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*Gender issues and diversity in  
occupational safety and health*

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**First Conference of Director Generals**

**Dublin, April 18<sup>th</sup> – 20<sup>th</sup> 2004**

**“Making a Difference” A Future For European  
Workers**

**Hans-Horst Konkolewsky**

**Director**

# EU Policy Agenda

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- *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*

# Community Strategy for Safety and Health at Work (2002)

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- *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

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

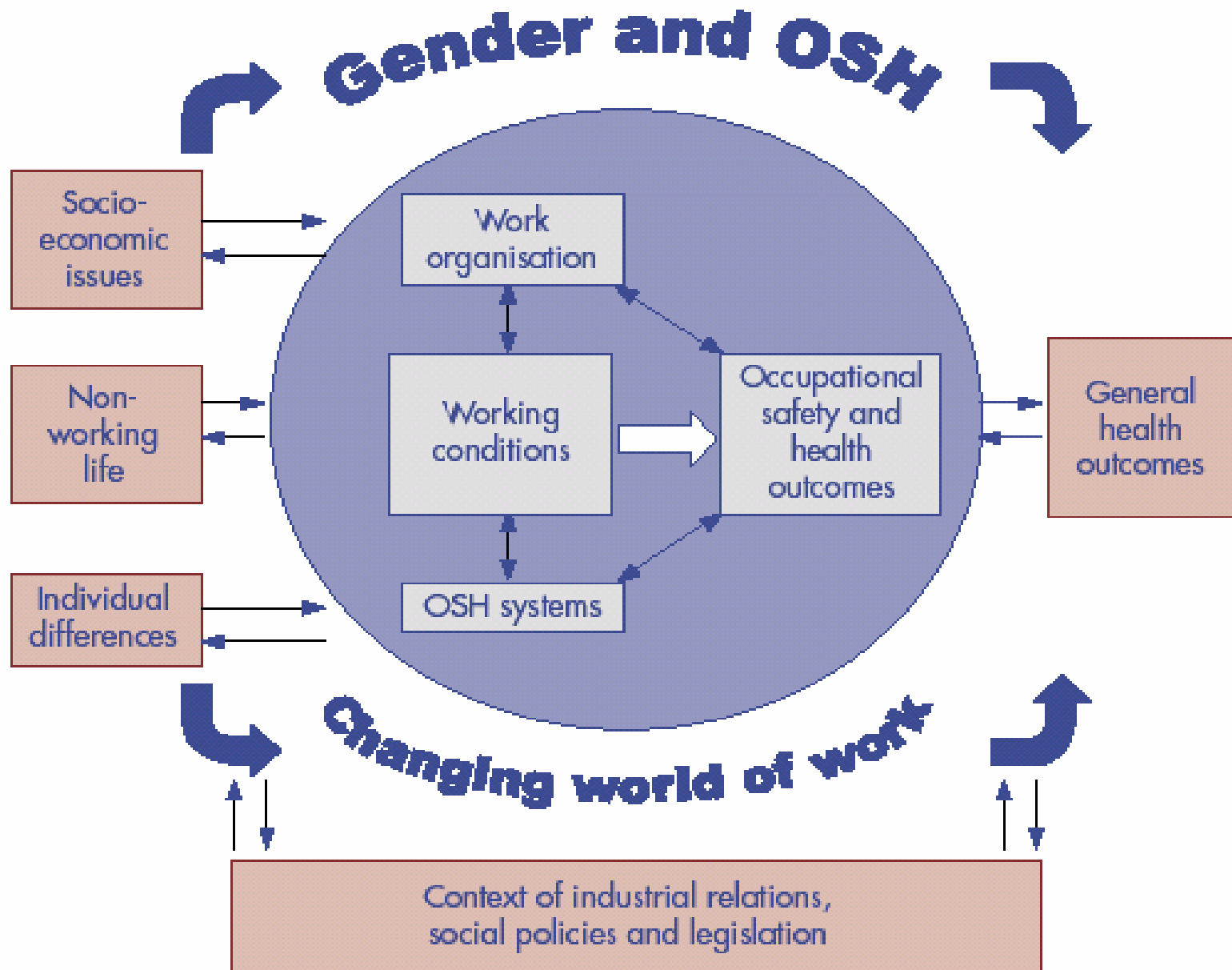
- *Gender differences in workplace injury and ill health – What? Why?*
- *Gaps in knowledge*
- *Approaches being taken to gender and OSH – policy and practice*
- *What further action can be taken*

# Methodology of Agency gender study

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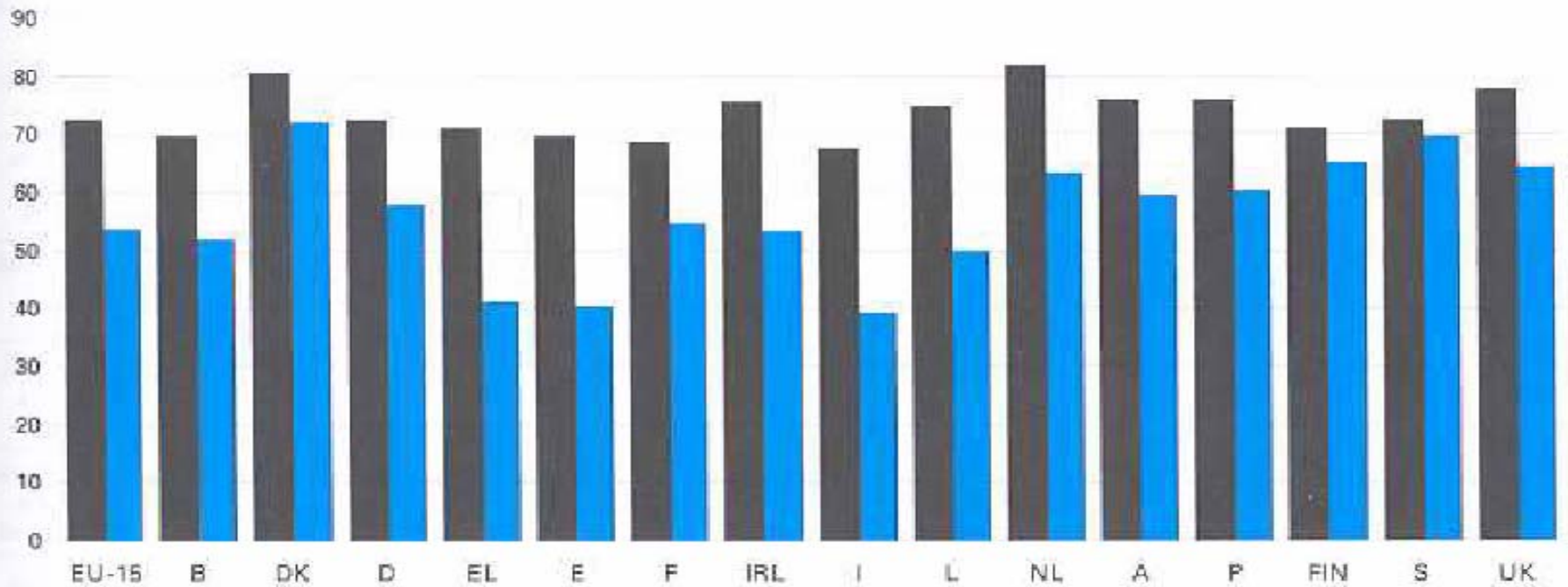
- *Review of scientific literature, current policy and good practices*
- *Carried out by the Agency with the input of experts from OSH institutions in the Member States*
- *International peer review group*

# Influences on gender differences in OSH



# Employment rate of men and women

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



Black: men; colour: women.

# Different jobs, different work circumstances

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- *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

Private households and extra-territorial

Health and education

Other community services

sales, hotel and catering

Public administration

Financial services

Agriculture

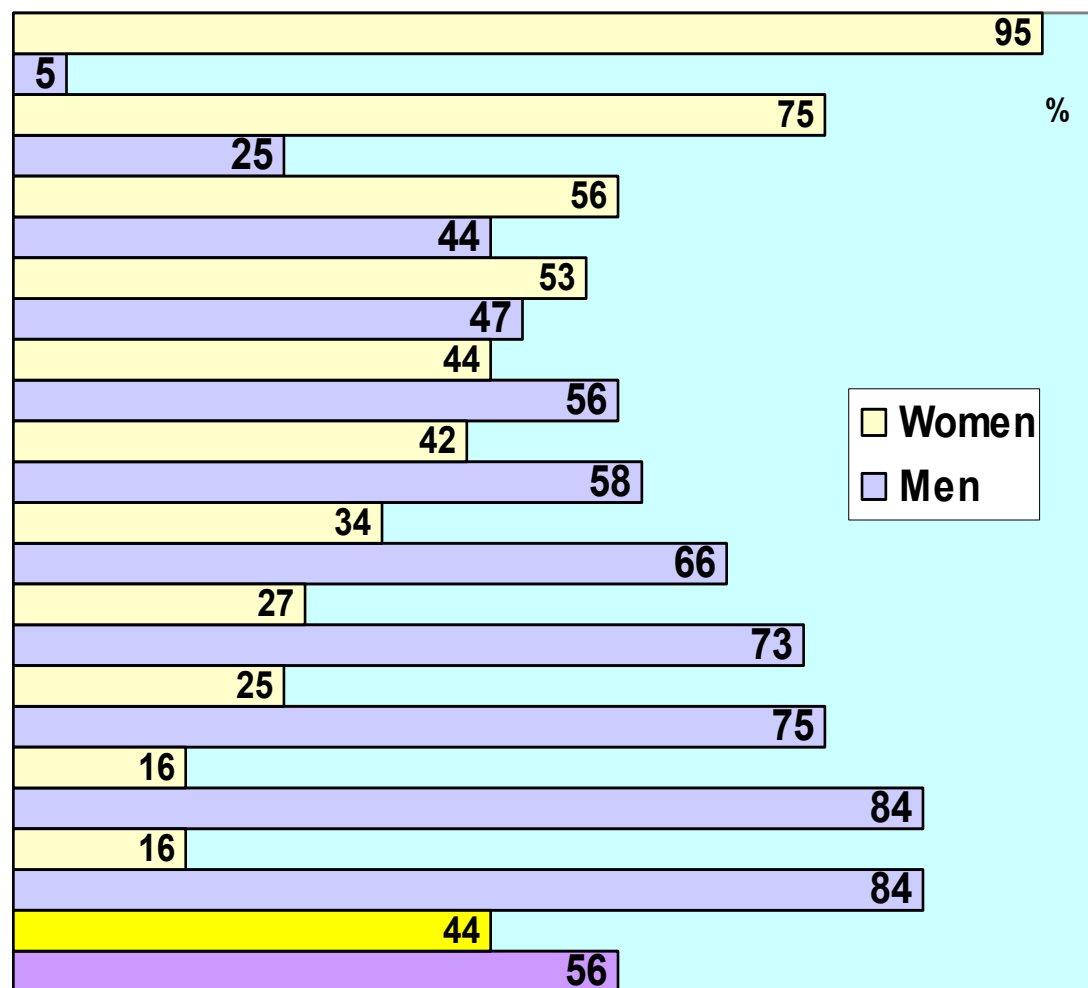
Manufacturing

Transport and communications

Utilities

Extraction

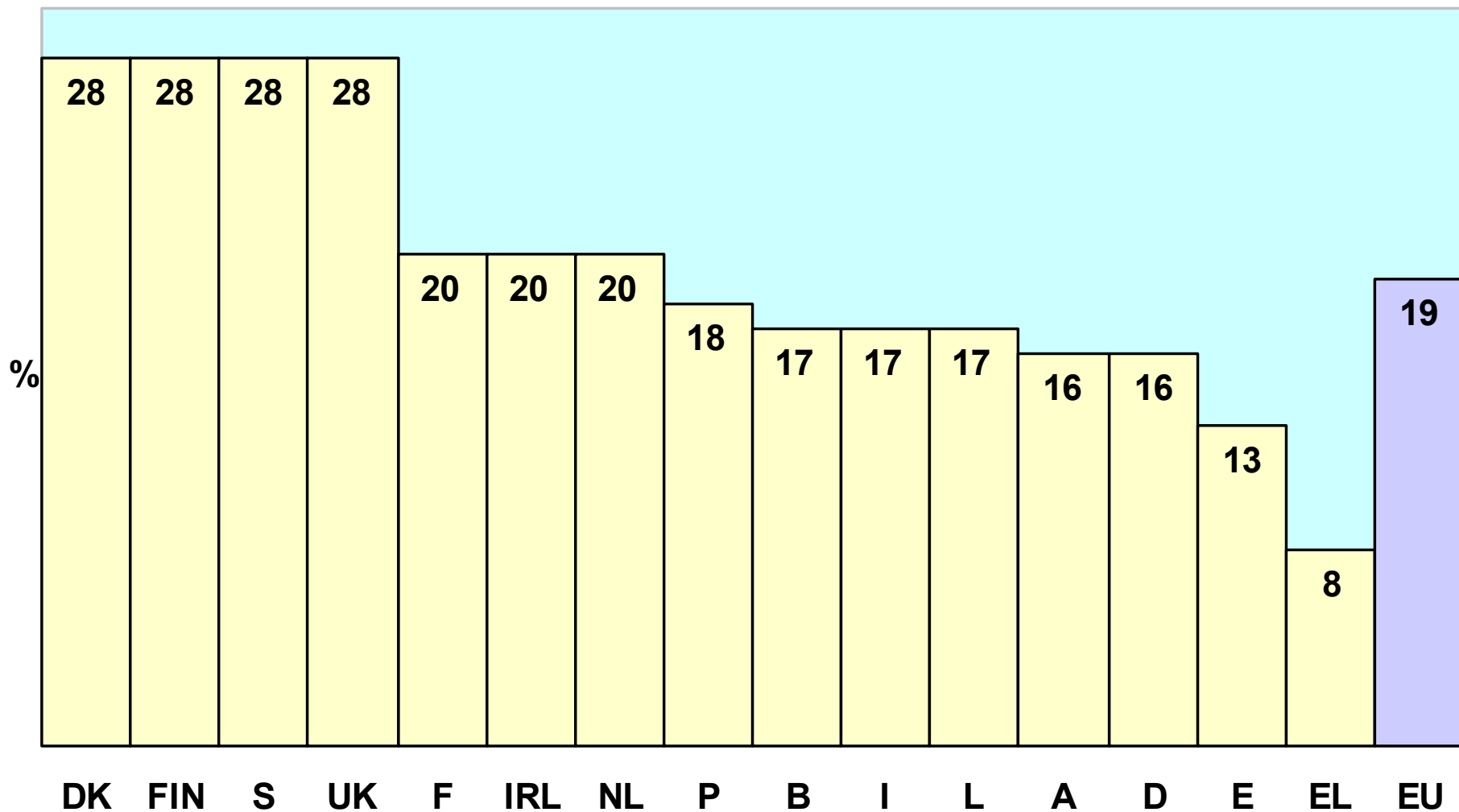
Total



# Workers for whom the immediate superior is a woman

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# Gender differences

## hazard health outcome/more exposed

Deaths and accidents	men
Upper limb disorders	women
Heavy lifting	men
Stress	women
External violence	women
Noise/hearing loss	men
Occupational cancer	men
Asthma, allergies	women
Infectious diseases	women
Inappropriate tools/PPE	women
Reproductive hazards	both
Inappropriate work hours	both

## Women workers more likely to:

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- *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)

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- *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)

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- *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:

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- *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:

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- *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

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- *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)

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- *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)

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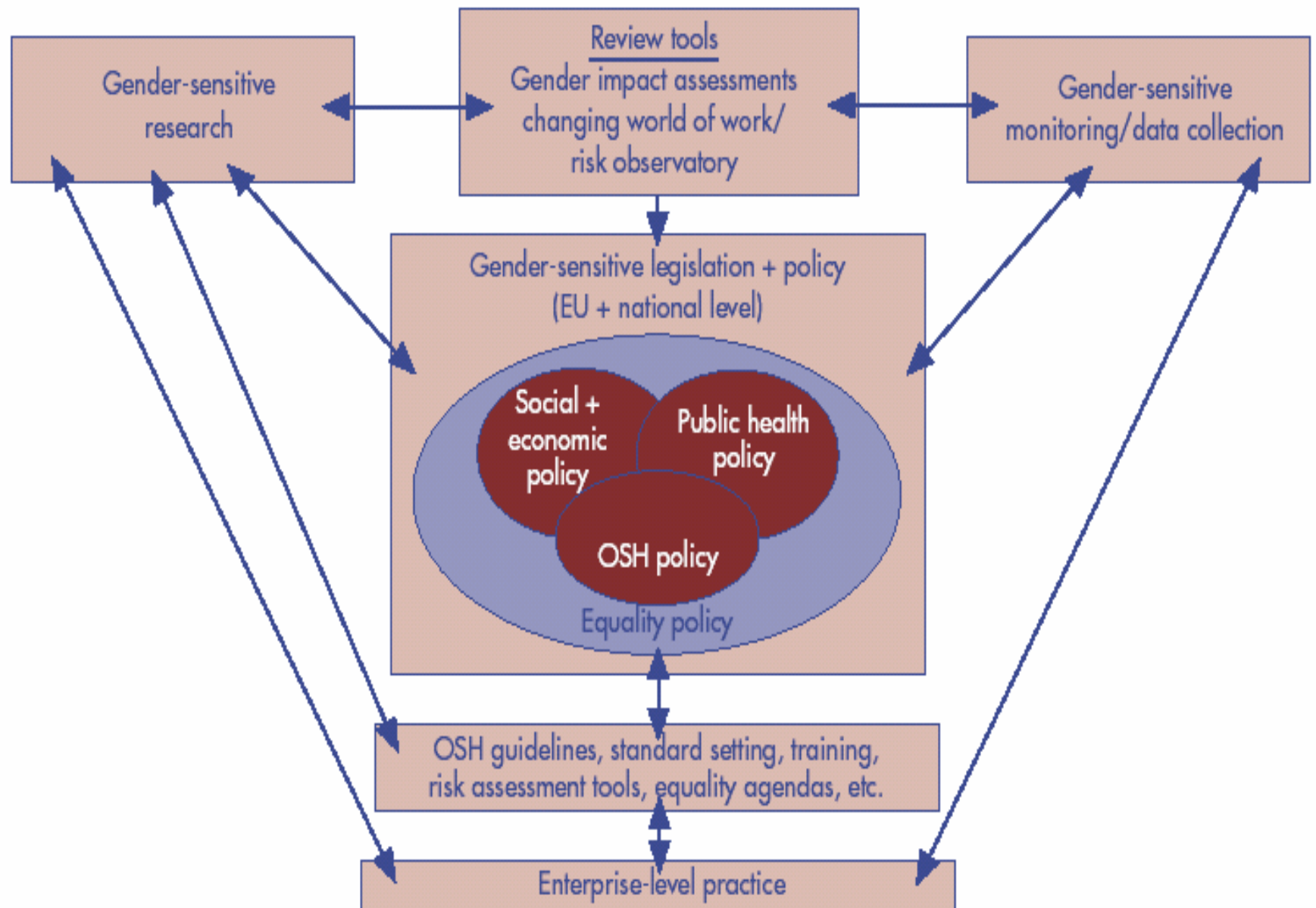
- *Mainstream gender issues into OSH, and OSH/gender into other policy areas*
- *Promote interdisciplinary cooperation*
- *Improve gender sensitivity in the implementation of existing directives*
- *Incorporate gender into standard setting*
- *Promote women's representation in OSH decision making*
- *Raise awareness and promote a gender-sensitive approach*

# Recommendations (3) risk assessment

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- *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



# Suggestions to take forward gender mainstreaming and OSH (1)

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- *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)

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



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## 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
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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 to





## Including gender issues in risk assessment

Continuous efforts are needed to improve the working conditions of both women and men. However, taking a 'gender-neutral' approach to risk assessment and prevention can result in risks to female workers being underestimated or even ignored altogether. Whereas this is about hazards at work, we are more likely to think of men working in high accident risk areas such as a building site or a fishing vessel than of women working in health and social care or in risk areas such as call centres. A careful examination of

real work circumstances shows that both women and men can face significant risks at work. In addition, making jobs easier for women will make them easier for men too. So it is important to include gender issues in workplace risk assessments, and 'mainstreaming' 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 1. Examples of health problems faced in female-dominated work

Work area	Risk factors and health problems include:			
	Biological	Physical	Chemical	Psychosocial
Healthcare	Infectious diseases, e.g. bloodborne, respiratory etc.	Manual handling and strenuous postures: ionising radiation	Cleaning, sterilising and disinfecting agents: drugs: anaesthetic gases	Irregularly demanding work: shift and night work: stress from clients and the public
Nursery workers	Infectious diseases, e.g. particularly respiratory	Manual handling, strenuous postures		Irregular work
Cleaning	Infectious diseases: dermatitis	Manual handling, strenuous postures: slips and falls: wet floors	Cleaning agents	Unusual hours: isolation, A.O. if working in isolation or late
Food production	Infectious diseases, e.g. animal borne and from raw food, spores, organic dusts	Repetitive movements, e.g. in packing jobs or slaughterhouses: hot temperatures: cold temperatures: noise	Pesticide residues: sterilising agents: wetting sprays and additives	Stress associated with repetitive assembly line work
Catering and retail work	Dermatitis	Manual handling: spillage in droppings: cuts from knives and burns: slips and falls: wet floor cleaning agents	Passive smoking: cleaning agents	Stress from hectic work: dealing with the public: no breaks and harassment
Textiles and clothing	Organic dusts	Noise: repetitive movements and awkward postures: needle injuries	Dyes and other chemicals, including formaldehyde in permanent press and stain resistant: solvents: dust	Stress associated with repetitive assembly line work
Laundries	Infected linen, e.g. in hospital	Manual handling and strenuous postures: heat	Dye cleaning solvents	Stress associated with repetitive and fast pace work
Ceramics sector		Repetitive movements: manual handling	Glass, lead, silica dust	Stress associated with repetitive assembly line work
'Light' manufacturing		Repetitive movements, e.g. in assembly work: awkward postures: manual handling	Chemicals in microelectronics	Stress associated with repetitive assembly line work
Call centres		Voice problems associated with talking: awkward postures: excessive sitting	Poor indoor air quality	Stress associated with dealing with clients, pace of work and repetitive work
Education	Infectious diseases, e.g. respiratory, measles	Prolonged standing: noise problems	Poor indoor air quality	Irregularly demanding work, stress
Handwriting		Strenuous postures, repetitive movements, prolonged standing: neck: hand/cuts	Chemical sprays, dyes, etc.	Stress associated with dealing with clients: fast paced work
Clerical work		Repetitive movements, awkward postures, back pain from sitting	Poor indoor air quality: photocopier fumes	Stress, e.g. associated with lack of control over work, frequent interruptions, monotonous work
Agriculture	Infectious diseases, e.g. animal borne and from raw food, spores, organic dusts	Manual handling, strenuous postures: agricultural work: equipment and pesticide: clothing: hot, cold, wet conditions	Pesticides	

(5) Adapting to changes in work and society. A new Community strategy on health and safety at work, 2002-06. Communications from the European Commission, COM(2002)118 final



# Incorporating diversity into OSH

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- *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.*