Gender issues and diversity in occupational safety and health

First Conference of Director Generals
Dublin, April 18th – 20th 2004
“Making a Difference” A Future For European Workers

Hans-Horst Konkolewsky
Director
EU Policy Agenda

• **The Lisbon objectives include:**
  – *Increase employment participation rates*
  – *Not only to create jobs, but quality jobs*

• **Strategic role of OSH to achieve objectives – OSH improvements will:**
  – *Facilitate getting workers into employment*
  – *Enable workers to stay in employment*
  – *Ensure work and workplaces suitable for a diverse population*
• OSH Policy and action must take account of an increasingly feminised and diverse working population
• New challenges for OSH to address:
  – Young and older workers
  – Gender
  – Workers with disabilities
  – Migrant/immigrant workers
• Importance of mainstreaming OSH into other policy areas
Aims of the Agency gender study

In order to support the development of policy and action, to explore:

- Gender differences in workplace injury and ill health – What? Why?
- Gaps in knowledge
- Approaches being taken to gender and OSH – policy and practice
- What further action can be taken
Methodology of Agency gender study

- **Review of scientific literature, current policy and good practices**
- **Carried out by the Agency with the input of experts from OSH institutions in the Member States**
- **International peer review group**
Employment rate of men and women

Employment rate of men and women (15-64), 2000

Black: men; colour: women.
Different jobs, different work circumstances

• **Gender segregation strong:**
  – Horizontal: not same jobs
  – Vertical: less women in senior positions
• **Women’s greater home responsibilities**
• **Higher proportion of women in low paid, low skilled, part-time and precarious jobs**
• **Discrimination of women has OSH impact**
Gender and sectors

<table>
<thead>
<tr>
<th>Sector</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private households and extra-territorial</td>
<td>5</td>
<td>95</td>
</tr>
<tr>
<td>Health and education</td>
<td>25</td>
<td>75</td>
</tr>
<tr>
<td>Other community services</td>
<td>44</td>
<td>56</td>
</tr>
<tr>
<td>Sales, hotel and catering</td>
<td>47</td>
<td>53</td>
</tr>
<tr>
<td>Public administration</td>
<td>44</td>
<td>56</td>
</tr>
<tr>
<td>Financial services</td>
<td>42</td>
<td>58</td>
</tr>
<tr>
<td>Agriculture</td>
<td>34</td>
<td>66</td>
</tr>
<tr>
<td>Manufacturing</td>
<td>27</td>
<td>73</td>
</tr>
<tr>
<td>Transport and communications</td>
<td>25</td>
<td>75</td>
</tr>
<tr>
<td>Utilities</td>
<td>16</td>
<td>84</td>
</tr>
<tr>
<td>Extraction</td>
<td>16</td>
<td>84</td>
</tr>
<tr>
<td>Total</td>
<td>44</td>
<td>56</td>
</tr>
</tbody>
</table>
Workers for whom the immediate superior is a woman

<table>
<thead>
<tr>
<th>Country</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK</td>
<td>28</td>
</tr>
<tr>
<td>FIN</td>
<td>28</td>
</tr>
<tr>
<td>S</td>
<td>28</td>
</tr>
<tr>
<td>UK</td>
<td>28</td>
</tr>
<tr>
<td>F</td>
<td>20</td>
</tr>
<tr>
<td>IRL</td>
<td>20</td>
</tr>
<tr>
<td>NL</td>
<td>20</td>
</tr>
<tr>
<td>P</td>
<td>18</td>
</tr>
<tr>
<td>B</td>
<td>17</td>
</tr>
<tr>
<td>I</td>
<td>17</td>
</tr>
<tr>
<td>L</td>
<td>17</td>
</tr>
<tr>
<td>A</td>
<td>16</td>
</tr>
<tr>
<td>D</td>
<td>16</td>
</tr>
<tr>
<td>E</td>
<td>13</td>
</tr>
<tr>
<td>EL</td>
<td>8</td>
</tr>
<tr>
<td>EU</td>
<td>19</td>
</tr>
</tbody>
</table>
## Gender differences

**hazard health outcome/more exposed**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deaths and accidents</td>
<td>men</td>
</tr>
<tr>
<td>Upper limb disorders</td>
<td>women</td>
</tr>
<tr>
<td>Heavy lifting</td>
<td>men</td>
</tr>
<tr>
<td>Stress</td>
<td>women</td>
</tr>
<tr>
<td>External violence</td>
<td>women</td>
</tr>
<tr>
<td>Noise/hearing loss</td>
<td>men</td>
</tr>
<tr>
<td>Occupational cancer</td>
<td>men</td>
</tr>
<tr>
<td>Asthma, allergies</td>
<td>women</td>
</tr>
<tr>
<td>Infectious diseases</td>
<td>women</td>
</tr>
<tr>
<td>Inappropriate tools/PPE</td>
<td>women</td>
</tr>
<tr>
<td>Reproductive hazards</td>
<td>both</td>
</tr>
<tr>
<td>Inappropriate work hours</td>
<td>both</td>
</tr>
</tbody>
</table>
Women workers more likely to:

• Suffer work-related stress, including confrontation with violent members of the public – hospitals, shops
• Be exposed to health problems
• Work in highly repetitive jobs
• Suffer work-related allergies, dermatitis
• Be exposed to infectious diseases in their work
• Work longer hours overall (paid work + home)
• Have a more hectic life
Key conclusions of the report (1)

• **Improvements needed to research and monitoring**
• **Imbalances in research and prevention**
• **Problems with gender-neutrality – less attention paid to women**
• **Existing legislation can be implemented in a gender-sensitive way**
• **Women’s weaker involvement in OSH decision making**
Conclusions (2)

- **Cross country trends, but some individual country differences**

- **Women (or men) are not a homogeneous group – OSH implications**

- **Holistic approach to OSH needed**

- **Scope for including OSH in employment equality actions**

- **Examples of successful gender approaches in OSH exist**
Risks to women underestimated or get less attention where:

- More attention has been given to male workers
- Women invisible as workers
- Women invisible at work
- Assumptions made that women do not face risks, do not do heavy work
- Men’s work risks more visible: Men - accidents, women - ill health
Risks to women underestimated or get less attention where:

- Studies exclude or ignore women
- Statistics not collected/analysed by gender
- Statistics ignore different time exposures
- Statistical indicator’s relevant to women’s jobs not included
- Women less involved in decision-making
- Women’s responsibilities at home not recognised
Many examples of good practice

- **Participative ergonomic research methods**, looking at real jobs, involving workers
- **Research programme specifically targeting women’s jobs, sectors where women work**
- **Stress investigations including work-life balance**
- **Guides and campaigns tackling risks in women’s jobs or risks more prevalent in women – e.g. hair dressing**
Recommendations (1)

• Include gender in data collection
• Ensure gender balance in research programmes
• Fill gaps in research, e.g. standing work, menstrual disorders
• Assess gender impact of policies, changes in the world of work etc.
• Consider double-work load and promote work-life balance policies
• Investigate and share good practices
Recommendations (2)

• **Mainstream gender issues into OSH**, and **OSH/gender into other policy areas**

• **Promote interdisciplinary cooperation**

• **Improve gender sensitivity in the implementation of existing directives**

• **Incorporate gender into standard setting**

• **Promote women’s representation in OSH decision making**

• **Raise awareness and promote a gender-sensitive approach**
Recommendations (3) risk assessment

- Avoid assumptions of who is at risk
- Include women’s jobs and consult them
- Look at real work situations
- Match jobs, equipment to real people
- Include work-life balance
- Incorporate into a holistic approach
Action levels for mainstreaming gender into the OSH system

1. Gender-sensitive research
2. Review tools: Gender impact assessments changing world of work/risk observatory
3. Gender-sensitive monitoring/data collection

Gender-sensitive legislation + policy (EU + national level)
- Social & economic policy
- Public health policy
- OSH policy
- Equality policy

OSH guidelines, standard setting, training, risk assessment tools, equality agendas, etc.

Enterprise-level practice
Suggestions to take forward gender mainstreaming and OSH (1)

- OSH policy bodies at EU and national level
- Sector dialogue committees, and development of guidelines
- Equalities organisations to examine how to include OSH in their activities
- Women’s health organisations to be encouraged to cover OSH
- OSH and equalities organisations at EU and national level to explore cooperation
Suggestions for mainstreaming (2)

- The Agency report includes a basic method for mainstreaming gender into risk assessment. How can this method be:
  - Tested?
  - Developed and adapted?
  - Promoted?
Women and Health at Work

- Introduction
- List of topics - Information presented by key hazards and issues.
- List of providers - Organisations providing information about occupational safety and health and women.
- Key Agency documents relating to gender
- Online Forum - Link to the Agency discussion forum
- Translation Help - Link to information about how to translate webpages
- Disclaimer

Here you will find information on safety and health of working women and gender related issues. We have compiled a list of links to practical information about working women and the hazards they may face, health and safety research into workplace gender issues, and information about strategies etc. towards health and safety gender issues in the workplace.

There are examples of practical guidelines and relevant legislation as well as research documents and documents relating to the debate about how to take better account of gender in occupational safety and health. There are Member State, European and international examples. There is also a list of links, by country, to the websites of some organisations that provide information on gender and occupational safety and health.

To help you find your way around, we have provided comments on the links and sorted them.

You can search the list of topics or search by the A to Z index or search the list of providers of information.

In the topics section you may find information on a topic by looking in the guides in the general section as well as under the specific topic section.

The Agency site links to "mirror" pages in the Member States and international countries, where you may find further information.

We are at all times seeking feedback and further information from visitors to this site to help us to develop it further.
Including gender issues in risk assessment

Continuous efforts are needed to improve the working conditions of both women and men. However, taking a gender-sensitive approach to risk assessment and prevention is crucial for reducing risks to female workers being underrepresented or exposed equally to workplace hazards. Men tend to think about hazards as work, while women are more likely to think of work as home tasks. Hence, work in high-risk areas such as buildings sites, or fishing vessels, often results in health and social problems for women working in health and social care in low areas such as care centres. A careful examination of real work circumstances shows that both women and men can face significant risks at work. In addition, making jobs safer for women will make them safer for men too. It is important to include gender issues in workplace risk assessments, and “multi-stressor” gender issues into risk prevention is now an objective of the European Community (5). Table shows some examples of hazards and risks found in female-dominated work areas.

<table>
<thead>
<tr>
<th>Work area</th>
<th>Risk factors and health problems include:</th>
<th>Information</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hairdressing</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
</tr>
<tr>
<td>Domestic care</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
</tr>
<tr>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
</tr>
<tr>
<td>Handling medical waste</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
</tr>
<tr>
<td>Clinical waste</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
</tr>
<tr>
<td>Agriculture</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
<td>Cleaning</td>
<td>Manual handling and carrying bags, microchips, and hair accessories</td>
</tr>
</tbody>
</table>

Table 1. Examples of hazards and risks found in female-dominated work.
Incorporating diversity into OSH

- **Statistics and research to cover a diverse workforce**
- **From neutral to sensitive risk assessments**
- **Diversity in training and guidelines**
- **Working with other intermediaries – who and how?**
- **Overcoming antipathy to OSH and diversity issues.**