Abstract:

In 2007, the Labour Force Survey (LFS) in Europe included an ad hoc module on health and safety at work. It included four variables on accidents resulting in injury, five variables on work-related health problems and two variables on hazardous exposure in the workplace. A study was performed to assess the quality of this ad hoc module in the participating countries (EU27, NO and HR). We report here two quality aspects in more detail: questionnaire administration and wording of the questionnaire. Method We investigated differences in questionnaire administration between countries with regard to use of proxies and we investigated differences between proxy and direct responses. The wording in the questionnaires was studied per question and per language. For the evaluation, three sources of information were used. First, the information on differences in wording described by the participating countries in quality reports and final reports on the LFS ad hoc module 2007 was assessed. Second, an evaluation questionnaire comparing the national questionnaires with the version proposed by Eurostat was filled out. As a third step in the evaluation, we compared the English translation of the questionnaire provided by the participating countries with the questionnaire proposed by Eurostat. We looked in particular at possible influences on the resulting data and possible limitations related to the comparability of the questionnaires. Finally we investigated the possible effect of wording differences on the outcomes. Results – questionnaire administration From the data it can be concluded that all countries used proxies in the LFS, except Norway and Sweden. In 29.6% of the persons for which data were available on the ad hoc module, a proxy answered the core LFS, and hence, most likely also the ad hoc module. In some countries more answers were given by proxies than by direct participation. The comparison of the occurrence of accidents between proxies and direct respondents showed that proxies reported accidents less often (2.4% versus 3.1% - unweighted). The comparison of the occurrence of work-related health problems between proxies and direct respondents showed that proxies reported health problems less often (6.8% and 11.5% - unweighted). Finally, the comparison of the occurrence of exposure between proxies and direct participants showed that proxies did not report exposure affecting physical health less often than direct participants (39.9% vs. 39.2% - unweighted), while proxies did report exposure affecting mental well-being less often than direct participants (23.0% vs. 27.6% - not weighted results).