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**W**hen looking at the job description of electrical work one can clearly relate certain job activities to specific muscle groups. Overhead work affects the neck, shoulders, arms, elbows, wrist/hands. Work that is straight over head, or working on ladders in an awkward off-plane position, places increased stress on the low back. And knee's and ankles if working on a ladder or lift where you need to stretch and twist in order to reach your work.

Confined work or low level work can put a lot of stress on your low back, hips, knee's, shoulders, elbows and neck.

Terminating panels or a lot of drilling and mounting equipment can have huge effects on your arms, elbows, wrists and hands.

As one can see, the job of electrician is very physical and each member reacts differently to the work factors, which is complicated by your genetic makeup, age, body type, general health, strength, flexibility, duration that certain work is performed, location of work and trade experience.

**W**hat we need to take away from this study is that we need to change how we work and our attitudes to how work is organized. Construction is a tough game. It can and will break down all the supermen we have in the trade, bar none, and it does affect every one of us.

Right now our bodies are being used as filters as we breath in all the pollution that all job sites offer. The members are also breaking down physically because of our current trade work practices and attitudes. It is our hope that we can use this study to educate members, foreman, contractors, other trades, and WSIB, that there are alternatives that can allow all of us to enjoy a healthier future.

**T**he problems we have cannot be blamed on any one sector, nor can we realistically eliminate all the disagreeable aspects of our work and the associated risks factors to injury and disease. But we can take small steps that are common sense to improve our collective health and safety by continued education, use of Personal Protective Equipment (PPE), change of job practices, rotation of work, and increased house keeping. Some of these are taught and advocated, but in reality, there is either intentional defiance by some workers and contractors, or just lip service paid to these programs.

At the end of the day, we all have to start thinking about the common sense strategies so we work smarter and safer to protect your health and safety.

By the summer of 2006 we will have completed our ergonomic review and physical demands analysis, in conjunction with Western University and OHCOW, of our five trade sectors (Industrial Commercial Institutional, Line & Utility, High-rise Residential, Low-rise Residential and the Communication).

  
Joe Fashion, Business Manager

  
Barry Stevens, President

# Membership Report - 2006



**T**he results of the Occupational Health Clinic held at the union hall on April 23/05 are in. In total, 400 members took part in the clinic when we added the participants from the June 2004 intake clinic at the CNE. 81% of the participants were ICI workers; 58.2% had greater than 10 years experience; 53% were age 50 years old and older; and 47% were retired members.



Chemical/physical hazards were reported showing:

- 82% had been exposed to asbestos
- 84% had been exposed to cutting oils
- 82% had been exposed to fibreglass
- 72% had been exposed to PCB's

Surprisingly missing from this section was silica or cement dust, as we all use drills and hammer drills to mount most boxes, pipe and panels. In the musculoskeletal section we fell right in line with other studies concerning the breakdown of our bodies due to work related injuries. A study from the U.S.A reported 860,000 occupational related illness in 1998 and 60,300 deaths due to occupational illness. In this study they report on average that 60% were musculoskeletal disorders. The LU 353 study mirrored the findings of this study and confirms we are experiencing similar findings within our own jurisdiction in 6 key areas:

- Lower Back - 67%
  - Knee's - 67%
- Right wrist/hand - 63.8%
- Left wrist/hand - 56.6%
  - Shoulders - 54.3%
  - Neck - 49.3%



Occupational Health Clinic, April 23/05

**T**he key factors that cause musculoskeletal disorders were listed as repetition, force, awkward or static posture, vibration, work speed and restricted tasks. In general this is also how many of our members reported their job duties, also throwing in overhead work, ladder work and confined work spaces.

The results show that many of our members experience repetitive strain injuries due to damage to body soft tissues. These if left untreated result in further injuries or diseases, such as Carpal Tunnel Syndrome, Epicondylitis (tennis elbow), Rotator Cuff damage and cervical strain to name a few.

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# Discomfort Survey Results

## Purpose

**IBEW** contacted the Occupational Health Clinics for Ontario Workers (OHCOW) to conduct a health and musculoskeletal discomfort/symptom survey of its membership. The objective was to provide a snapshot of various classifications experiencing pain and discomfort for action priorities. The focus of the survey included basic demographics and musculoskeletal discomfort in various body parts, assessment of level of discomfort, and frequency of discomfort.

## Results and Analysis

The survey yielded a number of key findings. Results of the discomfort survey for male and female, full-time, part-time, and other workers reporting in various classifications are presented in this report. Most of the respondents with respect to classifications came from ICI (81.3%) followed by High Rise (9%). Respondents working for (more than 10 years) were the biggest reporting group (58.2%) followed by 3-6 years group (10.7%) and less than 6 months (10.4%) and so on.

## MUSCULOSKELETAL HEALTH

- Have you, in the last 12 months, sought a health care professional's advice about pain in any of these parts of the body? *(response rate 100%)*

Neck	<b>72 (22.9%)</b>	Wrists/Hands	<b>98 (31.1%)</b>	Hips/Thighs	<b>50 (15.9%)</b>
Shoulders	<b>99 (31.4%)</b>	Lower Back	<b>119 (37.8%)</b>	Knees	<b>111 (35.2%)</b>
Elbows	<b>51 (16.2%)</b>	Upper Back	<b>49 (15.6%)</b>	Ankle(s)/Feet	<b>66 (21.0%)</b>

- Did you take any time off in the last 12 months because of problems that you believe to be work related, with any of these parts of the body? *(response rate 100%)*

Neck	<b>18 (5.7%)</b>	Wrists/Hands	<b>29 (9.2%)</b>	Hips/Thighs	<b>11 (3.5%)</b>
Shoulder(s)	<b>30 (9.5%)</b>	Lower Back	<b>41 (13.0%)</b>	Knees	<b>39 (12.4%)</b>
Elbow(s)	<b>10 (3.2%)</b>	Upper Back	<b>13 (4.1%)</b>	Ankle(s)/Feet	<b>23 (7.3%)</b>

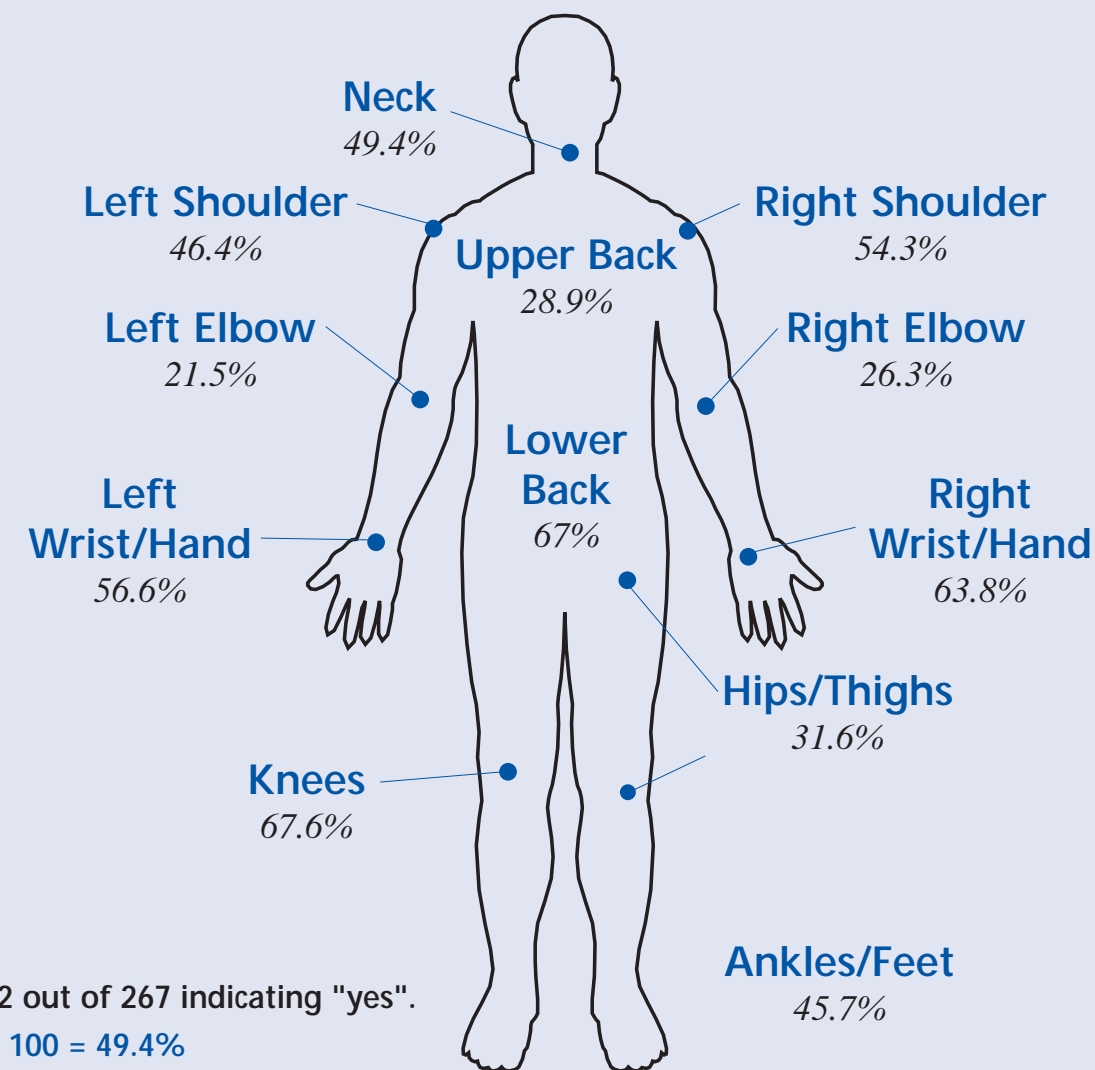
- If YES, did you report to the company? *(response rate 52.1%)*

Yes	<b>79 (48.2%)</b>	No	<b>85 (51.8%)</b>
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- Was it reported to the WSIB? *(response rate 52.4%)*

Yes	<b>65 (39.4%)</b>	No	<b>100 (60.6%)</b>
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Have you at any time during the last 12 months had trouble (such as ache, pain, discomfort, numbness) that you believe to be work related, with any of these areas of the body?



Example:  
Neck – 132 out of 267 indicating "yes".  
 $132/267 \times 100 = 49.4\%$



## Special Thanks

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