

Public administration and defence; compulsory social security statistics in Great Britain, 2025

Data up to March 2025

Annual statistics

Published 20 November 2025



Table of Contents

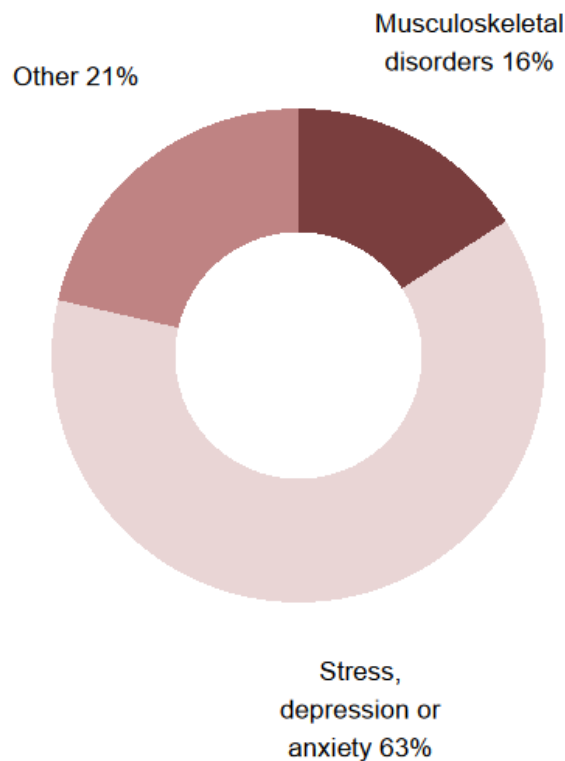
Key statistics	4
Ill health	4
Fatal injuries	5
Non-fatal injuries	5
Introduction	6
Work-related ill healthAll illness	7
Musculoskeletal disorders	9
Stress, depression or anxiety	11
Workplace injuries	13
Fatal injuries	13
Non-fatal injuries	13
Economic Cost	17
Working days lost	18
Annex 1: Sources and definitions	19
Annex 2: Links to detailed tables	21
Accredited Official Statistics	22

Key statistics

Ill health

152,000 workers suffering from work-related ill health (new or long-standing) averaged over the three-year period 2022/23-2024/25

Percentage of self-reported work-related ill health by type in Public administration and defence; compulsory social security: new and long-standing



Source: LFS, average estimate over 2022/23-2024/25

In the recent years prior to the coronavirus pandemic, the rate of self-reported work-related ill health had been broadly flat. The rate for the latest period was not statistically significantly different from the 2016/17-2018/19 period.

Fatal injuries

There were 0 fatal injuries to workers in 2024/25p. This is in comparison with the annual average of 1 fatality over the five-year period 2020/21-2024/25p.

There were 4 fatal injuries to members of the public in 2024/25p. This is in comparison with the annual average of 2 fatalities over the five-year period 2020/21-2024/25p.

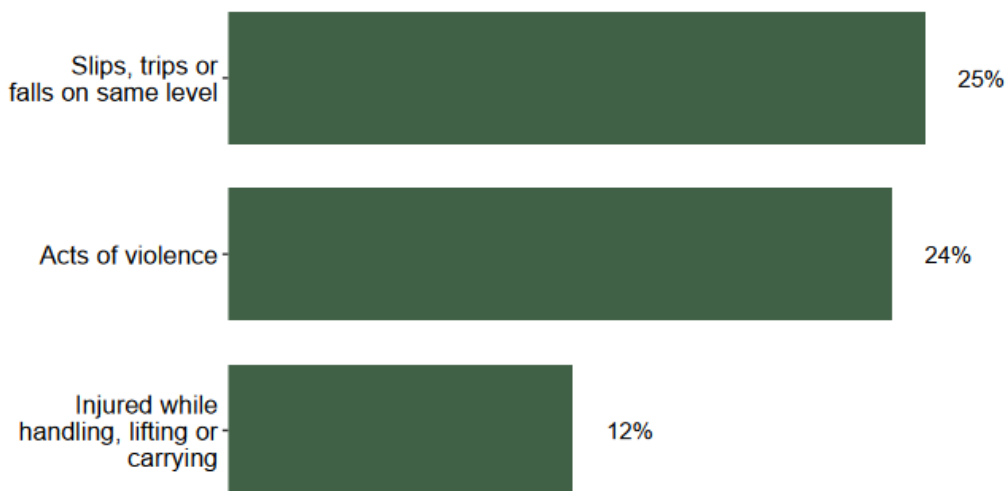
Source: RIDDOR, 2024/25p

Non-fatal injuries

42,000 workers sustained non-fatal injuries averaged over the three-year period 2022/23-2024/25. In the recent years prior to the coronavirus pandemic, the rate of self-reported non-fatal injury to workers had been broadly flat, having previously showed a downward trend. The rate for the latest period was lower than the 2016/17- 2018/19 period.

Source: LFS, average estimate over 2022/23-2024/25

Percentage of non-fatal injuries by accident kind in Public administration and defence; compulsory social security



RIDDOR is used here as the LFS is not able to provide a breakdown to this level of detail.

Accident kinds are shown that account for 10% or more of non-fatal injuries.

Source: RIDDOR, average over 2022/23-2024/25

Introduction

This report provides a profile of workplace health and safety in Public administration and defence; compulsory social security¹

This sector includes activities of a governmental nature, normally carried out by the public administration, local or national. It covers civil and criminal law courts, taxation, national defence, public order and safety, immigration service, foreign affairs, the administration of government programmes and compulsory social security activities.

These activities are included even where the work is carried out by non-government businesses, for example in privately run prisons.

This sector accounts for 8% of the workforce in Great Britain²

¹ The Public administration and defence; compulsory social security sector is defined by section O within the 2007 Standard Industrial Classification. See www.hse.gov.uk/statistics/industry/sic2007.htm for more detail.

² Annual Population Survey, 2024

Work-related ill health

All illness

In Public administration and defence; compulsory social security:

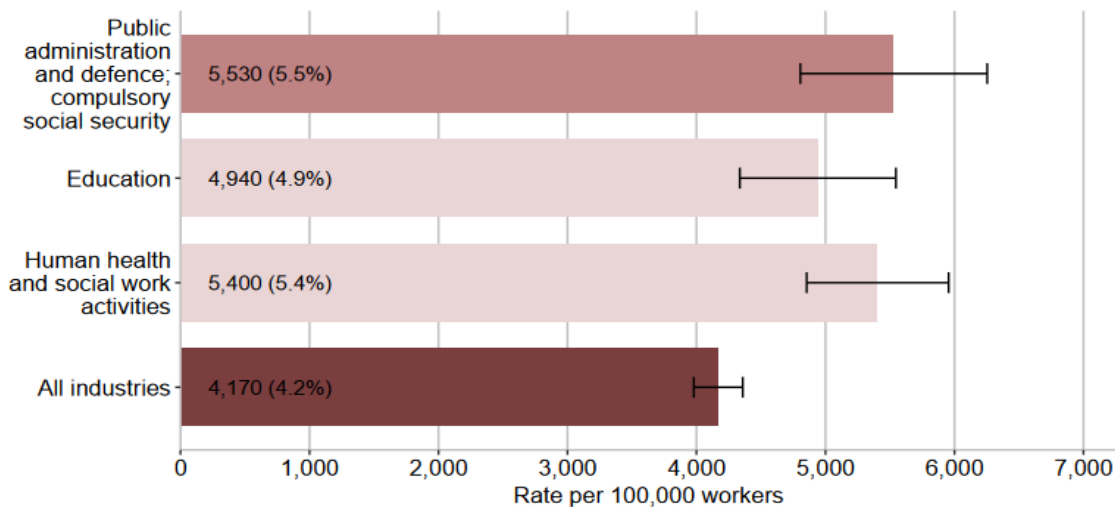
- There were an estimated 152,000 workers suffering from work-related ill health (new or long-standing)
- 63% were stress, depression or anxiety

Source: LFS, average estimate over 2022/23-2024/25

Public administration and defence; compulsory social security compared with other selected industries³

- Around 5.5% of workers in the sector suffered from work-related ill health (new or long-standing)
- This rate is statistically significantly higher than that for workers across all industries (4.2%)

Rate of self-reported work-related ill health in Public administration and defence; compulsory social security compared with other selected industries, per 100,000 workers: new and long-standing



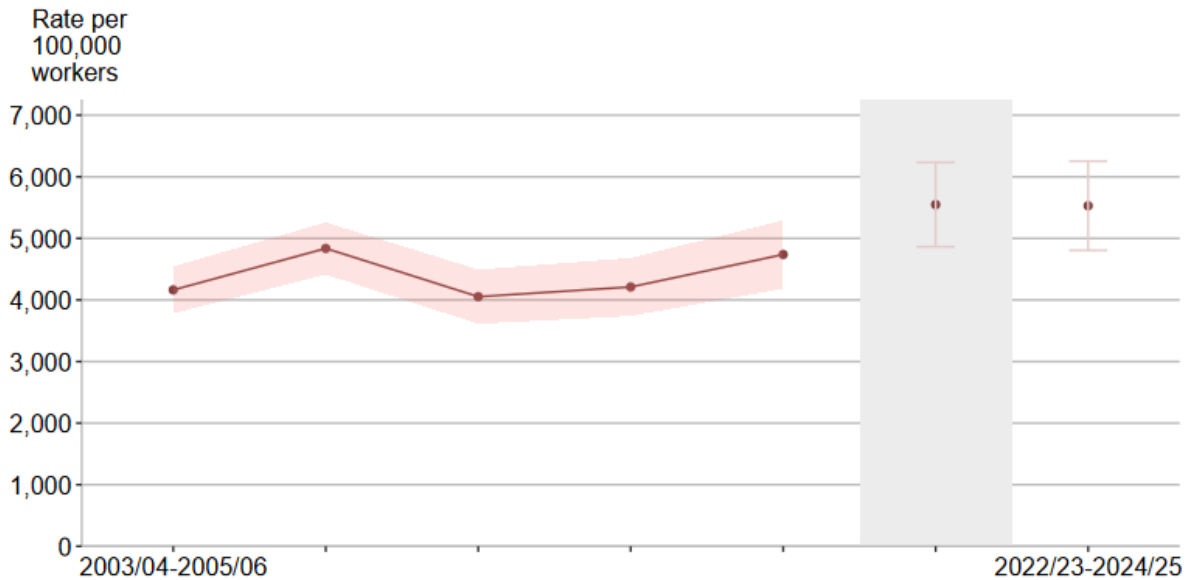
95% confidence intervals are shown on the chart

Source: LFS, average estimate over 2022/23-2024/25

³ Selected industries are those that are predominantly based in the public sector and are made up of similar work activities

Changes over time

Rate of self-reported work-related ill health in Public administration and defence; compulsory social security, per 100,000 workers: new and long-standing



In the recent years prior to the coronavirus pandemic, the rate of self-reported work-related ill health had been broadly flat. The rate for the latest period was not statistically significantly different from the 2016/17-2018/19 period.

The data for 2019/20 - 2021/22 includes years affected by the coronavirus pandemic, shown inside the grey shaded column. Shaded area and error bars represent a 95% confidence interval.

Source: LFS, average estimate from 2003/04-2005/06 to 2022/23-2024/25

Musculoskeletal disorders

In Public administration and defence; compulsory social security:

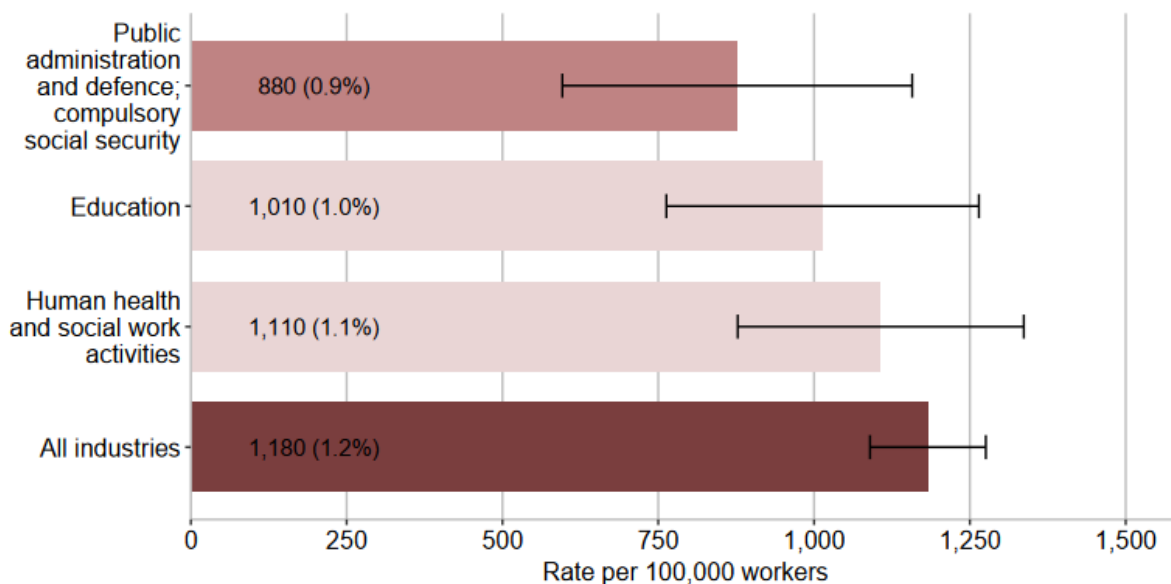
- There were an estimated 24,000 workers suffering from a work-related musculoskeletal disorder (new or long-standing), 16% of all ill health in this sector

Source: LFS, average estimate over 2022/23-2024/25

Public administration and defence; compulsory social security compared with other selected industries

- Around 0.9% of workers in the sector suffered from work-related musculoskeletal disorders (new or long-standing)
- This rate is statistically significantly lower than that for workers across all industries (1.2%)

Rate of self-reported work-related musculoskeletal disorders in Public administration and defence; compulsory social security compared with other selected industries, per 100,000 workers: new and long-standing

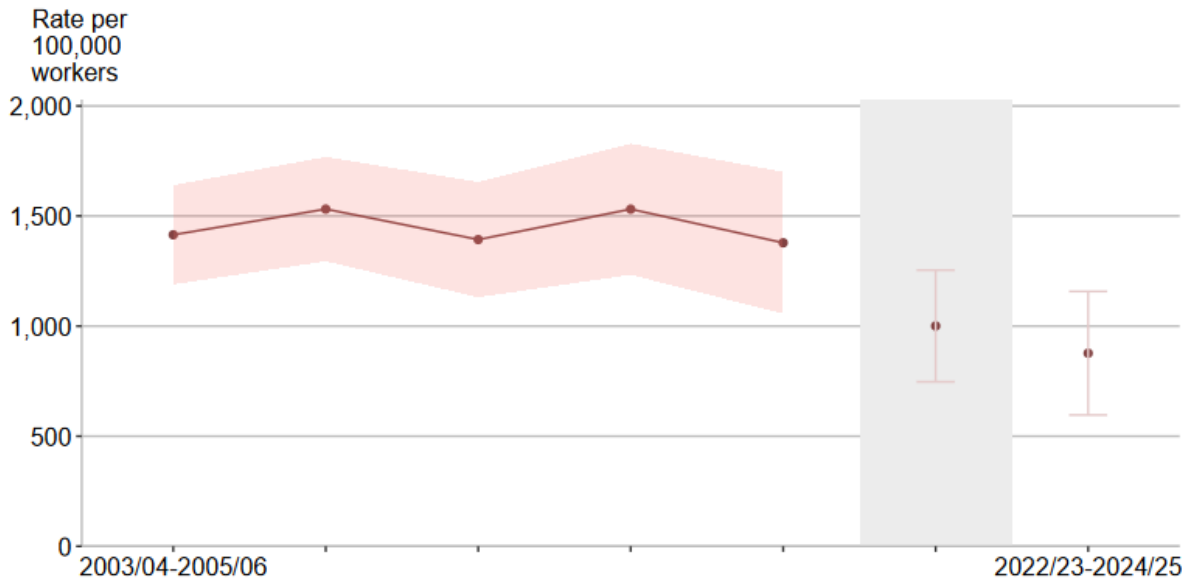


95% confidence intervals are shown on the chart

Source: LFS, average estimate over 2022/23-2024/25

Changes over time

Rate of self-reported work-related musculoskeletal disorders in Public administration and defence; compulsory social security, per 100,000 workers: new and long-standing



Prior to the coronavirus pandemic, the rate of musculoskeletal disorders had been broadly flat. The rate for the latest period was lower than the 2016/17-2018/19 period.

The data for 2019/20 - 2021/22 includes years affected by the coronavirus pandemic, shown inside the grey shaded column. Shaded area and error bars represent a 95% confidence interval.

Source: LFS, average estimate from 2003/04-2005/06 to 2022/23-2024/25

Stress, depression or anxiety

In Public administration and defence; compulsory social security:

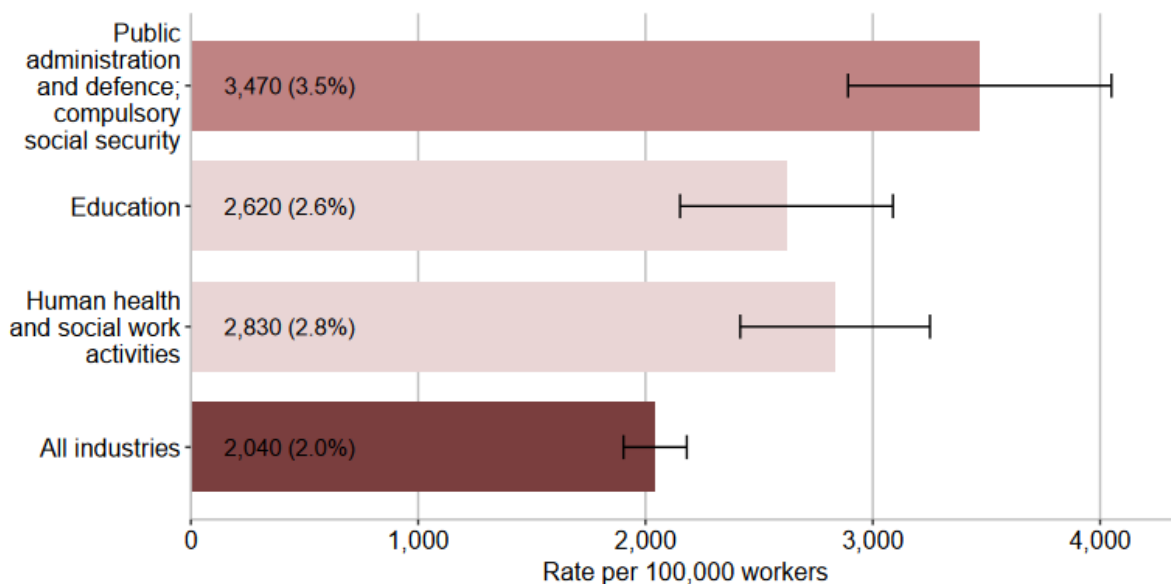
- There were an estimated 96,000 workers suffering from work-related stress, depression or anxiety (new or long-standing), 63% of all ill health in this sector

Source: LFS, average estimate over 2022/23-2024/25

Public administration and defence; compulsory social security compared with other selected industries

- Around 3.5% of workers in the sector suffered from work-related stress, depression or anxiety (new or long-standing)
- This rate is statistically significantly higher than that for workers across all industries (2.0%)

Rate of self-reported work-related stress, depression or anxiety in Public administration and defence; compulsory social security compared with other selected industries, per 100,000 workers: new and long-standing

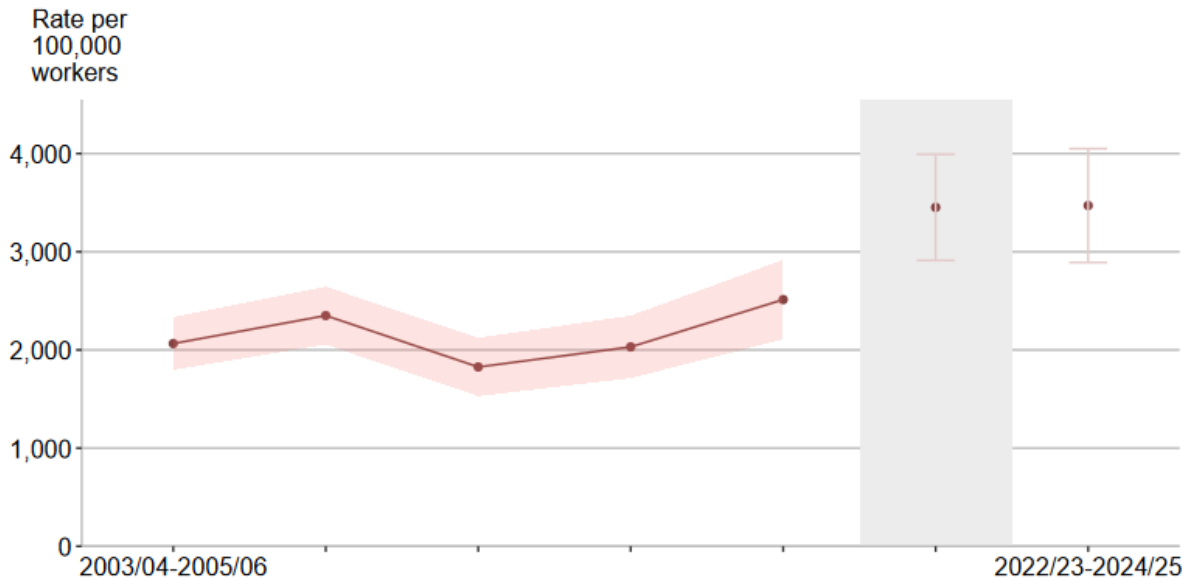


95% confidence intervals are shown on the chart

Source: LFS, average estimate over 2022/23-2024/25

Changes over time

Rate of self-reported work-related stress, depression or anxiety in Public administration and defence; compulsory social security, per 100,000 workers: new and long-standing



In the recent years prior to the coronavirus pandemic, the rate of self-reported work-related stress, depression or anxiety showed signs of increasing, having previously been broadly flat. The rate for the latest period was higher than the 2016/17 - 2018/19 period.

The data for 2019/20 - 2021/22 includes years affected by the coronavirus pandemic, shown inside the grey shaded column. Shaded area and error bars represent a 95% confidence interval.

Source: LFS, average estimate from 2003/04-2005/06 to 2022/23-2024/25

Workplace injuries

Fatal injuries

In Public administration and defence; compulsory social security:

- There were 0 fatal injuries to workers in 2024/25p
- This is in comparison with the annual average number of 1 fatality for 2020/21-2024/25p
- There were 4 fatal injuries to members of the public in 2024/25p
- This is in comparison with the annual average of 2 fatalities over the five-year period 2020/21-2024/25p

Source: *RIDDOR, 2024/25p*

Non-fatal injuries

The Labour Force Survey is HSE's preferred data source for non-fatal injuries.

In Public administration and defence; compulsory social security:

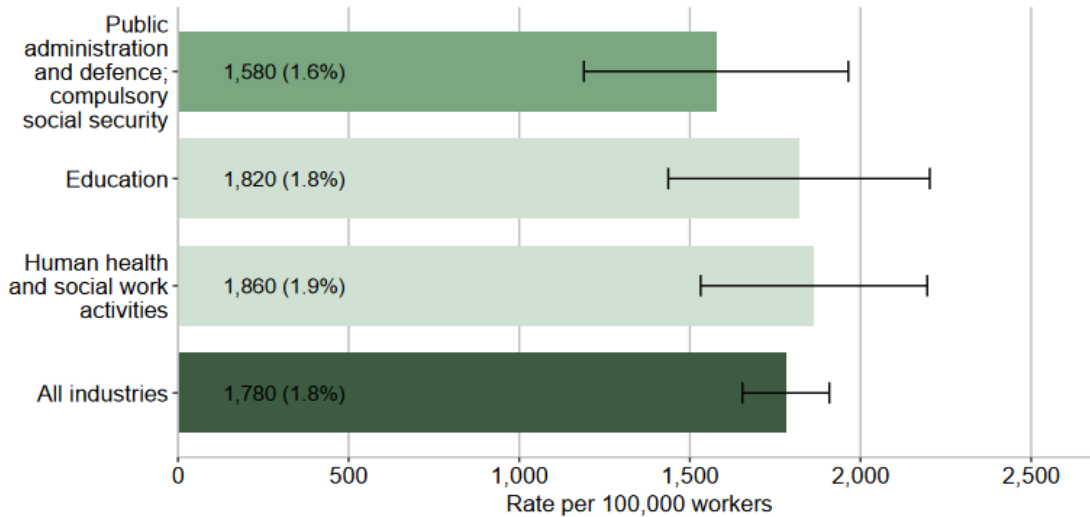
- There were an estimated 42,000 workers who reported sustaining a workplace non-fatal injury

Source: *LFS, average estimate over 2022/23-2024/25*

Public administration and defence; compulsory social security compared with other selected industries

- Around 1.6% of workers in the sector sustained a workplace non-fatal injury
- This rate is not statistically different than that for workers across all industries (1.8%)

Rate of self-reported workplace non-fatal injuries in Public administration and defence; compulsory social security compared with other selected industries, per 100,000 workers

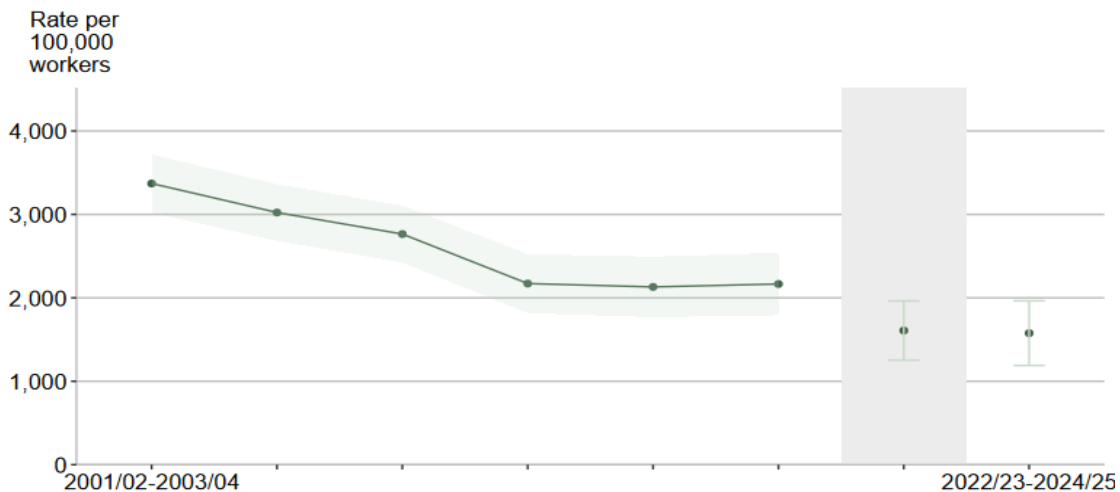


95% confidence intervals are shown on the chart

Source: LFS, average estimate over 2022/23-2024/25

Changes over time

Rate of self-reported workplace non-fatal injuries in Public administration and defence; compulsory social security, per 100,000 workers



In the recent years prior to the coronavirus pandemic, the rate of self-reported non-fatal injury to workers had been broadly flat, having previously showed a downward trend. The rate for the latest period was lower than the 2016/17- 2018/19 period.

The data for 2019/20 - 2021/22 includes years affected by the coronavirus pandemic, shown inside the grey shaded column. Shaded area and error bars represent a 95% confidence interval

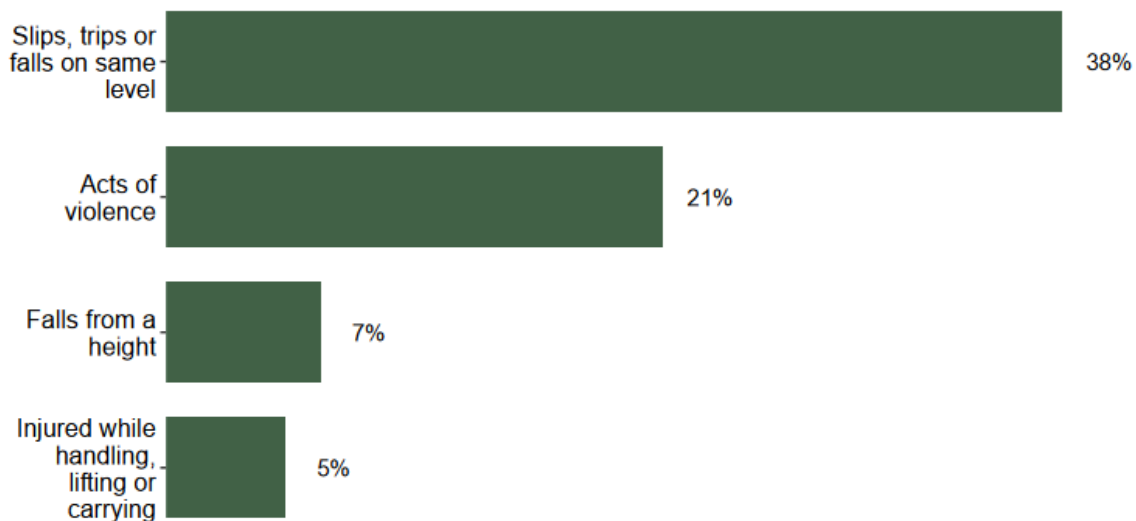
Source: LFS, average estimate from 2001/02-2003/04 to 2022/23-2024/25

Supporting information around work-related injuries is available from RIDDOR reporting⁴. In Public administration and defence; compulsory social security:

- There were 4,095 non-fatal injuries to employees reported by employers under RIDDOR in 2024/25p
- 1,053 (26%) were specified injuries⁵ and 3,042 (74%) were injuries resulting in the incapacitation of a worker for over seven days

Source: RIDDOR, 2024/25p

Percentage of non-fatal work-related specified injuries by accident kind in Public administration and defence; compulsory social security

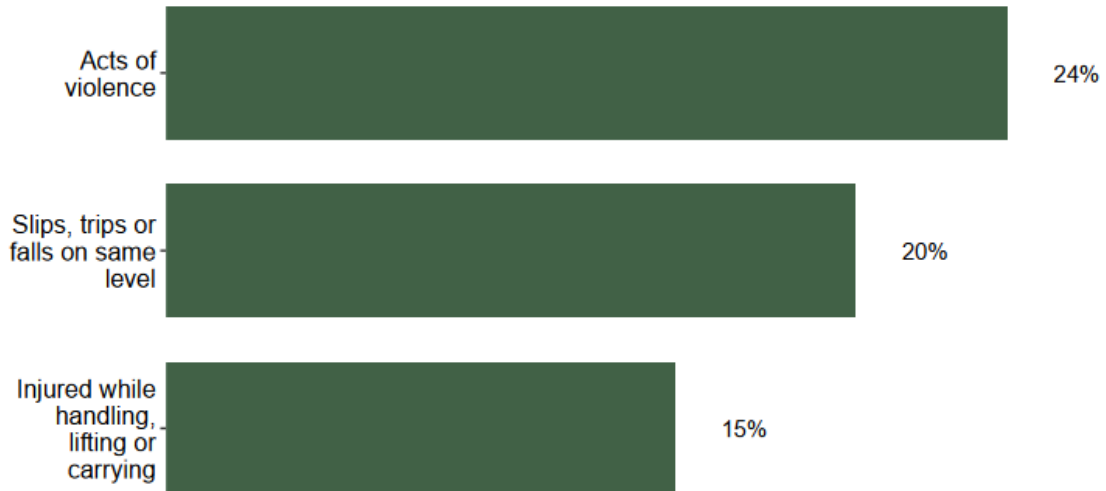


Source: RIDDOR, average over 2022/23-2024/25p

⁴ The LFS gives the best indication of the scale of workplace injury within the sector. RIDDOR provides additional information for non-fatal injuries but needs to be interpreted with care since it is known that non-fatal injuries are substantially under-reported. Possible variations in reporting rates both between industries and over time make comparisons difficult. However, RIDDOR can be used for analysis at a detailed level not available through the LFS, for example, around the kind of incident.

⁵ Specified injuries are a defined list of injuries. The full list is at www.hse.gov.uk/riddor/reportable-incidents.htm

Percentage of non-fatal work-related injuries resulting in incapacitation of a worker for over seven days by accident kind in Public administration and defence; compulsory social security



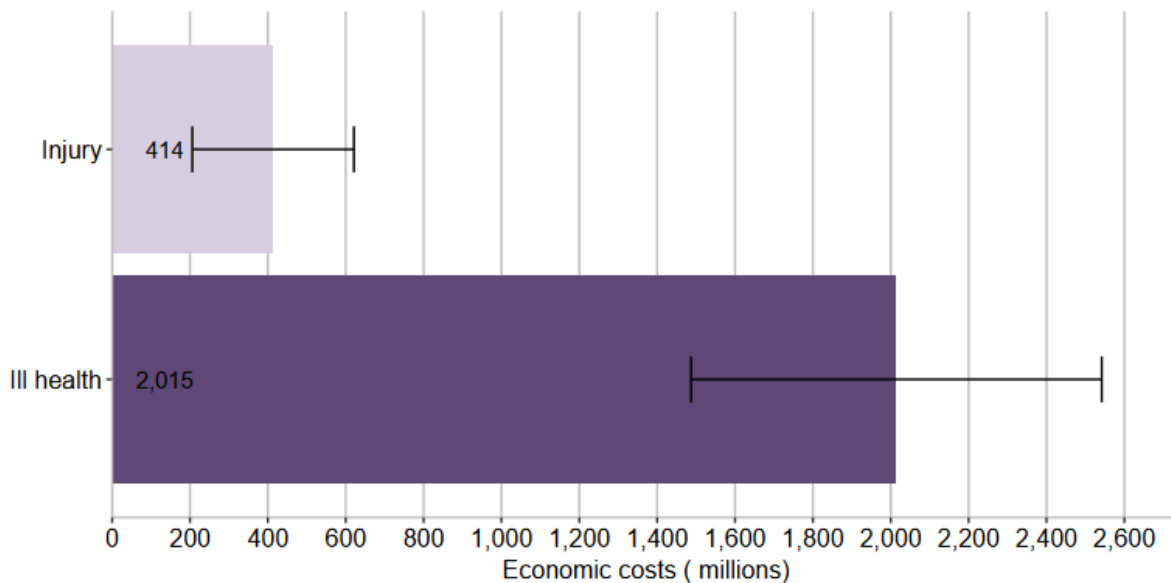
Source: RIDDOR, average over 2022/23-2024/25p

Accident kinds are shown that account for 5% or more of non-fatal injuries.

Economic Cost

- The total cost in 2023/24 is estimated at £2.4 billion, (95% confidence interval is £1,859M - £2,998M)
- This accounts for 11% of the total cost of all work-related ill health and injury (£22.9 billion)

Economic costs from work-related ill health and workplace injury in Public administration and defence, in £ millions (2024 prices)



Estimates based on LFS (self-reported work-related ill health and workplace non-fatal injuries) and RIDDOR (work-related fatal injuries). 95% confidence intervals are shown on the chart.

Source: *HSE Costs to Britain, 2023/24*

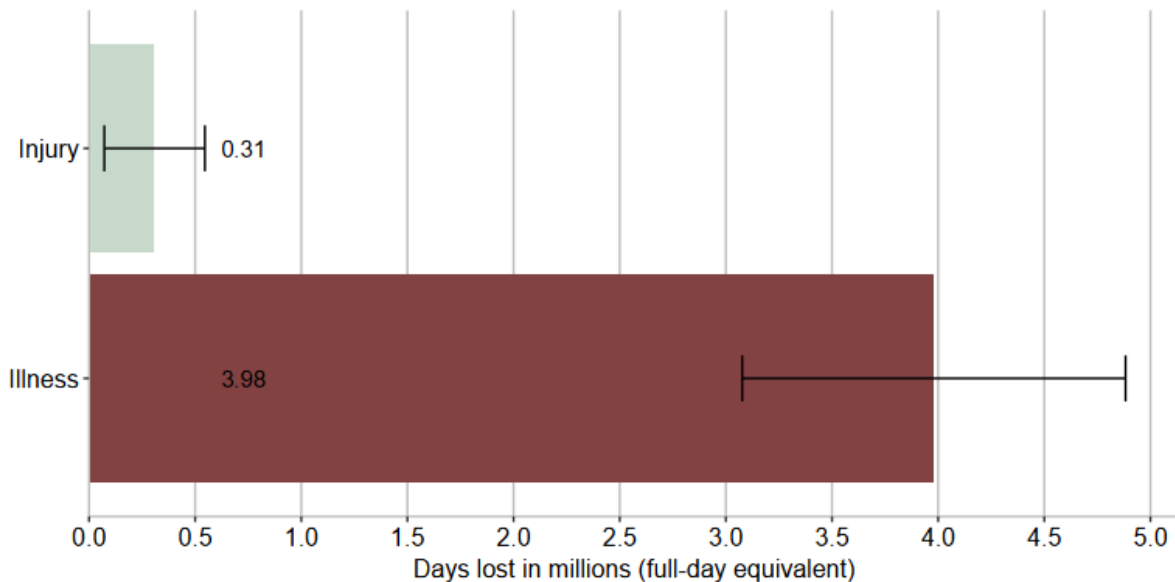
Workplace injury and ill health impose costs: both financial (for example in terms of lost output and healthcare costs) and non-financial (the monetary valuation of the human cost of injury and illness in terms of loss of quality of life and, for fatalities, loss of life). Taken together, this gives the total economic cost to society. This cost is shared between individuals, employers and government/taxpayers.

Working days lost

In Public administration and defence; compulsory social security around 4.3 million working days (full-day equivalent) were lost each year due to:

- Workplace injury (7%) and
- Work-related illness (93%)
- That is equivalent to around 1.9 working days lost per worker which is statistically significantly higher than the all industry level (1.1 days)

Working days lost from self-reported work-related ill health and workplace injury in Public administration and defence; compulsory social security, full-day equivalent



95% confidence intervals are shown on the chart

Source: LFS, average estimate over 2022/23-2024/25

Annex 1: Sources and definitions

The Labour Force Survey (LFS): The LFS is a national survey run by the Office for National Statistics of currently around 31,000 households each quarter. HSE commissions annual questions in the LFS to gain a view of self-reported work-related illness and workplace injury based on individuals' perceptions. The analysis and interpretation of these data are the sole responsibility of HSE.

- Self-reported work-related illness: People who have conditions which they think have been caused or made worse by their current or past work, as estimated from the LFS. Estimated total cases include long-standing as well as new cases. New cases consist of those who first became aware of their illness in the last 12 months.
- Self-reported injuries: Workplace injuries sustained as a result of a non-road traffic accidents, as estimated by the LFS.

RIDDOR: The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, under which fatal and defined non-fatal injuries to workers and members of the public are reported by employers. Certain types of work-related injury are not reportable under RIDDOR, hence excluded from these figures. Particular exclusions include fatalities and injuries to the armed forces and injuries from work-related road collisions.

HSE Costs to Britain Model: Developed to estimate the economic costs of injury and new cases of ill health arising from current working conditions. The economic cost estimate includes estimates of financial (or direct) costs incurred (either in terms of payments that have to be made or income/output that is lost) and the monetary valuation of the impact on quality and loss of life of affected workers.

Rate per 100,000: The number of annual workplace injuries or cases of work-related ill health per 100,000 employees or workers.

95% confidence interval: The range of values within which we are 95% confident contains the true value, in the absence of bias. This reflects the potential error that results from surveying a sample rather than the entire population.

Statistical significance: A difference between two sample estimates is described as 'statistically significant' if there is a less than 5% chance that it is due to sampling error alone.

Notes:

Percentages presented on charts in this document use rounded data and so may not sum to 100% in all cases.

p is used in this document to indicate provisional figures due to be finalised in 2026

For more information, see www.hse.gov.uk/statistics/assets/docs/sources.pdf

Annex 2: Links to detailed tables

The data in this report can be found in the following tables:

Work-related illness

lfsillind: www.hse.gov.uk/Statistics/assets/docs/lfsillind.xlsx

Workplace injuries

lfsinjind: www.hse.gov.uk/Statistics/assets/docs/lfsinjind.xlsx

RIDIND: www.hse.gov.uk/Statistics/assets/docs/ridind.xlsx

RIDFATAL: www.hse.gov.uk/Statistics/assets/docs/ridfatal.xlsx

Costs to Britain of workplace injury and illness

COST_tables: www.hse.gov.uk/Statistics/assets/docs/costs_tables.xlsx

Other tables can be found at: www.hse.gov.uk/Statistics/tables/index.htm

Accredited Official Statistics

This publication is part of HSE's suite of Accredited Official Statistics.

HSE's official statistics practice is regulated by the Office for Statistics Regulation (OSR). Accredited Official Statistics are a subset of official statistics that have been independently reviewed by the OSR and confirmed to comply with the standards of trustworthiness, quality and value in the Code of Practice for Statistics. Accredited official statistics were previously called National Statistics (and still referenced as such in Statistics and Registration Service Act 2007). See <https://uksa.statisticsauthority.gov.uk/about-the-authority/uk-statistical-system/types-of-official-statistics/> for more details on the types of official statistics.

From 7 June 2024 the Accredited Official Statistics badge has replaced the previous National Statistics badge.

These statistics were last reviewed by OSR in 2013. It is Health and Safety Executive's responsibility to maintain compliance with the standards expected. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the OSR promptly. Accredited Official Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored. Details of OSR reviews undertaken on these statistics, quality improvements, and other information noting revisions, interpretation, user consultation and use of these statistics is available from www.hse.gov.uk/statistics/about.htm.

You are welcome to contact us directly with any comments about how we meet these standards. Alternatively, you can contact OSR by emailing regulation@statistics.gov.uk or via the OSR website.

An account of how the figures are used for statistical purposes can be found at www.hse.gov.uk/statistics/sources.htm.

For information regarding the quality guidelines used for statistics within HSE see www.hse.gov.uk/statistics/about/quality-guidelines.htm.

A revisions policy and log can be seen at www.hse.gov.uk/statistics/about/revisions/

Additional data tables can be found at www.hse.gov.uk/statistics/tables/.

Lead Statistician: [Rebecca Simpson](#)

Feedback on the content, relevance, accessibility and timeliness of these statistics and any non-media enquiries should be directed to:

Email: statsfeedback@hse.gov.uk

Journalists/media enquiries only: www.hse.gov.uk/contact/contact.htm

