.
3. They often work overtime and/or are in poor health and thus more prone to occupational diseases and injuries.

The evidence gathered by the European studies covered in this literature review confirms the segregation of migrant workers into certain occupations and activity sectors that are featured by worse working conditions in terms of wages, working hours, training opportunities and OSH.

5.2 Problems in statistical data sources and in measurements used in the studies

In general, there are various problems concerning the availability of statistical background data from different countries. The main issues are the following:

- Some of the data are gathered in different time intervals.
- Some of the data are based on samples and do not give full national coverage.



- Some countries integrate their data sources using personal identification numbers while others do not.
- Accessibility to data varies by country.
- The category "migrant" is somewhat inadequate since there are differences in the conditions under which people are considered to be migrants.
- The category "foreign national" is somewhat inadequate since it does not include naturalised migrants.
- There is no possibility to link data on migration, employment and health in some of the countries

The problems in statistical data are generally noted, for example in the feasibility study done by Wren and Boyle [125] in the SALTSA project, in which they identified and evaluated major statistical data sources which incorporate aspects of migration, employment and/or health. According to them the Labour Force Survey (LFS) is the only survey incorporating these aspects and could realistically be used for cross-national survey. All EU countries are obliged to undertake the LFS annually and the data are transferred to Eurostat for processing. However, the LFS data are very general and there are some very clear differences in both the extent and the quantity of variables included. Clearly, available statistical data do not provide a full overview of the issue.

Various indicators of health status have been used to describe the general health situation of migrant groups. However, there are some methodological problems attached to them. For example, crude rates of *sickness leave* may be spurious, since considerable variations have been revealed among foreign nationalities and genders. Use of the *utilisation of health care* as a measurement is also somewhat unreliable since it has been suggested that cultural background plays an important role for the apparent pattern of ill-health and use of (occupational) health services. Other measurements used, like *premature retirement and disability*, *self-estimated health*, *mental ill-health* or *accidents* also pose problems. [126]

5.3 Recommendations

There is clearly a need for research in the area of migration and work-related health at European level. Presently, most of the existing material comes from the US and this evidence cannot necessarily be transposed into the EU due to the differences in ethnic minority groups and working contexts.

Currently existing statistics on (im)migrant workers lack validity in some aspects. More, better, cross-sectional and longitudinal data should be gathered in order to get an insight into work-related health risks of (im)migrants and the general health risks due to migration. All migrant workers are not in risk. There is a need for a large scale study where different aspects, such as the migrant's cultural and educational background, language skills and time lived in the country are taken into account.



It would be important to look at the way in which research and development projects are conceptualised, conducted and interpreted since they will determine whether these efforts actually result in improved health and safety of migrant workers.

It would also be important to increase attention to OSH issues of migrant workers and support the activities of OSH centres devoted to the occupational health of migrants.

Many aspects of the consequences of migration movements are still to be investigated. Some popular preconceptions require confirmation by collecting and analysing solid empirical evidence. There is a lack of information on undocumented workers, which creates difficulties regarding an assessment, an estimation and the effects of this phenomenon.



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In order to improve the working environment, as regards the protection of the safety and health of workers as provided for in the Treaty and successive Community strategies and action programmes concerning health and safety at the workplace, the aim of the Agency shall be to provide the Community bodies, the Member States, the social partners and those involved in the field with the technical, scientific and economic information of use in the field of safety and health at work.

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