

26 September 2014

Dr Graham Jacobs MLA
Chair
Education and Health Standing Committee
Parliament House
PERTH WA 6000

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Dear Dr Jacobs

**Submission to Education And Health Standing Committee
Inquiry into Mental Illness in Fly-In, Fly-Out Workers**

UnionsWA is the governing peak body of the trade union movement in Western Australia, and the Western Australian Branch of the Australian Council of Trade Unions (ACTU). As a peak body we are dedicated to strengthening WA unions through co-operation and co-ordination on campaigning and common industrial matters. UnionsWA represents around 30 affiliate unions, who in turn represent approximately 140,000 Western Australian workers.

UnionsWA welcomes the inquiry conducted by the Education and Health Standing Committee. Mental health in the FIFO/DIDO workforce is an issue that has been canvassed by the union movement for many years.

We believe that there is a lack of reliable information information to use as a starting point when examining this issue.

The recent House of Representatives report *Cancer of the Bush or Salvation of our Cities?* stated:

there is a lack of data relating to the direct and indirect health impacts of the FIFO lifestyle and recommended that the Commonwealth Government commission a comprehensive study into the health effects of fly-in, fly-out/drive-in, drive-out work and lifestyle factors and as a result of this research develop a comprehensive health policy response addressing the needs of fly-in, fly-out/drive-in, drive-out workers.¹

To date we are yet to see the outcome of that recommendation.

¹ House of Representatives Standing Committee on Regional Australia, *Cancer of the bush or salvation for our cities ?* (2013)
<http://www.aph.gov.au/parliamentary_business/committees/house_of_representatives_committees?url=ra/fifodido/report/fullreport.pdf>, pg 100, accessed 25 September 2014.

What limited research has been done has identified some disturbing trends and statistics. In 2011 OzHelp estimated that suicide rates for construction workers in Western Australia was at a rate of 79 per 100,000 workers compared to the Australian average for men of 16 per 100,000.²

In their submission to the *Cancer of the Bush or Salvation of our Cities?* report FIFO Families cited research that the suicide rates in male miners is four times that of the general male population.³

Many of the reports and studies examining the health effects have focused on mine production workers, typically working between roster between 2-1 and even time. While many of these workers struggle with work related mental health issues there is a gap in our knowledge is regards to the effects of the longer rosters such as 4-1 or 5-1.

It is clear that there are serious mental health issues facing fly-in fly-out workers and that is not a simple issue and can't be fixed by one program or by policy change, however a complete overhaul is needed in how we examine and report on suicide and mental health issues in these workplaces.

Contributing Factors leading to mental illness and suicide

What limited evidence exists points towards isolation, communications and difficulty balancing everyday life responsibilities. A report by Anglicare Australia found that FIFO workers have a high susceptibility to mental illness:

*Mental health, depression and stress-related problems associated with the fly-in, fly-out workforce are common. Kennedy (2011) finds that some people working fly-in, fly-out become isolated and lonely, often having difficulties managing the house or family when they return home. It's no small challenge to work for up to six weeks at a time and then try to re-establish family relationships - particularly when everyone is aware that the separation soon begins all over again.*⁴

We believe that while there is a strict emphasis on workers being fit for work, but there is no assessment for fitness for home.

Workers lack the adequate support structures and camp facilities to cope with spending long periods separated from families and friends. Often the only mental health support FIFO workers receive is a phone number for an employee assistance program (EAP).

² Turner. Rebecca, 'Depression the dark side of mining boom', *The Australian*, 12 March 2012, para. 9, <<http://www.theaustralian.com.au/national-affairs/health/depression-the-dark-side-of-mining-boom/story-fn59nokw-1226019669569>>, accessed 25 September 2014.

³ House of Representatives Standing Committee on Regional Australia, *Cancer of the bush or salvation for our cities?*(2013) <http://www.aph.gov.au/parliamentary_business/committees/house_of_representatives_committees?url=ra/fifodido/report/fullreport.pdf>, pg 101-103, accessed 25 September 2014.

⁴ Anglicare Australia, *STAYING POWER: Anglicare Australia's State of the Family Report*, Anslie, October 2011, pp. 47-48.

When asked about mental health support structures, one in four FIFO workers claimed that they did not have access to a union.⁵

Unions are regarded by workers as an independent and objective avenue to seek support when facing mental health issues. Many are concerned that approaching an employer or an employer commissioned EAP may lead to suspension or dismissal due to their mental health issues.

Current legislation, regulations, policies and practices for workplace mental health in Western Australia

We strongly believe that mental health is often a workplace health and safety issue.

Currently there is little mental health information provided by Western Australian health and safety regulators. There are a number of guidance notes and codes of practice on issues such as stress, fatigue and working hours but no guidance notes that address the issue head on.

Safe Work Australia has published information on Work-Related Mental Disorders and a four page fact sheet on *Preventing psychological injury under work health and safety laws*, yet nothing released has been specific for remote fly-in fly-out work or has had any enforceable outcomes or recommended standards or best practice.

Currently suicides in the workplace are not classified as a work related fatality. We strongly believe that when a suicide occurs in the workplace it should be viewed as a workplace fatality. Statistics should be kept and released, fatalities should be investigated, and surrounding circumstances should be studied.

If we are not collecting information surrounding these fatalities, it is hard to know the full extent of the problem.

Considerable effort is expended by contractors in the resources industry to screen and assess applicants for a predisposition for mental health issues in the recruitment process. This screening includes mental aptitude and mental health questions.

Because of this process, rightly or wrongly, anecdotal evidence from union members shows us that they have concerns that if they raise mental health issues with their employer that they will be discriminated against with regard to future employment and are unlikely to continue in their employment.

Current initiatives by government, industry and community, and recommended improvements

There are a number of organisations in Western Australia which provide mental health training and support to workers in the FIFO industry.

⁵ Lifeline WA, *FIFO/DIDO Mental Health Research Report 2013*, (2013), <<http://www.lifelinewa.org.au/download/FIFO+DIDO+Mental+Health+Research+Report+2013.pdf>>, p 46, accessed 25 September 2014.

Organisations such as Mates in Construction and OzHelp provide valuable services. However these are small organisations with limited resources. We believe that any support that can be given to these or similar organisations would be an effective way to help raise awareness and support for workers with mental health issues.

In particular we support the research findings from the lifeline report that many male FIFO workers are more likely to access informal rather than formal support networks and we believe that peer-to-peer support programs such as those run by Mates in Construction have an important role to play in addressing mental health issues.

Given that FIFO workers are totally dependent on their employer for all aspects of their life while on a FIFO roster, the services should be provided by the employer

We believe that it would be highly appropriate for WorkSafe to adopt a code of practice into FIFO work. We believe that this code should cover a number of issues which go to the best practice support for the health and wellbeing of FIFO workers, including:

- Camp accommodation and services;
- Fatigue management;
- Alcohol and drug abuse;
- Support for workers who have identified as having a mental health issue; and
- Family support.

Some considerable policy and research work will have to be done to develop best practice programs and we believe that because of its focus on safety and health in the workplace, WorkSafe would be the most appropriate government agency to undertake this work.

I would be happy to discuss our submission with you in more detail. Please don't hesitate to make contact on either 9328 7877 or mhammat@unionswa.com.au to arrange a suitable time.

Yours sincerely



Meredith Hammat
Secretary