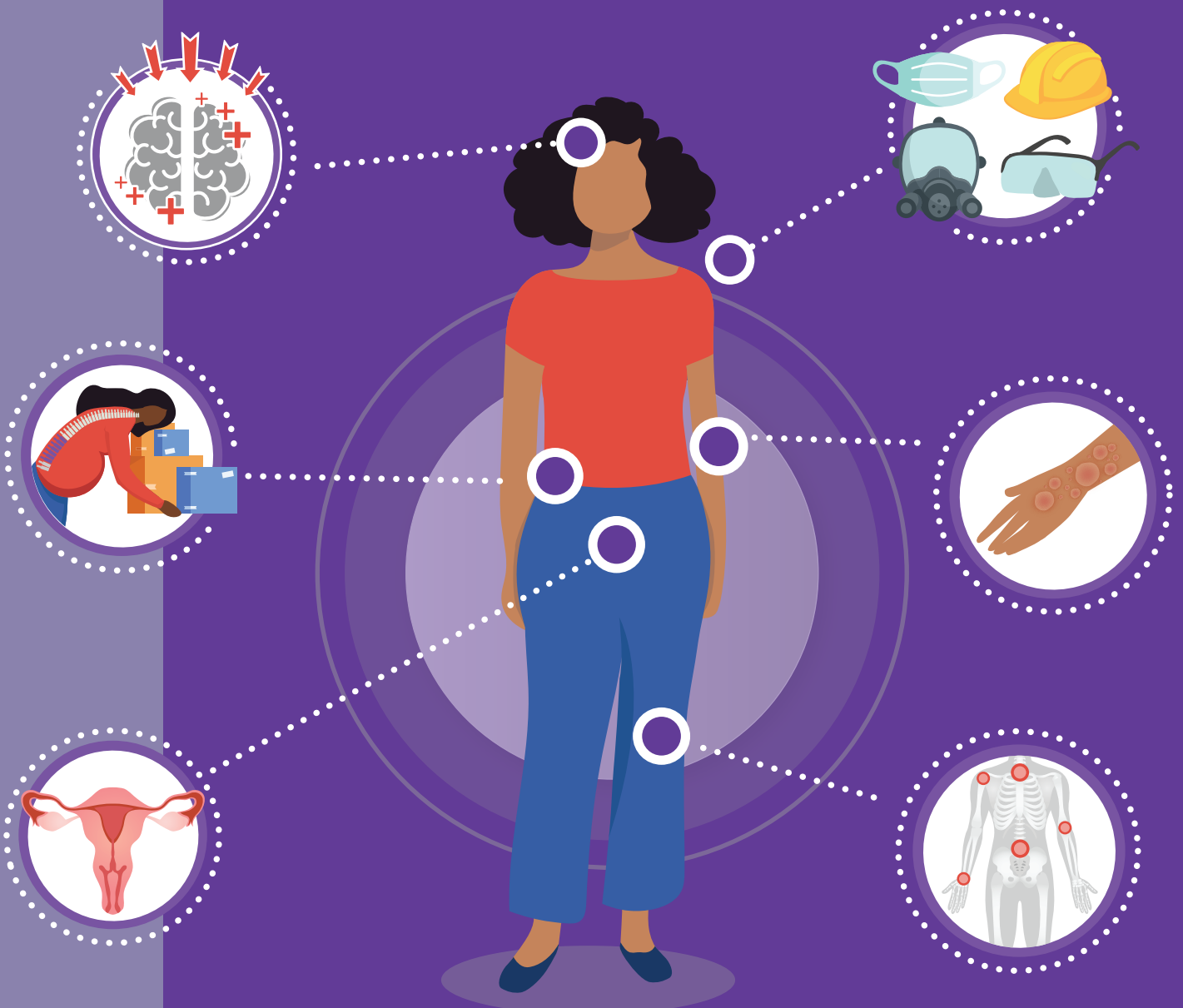


THE NEED FOR A GENDER PERSPECTIVE ON OCCUPATIONAL HEALTH & SAFETY

PRACTICAL GUIDE FOR DELEGATES



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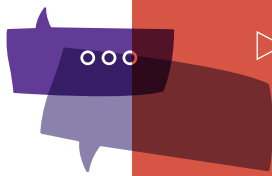
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Introduction ←

The 110th International Labour Conference held in June 2022, **recognized health and safety as one of the Fundamental Principles and Rights at Work.**

This historic decision means that **all ILO member states commit to respecting and promoting the right to a safe and healthy working environment, whether or not they have ratified the relevant conventions.**¹



▶ FUNDAMENTAL PRINCIPLES AND RIGHTS AT WORK SINCE 2022:

- freedom of association and the right to collective bargaining;
- the elimination of all forms of forced or compulsory labour;
- the effective abolition of child labour;
- The elimination of discrimination in employment and occupation; and
- the right to a safe and healthy working environment.

Millions of working people die every day from occupational injuries or illnesses.

However, workers experience different risks and different effects from these exposures to hazards. Gender, age, race, health conditions or impairments, in addition to social roles, and working conditions may increase the vulnerability of certain groups to occupational accidents or illnesses.

- ▶ **7,500 people die every day** because of occupational injuries and diseases.
- ▶ **60% of the world's population works in the informal economy (such as domestic work)**, where labour rights and other protections are poorly respected.
- ▶ Women are 29% less likely to be employed and are often in the lowest-paid and most insecure jobs, such as temporary workers, making them especially vulnerable, because of poor training and experience of safety measures.
- ▶ **Young workers:** In the European Union, the frequency of **non-fatal injuries is 40% higher amongst young people** than amongst older workers.
- ▶ **48.2% of migrant workers are women and 21.2% are young people.** Most migrants are employed in precarious and dangerous jobs, often in the informal sector or in unregulated sectors.²



40%

60%

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For this reason, we must make diversity, **including gender differences in the workforce, a fundamental factor when developing and adopting measures, policies and procedures to guarantee the safety and health of workers.**

1 - https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_848132/lang--en/index.htm
2- Labour migration: new context and governance challenges, ILO 2017

A **gender-responsive** approach recognizes that social roles, expectations and responsibilities assumed by different genders in different jobs can have specific physical and psychological risks, and therefore require specific **control and prevention measures**. We must have **accurate information** about the relationship between health and gender roles to create such measures.

This guide is part of the Women's Health Campaign by UNI Global Union's Equal Opportunities Department. The campaign will make a general assessment of major problems and risks to which women are exposed in the world of work.

The rights of all workers, including their health and safety, are better protected if they belong to a trade union. Trade unions have a key role to play in protecting the health and safety of workers and women, and in ensuring health and safety is included in collective bargaining discussions with employers.

We must also encourage more women to become leaders in our health and safety work. Our work will help to encourage women to attend training courses and ensure that their unions take into account women's health and safety issues.

We hope this guide will be a significant tool to protect our women workers and achieve decent, strong, diverse and equal workplaces around the world.

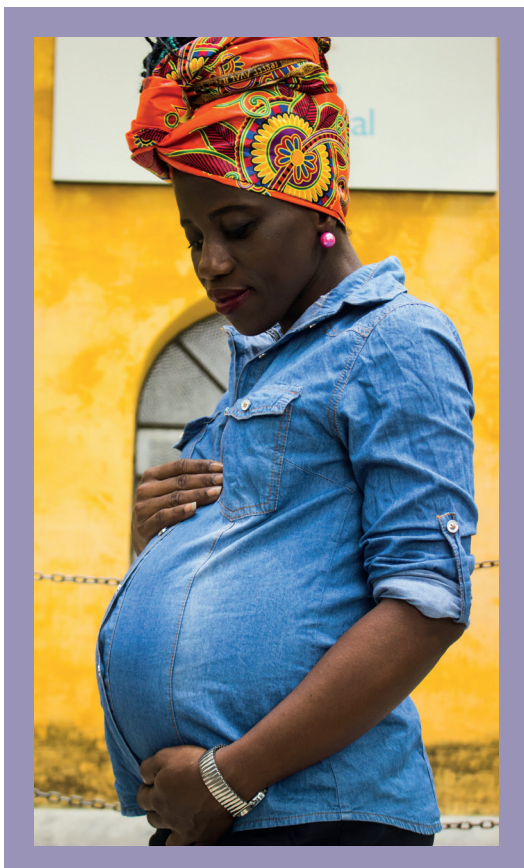
Verónica Fernández Méndez
Head of the Equal Opportunities Department
UNI Global Union

Is equality an issue in health & safety? ←

Everyone has the right to decent work and to be free from employment discrimination. This means that all genders have equal rights and should have equal opportunities in the world of work. Also, the diversity between genders must be considered.

In the area of health and safety, we have identified **three major issues** that differentiate genders in the world of work:

- ▶ **1. Segregation:** There is an unequal distribution in occupations and sectors that exposes different genders to different risks. In “masculinized” sectors, occupational accidents and exposure to physical risks dominate; while “feminized” sectors are characterized by risks such as repetitive movements, forced postures and monotonous work.
- ▶ **2. Gender Roles:** The social roles that women are assigned and the division of labour in all areas have a specific impact on women’s health. In this way, what has been termed the “double shift” – paid employment outside the home combined with caring & domestic responsibilities within the home – deteriorates the health of many women. Similarly, harassment and violence, including sexual harassment and discrimination, expose women to risks that impact on their health.
- ▶ **3. Sexual and Reproductive Health:** Reproductive healthcare affects all workers, however during pregnancy and breastfeeding, special attention needs to be paid to the working conditions of those assigned female at birth. In addition, menstruation, fertility, pregnancy loss and menopause should also be considered.



The health of women at risk ←

Exposure to hazardous substances and biological agents, which can cause adverse reproductive outcomes (including infertility, spontaneous abortions, and congenital malformations)³; the physical demands of heavy work, particularly during pregnancy; and the length of the working day (including the “double-shift”, resulting from women predominantly bearing the burden of social reproduction), are just some of the problems that specifically affect women.



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The over-representation of working women in certain occupational sectors, such as care-related jobs and retail; leads to a specific pattern of occupational injuries and diseases⁴, as women are greater exposed to repetitive tasks, high speed; awkward or tiring positions⁵.

3 - Hazardous Drug Exposures in Health Care | NIOSH | CDC

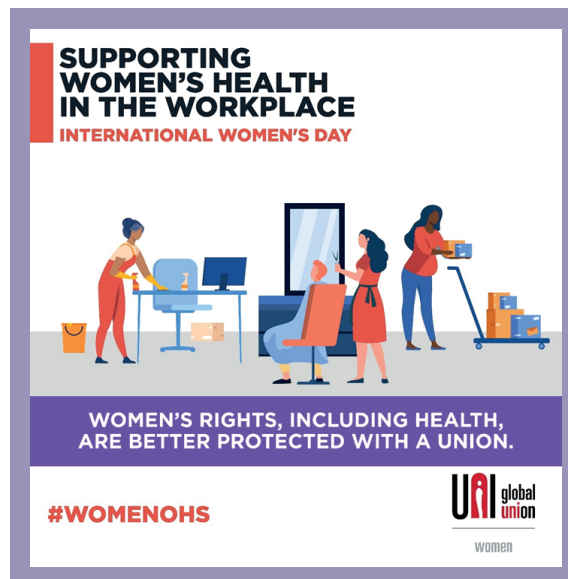
4 - According to the European Agency for Safety and Health at Work, occupational diseases for women were mostly associated with sectors such as “wholesale, retail, trade, repair” and “health and social work” Sectors and occupations - OSHwiki | European Agency for Safety and Health at Work (europa.eu)

5 - Amanda Eng I, Andrea 't Mannetje, Dave McLean, Lis Ellison-Loschmann, Soo Cheng, Neil Pearce. “Gender differences in occupational exposure patterns”, 2011.

In addition, women are more likely to experience violence and harassment in the workplace – including sexual harassment – domestic violence, bullying and employment discrimination. Violence and harassment against women can be further exacerbated by unsafe working conditions such as working in isolation, poor lighting and late night shifts.

Considering the above, general health promotion policies without a gender perspective do not achieve the desired benefits for women, given the disparity of factors affecting women's lives and health both within and outside the workplace.

The effects of gender on health need to be explored more carefully to develop a better understanding of the relationship between working women's health and their social and economic roles, and these findings need to be incorporated into policymaking.



Occupational Safety and Health Convention, 1981 (No. 155); the Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187); the Occupational Health Services Convention, 1985 (No. 161); the Labour Inspection Convention, 1947 (No. 81); Convention 190 on the elimination of violence and harassment in the workplace (No. 190).

Activity 1

Let's look at the following poster from our Women's Health Campaign. In the picture you will see women performing various jobs.

In groups, make a list of the all the possible health risks to which these three characters are exposed, considering the work they do, if they work with third parties, etc.

- ▶ What do you think happens when these women go home?
- ▶ Does their housework after completing a full workday have an impact on their health?

Once the group has discussed and reflected on these issues, a plenary discussion will take place to discuss **what a gender perspective is and why it is necessary in the prevention of health and safety risks at work.**

If the moderator deems it necessary, participants can review the concepts of gender, social roles and other key ideas of the Gender Equality Guide of the UNI Equal Opportunities Department:

[That's why! - UNI Global Union's IWD Campaign \(uni-iwd.org\)](http://uni-iwd.org)

Activity 2

Reflecting on each participant's sector of work, answer the following guiding questions:

Is my sector majority women?

- ▶ What kind of jobs do women do? Are they over-represented in low-skilled positions?
- ▶ Do women perform monotonous or repetitive tasks?
- ▶ Are women standing or in the same posture for long periods/
- ▶ Do women serve customers, patients or third parties?
- ▶ Are women working on a temporary contract or part-time job?
- ▶ Is domestic and/or care work equally distributed in my society, or is it mainly carried out by women?

Segregation: making the invisible, visible ←

Occupational segregation between genders can lead to false assumptions about who is and who is not at risk in the world of work and can create additional barriers for women’s employment in certain industries/sectors. Furthermore, it can cause women’s work, particularly unpaid work, to be invisible.

► PICTURE: HORIZONTAL AND VERTICAL SEGREGATION:

The **concentration of women in certain jobs because of preconceptions about gender and their social roles** (as educators, caregivers, etc.) is called horizontal segregation. These assumptions can exclude women from employment opportunities in certain industries such as construction or transportation.



On the other hand, vertical segregation refers to the restrictions that women encounter in their professional career within organizations, which leads them to be a minority in senior , managerial or decision-making positions.

Both gender (which describes those socially constructed characteristics) and sex (which encompasses biological characteristics) affect the lives of workers as well as their health and safety.

Gender stereotypes create a perception that working conditions in occupations traditionally performed by women are more “benevolent” than those in masculinized sectors. As a result, risks in masculinized sectors are given more attention.

While men can suffer more injuries and deaths in the workplace, the reality is that women also often work in physically demanding and repetitive jobs, such as cleaning, health and commerce.

Millions of women spend the day lifting or moving other adults and/or children, carrying food, bending down, standing for the duration of long shifts, and then return home to continue working in the domestic sphere. This labour is both physically demanding and hazardous and should be treated as such. A gender perspective is fundamental to make women’s work and effort visible and helps adapt the measures necessary to protect all workers according to the risks to which they are exposed every day.

Health and safety experts are concerned over the different effects of exposure to hazardous substances and biological agents on reproductive health, the physical demands of heavy work, the ergonomic design of workplaces and the length of the working day, especially when domestic duties are also accounted for. At present, there is a shortage of information about the different gender-related risks of chemical exposure, which may have different long-term health effects on women and men⁶.

Health risks affecting women in the world of work: “Women carrying the loads”

Musculoskeletal disorders

Musculoskeletal disorders (MSDs), such as chronic back pain, carpal tunnel syndrome and tendinitis, are among the most common health problems in the workplace and are the leading contributor to disability worldwide⁷.

Repetitive hand and arm movements, frequent kneeling, awkward positions, prolonged periods of sitting, static postures, or the need to lift or move heavy loads, including people⁸; make women in sectors such as care, finance, cleaners, commerce, postal, and hair and beauty, particularly vulnerable to these risks.

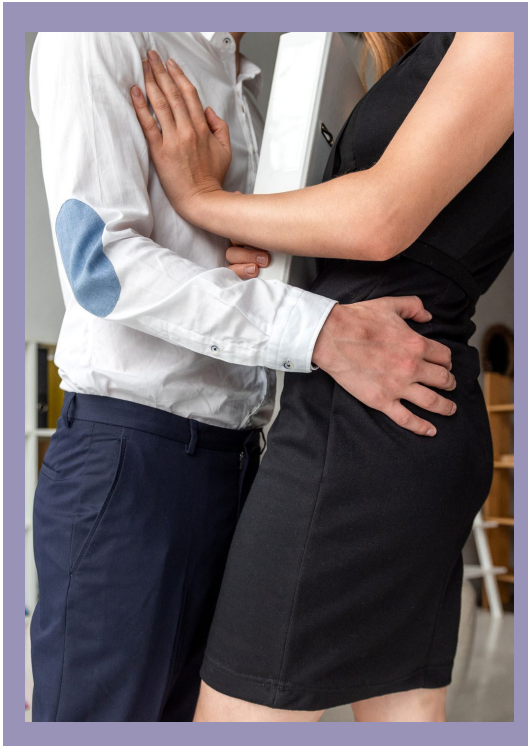
Additional factors such as psychosocial risks (verbal abuse, sexual harassment, discrimination and bullying that increase depression, stress and anxiety) as well as organizational factors (time required to perform a certain task or exposure to higher levels of work intensity), can also be determining factors that impact women at a higher rate⁹.

6 - ILO - The gender dimension: Integrating the gender perspective in OSH policies

7 - According to the World Health Organization, back pain makes for 37% of chronic diseases related to work and affects 1.71 billion people globally (Musculoskeletal health (who.int))

8 - How to be gender-sensitive when tackling MSDs in the workplace | News | Media centre (healthy-workplaces.eu)

9 - Ibid. The European Working Conditions Survey found that the prevalence of MSDs is higher among women than men. Female workers are more likely to develop one or more MSD-related health problem, including backache (reported by 45%), muscle pain in the shoulders, neck and upper limbs (reported by 44%) and the lower limbs (30%). Whereas 56% of men suffer from one or more MSD-related health problem, 60 % of female workers in the EU reported one or more MSDs.



ADDITIONAL FACTORS SUCH AS PSYCHOSOCIAL RISKS (VERBAL ABUSE, SEXUAL HARASSMENT, DISCRIMINATION AND BULLYING THAT INCREASE DEPRESSION. !



► **PSYCHOSOCIAL RISKS: STRESS, HARASSMENT AND VIOLENCE**

Women workers often face heightened psychosocial risks and situations that can cause work-related stress and/or burnout.

Jobs that include customer service and contact with third parties, including clients and patients, held more commonly by women, expose women to a greater risk of violence and harassment,¹⁰ particularly in the services and retail industries.

For women working from home, as a result of changes in the workplace due to the COVID-19 pandemic or flexibilization of work, domestic violence¹¹ is also an important risk factor.

Employers should take responsibility for remote workers' safety. They must make sure that these workers have proper work equipment and that their working times and right to disconnect are respected. Without society addressing the unequal distribution of domestic and care work undertaken by women inside the home¹², those who are now working remotely or in a hybrid form may be at greater risk of stress and/or burnout due to the demands of the “double shift”.

10 - To know more about violence and harassment in the world of work and what trade unions can do to help, go to the following website: [UNI Global Union: Break the Circle! \(breakingthecircle.org\)](http://UNI Global Union: Break the Circle! (breakingthecircle.org))

11 - For more information on the relationship between domestic violence and its effect on the workplace, go to: [Guide Delegates \(breakingthecircle.org\)](http://Guide Delegates (breakingthecircle.org))

12 - According to UN statistics, women do three out of every four hours of unpaid work ([Human Development Report 2015 | Human Development Reports \(undp.org\)](http://Human Development Report 2015 | Human Development Reports (undp.org))) this means that they are still doing most of the caregiving and household duties at home. Policies that provide support for these duties on an institutional scale can help reduce the amount of invisible work performed by women in the household but there is also a need to break deeply engrained beliefs from patriarchy in which women's values reside primarily in their capacity as wives and mothers (What is invisible labor? It's real and it hurts. Here's what to know. | Mashable)

UNI has stepped forward to support unions in collective bargaining on behalf of remote workers, creating a series of “key principles to promote remote workers’ rights virtually” and producing guidance on bargaining for humane remote working conditions.¹³

It is worth noting that women entering informal occupations are at even greater risk because of inadequate or inadequately enforced protections, causing more dangerous working conditions. These dangers are exacerbated by the lack of labour unions and other institutional worker advocates in the informal economy.

► HAZARDOUS SUBSTANCES

Exposure to chemicals (cleaning products, dyes, etc.), exposure to dusts (dust from office machinery, poor ventilation, etc.), and biological substances (human and animal waste, exposure to infectious diseases, etc.) are all hazards faced by working women in many highly feminized sectors, such as hospitality, care, cleaning and domestic work. The impact of these substances may vary depending on the sex of the exposed worker and a thorough gender-based examination should be conducted as part of any workplace safety review.

► INADEQUATE WORK MATERIAL AND UNIFORMS

Just as ergonomic equipment is necessary to avoid long-term risks to health, so is protective equipment. Unfortunately, these protections, such as goggles and face masks, are too often designed for “everyone,” without regard for physical differences or diversity. Even worse, in some industries, uniforms and tools are specifically designed for men, and women are expected to adapt them rather than employers providing adequate equipment. A male cut protective garment does not become suitable for a woman just by making it a smaller size.

When workers wear inadequate PPE not only is the PPE failing to serve its protective function, but it is creating additional hazards.

Additionally, a sexist view prevails in terms of dress codes or uniforms. In some organizations, women are pushed to wear revealing clothes or high heels, for example in some retail work or in food service. These requirements are not only discriminatory but can also add to health and safety risks like discrimination or sexual harassment.

► SEXUAL AND REPRODUCTIVE HEALTH

As previously mentioned, all workers can have their sexual and reproductive health affected by exposure to chemicals, physical exertion, and other factors, but there are certain periods in the lives of workers assigned female at birth that make them especially vulnerable to certain risks to their health (and that of their future children).

13 - Remote work: A review of unions’ collective bargaining response. UNI global union, 2022.
https://uniglobalunion.org/wp-content/uploads/Remote-work_WEB_FINAL_en.pdf

► PREGNANCY AND BREASTFEEDING

Rights around maternity protection at work are embedded in three International Labour Organization (ILO) conventions, as well as a multitude of international treaties. However, many women continue to face threats to their economic security and health as they do not have access to maternity leave before and/or after the birth of their baby and/or are dismissed or discriminated against at work because they are pregnant and/or are considered to potentially become pregnant. Pregnancy and maternity are especially vulnerable times for working women and their families. Women need special protection from working conditions that can harm them or their infants, just as they need adequate time to give birth, recover and nurse their children¹⁴.

Breastfeeding is one of the most effective ways to ensure child health and survival,¹⁵ but it is often interrupted by work and the lack of access to nursing breaks or facilities where women can pump and store expressed milk while at work. There are few workplaces that have breastfeeding policies or flexible working arrangements to support nursing mothers. These barriers make it difficult for women to resume their careers by forcing a choice between breastfeeding their infants or resuming their jobs.



¹⁴ - *International Labour Standards on Maternity protection (ilo.org)*
¹⁵ - *Breastfeeding (who.int)*

The five key elements for maternity protection at work are:

- ▶ Maternity Leave
- ▶ Pay and medical benefits
- ▶ Protection of health in the workplace, including alternative suitable work
- ▶ Protection and non-discrimination in employment
- ▶ Devices, private space and policies to facilitate breastfeeding in the workplace¹⁶

▶ **MENSTRUATION**

Some working conditions specifically affect women’s reproduction. The menstrual cycle itself can be lengthened, shortened or made irregular or more painful by exposure to solvents, cold or some types of work.¹⁷

Menstruation is a biological function that cannot be used as an excuse to exclude anyone (women, girls, people with disabilities, transgender people) from the workplace or cause shame or stigma. It should be addressed through policies that are properly drafted so as not to reinforce prejudices and, in turn, give menstruating people the possibility of having a rest period or flexible work when needed.

Proper sanitation and washing facilities in the workplace and unlimited access to facilities for sanitary breaks, are essential for the health, well-being and dignity of women¹⁸.

▶ **MENOPAUSE**

Menopause has traditionally been seen as a taboo subject in terms of employment, perceived as a private matter or “a women’s issue” and is often not an issue that is openly discussed or considered in the design of workplaces and work practices or policies.

It is a biological function that pertains to the end of the reproductive cycle and which can have serious physical, psychological, cognitive and emotional effects for those who are experiencing it, varying from person to person. The symptoms can range from physical changes like hot flushes, night sweats, weight gain, thinning hair, dry skin, to psychological ones, like mood changes and increased stress levels, as well as reduced cognitive function (“brain fog”), all the way to severe anxiety and depression.

Understanding that menopause is an occupational health issue that affects many women in the workforce, makes it a critical issue for unions. Employers must be made aware of their responsibility and adopt measures to support workers who are going through menopause.

¹⁶ - *Maternity Protection Resource Kit*. ILO, 2021

¹⁷ - MESSING, Karen. *Bent out of Shape*. 2021, p. 75

¹⁸ - <https://www.theguardian.com/business/2004/sep/05/theobserver.observerbusiness>

Activity 3

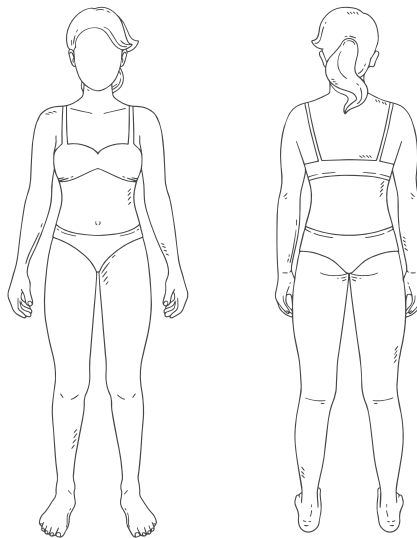
Using a picture of the human body (front and back), participants are asked to show with coloured dots places of pain or symptoms that they experience. Example: red for physiological symptoms such as hot flushes; blue for psychological symptoms, such as stress or anxiety.

► Place and compare all participant's pictures to develop an understanding of the spectrum of experiences.

Are there places on the body where many participants note pain or other symptoms?

► What kind of symptoms appear most? **For example:** if many points appear in the neck region, is it due to pain, stiffness, loss of mobility, etc.

► Can a link between these symptoms and the work tasks be established for participants, is there a pattern? **For example:** a certain posture, inadequate work equipment, particular types of movement, poor work environment, situations of violence, etc.



If it is a group of people from different sectors, they can be grouped by sector.

This type of resource is useful for investigating working conditions and occupational health and safety risks by trade union representatives. It can be used outside of an ad hoc workshop, at union meetings, or other occasions where workers can express their perceptions and concerns.

You can visit the following page that has an interactive risk map, very useful to recognize types of symptoms and possible causes:

<https://hazards.org/detective/index.htm> #

The role of trade unions in integrating a gender perspective into OHS

One of the key strategies for putting gender issues on employers' agendas, is to organize. We need more women in unions and to empower them to seek leadership positions.

When it comes to protecting women's health, trade union representatives can investigate, address and negotiate women's issues; they can encourage more women to become leaders; organize health and safety campaigns targeting women; encourage women to attend training courses; and ensure that women's health and safety issues are taken into account.

Bringing more women into trade unions brings improved working conditions; better wages; more protection from arbitrary actions by employers; more protection from abuse, harassment, violence and discrimination; more opportunities to access training, health benefits, maternity leave and pensions.

► WHAT CAN AFFILIATED UNIONS DO?

1. Work to ensure that adequate health programmes are included in workplaces and that they respond to the specific needs of women workers.
2. Campaign against any gender-based discrimination and any harmful practice that may arise from it.
3. Pressure national, regional and sub-regional governments to adopt international laws and conventions, such as the Maternity Protection Convention or the Convention on the Elimination of Violence and Harassment in the World of Work (C190).
4. Incorporate collective bargaining clauses that demand the inclusion of occupational health as an essential instrument for the eradication of violence in the workplace and consider the needs of a diverse workplace.
5. Take preventive measures from the onset at every level for both the collective and individuals and include training and information for workers.
6. Create independent occupational health and safety committees, which are essential for safe work and which fully include women to monitor the conditions, organization and working methods of workers, and making sure they take into account the biological and social needs and differences between workers.
7. Train and encourage women to know their rights and address health issues quickly.
8. Publicize the existing methods of reporting work-related injuries or illnesses.
9. Ensure that the employer conducts necessary risk assessments.

► WHAT CAN WORKERS DO?

Implementing appropriate measures to prevent occupational injuries and illnesses is the responsibility of the employer.

For their part, workers have important roles and duties, such as reporting occupational injuries, occupational illnesses, accidents on the way to work and dangerous events, as well as supporting the development and implementation of preventive measures.

Actions that workers can take include:

1. Get information and training about the reporting system at their workplace and reach out to their union representative.
2. Identify the person(s) to whom they should report workplace accidents, injuries and illnesses, suspected cases of occupational illnesses, unsafe conditions or equipment, accidents on the way to work and hazardous events, etc. This person could be an immediate supervisor or an elected health and safety representative in unionized workplaces.
3. Understand their reporting duties and familiarize themselves with any forms needed to flag an unsafe condition, injury or illness, making sure they are always at hand.
4. In the event of an accident, injury or occupational illnesses, a suspected case of illness, commuting accident, unsafe condition or dangerous event, comply with the reporting requirement in their workplace¹⁹.

Exercise their right to refuse unsafe work.

Workers have the right (and may be obliged by national legislation) to report occupational accidents and illnesses, commuting accidents, unsafe working conditions and dangerous events.

ILO standards, and national law in many countries, prohibit an employer from instituting retaliatory measures against a worker for reporting an occupational accident, occupational illness, hazardous event, commuting accident or suspected case of occupational illness.

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<http://uni-womens-health.org/>