Education statistics in Great Britain, 2022

Data up to March 2022
Annual statistics
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Key statistics

Ill health

160,000 workers suffering from work-related ill health (new or long-standing) averaged across the three-year period 2019/20-2021/22.

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, which includes years affected by the coronavirus pandemic, was higher than the previous period.

Source: LFS estimated annual average 2019/20-2021/22

Fatal injuries

There were 0 fatal injuries to workers in 2021/22p. The annual average over the five-year period 2017/18-2021/22 was 0 fatalities.

There were 3 fatal injuries to members of the public in 2021/22p. The annual average over the five-year period 2017/18-2021/22 was 3 fatalities to members of the public.

Source: RIDDOR, 2021/22
Note: p is used in this document to indicate provisional figures due to be finalised in 2023.
Non-fatal injuries

50,000 non-fatal injuries to workers each year averaged across the three-year period 2019/20-2021/22.

In the recent years prior to the coronavirus pandemic, the rate of self-reported non-fatal injury to workers had been broadly flat. The rate for the latest period, which includes years affected by the coronavirus pandemic, was not statistically significantly different from the previous period.

Source: LFS, estimated annual average 2019/20-2021/22
Introduction

This report provides a profile of workplace health and safety in Education.¹

This sector covers a range of educational activities across various levels. It includes pre-primary, primary, secondary, higher, tertiary (e.g. university) and other education, e.g. sport, music, arts, driving, vocational and adult education.

This sector accounts for 11% of the workforce in Great Britain.²

**Important Note:** The coronavirus (COVID-19) pandemic and the government’s response has impacted recent trends in health and safety statistics published by HSE and this should be considered when comparing across time periods. More details can be found in our reports on the impact of the coronavirus pandemic on health and safety statistics.

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¹ The Education sector is defined by section P within the 2007 Standard Industrial Classification. See [www.hse.gov.uk/statistics/industry/sic2007.htm](http://www.hse.gov.uk/statistics/industry/sic2007.htm) for more detail.

² Annual Population Survey, 2021
Work-related ill health

All illness

In Education:

- There were an estimated 160,000 work-related ill health cases (new or long-standing)
- 59% were stress, depression or anxiety

*Source: LFS, estimated annual average 2019/20-2021/22*

Education compared to industries with similar work activities

- Around 4.5% of workers suffered from work-related ill health (new or long-standing cases)
- This rate is not statistically different than that for workers across all industries (4.0%)

*Source: LFS, estimated annual average 2019/20-2021/22*

95% confidence intervals are shown on the chart.
Changes over time

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, which includes years affected by the coronavirus pandemic, was higher than the previous period.

Shaded area and error bars represent a 95% confidence interval
Latest data includes the effects of the coronavirus pandemic, shown as a break in the time series.
Source: LFS annual averages (new and long-standing cases), grouped by 3 years from 2003/04-2005/06 to 2019/20-2021/22
Coronavirus pandemic and work-related ill health

In Education:

- There were an estimated 74,000 workers suffering from a work-related illness caused or made worse by the effects of the coronavirus pandemic (new or long-standing) in 2021/22

*Source: LFS annual estimate, 2021/22*

These estimates of the number of workers who suffered work-related ill health as a result of the coronavirus pandemic should not be subtracted from the overall estimate of work-related ill health presented elsewhere. It cannot be assumed that those individuals would not have otherwise suffered a work-related illness in the absence of coronavirus.

Work-related illness caused or made worse by the effects of the pandemic in Education compared to industries with similar work activities

- Around 2.1% of workers in the sector reported suffering from a work-related illness they believed was caused or made worse by the effects of the pandemic (new or long-standing cases)

- This rate is statistically significantly higher than that for workers across all industries (1.5%)

*Source: LFS annual estimate, 2021/22*

95% confidence intervals are shown on the chart
Musculoskeletal disorders

In Education:

- There were an estimated 31,000 work-related cases of musculoskeletal disorder (new or long-standing), 19% of all ill health in this sector

Source: LFS, estimated annual average 2019/20-2021/22

Education compared to industries with similar work activities

- Around 0.9% of workers in the sector reported suffering from a musculoskeletal disorder that they believed was work-related (new or long-standing cases)

- This rate is statistically significantly lower than that for workers across all industries (1.1%)

Source: LFS, estimated annual average 2019/20-2021/22

95% confidence intervals are shown on the chart
Changes over time

In the recent years prior to the coronavirus pandemic, the rate of musculoskeletal disorders showed signs of a downward trend. The rate for the latest period, which includes years affected by the coronavirus pandemic, was not statistically significantly different from the previous period.

Shaded area and error bars represent a 95% confidence interval
Latest data includes the effects of the coronavirus pandemic, shown as a break in the time series.
Source: LFS annual averages (new and long-standing cases), grouped by 3 years from 2003/04-2005/06 to 2019/20-2021/22
Stress, depression or anxiety

In Education:

- There were an estimated 95,000 work-related cases of stress, depression or anxiety (new or long-standing), 59% of all ill health in this sector

*Source: LFS, estimated annual average 2019/20-2021/22*

**Education compared to industries with similar work activities**

- Around 2.7% of workers in the sector reported suffering from stress, depression or anxiety they believed was work-related (new or long-standing cases)

- This rate is statistically significantly higher than that for workers across all industries (2.0%)

*Source: LFS, estimated annual average 2019/20-2021/22
95% confidence intervals are shown on the chart*
Changes over time

In the recent years prior to the coronavirus pandemic, the rate of self-reported work-related stress, depression or anxiety to workers showed signs of increasing. The rate for the latest period, which includes years affected by the coronavirus pandemic, was higher than the previous period.

Shaded area and error bars represent a 95% confidence interval
Latest data includes the effects of the coronavirus pandemic, shown as a break in the time series.
Source: LFS annual averages (new and long-standing cases), grouped by 3 years from 2003/04-2005/06 to 2019/20-2021/22
Work-related injuries

The Labour Force Survey is HSE’s preferred data source for non-fatal injuries. The latest estimates show that in Education there were:

- 50,000 cases of non-fatal work-related injury
- 31% involved over three days and 24% over seven days absence

*Source LFS, estimated annual average 2019/20-2021/22*

**Education compared to industries with similar work activities**
- Around 1.5% of workers in this sector suffered from an injury
- This rate is not statistically different than that for workers across all industries (1.6%)

*Source: LFS, estimated annual average 2019/20-2021/22*  
*95% confidence intervals are shown on the chart*
Changes over time

In the recent years prior to the coronavirus pandemic, the rate of self-reported non-fatal injury to workers had been broadly flat. The rate for the latest period, which includes years affected by the coronavirus pandemic, was not statistically significantly different from the previous period.

Source: LFS, grouped by 3 years, estimated annual average from 2001/02-2003/04 to 2021/22

Latest data includes the effects of the coronavirus pandemic, shown as a break in the time series.

Shaded area and error bars represent a 95% confidence interval

Supporting information around work-related injuries is available from RIDDOR reporting. In Education there were:

- 4,653 non-fatal injuries to employees reported by employers under RIDDOR in 2021/22
- 1,879 (40%) were specified injuries and 2,774 (60%) were over seven-day injuries

Source: RIDDOR, 2021/22

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3 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, especially for the self-employed. 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.

4 For the full list of specified injuries, see [www.hse.gov.uk/riddor/reportable-incidents.htm](http://www.hse.gov.uk/riddor/reportable-incidents.htm)
Economic Cost

- The total cost in 2019/20 is estimated at £1,773 million, (95% confidence interval £1,450M - £2,095M)

- This accounts for 9% of the total cost of all work-related ill health and injury (£18.7 billion)

Workplace injury and ill health impose costs, both financial (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.

Source: HSE Costs to Britain, 2019/20
95% confidence intervals are shown on the chart
Working days lost

In Education around 2.5 million working days (full-day equivalent) were lost each year due to:

- Workplace injury (21%) and
- Work-related illness (79%)
- That is equivalent to around 1.0 working days lost per worker which is not statistically different than the all-industry level (1.0 days)

Source: LFS, estimated annual average 2018/19-2019/20, 2021/22
95% confidence intervals are shown on the chart
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 36,000 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.
Note: Percentages presented on charts in this document use rounded data and so may not sum to 100% in all cases.

For more information, see www.hse.gov.uk/statistics/sources.pdf
Annex 2: Links to detailed tables

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

Work-related illness

Workplace injuries
RIDIND: [www.hse.gov.uk/Statistics/tables/ridind.xlsx](http://www.hse.gov.uk/Statistics/tables/ridind.xlsx)

Costs to Britain of workplace injury and illness

Other tables can be found at:[www.hse.gov.uk/Statistics/tables/index.htm](http://www.hse.gov.uk/Statistics/tables/index.htm)
National Statistics

National Statistics status means that statistics meet the highest standards of trustworthiness, quality and public value. They are produced in compliance with the Code of Practice for Statistics and awarded National Statistics status following assessment and compliance checks by the Office for Statistics Regulation (OSR). The last compliance check of these statistics was in 2013.

It is Health and Safety Executive’s responsibility to maintain compliance with the standards expected by National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the OSR promptly. National 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

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/

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