

Mainstreaming gender into occupational safety and health

Proceedings of a seminar organised in Brussels on the 15 June 2004
by the European Agency for Safety and Health at Work

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Luxembourg: Office for Official Publications of the European Communities, 2005

ISBN 92-9191-169-0

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Printed in Belgium

PRINTED ON WHITE CHLORINE-FREE PAPER



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1. INTRODUCTION

Following the publication of its report 'Gender issues in safety and health at work, a review', the Agency organised a seminar to share and discuss the findings. The aims of the seminar were, firstly, to share information on gender and occupational safety and health (OSH) issues, particularly regarding how gender can be mainstreamed into OSH and the application of a gender-sensitive approach. The second aim was to facilitate discussion and debate among EU and national authorities, social partners and experts on how to take forward gender issues in OSH. In this way the aim was to complement the Commission's extensive work in the area of gender equality.

In addition, the Agency organised the seminar to provide an opportunity not only to present and discuss the results of its own work, but to also to provide an opportunity to discuss other European studies and practical experiences from the national level.

Finally, the seminar provided an opportunity for key experts from both the safety and health field and the equal opportunities field to get around the table and share experiences and discuss the way forward. Experts and decision-makers from the Member States, the European Commission and the European social partners participated in the workshop.

This paper is based on the presentations of speakers from different Member States and European bodies on key topics and the comments and viewpoints of the seminar participants.

Aims

To take forward the findings of the Agency report on gender and occupational safety and health and in particular to:

- share information on taking a gender-sensitive approach in OSH and how gender can be mainstreamed into OSH;
- facilitate discussion of how to take forward gender issues in OSH.

The Community strategy on safety and health at work 2002-06

Acting on the established EU policy to mainstream gender into all its policy areas ⁽¹⁾, the 'Community strategy on safety and health at work 2002-06'⁽²⁾ formally put the incorporation of gender issues into the Community occupational safety and health agenda as an objective. It stresses that measures should be taken to ensure that gender is mainstreamed throughout the strategy. In particular, it includes a number of complementary objectives to its overall objective of bringing about continuing improvement in well-being at work, which must be jointly targeted by all players. These objectives include mainstreaming the gender dimension into risk evaluation, preventative measures, and compensation arrangements, so as to take account of the specific characteristics of women in terms of health and safety at work.

Up to now, the existing EU approach to occupational safety and health has been 'gender neutral', which means that gender issues and differences are ignored in policy, strategies and actions. Because there are substantial differences in the working lives and the employment situation of women and men, policy decisions that appear gender neutral may have a differential impact on women and men, even when such an effect was neit-

(1) 'Community framework strategy on gender equality 2001-05', COM(2000) 335 final of 7 June 2000.

(2) 'Adapting to change in work and society: a new Community strategy on health and safety at work 2002-06', COM(2002) 118 final of 11 March 2002.



her intended nor envisaged. Gender sensitivity and gender mainstreaming are new areas to many in the OSH field, so further discussion and debate are needed about how to effectively raise awareness of the issues and take account of gender in OSH.

The employment agenda

According to European statistics, women make up 42 % of the EU workforce. Increasing the percentage of women in employment is one of the fundamental objectives laid down at the Lisbon European Council (23 and 24 March 2000). The increase in the participation rate of women in employment makes it all the more important to address the gender dimension in health and safety at work. On the other hand, the objective of the Lisbon Summit was not just the creation of more jobs, but also the creation of quality jobs. Quality includes good, safe and healthy working conditions, so in order to get and keep women in employment, attention must be paid to the health and safety of the jobs that women do.

Approaches to gender

- X gender stereotyped – differences accepted or exaggerated, for example, the woman is viewed as the weaker sex, and equality is not promoted
- X gender neutral/blind – equality promoted by ignoring differences – but there can be hidden discrimination, for example if approaches are based on male norms
- √ gender sensitivity – incorporation of gender differences, issues and inequalities into strategies and actions
- √ gender mainstreaming – taking the gender and equality dimension into account in all policies and activities, in the planning, implementation and evaluation phases



2. A GENDER-SENSITIVE APPROACH TO OSH? FINDINGS AND PRACTICE

2.1. Some findings from the Agency review of gender issues and safety and health at work

Sarah Copley, European Agency for Safety and Health at Work

The recently published report by the Agency on gender and OSH (see section 6, 'Further information') covered many areas, and this presentation highlights a few of the findings, particularly those related to the subject of the seminar – gender sensitivity and mainstreaming in relation to gender and OSH.

Job segregation is one of the key influences on the gender differences seen in the exposure to occupational hazards and accidents and diseases suffered. Men and women are strongly segregated into different work sectors, and hold different positions in the jobs hierarchy. For example, men predominate in the construction sector, women in the healthcare sector. Women are more likely than men to be in low paid jobs and less likely to hold supervisory or managerial positions. In addition, women still carry out a greater proportion of unpaid work in the home, and if paid and unpaid work are added together, women are seen to work longer hours than men.

As a result, women are more likely to suffer work-related stress, musculoskeletal disorders – other than back injury – and health problems such as dermatitis, while men are more likely to suffer accidents and health problems from exposure to physical agents such as noise. We can see that the safety and health problems suffered by men are more visible and more likely to be directly linked to a single cause. The fact that risks to male workers are often more evident than those faced by women, together with the OSH focus historically having been on male workers and the traditional industries where they work, are among the reasons that the health and safety of women workers has received less attention than that of men. To redress this balance, gender needs to be systematically mainstreamed into all areas of OSH.

With respect to gender sensitivity in OSH and gender mainstreaming, some relevant conclusions and recommendations arising from the report are listed below.

- Improvements are needed in OSH for both women and men; however, there are imbalances in prevention, for example, more attention is still paid to risks to male workers and the 'traditional' industries where men are more likely than women to be employed.
- Improvements are needed to research and OSH monitoring. Research gaps in areas more relevant to women and their work should be filled, for example, risks from standing work, work and menstrual disorders, etc. OSH research programmes should be systematically examined to ensure that they are balanced in terms of topics relevant to both women and men. The methodology of studies should ensure that any gender differences can be examined. A systematic approach is needed to including gender in OSH monitoring programmes and statistical collection of data, to ensure that data is collected and analysed by gender, and that the statistical indicators used are relevant.
- The main framework of European OSH directives is neutral in approach to gender, and this neutrality allows less attention to be paid to OSH risks to women workers. However, the requirements in the directives, such as risk assessment, are broad in nature, meaning that they are flexible enough to be applied in a gender-sensitive way. Indeed, there already exist many good examples of how to include gender in OSH actions and activities in practice. Such good practices need to be investigated and shared.
- Women are less involved than men in OSH decision-making, for example because they are less likely to hold managerial positions, and are less represented in trade union hierarchies.
- Across Europe there are general trends regarding gender and OSH, such as the trends in exposure of women and men to different risks, but there are also some individual country differences that should not be ignored.
- Women (or men) are not a homogeneous group – they are not all the same. For example, issues such as age and ethnic origin should also be taken into account as necessary.
- A holistic approach to OSH is needed to improve prevention, for example considering women's double workload and including work-life balance as an OSH issue.



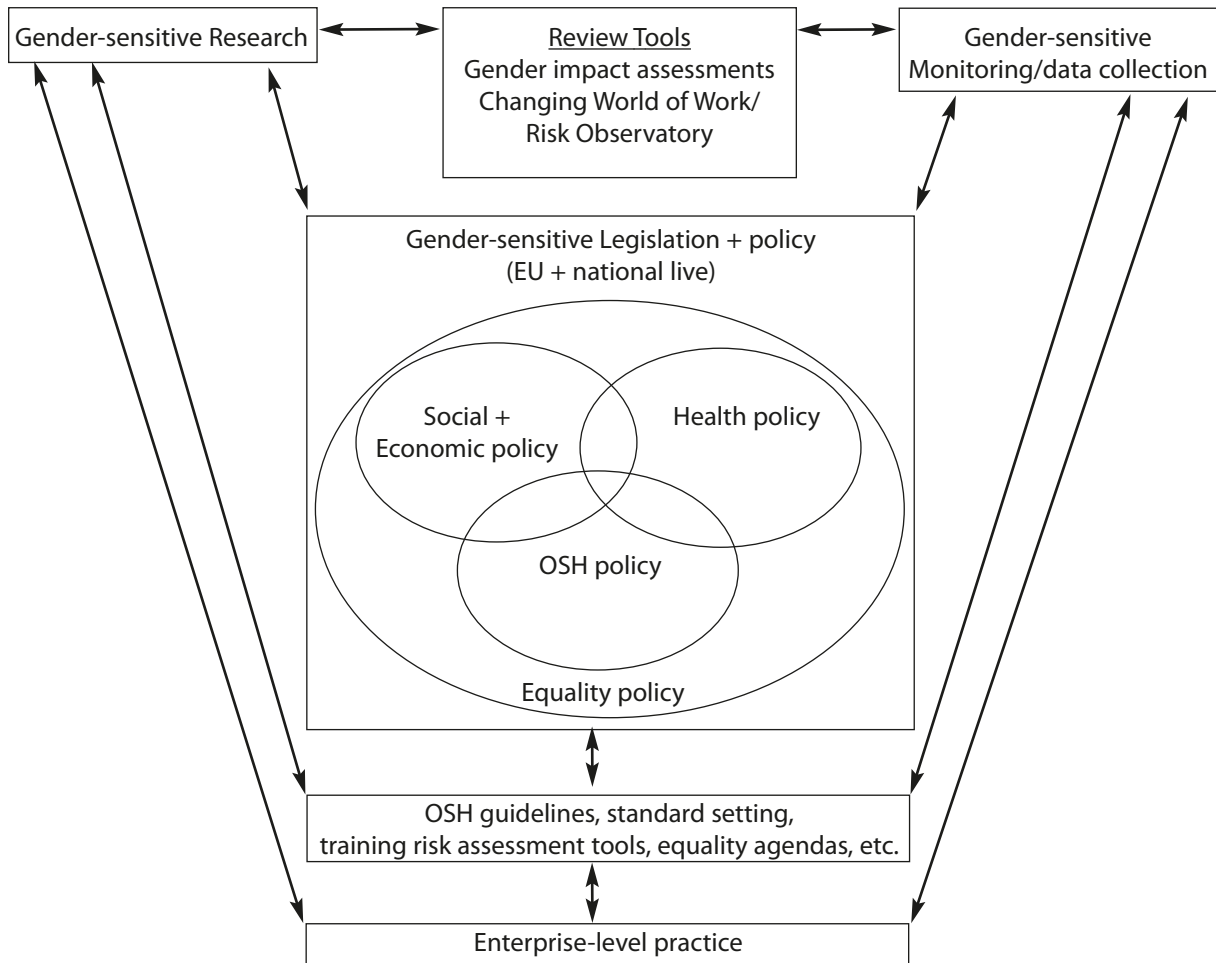
- OSH must also be mainstreamed into gender equality actions, for example by including OSH in employment equality action plans.

It is crucial to establish as an automatic process the assessment of the gender impact of OSH policies and actions, including the OSH implications of changes in the world of work etc. and proposed responses. As an aid to making 'gender checks' while devising policy, carrying out investigations or making risk assessments it is important to:

- avoid making prior assumptions about who faces particular risks and avoid stereotyping the risks that women and men encounter at work;
- include women's jobs and consult them;
- look at real work situations;
- match jobs, tasks and equipment to actual workers;
- include work-life balance as an OSH issue;
- take a holistic approach to risk prevention.

In conclusion, the Agency report presents good reasons for the need to systematically mainstream gender into OSH, in order to improve prevention for both women and men. There are gaps in knowledge and in actions and activities taking place, but it is possible to apply existing legislation in a gender-sensitive way and there are examples of good practice of how to do this.

Figure 1: Action levels for mainstreaming gender into the OSH system



2.2. Women's working conditions in a new enlarged European Union: an overview of the Foundation's data ⁽³⁾

Sabrina Tesoka, European Foundation for the Improvement of Living and Working Conditions ⁽⁴⁾

Regarding the position of women and men in the labour markets: female labour force activity rates were very high in 1989, ranging between 70 and 90 % of working age women, but since then all 10 central and eastern European countries (CEECs) have suffered a massive decline in female activity and women's employment rates in the CEECs are now lower than in the EU-15. Women's unemployment rates are nearly 50 % higher in the CEECs than in the EU-15.

Regarding the gender segregation of the European labour markets: the jobs into which women and men are segregated show a similar pattern in the CEECs and the EU-15 (for example, the workforce is most male dominated in construction in both regions, and most female dominated in education, health and social work). For the male-dominated sectors in the EU-15, the degree of segregation is greater in terms of male domination in construction and manufacturing. In the CEECs, segregation is greater in the degree of female domination of the feminised sectors of public services and hotels and restaurants. Female domination is the same (53 per cent) in wholesale and retail. The greatest contrasts between the CEECs and the EU-15 are in manufacturing, which is far less gender segregated in the post-Communist countries, and in finance, which is male dominated in the EU-15, but female dominated in the CEECs.

Men's and women's distribution patterns between the private and the public sectors in the CEECs are worth mentioning: in most countries, apart from Romania, the public sector takes a larger share of women's employment than the private services. Job creation in private services seems to have mostly concerned male workers.

Regarding occupational segregation: in both the CEECs and the EU-15, women tend to occupy white-collar professional and lower professional and semi-professional positions. Men still dominate managerial positions as well as the blue-collar skilled labour group. However, the differentials seem to be less significant in the CEECs than in the EU-15. More women in the CEECs compared to the EU-15 have subordinates: 23.9 % of men in the EU-15 have subordinates against 12.9 % of women; in the CEECs, 20.6 % of men have subordinates against 16.8 % of women.

Regarding working time and employment status: the gender gap in hours worked is much smaller in the CEECs than in the EU-15, with men working only roughly two hours longer than women in the CEECs, while this is 13 hours in the EU. Part-time work is not very well developed in the CEECs. There is also less gender difference in the CEECs for workers working 10 or more hours per day.

Regarding training: fewer workers report having received training in the last 12 months in the CEECs than in the EU-15. The gender difference between workers who have received training is less marked in the CEECs than in the EU-15 (1.2 % difference in the CEECs against 1.7 % in the EU-15).

Regarding discrimination and health risks: the table shows that fewer workers in the CEECs consider their jobs as health risks (54.3 % of men and 61.8 % of women against 68.5 % of men and 76.5 % of women in the EU-15). In both the EU-15 and the CEECs, women seem to be more sensitive to health risks related to their jobs.

⁽³⁾ The data presented is based on 'Third European working conditions survey in EU-15' (EWCS) – 2000; 'First European working conditions survey in the new Member States and candidate countries (then ACCs)' – 2001; forthcoming foundation report on 'Gender, work and employment in central and eastern Europe CEEC (8 Laeken countries plus Bulgaria and Romania)'.

⁽⁴⁾ Sabrina Tesoka was unable to attend the seminar and this is a summary of the presentation she intended to make.



Table: Percentage of men and women who stated that they experienced discrimination and considered their jobs as health risks ⁽⁵⁾

	EU countries (2000 data)		CEECs (2001 data)	
	Men	Women	Men	Women
Ever felt discrimination (%)	11.5	16.7	12.6	11.6
Health risk (%)	68.5	76.5	54.3	61.8

'Women seem to be more sensitive to health risks related to their jobs'

Sabrina Tesoka, European Foundation for the Improvement of Living and Working Conditions

2.3. OSH in workplace equality plans

Kaisa Kauppinen, Finnish Institute of Occupational Health

Through equality planning both OSH and gender equality objectives and activities can be promoted. The aim of the Finnish act on equality between women and men (609/1986) ⁽⁶⁾ is to prevent discrimination on the basis of gender and to promote equality between men and women, and, for this purpose, to improve the status of women, particularly in working life. The act will be renewed in the near future, and the role of equality planning will be emphasised in the new act. In 2004, the draft for the act has been in the parliamentary process and, after acceptance, will come into force.

Employers' duties to promote equality are identified in the equality act. The employer must, with due regard to the available resources and other relevant factors:

- act so that both women and men apply for vacancies;
- promote an equitable recruitment of women and men in the various jobs and create equal opportunities for promotion for them;
- develop working conditions so that they are suitable for both women and men, and facilitate the reconciliation of working life and family life for women and men; and
- ensure, as far as possible, that an employee is not subjected to sexual harassment.

A public or private sector employer that regularly employs a staff of at least 30 shall include in the annual personnel and training plan, or the action plan for labour protection, workplace-specific measures to promote equality between men and women in the workplace ⁽⁷⁾.

Measures promoting equality are workplace-specific. They are affected by the resources available to the employer, other concrete workplace and typical business factors such as the size of the organisation and financial resources and professional competence. Equality planning should be viewed as an integral part of the operations and management culture of the workplace. All parties involved should benefit from it: the management, the employees and the customers. It is important that the management is fully committed to developing equality actions within the workplace.

The objective of the Finnish occupational safety and health act (738/2002) is to improve the working environment and working conditions in order to ensure and maintain the working capacity of employees. In addition, occupational accidents and diseases should be prevented and other hazards to physical and mental health from work and the working environment should be eliminated.

⁽⁵⁾ European working conditions surveys, EU-15 and CEECs, 2000–01.

⁽⁶⁾ Act on equality between women and men – Equality issues in Finland. Office of the Ombudsman for Equality, Ministry of Social Affairs and Health, Finland. Equality Brochures 1998:2

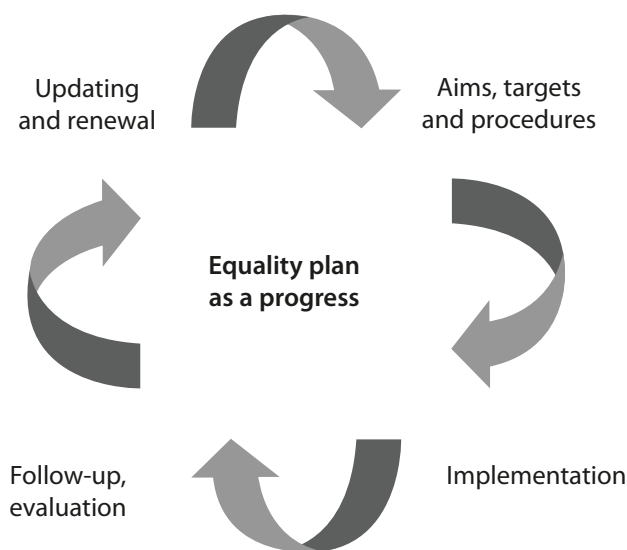
⁽⁷⁾ Toolkit of gender equality – Equality planning at workplaces. Office of the Ombudsman for Equality, Ministry of Social Affairs and Health, Finland. Equality Brochures 2000:1.



Some of the key items of this act are: ergonomics, work postures and work motions; avoiding and reducing workloads; work with a display screen; threat of violence; harassment; lone working; and good housekeeping, order and cleanliness in the workplace. The act also encourages cooperation between employers and employees in order to maintain and improve safety and health in the Finnish workplaces. The new occupational safety and health act includes several items referring to the so-called psychosocial risks at work which should be controlled for the improvement of safety and health at work. This fits in well with the concept of equality planning. In Finland, one third of the public and private sector employers who are required to do so have already agreed on an equality plan.

Through equality planning both OSH and gender equality objectives and activities can be promoted. Equality planning should be viewed as a process, which starts with a preliminary charting or a survey of the situation at the workplace (see Figure 2). It is important to identify the aims and targets and specify the procedures to attain them. The follow-up provides information on what has been achieved and what still remains to be done. Based on the evaluation and follow-up, new aims and targets can be created.

Figure 2: Equality planning as a process ⁽⁸⁾



Equality planning is workplace-specific, concentrating on different aspects depending on the workplace. The plan can deal with such questions as: the hierarchy of the personnel; recruitment policy; wages and wage structure; use of family leave; working conditions and workplace atmosphere; and personnel training and occupational advancement. For example, men's and women's use of parental leave options and leave for caring for a sick child can be charted for a year and objectives set to encourage both women and men to use these options more equally. Equality planning can be a motor for change.

In industry, the equality plans have mostly focused on wage and wage structures as well as on promotion of safety and health, e.g. applying ergonomics in order to attract women into industrial work which has been male-dominated and often regarded as too heavy for women. Good examples in this regard are the equality plans of the Valmet Automotive plant and Cloetta Fazer Chocolates Ltd. The equality plan of the police force concentrates on recruitment policy, creating a woman-friendly atmosphere and introducing zero tolerance of sexual harassment. The City of Helsinki equality plan ⁽⁹⁾ concentrates on problems of ageing personnel and their challenges for management and the occupational healthcare system.

⁽⁸⁾ Saari, M., S. Mustakallio and P. Sevelius. Tasa-arvosuunnittelu. Henkilöstön ja johdon yhteinen asia. (Equality planning. A shared issue for personnel and management.) Suomen Elintarviketöläisten Liitto SEL ry 2004.

⁽⁹⁾ City of Helsinki equality plan: http://www.hel.fi/kkansl/heos/tasu/tasu_e.html



'Through equality planning, both OSH and gender equality objectives and activities can be promoted'
Kaisa Kauppinen, Finnish Institute of Occupational Health

2.4. A gender-sensitive approach to OSH research and monitoring

Maria Castriotta, Tiziana Paola Baccolo and Stefania Massari, ISPESL, Italy

In Italy, since the 1970s, the proportion of those employed who are women has increased from 27 % in 1972 to 38 % in 2003, equal to approximately 22 million workers. The labour market has also changed. As in other European countries, the number of women employed in Italy in agriculture and in industry dropped, while a steady increase was recorded in the trade and service sectors. In 2002, the presence of women in agriculture was 3.7 %, in industry 19.6 %, while women employed in services represent 76.7 % of all women employed. Within the services sector, commerce, education, healthcare and other social services rank first for the presence of women. With regard to their professional position, 78.9 % of women are employed in subordinate work, while only 21.1 % are self-employed. Among employees, women are mainly white-collar workers (45.4 %), followed by blue-collar workers at 26.9 %. Managers and the like (including executive officers and middle managers) account for only 5.6 % of the total number of women employed.

In 1999, a survey ⁽¹⁰⁾ was carried out of Italian OSH research on women in the period from 1970 to 1994. It showed that 125 epidemiological studies were published on the effects of working environment on the Italian female workers' health. One of the weak points identified in relation to gender is that most epidemiological cohort studies considered the effects of exposure on health in typically male occupations. Thus, the female portion of the cohort was very small. Case-control studies reported data on 'female' exposure, but especially with regard to tumours, investigations were carried out on low-incidence anatomic sites in women (e.g. ovary, intestines, bladder). Some sectors were studied more than others in their 'female components', like textiles, laundry, beauty centres, hairdressers and hospitals, due to the high percentage of female labour force or to the high frequency of diseases that affect women in particular (e.g. carpal tunnel, phlebopathies).

ISPESL is committed to gender-related research and monitoring activities regarding traditional and new research lines such as reproductive health, psychophysical well-being, occupational carcinogenicity and dissemination of information. Several projects regarding the relation between occupational exposure to dangerous substances and reproductive health are being carried out. They focus on both female and male fertility in some industrial sectors, crafts, agriculture and services; the incidence and types of birth defects, abortions and birth weight; the effects of exposure to chemical, physical and biological agents; and on the stress arising from shift work, strain and an inadequate working environment.

One project studied the relation between women workers' occupational exposure to lead and menopause osteoporosis. The research was based on the observation of retired women affected by lead intoxication symptoms. The results showed that high blood lead levels in older women were caused by the release of lead which had accumulated during previous years of occupational exposure at the bone level and re-circulated later because of menopause osteoporosis.

Another project was carried out to detect the psychophysical well-being of educational personnel (mostly women) of preschool kindergartens in the municipality of Rome. The results showed alarming situations with a high percentage of emotional exhaustion causing lack of interest in the assigned tasks. The results of this project indicate the complex nature of the system of interpersonal relations as the most crucial element that

(10) Pirastu R. et al., 'Health and work among women in Italy: An overview of the epidemiological literature', *Eur J Epidemiol.*, 15(1): 51-57.



can often lead to conflicting situations. In fact, the work of educators necessarily implies contact with different stakeholders involved in the educational process (e.g. children, parents, institutions). Adequate organisational tools are therefore essential elements in such a delicate working environment.

ISPESL is also involved in implementing surveillance systems on occupational carcinogenicity. The highest risk sectors for women (i.e. leather and footwear industry, textile industry, health services, services in general, in particular hairdressers) have been the object of various epidemiological studies and monitoring programmes, such as the national mesothelioma register (RENAM) ⁽¹¹⁾ and the occupational cancer monitoring project (OCCAM). In the period 1993–96, 789 cases of mesothelioma were reported in the RENAM, of which 221 related to women. Women aged over 65 had the highest number of cases. A relevant issue emerging from this registry is that Italy presents the highest female to male ratio in the world in this respect: 1 to 2.57. This means that approximately two women for every five men are affected by mesothelioma.

The OCCAM project is based on a case-control study and consists of matching data coming from various registers. It assesses risks resulting from exposure to carcinogens present in various economic sectors. The results are expressed in terms of relative risks (RR), indicating the probability of people working in a specific sector being affected by a type of cancer. The findings of the OCCAM project indicate an excessive risk among women employed in the leather and footwear industry of being affected by colorectal cancer, stomach cancer, nasal cavity cancer and thyroid cancer. The outstanding data regarding nasal cavity cancer are already well known, while the three remaining cancer sites are new data and need to be further investigated.

All the results arising from the research projects support ISPESL's information and dissemination activities. A project carried out by the ISPESL documentation department produced a webpage dedicated to women, work and health, published on the ISPESL website ⁽¹²⁾. It contains references to scientific articles, publications, legislation and regulations concerning gender issues, indexed in seven general categories and subcategories. The ISPESL documentation department, acting as part of the European Agency's network of focal points also produced an Italian translation of the Agency report 'Gender issues in safety and health at work – A review' ⁽¹³⁾.

Figure 3: ISPESL's gender web page can be found at: <http://www.ispesl.it/dsl/Home.asp>

(11) Nesti M. et al., Il Registro Nazionale dei Mesoteliomi. Primo Rapporto (Rome: ISPESL), 2001.

(12) <http://www.ispesl.it/dsl/Home.asp>

(13) Prospettive di genere applicate alla salute e sicurezza del lavoro – Stato dell'arte (Rome: ISPESL), 2004.



3. GENDER SENSITIVITY IN OSH – THE WAY FORWARD IN THE EU

3.1. The challenges and opportunities from an equalities perspective

Fay Devonic, Head of unit, Equality for women and men unit, European Commission

Taking account of occupational health and safety is very important for equality, as well as achieving mainstreaming of gender and properly addressing reconciliation of work with family life. Gender mainstreaming is a task for the European Union, now set out in the Treaty of the European Union, but it is not an easy task. Mainstreaming in general is not easy, and gender mainstreaming is even more difficult.

To make progress, health and safety has to be taken out of its niche, in the same way that we are taking gender equality out of the ghetto of those dealing with it. This is what is needed to succeed, as it is no good just keeping it with those who are already convinced. The challenge is to mix it up – that is the essence of mainstreaming. And this is what is interesting, challenging and inspiring: dealing with the issue where not everyone agrees with everything. So it is very important to pinpoint the problems in order to know what recommendations can be made and steps taken in the future.

Reconciliation of work and home life, or work-life balance, is a key issue for both gender equality and the success of the EU employment strategy's objective to get more women into the job market, but it is another difficult area. There are some supportive pieces of legislation, such as on parental leave, but again, a successful result can only be achieved through all working together, women, men, social partners, etc. And in practice, ways have to be found to be sensitive to cultural differences, recognise differences in rural areas, and the link to stereotypes. Indeed, combating stereotypes is another key issue that must be addressed not only in the context of reconciliation of work and home life, but in relation to the whole area of gender equality.

'To make progress, health and safety has to be taken out of its niche, in the same way that we are taking gender equality out of the ghetto of those dealing with it'
Fay Devonic, European Commission

3.2. Gender mainstreaming and the role of the Community OSH strategy

Bernhard Jansen, Director, Adaptability, social dialogue and social rights directorate, European Commission

The Community strategy on health and safety at work 2002–06⁽¹⁴⁾ is an important policy document adopted in March 2002 that contains a four-year programme for the European Community's activities on safety and health at work. It takes account of changes in society, forms of employment and risks. One important change that it addresses is the 'increasingly feminised society' and women's increased participation in employment, which is coming about partly because there is a political will and economic need to involve more women in gainful employment.

There are over 30 directives on occupational safety and health at work, covering issues such as manual handling, construction work and dangerous substances. These directives are typically relevant to hazards in the work of male manual workers, reflecting that when the directives were developed the emphasis was on a traditional male job setting. Europe's industrial pattern is now changing, particularly with the growth in the services sector, and women are the main part of the workforce in this sector, for example, in education, health-care or tourism. These sectors present very different work circumstances compared to construction sites. For example, psychosocial risks are more prevalent, including stress, psychological harassment, sexual harassment and violence arising from working with members of the public.

(14) 'Adapting to change in work and society: a new Community strategy on health and safety at work 2002–06', COM(2002) 118 final of 11 March 2002.



In developing research and in identifying risks, one needs to take account of risks to women workers so as to take appropriate preventive actions. The Commission and the strategy recognise that there is a need to concentrate more in future on psychosocial risks, allergies, etc., including research in these areas.

Increased globalisation means that a high level of employment is important. The Commission also wants to encourage older workers of both sexes to continue working, and the strategy recognises demographic changes in employment.

The Commission has been supporting the European social partners to take initiatives to address OSH issues in the context of these changes in European workplaces. For example, the European social partners have finalised an agreement on call centres⁽¹⁵⁾, and this includes measures addressing stress. In the cross-industry social dialogue, the social partners have agreed, in their multiannual work programme 2002–2005, to deal with stress and violence at work, among other things. The social partners are in the process of agreeing a text on stress⁽¹⁶⁾, with guidelines on how to approach this relatively new type of risk, emphasising the issues from the viewpoint of the social partners.

Another development is the risk observatory that the European Agency is setting up, and without doubt these new risks include risks to which women are specifically exposed.

Psychosocial risks can lead to physical problems if no action is taken, for example they can trigger cardiac diseases etc., and so they must be considered as serious risks. There are a number of factors that combine to produce risks of developing stress and this means that we still do not have all the necessary prevention tools or information available.

In the future, we need to ensure that changes in society are reflected in the measures taken. In the past the legislative instruments helped establish methods for measuring risk, but this is more difficult for psychosocial risks as they are more difficult to measure. So how can psychosocial risks be evaluated and assessed? How can appropriate preventive actions be taken? The general framework directive⁽¹⁷⁾ is applicable, but it needs filling in with more specific measurement tools and data. Therefore legislation is not the only answer and not necessarily the appropriate answer. The fact that the social partners have recognised the risks and want to cooperate on preventing these risks is very important, as their experiences can be incorporated into the appropriate response. In 2005 the Commission will launch a consultation of the social partners on another psychosocial risk area, namely violence (including harassment) at work.

The public authorities remain responsible for enforcement, but they need appropriate support to do this and the actions at European level that have been mentioned are part of that support.

'In the future, we need to ensure that changes in society are reflected in the measures taken'
Bernhard Jansen, European Commission

(15) 'Guidelines on customer contact centres', telecommunications social dialogue committee, agreed 15.06.04.

(16) European framework agreement on work-related stress, agreed 24.10.04.

(17) Council Directive 89/391 of 12 June 1989 on the introduction of measures to encourage improvements in the safety and health of workers at work.



3.3. A gender-sensitive approach to OSH prevention at workplace level

Véronique Cazals, Mouvement des Entreprises de France (MEDEF), representative of UNICE

Current European legislation in the field of occupational safety and health (OSH) has introduced a better level of protection for all workers. The place and role of women in the workplace and their working conditions, including health and safety, are now a concern for public authorities, researchers, and of course for employers and workers and their representatives in Europe.

Far from being ignored, the gender issue is increasingly being taken into account in employment and health and safety policies at European and national levels. Increasingly, research, agreements, regulations, guidelines and good practices in the Member States are focusing on the integration of women in the labour market and the quality of their working lives.

For example, in France, a recent agreement has been signed at the national level between the three employers' organisations (MEDEF, CGPME, UPA) and the French trade unions, concerning equal treatment for men and women (covering employment, training and payment). It puts new obligations on sectors and companies in order to promote the employment and working conditions of men and women.

While the protection of women in the workplace should be fully integrated into social policy, actions to integrate gender into the social policies of companies have already existed for some time and have increased, particularly since the beginning of 2000. Such actions include agreements about the equal treatment of men and women at work, their working conditions, and work-life balance, such as the agreements signed recently in some major French companies, including Peugeot, Renault, Thales, and France Telecom. The next step will be to develop such initiatives in many more companies and especially in SMEs.

It is important to develop a global policy against gender segregation, and to promote this idea at the cultural level. Where there is an unequal distribution of work in the home, with women carrying out the majority, this adds considerably to their daily work time and puts extra pressure on these women workers. However, this problem cannot be solved only at company level or by employers: it needs some cultural changes in the society, which are not within the scope of employers' responsibilities.

Making prior generalisations which classify women into a specific target group should be avoided during workplace risk assessment. Generalisations may be misleading and counter efficient to improving working conditions. The whole workforce has to be protected from workplace risks, women as much as men. In this respect the current EU legislation already covers the protection of all workers from exposure to hazards and also covers the protection of any particularly sensitive groups. In accordance with this, companies conduct risk assessments and take appropriate measures. Women will not be a sensitive group in all circumstances, nor will younger workers or older workers, etc. This can only be determined in relation to the nature of activities of a company, the hazards present, the exposure situations, the extent to which they are likely to affect one category of workers more than others and so on. Differentiation on a gender level seems not to be appropriate. Nevertheless, further research could be undertaken on whether some agents affect women in a fundamentally different way to men.

As companies in the EU are already required to manage health and safety, especially through the use of a full risk assessment, it is not necessary to revise the regulation concerning risk assessment to include a gender-sensitive approach. It is not possible to assess real rates of work-related risks – accidents or illness – or ascertain whether women or men, or young workers, for example, are more vulnerable through exposure to certain work hazards. These considerations can only be taken into account at company level, where the employer assesses whether part of the workforce is exposed to specific hazards. Moreover, relevant EU legislation already provides protection for women in specific situations where higher protection levels are required, as in the case of pregnant workers or those who are breastfeeding.

Today, most policies, strategies and actions take account of differences in the workforce (younger workers, women, etc.) and in the research area there are many examples of studies that focus on women's working con-



ditions. But in practice, a gender-sensitive approach to occupational safety and health will be most effective where it is promoted by the companies, taking account of the specific risks that the workers are exposed to.

The solution is not to elaborate a gender-sensitive approach in the European legislation, and in the regulations of the Member States: it is the role of employers to identify hazards or specific conditions of hazards that could affect women at work. But the gender approach must increasingly become a part of social policy and be taken into account as a way of improving working conditions, quality of work, and improved efficiency, with the ensuing economic and social benefits for companies, workers and society as a whole.

'The gender issue is increasingly being taken into account in employment and health and safety policies at European and national levels'

Véronique Cazals, Mouvement des Entreprises de France

3.4. The TUTB study on gender sensitivity in occupational safety and health: some results and their implications Laurent Vogel, Trade Union Technical Bureau, representative of ETUC

The TUTB carried out a survey ⁽¹⁸⁾ in 2001–02 among organisations in the European Union to investigate the extent of the inclusion of gender in occupational safety and health and how this was done. The survey was sent to various types of organisations, including trade unions, research institutions, OSH organisations and equality organisations. The survey received 150 replies and various differences were noted in the responses. One fifth of the responses were from research institutions, but the response rate from equality organisations was very low. It appears that equality organisations in Europe do not find it very useful to include occupational safety and health in the equality agenda as it is seen to be a very technical, specific topic for the health and safety specialists. But this finding is quite strange because, for example, in India, Brazil, USA and Canada, health and safety is more easily included and recognised as an essential part of the equality agenda if you want to promote a mixed workplace. For example, there is a clear link between equal pay and OSH, as there is a tendency to ignore health and safety elements in the low paid, peripheral jobs of cleaners, cashiers, etc., and also limited attention is given to their working conditions.

In the survey, organisations were asked what type of activities they had undertaken regarding gender issues and occupational safety and health. There was much more 'knowledge' oriented work than 'action' oriented work reported. 70 % of activities reported involved carrying out surveys, or producing statistics, etc., while only 30 % involved actions aimed at prevention. Most actions were limited in nature, such as the production of a pamphlet, and only a few consisted of long-term actions to change the workplace.

The study highlighted some important differences and implications regarding research approaches. The TUTB found some very important information in surveys and research carried out by individual trade unions, including at the local level. Making surveys to investigate issues is one of the strong traditions that trade unions have and local branches often carry out their own research or surveys to gain evidence if they want to change something. A second tradition is their attention to equality, which includes a broad approach to equality issues. The most interesting surveys combine both.

Trade union surveys include a subjective approach. Objective statistics only give a very basic view. Subjective approaches take workers' perceptions into account, and uncover issues overlooked in 'objective' research. This has shown that workers' views of the workplace are different for women and men. For example, women have reported that menstruation is an occupational health issue, but this has not been reflected in traditional research.

⁽¹⁸⁾ For more details see: Vogel, Laurent, 'The gender workplace health gap in Europe', TUTB, 2003, and the TUTB website: <http://www.etuc.org/tutb/en/women.html>



To analyse working conditions a multidisciplinary approach is also needed, including medicine, epidemiology and ergonomics. It is important to study the life of people, the working life of people and the impact both have on OSH. No single discipline can provide the complete picture, so research activities must open up to this multidisciplinary approach.

Another finding of the study was that women workers have less access to preventive mechanisms, as shown by trade union surveys and some ministry data. For example, in a survey ⁽¹⁹⁾ of women from different companies in Tuscany, only 17 % of women were involved in the risk assessment carried out by the employer; 83 % of women were not involved, which means either that there was no risk assessment at all or that the risk assessment was a unilateral exercise made by the employers or experts paid by the employers without any participation from the workers. And we have to bear in mind that these results are from workplaces that have a trade union, so this is not even the worst situation. The Spanish Ministry of Labour found a difference between men and women workers answering questions such as 'did you receive training for health and safety?', with men answering more positively than women on all items ⁽²⁰⁾.

The TUTB has also looked at the occupational health indicators used in the EU and has found some strong biases resulting in the underestimation of risks to women workers. Indicators include officially reported accidents and the registration of occupational diseases, the traditional indicators, and self-reported data from Labour Force surveys and the European working conditions surveys. Only a minority of women feature in the traditional occupational disease recording systems. However, in the answers to questions in the Labour Force Survey asking the person if they consider that they have a disease linked to their work, little difference is seen in the responses between women and men. But if only figures from recognised industrial disease systems are looked at, huge differences are seen, with men far more likely to be compensated than women. The occupational disease recognition system therefore needs a radical reform to reflect the reality of work-related illness. However, until now, at the EU level there only exist recommendations, which are voluntary, so each Member State is left to take whatever action it deems to be appropriate.

Regarding the question of whether additional preventive legislation is needed in the EU to protect women, the TUTB is of the opinion that a specific law on gender and prevention is not required, as the gender issue should be integrated into the existing legislation. However, we still need to take a critical view of existing provisions, and revise them or introduce new instruments where this is shown to be necessary. For example the existing directive on pregnancy ⁽²¹⁾ is limited because it does not cover all reproductive risks and, in addition, it only manages risk in individual cases. It does not act to remove risks at the collective level, but harm may already have occurred once a woman realises that she is pregnant. And while musculoskeletal disorders (MSD) are not a problem specific to women, they are more exposed to the hazards, yet the EU legislative framework is inadequate on MSD as it only specifically addresses manual handling and, to a certain extent, working with a visual display unit (but the specific directive on visual display units is too focused on vision).

'We see a clear link between equal pay and OSH, as there is a tendency to ignore health and safety elements in the low paid, peripheral jobs of cleaners and cashiers, etc.'
Laurent Vogel, Trade Union Technical Bureau

⁽¹⁹⁾ Massai, 2002 and Arena & Valzania, 2003.

⁽²⁰⁾ Data from the fourth Spanish survey on working conditions, 1999.

⁽²¹⁾ Council Directive 92/85/EEC of 19 October 1992 on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding.



4. DEVELOPING A GENDER-SENSITIVE APPROACH TO OSH – PERSPECTIVES, EXPERIENCES, DISCUSSION OF PROBLEMS, SOLUTIONS AND PROPOSALS

During the day, speakers and participants raised a number of challenges that need to be tackled, potential problems that need to be avoided and issues that need to be attended to.

The seminar provided an opportunity to share experiences and practical proposals for moving forward on gender issues in occupational safety and health. Seminar discussion focused on the following questions.

- What should the main priorities/aims regarding OSH and gender be?
- What are the main challenges envisaged?
- What practical steps could those in the equalities field be taking to mainstream OSH into their activities?
- What practical steps could those in the OSH field be taking to mainstream gender into their activities?
- How can we achieve effective cooperation between equality areas and OSH areas on gender issues? What existing forums could be used to bring the two communities together?
- Who should be taking action on the various priorities: policy-makers, social partners, authorities, equality commissions, think tanks, research funding bodies, national bodies, EU bodies, those involved in statistical data collection? What are their roles?
- What more should we be doing to ensure that we have improved information on gender issues in OSH? This includes research programmes, research methods and data collection and analysis, including by our own national authorities?
- What lessons can be learnt from specific actions already taken/presented at this seminar? What can be done to include such individual actions in a broader approach or recommendations?
- How can we improve both sharing of experiences and monitoring of experiences in a systematic way?
- What commitment can participants offer to take forward the issue of gender and OSH? What common actions can be agreed upon?

4.1. Perspectives

The discussion part of the seminar opened with statements from representatives of employees' and employers' organisations and a government ministry.

Gertrud Breindl, from the Austrian Ministry of Economics and Labour observed that women workers are not a homogeneous group, meaning that we have to be sensitive to a diverse workforce. Priorities for achieving a gender-sensitive approach include raising awareness and convincing key players, including at company level. This is a real challenge, so social partners need to be called on to take action. A certain routine for gender impact assessments or checks on legislation and on setting preventive measures in the workplace needs to be established. This presents another challenge, although it should be simple in reality if it is made routine to carry out a gender check in advance. It is also important to inform those in the field of equalities about the framework of occupational safety, as there seems to be a lack of knowledge on their part.

In August 2003 the Austrian labour inspectorate began a project on mainstreaming gender into OSH, involving the labour inspectors and the central labour inspectorate. The project has two aims: firstly, to mainstream gender into the organisation of the labour inspectorate and the working lives of inspectors, as this also makes them more aware of gender issues; and, secondly, to mainstream gender into the daily OSH work of the labour inspectorate. The project team has been developing guidelines for inspectors, for example, about always speaking to both women and men at the company level, and including certain questions that they should ask themselves about their interventions, such as 'does my advice cover both women and men workers?' or 'will my advice have results for both women and men workers?' The initiative is being supported by training for inspectors.



'We need to establish a certain routine for gender impact assessments or checks'
Gertrud Breindl, Ministry of Economics and Labour, Austria

Steven Sumner, from the UK Employers Organisation for Local Government and representing the European Centre of Enterprises with Public Participation and of Enterprises of General Economic Interest (CEEP), commented that public sector employers welcomed the Agency's report on gender. It raises many interesting points and will stimulate debate. The public sector recognises and values the contribution made by women employees and also the importance of recruiting and retaining women in the workforce. The public sector is committed to securing the health, safety and welfare of all employees, both men and women. Employers therefore need to incorporate both health and safety and equality into their actions.

Public sector employers particularly recognise the importance of social dialogue to take forward issues such as these, including at the EU level (in a similar way to the agreements on teleworking and work-related stress). Additional statutory instruments are not required to deal effectively with gender issues and OSH, as this can be done under the existing framework directive on OSH. The current risk assessment protocol allows for the consideration of gender within that process. As a first step it is essential to raise awareness of gender issues to ensure that employers properly and adequately consider them during the application of the risk assessment process.

UK guidance on risk assessment introduces the five step approach. Within this approach the second step is to ask who can be harmed by the identified hazards. With the second step employers should be considering effects of identified hazards on both women and men. There is a need to boost the profile of women in this process and improve guidance to assist employers in recognising hazards and diseases to women. Then appropriate measures should be implemented to prevent, or control to an acceptable level, the risks to all employees, both women and men.

UK local authorities are committed to developing good practice on health and safety and gender issues. There is an equalities standard which seeks to ensure that local authorities mainstream equalities issues into their activities. The challenge is to ensure that gender, health and safety considerations are adequately reflected within the standard.

'The first step is to embark on an awareness raising exercise and ensure that women are properly covered in the process'
Steven Sumner, Employers Organisation for Local Government, UK

Catelene Passchier, representing ETUC, stated that ETUC also believes there is a need for awareness raising and recognition of the gender issue. She remembered the first time that she encountered equalities issues in this respect: at a meeting of women bus drivers, the health and safety delegate explained that it was not due to their weakness that they complained about problems arising from cold temperatures at work, but that it had to do with their biology as women. This started a whole debate about how to deal with gender differences at work.

Night work was previously banned for women so that they could look after children. Then the ban was removed as it was decided that everyone is equal, but this approach does not work either, as it does not take into account that women still carry most of the responsibility at home. With regards to discussion on working time and the directive itself, it would be useful if bodies such as the Agency could look at work-life balance in order to obtain a greater understanding of the health and safety aspects of combining work and family responsibilities (long hours, stress, etc) and what can be done in this area.



Some other issues that should be noticed include gender stereotypes, violence to women, and the link between OSH and other working conditions.

In the past, trade unions had a male view of employment, seeing women as just having a modest job, for example as a cashier. Young women performed much of the work and it was temporary work, so it was not considered important and insufficient attention was paid to these women workers. But in fact there are many problems in these jobs, including workplace temperatures and poor ergonomics. So the social partners have a big role to play to take the issue of gender sensitivity forward. But support is needed to do this, for example from research.

Health and safety structures for consultation and decision-making can be a problem, if linked to works councils, as these are male-dominated. If women's voices want to be heard we have to rethink the structures, so this has to be discussed within ETUC, with our affiliates and with employers.

The reconciliation of work and family life has an overlap with occupational safety and health, so hopefully there will be more joint working and actions between OSH and equality, including on this issue.

'Health and safety structures for consultation and decision-making can be a problem, if linked to works councils, as these are male-dominated. If women's voices want to be heard we have to rethink the structures, so this has to be discussed within the ETUC, with our affiliates and with employers'
Catelene Passchier, ETUC

Gender and OSH actions

A variety of different gender and OSH actions or proposals for actions were reported during the seminar.

- The Danish trade union organisation, LO, has started to instruct shop stewards using coaches in order to facilitate a gender-sensitive approach to understanding different workplace issues. The shop stewards are coached every month in order to give them the skills to identify where and how gender issues are present at the worksite. There is a specific focus on change processes and discussion about how inappropriate gender divisions can be prevented. There are 10 networks with approximately 10 participants in each. Positive results have included negotiations to improve women's wages and the work environment.
- The equality programme of the Finnish government includes elements with implications for OSH activities. The government directs actions especially towards improving mental well-being at work, maintaining working ability, and work-life balance through, for example, flexible working-time arrangements. In addition, special needs of the ageing workforce are considered. The programme emphasises that equality policies should also be evaluated from the male perspective, and men are strongly encouraged to take parental leave ⁽²²⁾.
- Ireland and Northern Ireland are currently engaged in transposing the voluntary protection programme (VPP) from the USA to Ireland and Northern Ireland. The VPP is a programme run by OSHA in the USA which recognises excellence in health and safety. Both the Health and Safety Executive in Northern Ireland (HSE NI) and the Irish Health and Safety Authority (HSA) are running a pilot programme with eight companies participating – all of them US companies. There is a steering group that comprises representatives of OSHA, HSE NI and HSA, which oversees the project. One objective of this steering group is to ensure that the gender dimension is included and addressed and this issue will be on the next agenda.

(22) Equality programme of the Finnish government: <http://www.stm.fi/Resource.phx/eng/index.htm>



- Inclusion of groups of workers in compensation schemes is important, as this influences action in the workplace, to avoid compensation payment. For example, following some research, textile workers became eligible for compensation, and at that point workplace improvements were made.
- In Denmark, during the past 25 years, alkyd paints dissolved in white spirit have been substituted with water-borne paints. Female painters were previously removed from the job when they became pregnant, but then a compound in the paint was changed, enabling them to continue in the job.
- There is company-level intervention in J&J in France to facilitate work-life balance: employees' families are regularly invited to the workplace for free-time activities and sports activities. The aim is to integrate the families into the company spirit. There are children's club activities and a big event, called 'family day', once a year

4.2. Challenges in taking gender issues in OSH forward

Mary Dorgan, Assistant Chief Executive of the Health and Safety Authority of Ireland, opened the general discussion session by raising a number of important issues. The challenge is how do we take gender and put it into the middle of the occupational safety and health agenda. There is data at macro level but data should be obtained from the individual country level as well. Everybody from the workplace level to the policy side should be included. The gender impact of working conditions is much more dramatic than is realised and the challenge is to get actions and measures that everyone can live with.

The participants identified and discussed a number of key challenges, which are described below.

Avoiding stereotyping and the creation of a 'deficit model' of women workers

Approaching the issue of gender sensitivity has to be done carefully to avoid misunderstandings about what it means. Those working in the field are aware that it means being sensitive to difference in a context of equality. It means awareness that women and men do not face the same risks and that they do not necessarily act the same way in the same situation. This must be taken on board in occupational safety and health policy.

Restricting women from doing dangerous work, or creating special 'female' workplaces is a gender stereotyping action, not a gender-sensitive action. But how do we avoid others taking a stereotyped view of gender? There will be those who will view the need to include gender in evaluations in terms of the old stereotypes of women as weaker, less capable at work, more susceptible or vulnerable or a problem (the 'deficit model').

The perceived solution to this way of thinking is often that all problems would be solved if women were more like men. But the need to analyse the risks that women and men face and take appropriate action does not mean the reintroduction of protective policies of exclusion. Nor does it mean developing different jobs for women and men, as the OSH response should be to adapt work to real people, not fit workers to jobs. Equally, issues such as stress and musculoskeletal disorders are not just issues affecting women - they affect women and men. It is therefore important not to marginalise or ghettoise women and the OSH issues they face.

An example of good practice is the above-mentioned example of female painters who were originally removed from the job when they became pregnant, but then it was decided that a compound in the paint should be changed, enabling pregnant women to continue in the job. So the work was adapted to workers and not the other way around.

Avoiding a backlash

The promotion of a gender-sensitive approach must be done itself in a sensitive way. An unsubtle approach could provide the basis for a backlash regarding equalities in OSH issues, both at policy and workplace level. There are at least two types of 'backlash' attitude to be avoided: the attitude that 'gender is about saying that



only women are at risk' and the attitude 'why all this talk of gender when we know that it is still men facing the most accidents and deaths at work'.

Including everyone

OSH is an issue that affects both women and men. Therefore OSH actions need gender proofing for both women and men. The implication of this is that everyone must be included in actions, whether at the workplace or the policy level. A greater focus on diversity in the workplace would be helpful in this respect.

Working together

There exists an equalities main agenda and an OSH main agenda. The task is to bring these together. But each is currently in its own niche. Each has its own methods and vocabulary and each sees the other as complicated and problematic. This seminar has been an example of bringing these two agendas together.

Understanding the issues, asking the right questions, adapting tools

Getting the right answers starts with asking the right questions. The way problems are defined and investigated is very important. Any health promotion strategy should start with investigations, and start with the experiences of women and men. One of the crucial issues is to look at the jobs people really do. The equalities field can bring and apply to the OSH field the experiences of investigations that take place under equal pay for equal work legislation, where a male job is compared to a female job. Carrying out these types of investigations makes you look at the work people really do (not just job descriptions), and techniques and training have been developed to do this. This evaluation approach could be adapted to OSH risk assessment in order to improve it.

4.3. Proposals for taking gender issues in OSH forward

Various proposals were made for taking forward gender sensitivity and mainstreaming of gender into OSH.

More gender sensitivity

Gender sensitivity is needed in research, policy and prevention practices to ensure effective prevention and avoid bias in occupational and health practices. Awareness of the need for a gender-sensitive approach and support in achieving it are needed at all levels. More research as well as good practices are needed in order to activate this process.

Gender mainstreaming

Gender should be mainstreamed into all areas of occupational safety and health both at EU and national level. Concrete measures and tools should be created to guide mainstreaming process into OSH policies, programmes and practices at all levels. Gender impact assessments should be applied as a mainstreaming tool.

Gender checks of actions arising from the Community strategy and of directives

Member States must produce national implementation reports on the Community OSH strategy, and as gender is part of the strategy, the reports should cover gender. Reports on the transposition of OSH directives should cover gender in a systematic and comprehensive way. Gender issues should also be routinely considered in all OSH policy areas, such as the European regulatory framework for registering, evaluating and authorising chemicals (REACH).



Common meeting point: work-life balance

One issue that the equalities and OSH fields could cooperate together on is work-life balance and working hours. But in doing so, it is important to remember that it is not just an issue for women, as, for example, men working long hours have less time to contribute to helping at home.

Commission activities – Advisory committee, cooperation, policy development

It was pointed out that cooperation across several policy areas may sometimes be required. For example, in the Commission, standardisation work is covered by the Enterprise and Industry DG, not the Employment, Social Affairs and Equal Opportunities DG.

Gender issues should be addressed at a meeting of the advisory committee on safety, hygiene and health. It should become part of the daily work of the committee and they should routinely consider gender issues, including in the work of each ad hoc group set up to discuss specific topics.

EU research programmes

It should be possible to make use of the Commission research programmes for investigating OSH and gender issues. Areas to cover could include the investigation of new risks or new sectors and types of work, and also specific health issues that can affect women and men.

Increasing women's participation in OSH decision-making

It is important to increase women's participation in occupational safety and health decision-making at all levels. Women are still lacking or are in the minority in the OSH decision-making bodies. Women's own views, their experiences, knowledge and skills should be reflected when formulating and implementing health-promoting activities at workplaces as well as in national and EU-level policies.

Achieving a multidisciplinary approach and cooperation across policy areas

It was agreed that a multidisciplinary approach was needed, and that it was not so easy due to compartmentalisation of disciplines and policy areas and differences of approach. Those who should be involved include employers, gender units, statistics units and researchers. The involvement of women's organisations is important to assist with awareness raising and policy development. Common terminology needs to be found and developed. For example in the Finnish language, the terms such as 'well-being or wellness at work' (työhyvinvointi) and 'working ability' (työkyky) have been broadly adopted as they are felt to be accessible and user-friendly.

Social partner role and agreements

The social partners can play an important role by incorporating gender issues into all agreements that they are negotiating. Sector groups could take the Agency model for gender-sensitive risk assessment and adjust it to their sector.

Labour inspectors' role

Labour inspectors have some responsibility for setting the right climate. What influence can labour inspectors bring to bear on a one-to-one level at the workplace? What influence can they bring to bear at the broader prevention level in order to reach workplaces?

Continued efforts are required to ensure that the health and safety directives are complied with, as this would benefit all workers.



Improving information

It is important to ensure that there is a systematic approach taken to include gender in national and EU statistics, surveys and research, in order to provide clear documentation, as this is the basis of taking issues forward. Further investigation and comparing EU Member State differences from a gender perspective in working conditions and occupational health outcomes is important, in order to see if and why there are any differences. Differences between south and north are interesting as well as differences between the new and old Member states.

Developing and maintaining a network

Forums for mutual dialogue and exchange of good practices should be created. Networking is important to help develop ideas and continue the flow of new ideas.



5. CLOSING REMARKS – COMMON GOALS AND COOPERATION

Hans Horst Konkolewsky, European Agency for Safety and Health at Work

The issues of gender and OSH should not be treated separately. Gender mainstreaming as a strategy should be adopted. The overall goal of the EU is to improve working conditions and the examination of gender issues is part of the process of looking for ways to improve prevention as a whole.

Within this context, the Agency carried out its project on gender and OSH. It was initiated at the instigation of the Member States, while the representatives of the Agency board, including government and social partner representatives, unanimously supported the project. It is therefore not a one-off, isolated activity ⁽²³⁾.

The Agency will continue to play a role within its area of competence by incorporating gender into its activities, for example by addressing gender issues in the work of the Agency risk observatory, and through the promotion of good practice, including reporting any examples of good practice that are sent to the Agency. Feedback is also expected on the practical method that is proposed for the inclusion of gender in risk assessment activities ().

However, other actors in OSH and equalities must be the driving force to take the issue forward, and it is clear that a cooperative approach is needed. Common points of connection and a common understanding of issues are needed, and both can learn from each other and make use of their different approaches. By joining forces, equalities and OSH can move forward together.

'Examination of gender issues is part of the process of looking for ways to improve prevention as a whole'
Hans Horst Konkolewsky, European Agency for Safety and Health at Work

(23) Equality programme of the Finnish government: <http://www.stm.fi/Resource.phx/eng/index.htm>



6. FURTHER INFORMATION

All Agency publications are available online and can be downloaded free of charge. Some are available in print from the Office for Official Publications of the European Communities in Luxembourg (<http://publications.eu.int>) or from its sales agents (<http://bookshop.eu.int>).

Reports are available in English, magazines are available in four EU languages and factsheets are available in at least 11 official Community languages.

'Forum' is available in four EU languages at <http://osha.eu.int/publications/forum/>.

Other Agency resources where information related to this topic can be found include the following.

- The Agency's report on 'Gender issues in occupational safety and health – a review' is available from <http://osha.eu.int/publications/reports/209/en/index.htm>
- Two factsheets based on the findings of the report are available in 13 languages:
Factsheet 42 – 'Gender issues in safety and health at work' is available from <http://osha.eu.int/publications/factsheets/42/en/index.htm>
Factsheet 43 – 'Including gender issues in risk assessment' is available from <http://osha.eu.int/publications/factsheets/43/en/index.htm>
- The Agency's website has a section devoted entirely to issues of women and health at work: http://europe.osha.eu.int/good_practice/person/gender/

The EU Community strategy on safety and health at work and related information are available on the Internet at <http://europe.osha.eu.int/systems/strategies/future/>.
http://europa.eu.int/eur-lex/en/com/pdf/2002/com2002_0118en01.pdf

The European framework agreement on work-related stress between ETUC, UNICE, UEAPME and CEEP, signed 8 October 2004, can be accessed at [http://tutb.etuc.org/uk/newsevents/files/accord-cadres %20STRESS.pdf](http://tutb.etuc.org/uk/newsevents/files/accord-cadres%20STRESS.pdf)

Guidelines on customer contact centres', telecommunications social dialogue committee, agreement between ETNO and UNI-Europa, signed on 15 June 2004
http://europa.eu.int/comm/employment_social/soc-dial/pdf/telework_guide_en.pdf



European Agency for Safety and Health at Work

Mainstreaming gender into occupational safety and health

Luxembourg: Office for Official Publications of the European Communities

2005 – 27 pp. – 21 x 29.7 cm

ISBN 92-9191-169-0

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European Agency for Safety and Health at Work

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Publications Office

Publications.eu.int

ISBN 92-9191-169-0



9 789291 911691