

# Mainstreaming gender into occupational safety and health practice

Authors:

European Agency for Safety and Health at Work's Topic Centre OSH with contributions from:

Roxane Gervais (task leader), Jennifer Webster (Health and Safety Laboratory, UK)

Gediminas Vilkevicius (Aleksandras Stulginskis University (ASU), Lithuania)

Janine Dorschu, Ellen Zwink (BAuA, Germany)

Marie-Amélie Buffet (Eurogip, France)

Georgiana Nicolescu (INCDPM, Romania)

Juliet Hassard (I-WHO, UK)

With additional support from Theoni Koukoulaki (ELINYAE, Greece), Kaisa Kauppinen (FIOH, Finland).

Project management: Sarah Copsey, Prevention and Research Unit, European Agency for Safety and Health at Work (EU-OSHA)

EU-OSHA would like to thank members of its focal point network for their valuable input.

This report was commissioned by the European Agency for Safety and Health at Work (EU-OSHA). Its contents, including any opinions and/or conclusions expressed, are those of the author(s) alone and do not necessarily reflect the views of EU-OSHA.

Europe Direct is a service to help you find answers to  
your questions about the European Union

Freephone number (\*):  
**00 800 6 7 8 9 10 11**

(\*) Certain mobile telephone operators do not allow access to 00 800 numbers, or these calls may be billed.

More information on the European Union is available on the Internet (<http://europa.eu>).

Cataloguing data can be found on the cover of this publication.

Luxembourg: Publications Office of the European Union, 2014

ISBN: 978-92-9240-499-4

doi: 10.2802/33323

Cover pictures: (computers) by Michel Wielick, (Lawn mowing) by David Tijero Osorio, (Woman with gloves), by Jim Holms, and (hairdresser) by "Courtesy of the Cypriot Department of Labour Inspection"

© European Agency for Safety and Health at Work, 2014

Reproduction is authorised provided the source is acknowledged.

## Table of Contents

Foreword.....	6
1 Executive summary .....	7
2 Introduction.....	13
3 Overview of cases.....	17
3.1 Approach by national and intermediary organisations.....	17
3.2 Approach at workplace level.....	20
4 Case studies: approach by national and intermediary organisations .....	23
4.1 The Austrian Labour Inspectorate’s approach to gender mainstreaming into OSH, Austria.....	23
4.2 The Danish interministerial gender-mainstreaming project: Action Plan 2002-2011, Denmark .....	32
4.3 Finnish Gender Equality Act, Finland .....	38
4.4 Gender aspect — OSH in Finland — Strategy and practices, Finland.....	43
4.5 Gender-sensitive design of occupational health management in the public administration of Berlin, Germany .....	48
4.6 A woman-sensitive approach focused on equal opportunities in the Italian railway sector, Italy.....	52
4.7 The autonomous community of Madrid and occupational risk prevention from a gender perspective, Spain .....	58
4.8 Integrating gender mainstreaming in occupational risk prevention for Navarra, Spain..	64
4.9 Development and implementation of a diversity programme by a national OSH authority, United Kingdom .....	70
4.10 Purple Boots Campaign, United Kingdom .....	77
4.11 Promoting a workplace approach to testicular and prostate cancer, United Kingdom...	81
4.12 Mainstreaming gender into the activities of an international occupational health professional society .....	83
4.13 Incorporating gender into WHO’s healthy workplaces model, WHO.....	88
5 Case studies: approach at the workplace level.....	97
5.1 A gender-sensitive approach to MSD prevention in a printing company, France .....	97
5.2 Supporting women employees and a family-friendly company culture, Germany .....	102
5.3 Gender mainstreaming in the risk assessment of psychological stress, Germany .....	106
5.4 A positive initiative for female workers’ safety in the transport sector at Met.Ro. SpA Group, Italy.....	114
5.5 PPE corresponding to women’s needs at work within various economic sectors — Romania.....	119
5.6 Bringing gender equality into the ergonomic design of food preparation areas, United Kingdom .....	128
5.7 Olympic Delivery Authority’s ‘Women into Construction’ project, United Kingdom .....	132
5.8 ‘Male-friendly’ staff wellness programme reduces absence at Royal Mail, United Kingdom .....	137
6 Snapshots .....	141
6.1 Approach by national and intermediary organisations.....	141

6.1.1	Women and OSH, Australia .....	141
6.1.2	A gender-sensitive approach to OSH integration within SMEs' organisational culture; a Brazilian–Canadian project (EOHSBI), Brazil, Canada .....	141
6.1.3	Canadian Women's Health Network, Canada .....	142
6.1.4	PPE for women, Canada.....	142
6.1.5	Implementation of gender issues in OSH: national approach and strategy, Czech Republic .....	143
6.1.6	World of Management Ltd, Finland.....	143
6.1.7	Guidelines for Practice 'Occupational Health for Women', Germany .....	144
6.1.8	Developments in Diversity Europe Project, Germany.....	145
6.1.9	Gender-sensitive legislation and actions on OSH, Hungary.....	145
6.1.10	'Women and work' contest in Umbria, Italy.....	146
6.1.11	Integration of gender dimension into national policy by training, Luxembourg....	146
6.1.12	Brochure 'Desire to have children, pregnancy and substances at work', The Netherlands.....	147
6.1.13	Information campaign in the workplace about pregnancy and reproductive toxins: 'Babyproofbox', The Netherlands .....	148
6.1.14	Coaching for women trying to return to work, The Netherlands .....	149
6.1.15	Fewer women with a work disability pension, The Netherlands .....	149
6.1.16	Healthy working for young, educated women, The Netherlands .....	149
6.1.17	The diversity quick scan, The Netherlands.....	150
6.1.18	Integrating gender into a trade-union safety representative guide, United Kingdom .....	150
6.1.19	Developing guidelines on menopause and work, United Kingdom.....	151
6.1.20	Mainstreaming gender into the OSH activities of a trades union confederation, United Kingdom.....	153
6.1.21	Liberty Mutual Manual Materials Handling Tables, USA .....	154
6.1.22	Women in the construction workplace: providing equitable safety and health protection, USA.....	155
6.1.23	Wear BLUE, USA.....	155
6.1.24	Designing safer truck cabs for a diverse workforce, USA.....	156
6.1.25	IEA's Gender and Work Technical Committee, International .....	156
6.1.26	Incorporating OSH into a global project on women in the informal economy, International .....	158
6.2	Approach at the workplace level.....	159
6.2.1	Improving the treatment of gender in ergonomic interventions and epidemiological investigations, Canada.....	159
6.2.2	A gender-sensitive OSH approach in railway transport, Croatia .....	160
6.2.3	Flexible hours and health programme to retain older care workers, Denmark....	161
6.2.4	Improving working conditions for pregnant employees in the magistrate of Bremerhaven, Germany.....	162
6.2.5	Tackling gender health inequalities at work by use of gender-disaggregated data, Germany .....	163

6.2.6	Creating new professional opportunities for highly qualified women through information and training in health and safety, environmental and quality management, Greece .....	164
6.2.7	Improving the work capacity of older female workers, Finland .....	165
6.2.8	Ergonomics and employability in a car manufacturer, Slovenia .....	165
6.2.9	Impact of laughter yoga and therapy on occupational stress, South Africa.....	166
6.2.10	Urban and interurban bus drivers: psychosocial risk factors, and the development of suitable working clothes for women bus drivers, Spain .....	166
6.2.11	Inclusion of gender in OSH in the region of Cantabria, Spain .....	167
6.2.12	Inclusion of gender in OSH in the region of Galicia, Spain .....	168
6.2.13	Actions to incorporate gender into OSH in the Catalan region, Spain.....	169
6.2.14	Inclusion of gender in occupational risk prevention by the regional government of Andalucia, Spain .....	170
6.2.15	Women and PPE, United Kingdom.....	170
6.2.16	Grampian Fire and Rescue Service's Gender Equality Scheme, United Kingdom .....	171
6.2.17	Gender equality planning in transport, United Kingdom .....	171
7	Additional examples .....	173
8	Discussion and conclusions .....	185
9	Overview tables of the cases .....	207
9.1	Cases by main achievements.....	207
9.2	Categorisation by risks and issues .....	212
9.3	Classification of cases .....	217
9.3.1	Full case studies .....	217
9.3.2	Snapshots .....	219
10	References and further information.....	223
	Annexes .....	229
	Annex 1: Glossary.....	229
	Annex 2: Gender mainstreaming .....	235
	Annex 3: A model for making risk assessment more gender-sensitive .....	239
	Annex 4: Worker participation methods to increase the involvement of women .....	241
	Annex 5: Selected findings, conclusions and recommendations on gender issues in safety and health at work from previous EU-OSHA reports.....	243

## Foreword

Women and men should both benefit from occupational safety and health (OSH) strategies and interventions. To achieve equality in OSH the differences between women and men and the differences in their work circumstances must be recognised and taken into account. By considering gender issues prevention can be improved for women and men.

This gender-sensitive approach to OSH needs to be taken at all levels: from policy development down to workplace measures. The tool used to do this is gender mainstreaming.

The European Commission first put gender mainstreaming onto the OSH agenda by including it as an objective in the Community safety and health strategy 2002-06. This motivated progress and we have seen a steady increase in the number of examples of a gendered approach to OSH in the Member States. However, at the same time there can still be misunderstandings and concerns about what gender mainstreaming means with regard to OSH, what exactly its goals are, whether it means that the OSH of men is sidelined, how it can be carried out in practice, and so forth.

In fact taking a gender-sensitive approach to OSH ranges from the simple and obvious, such as providing women with safety gear designed to fit them, and not just giving them smaller-sized men's clothing and footwear, to comprehensively mainstreaming gender across the whole strategy and work of labour inspection.

The intention of this report is to present practical examples such as these — examples from the workplace up to OSH authorities. It includes modest steps and major projects. It is hoped that showing what can be done in practice will inform and inspire those who want to introduce gender into their OSH actions for the first time or who want to develop their activities further. It is also hoped that it can serve as a resource for those who want to provide training in this area.

It includes annexes which give more information about gender mainstreaming, and a simple model for how to incorporate gender into risk assessment. These are included to complement the cases to give further support to those who want to take their own actions.

Ultimately, the report is an attempt to debunk some of the myths and barriers to taking a gender-sensitive approach in OSH by showing through practical examples why it is necessary for prevention and how it can be done, and how, by improving OSH for the whole workforce, it brings benefits for business.

Christa Sedlatschek

Director

European Agency for Safety and Health at Work (EU-OSHA)

# 1 Executive summary

Women and men are not the same and the jobs they do, their working conditions and circumstances and how society treats them are not the same. All these factors can affect the risks they face at work and the approach that needs to be taken to prevent these risks. Consequently, an understanding of gender differences which is then systematically incorporated and applied to occupational safety and health (OSH) strategies, policies and actions will improve risk prevention measures for the benefit of female and male workers. This is what gender mainstreaming and a gender-sensitive approach involve.

More widespread recognition of the importance of taking account of gender differences in occupational safety and health (OSH) is relatively recent, although the number of initiatives seen in this area is increasing. However, especially because it is not always a very well understood area, practice needs to be exchanged and experiences shared. This report presents examples of policies, programmes and practices from across the EU and worldwide to illustrate gender approaches in OSH.

In a *gender-neutral* approach to OSH, the average male worker is taken as the standard, but this cannot do justice to either women or men who do not comply with this picture. A *gender-sensitive* approach takes the different working situations of women and men as well as gender relations in companies into account, considers the variety and differences within the groups of male and female employees and questions role stereotypes in the workplace.

The basic feature of *gender mainstreaming* is the systematic consideration of the differences between the conditions, situations and needs of women and men in policies and actions. This means that gender mainstreaming is not a goal in itself but a strategy to achieve equality between women and men. In other words, gender mainstreaming is used to integrate concerns of women as well as men into policies and actions so that women and men benefit equally. It should cover design, implementation, monitoring and evaluation.

It is important to note that the mainstreaming of gender into OSH is not meant to highlight only 'women' as 'workers'. However, as the OSH of women is still not considered, practised and accepted as routine, gender actions in OSH are often focused on women in order to redress this imbalance. Furthermore, improving OSH for women will often then improve OSH for workers in general.

## Overview of cases

The cases in the report cover approaches by national and intermediary organisations and also gender-sensitive approaches to OSH in the workplace. The cases are varied and concentrate on the following factors:

- integrating gender mainstreaming into organisations' planning, administration and daily working practices;
- developing methods and tools to promote gender mainstreaming;
- facilitating working conditions that are suitable for both women and men, including both health and human resources management;
- facilitating the reconciliation of work and family life and thereby promoting better work–life balance;
- ensuring that equal opportunities exist, with women encouraged and supported in working in male-dominated professions;
- designing and promoting adequate personal protective equipment (PPE) for women, and thereby reducing their having to make do with the ill-fitting and poorly structured equipment that is usually available to them;
- conducting awareness-raising campaigns that focus on health.

## Tools

The cases highlight the development and use of a variety of tools for gender mainstreaming within organisations. They included the following: gender-related websites; checklists; indicators; guidelines

and brochures; training courses; best practice examples; a comprehensive toolkit; and surveys. Most of these tools are for use by individual workplaces, but one Labour Inspectorate has provided its inspectors with training and checklists for them to use during visits to help them take a gender-sensitive approach.

### **General success factors**

There were various general factors that positively impacted on integrating gender into OSH, and these are detailed below.

- *Prior investigation:* In accordance with prerequisites for all successful health and safety interventions, successful actions were based on prior investigation, risk assessment and the full participation of all involved throughout the process.
- *Partnership:* A success factor in quite a few of the cases described was working within partnerships, especially partnership between OSH and equalities personnel or organisations.
- *Steering committee:* The establishment of a project steering committee or group will help in moving the project or policy forward.
- *Top-down, bottom-up approach:* At the organisational level, the combination of a top-down, bottom-up approach assists in achieving the established aims, where a clear mandate from the top is combined with involvement at all levels, so that everyone comes to understand and feel ownership of the projects.
- *Creation and use of tools:* to move the process forward.
- *Addressing concerns of men and women:* Methods and tools developed to address the concerns and issues of the female employees in the organisation were found to be relevant for the problems encountered by the male employees as well.
- *External requirements to address gender and diversity:* Drivers of actions included both European Union recommendations and strategy as well as national regulation and Ministerial directions.

### **Success factors at workplace level**

- Often very simple steps can be taken to improve the OSH of women workers where it had been previously overlooked.
- Looking at the real jobs people do and broader work organisation when carrying out risk assessments and deciding solutions.
- Use of surveys, discussion and other worker participation methods to determine real needs and practical solutions.
- Including men and women, for example, in surveys, even if the intention is to target the measures at women.
- Promoting the message that the intention of a gender-sensitive approach is to improve working conditions for men and women — measures that improve OSH for women generally improve OSH for men as well.
- Small and microenterprises may not have the structures or capacity to take a comprehensive approach. However, they may focus on a specific job or risk that is a particular issue for women rather than an integrated policy approach. The key is to be sensitive to different problems and needs. A simple 'gender check' can be made and simple questions asked. Has the OSH of both men and women been considered? Have any differing needs been taken into account?
- Bringing OSH and equalities actions together.

### **Success factors regarding women in non-typical sectors**

- Surveys and discussion to find the real OSH issues of importance to women.
- Training women in OSH as part of their vocational skills development aids their integration (for example, in the construction sector).
- Combining human resources measures and OSH measures.



- Key issues include PPE, ergonomics, violence and harassment, welfare, uniforms, flexible working and child care.
- Partnership with manufacturers and suppliers, for example, to improve the suitability of PPE or equipment.
- The use of mentors.

### **Some success factors for gender-sensitive workplace health promotion**

#### *Men*

- Advice from men's health forums and messages and materials tailored to the particular male audience.
- Combining work aspects and general health aspects of an issue.
- Consultation with men and joint development with trade unions.
- Covering men in actions related to reproductive risks and health.
- Involvement of wives and partners.

#### *Women*

- Consultation and discussion with the group concerned to determine their real needs, for example, older and younger women will have different concerns.
- Combining work aspects and general health elements.
- Covering the whole reproductive life cycle.

### **Success factors for mainstreaming gender into national labour inspection and OSH services**

- Having gender and OSH included in the national OSH strategy and work programme.
- A stepwise approach can be taken starting with gender mainstreaming and then expanding this to cover all areas of diversity.
- Key drivers are legal obligation or general ministerial policy and commitment from the top level in the OSH authority.
- Having access to general mainstreaming tools and collaboration with equalities experts.
- Developing and implementing the process and activities over time, including through the use of working groups and forums, communication and feedback mechanisms.
- Recognising that some staff may have misconceptions or be reluctant to embrace the issue and supporting them.
- Awareness-raising, training and practical tools for inspectors to use in their daily work. Embedding gender issues in training for new inspectors.
- Setting objectives and evaluation.
- Mainstreaming gender externally into the delivery of services and internally into the working conditions of staff. Integrating it across all activities: inspection, research and campaigns.

### **Success factors for mainstreaming gender into professional OSH-related organisations**

- Networking.
- Using the structures and the working procedures of the organisation, for example setting up a working group to define the need and develop a proposal or proposing a dedicated scientific/technical committee with objectives and a remit compatible with the structure and remit of the organisation.
- Including activities to support the integration of gender throughout the work of the organisation and its other technical committees etc.

### **Challenges**

Two key challenges were found; these point to areas that should be addressed in moving forward with a gendered approach to OSH and with its integration in the workplace.

- *It takes time to introduce initiatives.* There can be significant barriers to overcome, such as misunderstandings about what gender mainstreaming means or perceptions of some individuals that may be difficult to change. It takes time to overcome such barriers and bring everyone along with the process.
- *The need for context-specific materials on gender mainstreaming.* Some organisations could not find comparative materials on gender mainstreaming to reference in moving forward with their own projects.

### **Drivers**

Reasons or drivers for activities include: to comply with equalities requirements; to recruit and retain more women, especially in jobs where women are under-represented; to reduce sickness absence and improve OSH in general; to meet demands from women workers; in response to an increased awareness about covering both men and women in prevention activities; and to improve the OSH vocational skills and professional training of women in order to improve their job opportunities.

### **Transferability**

The majority of the cases could potentially be transferred across countries. There are several initiatives and aspects of larger initiatives that could be carried out by small enterprises. Once a small organisation understands that there are gender differences in OSH and that men and women may have different needs and priorities, the next basic step is consulting male and female employees and listening to what they have to say about the issues that affect them.

### **Overall conclusions**

All workers, men and women, benefit when gender differences are recognised and are addressed in OSH. Business benefits by having a healthier, more productive workforce. The report shows that this is being done in a variety of different ways, through policy and strategy, research and at the workplace. Those taking action include scientific associations, OSH organisations, equalities organisations, health organisations, employers and trade unions.

The cases show a range of initiatives, from comprehensive gender-mainstreaming projects to simple steps that organisations can take to ensure that the OSH of both women workers and male workers is covered.

The approaches in the cases support the recommendations of how to take a gender-sensitive approach given in the EU-OSHA reports of 2003a, 2013 and 2014. The key issues for practice include:

- Include gender systematically: in research, in interventions and in policy development, in standard settings and so on.
- Include women's OSH explicitly.
- Include men's gender explicitly; for example, question why men have more work accidents.
- Take account of the real jobs that men and women do and the differences in exposure and working conditions. Go beyond the task and look at all gender differences in work circumstances, such as the effect of differences in career progression on exposure to risk. Question gender stereotypes about job assignment and job content.
- Include work–life balance and work–family issues.
- Bring employment equality actions, OSH actions and health equality actions together.
- Base actions on evidence, such as surveys of awareness and current practice, and risk assessment in workplaces.
- Listen to women and involve them in risk assessment and the development of prevention measures through participatory approaches.
- Involve women in decision-making regarding OSH policy and strategy.
- Provide relevant training on incorporating gender issues to those involved in risk prevention in the workplace, to those involved in developing OSH policy and strategy, and to those involved in implementing it, such as labour inspectors.

This is a developing area. In order to make further progress more attention needs to be given to developing effective ways of working between equal opportunities actors, OSH actors and human resources.

In addition, gender mainstreaming is an ongoing exercise, not a one-off activity. Therefore, sharing and exchange of experience, practice and tools need to continue. In this respect it would also be useful to follow up relevant examples, particularly to look at sustainability and further developments.

#### **Examples of measures and features seen in the cases**

- ✓ One Member State systematically integrated gender into the everyday work of its Labour Inspectorate. Inspectors use 'gender' checklists during workplace visits to help them take a gender-sensitive approach.
- ✓ The inclusion of broader employment issues in assessments and prevention measures is seen, for example, in a musculoskeletal disorder (MSD) intervention which looked at women's career paths as well the ergonomics of their workstations to assess exposure to MSD risks.
- ✓ Experience gained from interventions at several workplaces was used to develop guidance on carrying out risk assessments for stress from a gender perspective.
- ✓ A bakery changed 'male-sized' equipment, which resulted in health and productivity benefits.
- ✓ One issue that is gaining prominence is designing PPE specifically for women. A campaign on PPE by a professional association for women in engineering included working with a manufacturer to produce safety boots for women.
- ✓ Several cases covered improving welfare facilities for women in male-dominated work areas. This ranged from access to suitable toilet facilities to banning urinating in public on work sites.
- ✓ Gender mainstreaming was incorporated into broader actions on diversity.
- ✓ Actions relevant to the health promotion of older women included the use of health discussion forums and addressing the topic of the menopause; for example, a trade union organisation produced guidelines on simple workplace measures that can help alleviate menopause symptoms.
- ✓ Several cases addressed the suitability of uniforms for pregnant women.
- ✓ Measures to improve working conditions for women, taken to help recruit more women, improved them for male workers too. For example, this was seen where interventions aimed at women in the transport sector benefited men as well.
- ✓ A workplace health promotion activity aimed at men used booklets in the format of a car maintenance manual to appeal to a male audience.
- ✓ Workplace reproductive safety has traditionally focused only on the pregnant women. The 'babyproof' box information campaign covered the reproductive cycle of men and women in its entirety.
- ✓ One case acknowledged that women were more reluctant to put forward views. Group discussions, surveys, interviews and training initiatives were among the methods used to facilitate women's participation.
- ✓ An assessment of gender roles showed that these were still considered around stereotypical perceptions. These could then be addressed.
- ✓ The World Health Organization advocates, as one of its steps for implementing a healthy workplace programme, the collection of gender-segregated qualitative and quantitative data. Several regional OSH organisations supplemented the collection of accident and working conditions data by gender with additional survey data in specific areas to gain a better understanding of problems and to help set priorities.
- ✓ Two international professional associations have established scientific committees on women/gender and work to promote a gender perspective in the work of the organisations.
- ✓ A regional occupational health institute worked with a regional equal rights institute and developed the OSH section in a tool for developing gender equality plans in companies.



## 2 Introduction

### Gender mainstreaming and gender sensitivity

Men and women are different. Some of these differences are biological, or sex, differences. Some are differences in the way that society views or treats men and women, and these are gender differences. Sex differences include anatomical differences. Gender differences, which are variable, include men and women working in different jobs and industrial sectors and women shouldering a greater share of unpaid work in the home, including care of children and dependent relatives. Such differences can impact on the risks women and men face at work and the measures needed to ensure effective prevention. Taking account of gender differences in occupational safety and health (OSH) is what is meant by taking a gender-sensitive approach. This is done through mainstreaming or integrating gender into OSH at all levels — policy and strategy, research and workplace practices. This approach is important for the health and safety of male and female workers. How this can be done in practice is the subject of this report.

The basic feature of *gender mainstreaming* is the systematic consideration of the differences between the conditions, situations and needs of women and men in policies and actions. This means that gender mainstreaming is not a goal in itself but a strategy to achieve equality between women and men. In other words, gender mainstreaming is used to integrate concerns of women as well as men into policies and actions so that women and men benefit equally. It should cover design, implementation, monitoring and evaluation.

The above description of gender mainstreaming is based on definitions by the European Commission, European Institute for Gender Equality, International Labour Organization (ILO) and others. See Annexes 1 and 2 for more detail.

A 2003 report from the European Agency for Safety and Health at Work (EU-OSHA, 2003a) provided examples of approaches and practices to gender mainstreaming in individual Member States and from other sources. It concluded that it would be useful to gather and share more examples of policies, programmes and good practices in the workplace from all Member States (p. 142). Participants at a seminar held in 2004 (EU-OSHA, 2005) and further reports on women and OSH from EU-OSHA (EU-OSHA, 2013 and 2014) came to similar conclusions. This report aims to fill this gap and presents case studies and snapshots (smaller case studies) on initiatives that have been taken across the EU and worldwide to illustrate how gender mainstreaming can be applied to OSH.

It is important to note that the mainstreaming of gender into the work environment is not meant to highlight only women as workers, and some of the examples in this report show how a gendered approach can improve measures for men's occupational health. However, traditionally, the OSH of men and their jobs have had considerable more attention, and the male body and work experiences have in the past been taken as the norm or standard on which to base prevention measures. This report focuses more on women because the OSH of women is far less likely to be considered, practised and accepted as routine, and this gender imbalance needs to be redressed. Modern OSH legislation is, in general, neutral in terms of its approach to men and women, and there has been a widely held misconception that this means that it cannot be discriminatory. However, because OSH practice has traditionally taken the male condition as the norm, this builds in a gender bias to prevention. Furthermore, research has supported the premise that improving OSH for women will then improve OSH for workers in general (ILO, 2011). Further information about gender mainstreaming and its application is given in Annex 2.

### Approaches to gender in OSH

X *gender stereotyped* – differences are accepted or exaggerated; for example, the woman is viewed as the weaker sex, and equality is not promoted.

X *gender neutral/blind* – equality is 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.

In a *gender-neutral* approach to OSH, the average male worker is taken as the standard, but this cannot do justice to either women or men who do not comply with this picture. A *gender-sensitive* approach takes the different working situations of women and men as well as gender relations in companies into account, considers the variety and differences within the groups of male and female employees and questions role stereotypes in the workplace.

Source: EU-OSHA (2005), p. 6

### Taking a gender-sensitive approach to OSH

As mentioned above, in certain industries, more women are employed; in others, more men. Hence, women and men are exposed to different workloads and different OSH hazards. Some of the existing risks for women and men are underestimated, which makes the effective prevention and improvement of working conditions difficult. Protective and preventive measures are not equally effective for all workers or they may be omitted, because a workplace risk is not recognised, for example, overlooking that cleaners do manual handling or that men as well as women can face reproductive hazards. Even if women have the same job titles or job descriptions as men, it does not mean that they also perform the same activities under the same working conditions.

A gender-sensitive approach to risk assessment acknowledges the differences between men and women and their work and takes this into account. By means of risk assessment, effective OSH measures can be implemented for everyone. Working conditions that need to be acknowledged and considered include that more women are involved in part-time work and in informal employment, and that they tend to underreport violence, bullying and harassment. Furthermore, work equipment (such as desks, chairs, machinery and personal protective equipment (PPE) still tends to be designed for the average-sized male worker and takes less account of the ergonomic needs of women. Further information about carrying out gender-sensitive risk assessments is given in Annex 3. An important step in making gender-sensitive risk assessments is the consultation and participation of women and men. Further information on this can also be found in Annex 4.

These and other gender-related issues also need to be embedded or mainstreamed into OSH policies and strategies in a systematic and consistent way. Gender impact assessments are an important tool used to support this. Broader policy issues that need to be covered include ensuring that equal attention and resources are directed towards work-related risks to women and that occupational health research in general becomes more sensitive to gender. Furthermore, the data analysis within research should be gender-specific, so that any different impacts on measures and prevention practices by sex are highlighted and thereby acknowledged (UNDP, no date; WHO, 2011; EU-OSHA, 2003a).

### Gender mainstreaming in European Union OSH policy

Gender mainstreaming is established as part of EU policy (European Commission, 2003). The European Union's approach to gender mainstreaming covers a number of aspects (European Commission, 2004b):

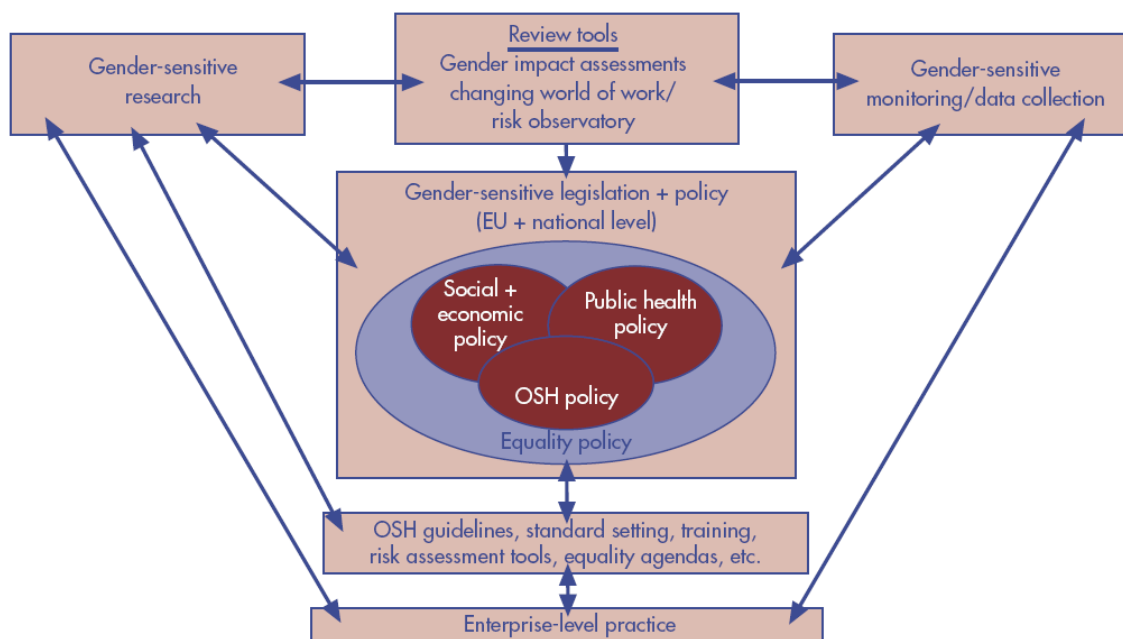
- policy design;
- decision-making;
- access to resources;
- procedures and practices;
- methodology;
- implementation;
- monitoring and evaluation.

Including gender mainstreaming in EU policy (European Commission, 2003) led to the 'Community strategy on safety and health at work 2002-06' (European Commission, 2004a) to formally incorporate

gender issues into the Community OSH health agenda as an objective. The strategy stressed the importance of taking measures to ensure that gender is mainstreamed within OSH. In particular, it included several complementary objectives alongside its overall objective of achieving continuing improvement in well-being at work, which must be jointly targeted by all of those involved. These objectives included mainstreaming the gender dimension into risk assessment, preventive measures and compensation arrangements, and thereby taking account of the specific characteristics of women in terms of safety and health at work. This theme was continued in the 'Community strategy on safety and health at work 2007-13' (European Commission, 2007). The EU Strategic Framework on Health and Safety at Work 2014-2020 again highlights that women can face specific risks, being an example of an area which warrants specific attention, and that OSH policy can contribute to promoting equal opportunities (European Commission, 2014).

There are a number of identified action levels for mainstreaming gender into the OSH system at European level and in the Member States, which are shown in Figure 1 (EU-OSHA, 2003a).

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



Source: EU-OSHA (2003a), p. 16

## 2.1 Aims

If a gender-sensitive perspective in OSH is introduced, the working conditions for all workers — men and women — will improve and develop in a gender-equitable way. However, it is not always understood what this means in practice. EU-OSHA commissioned this report to provide detailed case studies of mainstreaming gender into the strategy and actions of OSH authorities and organisations, and taking a gender-sensitive approach to the research process and to the work environment. These are combined with a wide range of shorter examples.

The project aims to:

- take forward the findings of previous EU-OSHA activities on gender and OSH, particularly the need to share and exchange examples of good practices;
- provide practical examples on taking a gender-sensitive approach in OSH and how gender can be mainstreamed into OSH;
- identify trends and successful approaches;

- facilitate the provision of good practice information and resources at the workplace level for OSH technicians and equalities officers, and for those in intermediary and national organisations involved in developing policy and promoting good practice in OSH and equalities.

## 2.2 Scope

The report focuses mainly on the EU, describing case studies and snapshots from 16 EU countries. Other, shorter, snapshots are detailed from five non-EU countries, with cases and snapshots from four international organisations/associations. The scope of the report is broad and thereby permits the exploration of different perspectives of gender mainstreaming.

The cases are of two types: those that take a gender-sensitive approach by national and intermediary organisations and those that take a gender-sensitive approach at the workplace level or by external organisations aimed at the workplace level.

Some of the cases in the report are more generally on gender mainstreaming. The aim of this is to show the wider context of how gender mainstreaming is done as well as how it can be done specifically in relation to OSH. At the beginning of each case it is indicated that it concerns general examples of gender mainstreaming.

There is also a further section (section 7) which contains some additional examples which were found later in the project. These were added because they were considered to be relevant and interesting, but it was not possible to include them in the analysis.

## 2.3 Method

### 2.3.1 The cases and snapshots

The examples used in the report were gained through a request to EU-OSHA's national focal points <sup>(1)</sup> for examples of good practice, through desk-based research and personal contacts. The organisations on which the case studies were based were asked to approve the use of the final version of these. A few of the cases included date back a number of years. Where good practice was found in older examples which remain relevant to workplaces today it was felt useful to include it.

### 2.3.2 The literature

The authors used a desk-based method to source the information and data used in the report. This included reviewing structured databases, for example EU statistical databases, peer-reviewed journals, peer-reviewed research and reports. The authors also used 'grey' literature to facilitate the assessment of reports and research that may not have been covered during searches of established electronic databases and to allow a broader, more comprehensive assessment of mainstreaming gender into work. <sup>(2)</sup>

---

<sup>(1)</sup> The focal points are nominated by the government in each of the Member States as EU-OSHA's official representative in that country. The focal points are typically the competent national authority for safety and health at work and are primary contributors to the implementation of EU-OSHA's work programmes. Each focal point manages its own tripartite network comprising government bodies and representatives from workers' and employers' organisations. This network provides input to EU-OSHA's work and is the mechanism for disseminating products and information to national stakeholders. In addition, the focal points are active in the planning and implementation of EU-OSHA campaigns as well as nominating national experts to the agency's groups and seminars (for more, see <http://osha.europa.eu/en/oshnetwork/focal-points>).

<sup>(2)</sup> Grey literature is authoritative primary scientific report literature in the public domain, often produced in-house for government research laboratories, university departments or large research organisations, and yet often not included within major bibliographic commercial database producers.



## 3 Overview of cases

### 3.1 Approach by national and intermediary organisations

#### **The Austrian Labour Inspectorate's approach to gender mainstreaming into OSH, Austria (Case 4.1)**

A Total Quality Management project highlighted the need for systems to avoid gender stereotyping in the labour inspection process. A gender-mainstreaming framework and strategy were put in place resulting in information, a survey, tools (indicators, guidelines and checklists) and cooperation in pilot sites. Implementation was through a gender-mainstreaming group and an intranet portal. The project aims to mainstream gender into the organisation and the working lives of inspectors, so that they are more aware of gender issues, and mainstream gender into the daily OSH work of the Labour Inspectorate. Actions include training for inspectors, public awareness-raising and designing promotional material, providing gender-mainstreaming experts and setting up a network, and setting benchmarks. Gender-mainstreaming approaches, along with age and other diversity areas, were subsequently integrated into Austria's OSH strategy. Outcomes have included gender elements integrated into research, campaigns and guides; and checklists to help inspectors take account of gender during workplace visits. The Labour Inspectorate has also mainstreamed gender into its recruitment policies, procurement and advance planning at all levels.

#### **The Danish interministerial gender-mainstreaming project – Action Plan 2002-11, Denmark (Case 4.2)**

This interministerial project is a general case. The project encouraged taking gender-mainstreaming initiatives and innovations in the policy areas of each of the Danish government's ministries. The project's steering committee included one officer from each ministry, to ensure 'buy-in' across the ministries. A network was established that included employees from different institutions working on gender-mainstreaming issues, thereby ensuring the exchange of knowledge and experience. A website for the project was created to develop communication and promote participation in gender-mainstreaming activities. The action plan focused on developing methodologies and establishing the gender-mainstreaming strategy. Outputs included examples of good practice, a toolkit with concrete tools for equality assessment of bills, campaigns, data production and budgets, and the introduction of initiatives for gender mainstreaming into the ministries' planning and administration. Regular reporting on progress by ministries and evaluation were part of the project.

#### **Finnish Gender Equality Act, Finland (Case 4.3)**

This is a general case concerning the Finnish Gender Equality Act which introduces the needs and the background of the legislation. The Act includes two key sets of provisions. First, the Act contains provisions prohibiting discrimination in virtually all areas of life and in all social activities; secondly, the Act provides for the promoting of gender equality in the actions of the authorities, at workplaces and at educational institutions. The Act also provides for its supervision and for sanctions for violating its provisions. In the workplace it requires companies to take a systematic approach through planning, monitoring and evaluation. The Act has resulted in improved practices in companies; however, the case also explores the reasons for non-implementation in some companies. The Finnish approach recognises that equality in working conditions includes OSH.

#### **Gender aspect – OSH in Finland – Strategy and practices, Finland (Case 4.4)**

In Finland, the Finnish Equality Act, which was amended in 2005, requires companies and organisations that employ at least 30 people to draw up an equality plan. Safety and health at work is one of the focuses of the equality plan. Under this focus, sexual harassment, ergonomics and workplace design are the key areas addressed. The employer has to facilitate working conditions that are suitable for both women and men. Furthermore, the employer has a duty to facilitate the reconciliation of work and family life and to attempt, without prejudice, to provide both women and men with equal opportunities to experience parenthood. The employer is also required to prevent sexual

and gender-based discrimination and to protect its employees from becoming victims of harassment. In Finland there is also a broad coverage of working conditions within the remit of the OSH authorities.

#### **Gender-sensitive design of occupational health management in the public administration of Berlin, Germany (Case 4.5)**

The change process in public administrations is increasingly focusing on gender mainstreaming. Therefore, the Senate of Berlin launched a programme for the implementation of gender mainstreaming in the Berlin administration. In line with this programme, the idea for linking gender mainstreaming and workplace health promotion arose. The project ended by producing the practical guideline 'Gender-sensitive design of the occupational health management in the public administration of Berlin'. It dealt with the links between gender issues, health management and personnel management. Tools were developed for its implementation.

#### **A woman-sensitive approach focused on equal opportunities in the Italian railway sector, Italy (Case 4.6)**

The Italian State Railway Group (Ferrovie dello Stato Italiane) developed a woman-sensitive approach focused on equal opportunities in the Italian railway sector. Its Equal Opportunities Committee carried out a series of activities to ensure equal opportunities for its female employees. These activities mainly consisted of providing information for its female workers (in such areas as employment opportunities, preventive measures adapted to women's specific needs at work and health promotion); carrying out local and national research projects addressing workplace problems specifically related to female workers; training for female employees on equal opportunities at work; health promotion projects and campaigns for both male and female employees of the Group. OSH issues, such as violence from the public, have been addressed. An equal opportunities network was set up at local level, as were various partnerships for exchanging good practices. Measures to improve women's health and safety in particular often benefited men as well.

#### **The autonomous community of Madrid and occupational risk prevention from a gender perspective, Spain (Case 4.7)**

Spain and the European Community promote the adoption of the gender perspective in public policies, including regarding occupational risk prevention. The Occupational Risk Prevention Master Plan for the Community of Madrid for 2008 to 2011 established actions directed specifically at some sectors and groups of workers particularly exposed to occupational risk, including women. Following a study, several actions were developed which were aimed at introducing the gender aspect into risk prevention on specific issues, such as gender violence in the workplace, equality and reconciling professional and personal life, preventing occupational risks to women, and sexual harassment in the workplace.

#### **Integrating gender mainstreaming in occupational risk prevention for Navarra, Spain (Case 4.8)**

Gender mainstreaming is recognised as an objective of the second Occupational Health Plan for Navarra 2007 to 2012, which aims to promote equality between men and women in the evaluation of risks and other occupational health-related actions carried out by companies. The Navarra Occupational Health Institute and the Navarra Equal Rights Institute cooperated to promote gender aspects in occupational risk prevention, including in the equality plans to be developed by companies. The work included research to determine the issues and priorities, an OSH and gender web portal and OSH aspects integrated into the equality planning tools for companies. The drivers for the activities came from Spanish law and strategy and European Community recommendations and strategy to mainstream gender into public policy and into OSH.

#### **Development and implementation of a diversity programme by a national OSH authority, United Kingdom (Case 4.9)**

The Health and Safety Executive (HSE) has a duty to promote workers' equality and address work-related discrimination. The HSE prepared and published its equality schemes for disability, gender and race to fulfil this duty. The HSE's first Race Equality Scheme was developed in 2002, and the Equality Scheme Framework and joint Disability and Gender Equality Schemes were developed in 2006. The scheme's development involved consolidating gender research, identifying future actions (in such

areas as male and female reproductive health, pregnancy and older workers), identifying the sectors that have gender-specific risks, and risk assessments. In April 2010, the HSE developed and published its Single Equality Scheme, which replaces the HSE's schemes for race, gender and disability and is in line with good practice across the public sector. Measures cover internal activities, including staff equality, and external activities.

#### **Purple Boots campaign, United Kingdom (Case 4.10)**

One of the barriers to women in construction is a feeling of belonging, exacerbated by poor fitting and unsuitable personal protective equipment (PPE). The Women's Engineering Society (WES) explored this issue further and conducted a large-scale safety clothing and footwear survey (part of the Purple Boots campaign). The survey results showed a lack of availability of PPE designed for women. It was usually smaller sizes of menswear. WES partnered with a manufacturer to develop and retail a new pair of boots. Through its campaign, WES was able to raise the awareness of women and so obtain PPE that was suitable for their size and shape.

#### **Promoting a workplace approach to testicular and prostate cancer, United Kingdom (Case 4.11)**

The trade union Unite's approach to health and safety at work includes being conscious of the gender-sensitive aspect, focusing on issues that may be of particular importance for women or men and adapting what they do to suit the target group. Unite is concerned that some men's health issues are neglected, including those within the workplace, and need special attention. Two such health issues are testicular and prostate cancer. Unite ran an awareness-raising campaign around these health concerns. It provided simple information via its publications for members and leaflets distributed in the workplace about testicular and prostate cancer. Many workplaces in which it has branches have introduced policies and improved their occupational health provision as a result. Cancer-awareness organisations and other partners have keenly supported Unite's activities.

#### **Mainstreaming gender into the activities of an international occupational health professional society (Case 4.12)**

The International Commission on Occupational Health (ICOH) is an international non-governmental professional society. Initially, a network on women, work and health was established among interested ICOH members, which formulated goals that stated that the gender issue should be introduced into every ICOH subcommittee, and that at its seminars, workshops or conference there should be sessions addressing the gender aspect within the field. The ICOH structure allows for the formation of scientific committees, following the proposals of a working group. As well as agreeing that gender should be part of the work of every scientific committee, a specific scientific committee on women, health and work was proposed and established. It supports the achievement of the goals formulated by the original network, produces newsletters and collaborates with other ICOH committees and with non-ICOH organisations.

#### **Incorporating gender into WHO's healthy workplaces model, World Health Organization (Case 4.13)**

The World Health Organization (WHO) is engaged in permanent work on workers' health and gender equality issues. Its goal is equality in health for all. Its approach is to promote and facilitate the institutional mainstreaming of gender, equity and human rights. This is a core value for all staff to be reflected in their daily work. It has produced gender-mainstreaming tools to support its own work and others' work. The results of a systematic review of literature on healthy workplaces led to the development of the healthy workplaces model, with specific suggestions on the inclusion of gender differences. This evidence-based approach combines principles of health protection and health promotion and in its implementation, combines the engagement of leaders, the involvement of workers and their representatives, gap analysis, learning from others and sustainability. A short guide on occupational health and gender is one of the tools it has produced to promote gender mainstreaming in occupational health.

## 3.2 Approach at workplace level

### **A gender-sensitive approach to musculoskeletal disorder (MSD) prevention in a printing company, France (Case 5.1)**

A printing company employing 225 people required an intervention to address the various disorders and absenteeism that affected its staff in its finishing workshop, the majority of whom are women. The company approached the regional association for the improvement of working conditions (ARACT) in Basse-Normandie for help in understanding what was happening. The analysis of the situation showed a disparity between men and women. Ergonomic solutions were put in place to reduce the physical strain among finishing assistants; changes to improve career development were also proposed. A holistic approach to analysing where the problems lay revealed that the absenteeism that was widespread among women, and their susceptibility to MSDs, was to the working conditions to which they in particular were exposed, and that this exposure was long term due to the complete absence of professional development.

### **Supporting women employees and a family-friendly company culture, Germany (Case 5.2)**

ConSol\* is a medium-sized enterprise within the information technology (IT) industry that has established a family-friendly work environment and supports women as employees. It allows flexible work patterns, has an established training policy, objective performance measures and no gender pay difference and actively develops female employees. Female employees are represented on the organisation's working group on strategic corporate decisions and have a women's forum to discuss women-related work issues, including OSH and well-being issues. The organisation has benefited from these practices as it has low turnover and absenteeism, is able to recruit high-quality professionals and maintain high levels of productivity and performance.

### **Gender mainstreaming in the risk assessment of psychological stress, Germany (Case 5.3)**

The project examines and describes the gender-specific perspectives of dealing with work-related stress and the resources available to deal with it. Employees were interviewed in three organisations about their perception of gender and stress. The evaluation showed that gender roles have a significant impact on the actual characteristics of the workload for women and men. The images of masculinity and femininity often do not match with the reality: certain demands and workloads are not perceived or others are overvalued. Therefore, concrete actions were identified, which could cause a reduction in stress and a strengthening of resources to support staff as well as the improvement of gender equality. The project focused especially on risk assessment as a key instrument of workplace health management, with the emphasis on stress from a gender perspective. The experiences and results from the interventions were used to produce a guide.

### **A positive initiative for female workers' safety in the transport sector at Met.Ro. SpA group, Italy (Case 5.4)**

The Met.Ro. SpA group initiated a joint action with the Italian Ministry of Labour and Social Policies aimed at the public transport sector: 'Project of positive action for the safety of female workers in the sector of the Met.Ro. SpA group'. The project was implemented to improve the skills of 200 female station operators working in two underground lines of Rome's network. It sought to boost their capability to manage the potential conflicts that may occur between passengers and the metro station operators. A questionnaire-based survey identified the female workers' needs, which was followed by appropriate training and a final assessment. The project improved safety at work for the company's female workers, but also resulted in an improvement in the safety and quality of the services provided by the public transport company.

### **PPE responding to women's needs at work within various economic sectors — a cooperative approach, Romania (Case 5.5)**

A woman-sensitive joint approach to safety and health was taken by a number of Romanian protective clothing manufacturers (FORNAX Group, S.C. MENTOR SRL, S.C. MarMih SRL), an occupational health and safety research organisation (the National Research and Development Institute on Occupational Safety 'Alexandru Darabont' Bucharest) and women end-users from beneficiary

companies. The beneficiary companies belonged to various sectors (including gas distribution, healthcare and cleaning services providers) with a significant number of female workers. This approach aimed at adapting the personal protective equipment (PPE) to the women's different shapes and sizes (during pregnancy, for instance) and the requirements of their work tasks. This resulted in more comfort at work and increased protection from workplace-related risks.

**Bringing gender equality into the ergonomic design of food preparation areas, United Kingdom (Case 5.6)**

Greggs plc is one of the largest retail bakeries in the United Kingdom. In order to reduce the risk of upper-limb disorders in its predominately female workforce, Greggs plc initiated a plan to refurbish its retail bakeries and equipment to create a better working environment for its employees. Greggs plc asked independent ergonomists to assess the suitability of its current food preparation benches and a proposed replacement. The assessment took into account the reach capabilities of women in the UK of both small and average stature. As a result of the assessment, Greggs plc updated its equipment and now has very few issues concerning repetitive strain injuries. The organisation has also found additional business benefits in providing a comfortable working area for its female employees, as tasks are now being completed more efficiently.

**The Olympic Delivery Authority's 'women into construction' project, United Kingdom (Case 5.7)**

The Olympic Delivery Authority (ODA) wished to increase the number of women working in construction on the 2012 Olympic Park site, and had two aims in place to facilitate gender mainstreaming. These were eliminating unlawful sex discrimination and sexual harassment and promoting equality of opportunity between women and men. Among the actions taken by the ODA to achieve its aims were the provision of care facilities, training (which included OSH) and mentoring programmes, marketing campaigns and outreach programmes, and OSH standards and rules for contractors which covered issues such as toilet facilities, a ban on urination in public and sexual harassment.

**'Male-friendly' staff wellness programme reduces absence at Royal Mail, United Kingdom (Case 5.8)**

The Royal Mail wished to reduce sickness absence by tailoring a health promotion programme to increase the engagement of both male and female employees. This involved getting all staff more involved in its wellness programme. One action to engage male manual workers in particular was to provide staff with booklets produced by the Men's Health Forum, written in the format of a well-known series of car maintenance manuals to make them more attractive to men. Due to its incentives, the company saw a reduction in its sickness absence rates, as well as lower staff turnover and greater employee satisfaction. Wives and partners were also engaged in the activity of getting the message across.



## 4 Case studies: approach by national and intermediary organisations

### 4.1 The Austrian Labour Inspectorate's approach to gender mainstreaming into OSH, Austria

#### Organisation involved

Austrian Labour Inspectorate

#### Key points

- The gender-mainstreaming approach aims to ensure fair working conditions and effective OSH for all workers, both men and women, combined with qualitative improvements in efficiency and sustainability in the advisory and control activities of the Austrian Labour Inspectorate.
- It combined two aspects: mainstreaming gender into the work of the labour inspectorate and awareness-raising/promotion of a gender-sensitive approach to OSH prevention in workplaces.
- Gender mainstreaming began as a result of a Total Quality Management (TQM) process so it was never a stand-alone issue, but part of a core management approach. Implementation has been systematic and process-oriented.
- Gender mainstreaming was incorporated into the Austrian OSH strategy and gender budgeting introduced.
- Gender mainstreaming/diversity have been embedded into the daily operations of the Austrian Labour Inspectorate.
- Inspectors are supported through training and checklists, for example to answer questions such as 'does my advice cover both women and men?'.
- The project was developed through a seven-year process and carried over from a gradual implementation of gender mainstreaming in core areas to a permanent gender and diversity structure across the entire Labour Inspectorate.
- A gender-mainstreaming working group and a network were established.
- Activities with a gender focus have included the development of a guide for cleaners, research into female musicians, and gender incorporated into actions for older workers.
- The Austrian Labour Inspectorate was awarded the National Excellence in Administration Award 2011 for its innovative programme.

Inspectors have the responsibility to set the right climate and use their influence at the workplace level and at the broader prevention level.

Labour inspection staff act...

- considering the different situation of women and men in a working environment; and
- taking into account the fact that OSH measures should be gender-sensitive.

#### Introduction

The Austrian Labour Inspectorate is made up of 20 regional inspectorates responsible to a central inspectorate. Of the over 400 employees some 300 work in the field (211 men to 76 women). Gender-mainstreaming activities in the Inspectorate arose out of a general and comprehensive Total Quality Management (TQM) project, which began in 2000. This triggered various projects and instruments including the development of a new mission statement, a framework strategy and performance indicators. In 2002, within the quality management process, gender equality and gender mainstreaming were systematically addressed within the Labour Inspectorate for the first time.

The new mission and framework strategy for the Labour Inspectorate included within its core principles 'encouraging the balance of interests of men and women at work'. Regarding its image, labour

inspection staff should act 'considering the different situation of women and men in a working environment' and 'with regard to the fact that OSH measures should be gender-sensitive'.

The following also provided impetus for further action in 2003:

- The general legal duty on the Labour Inspectorate to contribute towards enhancing OSH at work for all.
- Equal opportunities to be promoted through the encouragement of women in the internal mission statement of the Labour Inspectorate.
- Three resolutions of the Ministerial Council of the Federal Government for the implementation of gender mainstreaming in the Federal Government. This also led to the establishment of an interministerial working group on gender mainstreaming.
- An action plan to promote women, arising out of a gender-mainstreaming strategy covering all work areas of the Ministry covering the Labour Inspectorate.
- A duty to produce a report on women's policy.
- The European Community Strategy on OSH 2002-06, which specifically recognised the need to address gender issues in OSH and gender mainstreaming for the first time and required Member States to implement measures and report on implementation.
- An EU-OSHA report and factsheets on gender and OSH.
- The employment policy goal to increase the rate of women's employment.

### Aims

In 2003, in response to the TQM project and the goals regarding gender mainstreaming that had been placed on it, the Austrian Labour Inspectorate wanted to ensure that gender and diversity were incorporated into its work across the entire Labour Inspectorate in a systematic and permanent way. This is to ensure fair working conditions and effective OSH for all workers, combined with qualitative improvements in efficiency and sustainability in the advisory and control activity of the Austrian Labour Inspectorate.

It was recognised that, for OSH, the inclusion of gender aspects, gender-equitable participation and the questioning of stereotypes at work are particularly important. The incorporation of the gender-perspective into the functioning of the Inspectorate is in order to influence the following factors at the workplace:

- gender sensitivity in risk assessment, to include the workloads and risks for all employees;
- gender and gender-equitable development of working conditions;
- agreement of adequate and effective risk prevention and protection measures;
- overcoming role stereotypes in work;
- information and training;
- gender-equitable personnel selection;
- design of work processes and work equipment;
- access to preventive care services (safety engineering, occupational hygiene, occupational health);
- workplace health promotion;
- appointment to special functions (such as first aider and safety engineer).

The issue was how to make the statements of core principle and conduct with respect to gender in the Austrian OSH framework strategy a reality: how to implement them in practice in a systematic and comprehensive approach.

### What was done, and how

Gradual implementation of gender mainstreaming in core areas to achieve a permanent gender and diversity structure across the entire Labour Inspectorate:

- 2002: TQM project – addresses gender issues in a systematic way for the first time.
- 2003/4: Under the TQM project, the gender-mainstreaming project group prepares a concept for implementation of gender mainstreaming in the Labour Inspectorate.



- 2005: The proposal is put into practice.
- 2007: Increased inclusion of diversity in OSH at the workplace.
- Gender mainstreaming embedded in the Austrian OSH strategy 2007-12.
- 2012: Implementation process completed: gender mainstreaming/diversity becomes part of daily operations.

The gender-mainstreaming implementation process started with the director-general approving the implementation of a systematic gender-mainstreaming approach and requesting the preparation of a concept for its implementation in the Labour Inspectorate. A gender-mainstreaming project and a working group were established.

The phases of the implementation process were as follows:

*2003-04: Development of the gender-mainstreaming project — labour inspection (task under the TQM programme)*

From 2003 to 2004 a one-year project took place under the TQM project. In this project, the working group for gender mainstreaming developed the implementation process. The gender perspective also began to be included in the ongoing activities of the labour inspectors as well as in OSH at the workplace. Specific measures, such as further training and appropriate field jackets for women inspectors, were proposed.

The proposal for the implementation of gender mainstreaming was developed as a quality management measure:

- Gender mainstreaming in relation to OSH and labour inspection was defined and incorporated into the Austrian OSH framework strategy.
- Gender-mainstreaming information was collected and made available in a dedicated section, GM-Corner Infotrail, on the intranet.
- The current status regarding gender mainstreaming, covering all areas of the Labour Inspectorate's functions and how it operates, was analysed and evaluated through a survey.
- Tools were explored: how to create indicators; assessment of existing checklists for labour inspectors to see how they could be revised to address gender; how to achieve gender mainstreaming in research proposals.
- Gender-mainstreaming criteria for good practice were explored as well as defining what constitutes good practice in gender mainstreaming.
- Cooperation began with selected ongoing projects, for instance a nursing home project, a guideline for internal documents and a study of noise and female musicians.

Even in the early stages of the project, TQM measures for equal treatment began to be introduced into the Labour Inspectorate. For instance:

- Gender issues to be taken into consideration in all personnel decisions and prior to the publication of job advertisements and conducting of job interviews.
- Checklists of TQM points for the organisation of meetings and seminars were expanded, for example to include child care.
- The checklists for labour inspection were revised to ensure that the following questions were considered: 'Have I spoken to both women and men at the company level?', 'Does my advice cover both women and men?' and 'Will both women and men benefit from my advice?'

The output in 2004 was a proposal for the systematic implementation of gender mainstreaming.

*2005: Implementation of gender mainstreaming and development of principles*

The implementation of the process to embed gender mainstreaming across all aspects of the operations of the Labour Inspectorate took place in a step-by-step approach between 2005 and 2012.

In 2005, the gender-mainstreaming working group was made permanent, which included contact persons in the local inspectorates, and the implementation process started. Additional needs were identified, which included a further exchange of experiences on gender with other OSH institutes and 'multipliers' to cascade the actions.

Structural implementation of gender mainstreaming in the Labour Inspectorate took place in five priority areas: education and further training for inspectors; information and public relations/raising awareness/marketing; statistics and reporting; structural measures; and evaluation, benchmarking and control. The features of each area are listed below.

*Education and further training for inspectors:*

- Gender mainstreaming/diversity in OSH and labour inspection as part of basic training for all new Austrian Labour Inspectors.
- Training in gender mainstreaming and OSH included managers, trainers of labour inspectors and experts: gender mainstreaming/diversity seminars and OSH workshops for all staff, gender-mainstreaming implementation seminars for executives and multipliers of the Austrian Labour Inspectors.
- Gender-mainstreaming standards for internal training: seminars should be gender equitable, use appropriate language, use trainers with competence in gender equality, have input from staff engaged in gender mainstreaming/diversity, use publicly accessible venues, ensure a balance of female and male participants and be compatible with part-time employment.

*Information policy, public relations, awareness-raising, marketing:*

- Exchange of know-how, including further development of the GM-Corner Infotrail on the intranet.
- From 2006 the promotion of gender mainstreaming/diversity in a dedicated section on the public website of the Labour Inspectorate (<http://www.arbeitsinspektion.gv.at/Al/Arbeitsschutz/gender/default.htm>).
- Focusing on two main gender-mainstreaming themes for information: gender-sensitive language, and gender mainstreaming in the Austrian Labour Inspectorate and OSH.
- The design of a gender-mainstreaming logo and a gender-mainstreaming leaflet.
- An OSH award for gender mainstreaming.

*Statistics and reporting:*

- Data collection to include men and women — generally and in specific projects.
- Statistics broken down and analysed by gender.
- Reporting on gender mainstreaming/diversity, for example in the annual report.

*Gender mainstreaming — structural measures:*

- Permanence of the gender-mainstreaming working group and its involvement in the working group of the Federal Ministry of Labour, Social Affairs and Consumer Protection (BMAŠK).
- Nominating gender-mainstreaming experts in the organisation, including contact persons in the local labour inspection areas.
- Use of multipliers to disseminate information (for example, managers, gender-mainstreaming experts, contact persons for training, quality representatives and equal opportunity commissioner) and linking them.

*Gender mainstreaming/diversity evaluation, benchmarking and checking*

- Gender mainstreaming/diversity included in the strategy and mission statement, and drafting of the National Occupational Safety and Health Strategy 2007-2012 for Austria.
- Gender mainstreaming/diversity included in the Labour Inspectorate's annual plans, projects and setting of priorities.
- Review of gender mainstreaming/diversity in the head officials' meeting.
- Benchmarking activities with external organisations, for instance cooperating with the development partnership Quality Development Gender Mainstreaming: Concepts, Implementation, Evaluation to set quality criteria for effective gender mainstreaming in OSH in (a project within the European Commission's EQUAL programme that aims to provide a quality

assessment framework for good practice in gender mainstreaming, see online at <http://www.ge-gm.at/englisch/start.html>); and defining benchmarking indicators for the OSH strategy.

The first effects could already be seen in 2005. Inspectors were showing increased awareness and were beginning to incorporate gender into their daily work, supported by the revised inspection checklists. It was felt that gender mainstreaming was leading to a better focus on OSH problems and improved external efficiency. Gender was being mainstreamed into the inspectorate, for example, through mixed teams in the preparation of campaigns and for special inspections and cooperation and communication was being improved between those working in the field and office-based colleagues. Gender training for labour inspection managers and 'OSH-multipliers' helped to bring gender expertise into most labour inspectorate projects.

#### *2007 onwards: expansion of the gender-mainstreaming strategy and the inclusion of diversity*

In 2007 inclusion of diversity in OSH at the workplace increased, but with the principle that the gender perspective should be included in all diversity issues, recognising that there can be gender-specific issues regarding, for example, the OSH of migrants, working with a disability or older workers. The Labour Inspectorate ensured that it undertook the following steps:

- driving forward the implementation internally (ensuring that gender mainstreaming and diversity became part of the Labour Inspectorate's values and culture) and externally (when the Labour Inspectorate is dealing with external companies or working with partners);
- strengthening the exchange of experience;
- transferring knowledge on gender mainstreaming and diversity in OSH and the Austrian Labour Inspectorate;
- establishing a gender mainstreaming/diversity network (by means of a mailing list, discussion platform in the intranet section, and annual meetings on special topics, such as employees with disabilities and migrants);
- getting the gender mainstreaming and diversity network involved in all activities.

#### *Implementation through the Austrian Occupational Safety Strategy 2007-2012*

The Austrian Occupational Safety Strategy 2007-2012 was based on the principle that prevention goals are to be achieved by taking into account gender and age aspects. This legitimised and underpinned all the work on mainstreaming gender into OSH. The adoption of a gender-mainstreaming approach can be seen in projects on MSDs and skin diseases (with an emphasis on wet work (such as the work of hairdressers)), work on corporate culture and industry, a focus on the prevention of work-related diseases and illnesses and work to improve support for the prevention of violence and bullying.

The strategy included the goal that representatives of institutions directly or indirectly involved in OSH, such as ministries, state governments, accident insurance companies, social partners, stakeholder groups, safety engineering and occupational health centres, research centres, universities, regulatory agencies, companies, associations etc. should commit themselves to cooperate to improve sustainable OSH conditions with special consideration to gender and ageing aspects. The strategy covered six work areas:

1. Risk assessment and hazard awareness
2. Accident prevention
3. Prevention of work-related and occupational diseases
4. Instruction and advanced training and information concerning OSH
5. Improving the activities of preventive services (best practices)
6. Raising awareness of OSH.

Each area had a working group and each had to take account of gender issues. For example, the working group on the prevention of work-related and occupational diseases paid special attention taking a gender-sensitive approach, to reflect the high incidence of MSDs, skin diseases and stress among women workers and the gender aspects of underlying causes. Similarly, it paid particular attention to age and cultural diversity. The strategy was to look at the topic by sector, but also by gender and age, and to look at combined effects of physical and psychological strain and the working environment.

Gender aspects in the resources for the 2007 European Campaign on MSDs

- Men and women in different sectors – different risks/exposures.
- Different health complaints of women and men.
- Industrial design: gender-proof design of the working equipment.
- Combined risks – multifactorial strains, e.g. psychosocial strains with back pains.
- Consideration of gender aspects while doing risk assessments of MSDs, e.g. gender taken into account in guidance on the manual handling of loads: see ‘Pack’s leichter an!’ (for the Lighten the Load campaign) <http://www.arbeitsinspektion.gv.at/ew07/kapitel/kapitel01.htm>.

*Implementation through the gender mainstreaming and diversity network*

Systematic use of networking has been instrumental in the process to embed gender and diversity systematically across the Labour Inspectorate’s projects, activities and ways of working, as well as for promoting specific projects on diversity and gender. This has included input into:

- gender-sensitive graphics, for instance for advice on manual handling and screen work;
- overarching activities such as the preparation of annual working plans; campaigns, including a campaign on working time; the implementation of the Austrian OSH strategy, such as within the working group on work-related ill health; including gender mainstreaming and diversity in guidance on OSH systems and risk assessment;
- diversity training in 2009;
- specific projects on disabled workers (deafness in 2009) and migrant workers in 2011, website pages covering gender and diversity.

On the intranet the network developed the gender mainstreaming aspect, GM Corner-Infotrail, into a new interactive networking platform with access for each local labour inspectorate, with features such as colour-coded topics, events, good practices and tools, links and an archive. They also created a mailing list. External coaching was used to support the development of the network.

*External partnership on projects incorporates gender mainstreaming*

The Austrian Labour Inspectorate frequently carries out prevention and awareness-raising activities in partnership with other organisations. It makes sure that the gender dimension is explicitly included in these activities too. An example has been its joint activities on skin care and protection with the Austrian social insurance for occupational risks (AUVA), which formed part of work area 3 in the 2007-12 strategy. For example, men working outdoors were targeted regarding dangers of exposure to the sun and women were targeted regarding the risks of work with wet hands (e.g. in cleaning and hairdressing). Typical bad practices of both male and female cleaners were featured. The Labour Inspectorate also collaborated with the Community of Vienna on a safety poster series to show male and female pictograms, e.g. a female worker on a roadworks sign and both male and female cyclists on signs for bicycle lanes. In this manner the Labour Inspectorate is also promoting a gender-sensitive approach in the activities of other organisations it works with.

*Decision-making taking account of gender*

Gender relevance and gender balance and diversity are criteria used to select the risks and sectors to focus on. For example, the industrial cleaning sector and the hotel and restaurant industry were chosen for gender-mainstreaming projects for a number of reasons which were clearly explained.

- A high percentage of women work in them. (Between 77% and 80% of the workforce in the dry-cleaning industry is female, which amounts to around 30,000 women in Austria; 59% of the hotel and restaurant workforce is female, around 107,000 women in Austria.)
- They often have precarious working conditions (with low pay, little contractual protection and a high rate of part-time employment).
- They have a high proportion of immigrants and are considered low-status sectors.
- The work characteristics complicate the implementation of OSH measures. In cleaning jobs, the working structure is typically external, at clients’ premises; in hotel and restaurant jobs, the work is characterised by high levels of customer contact and time pressure.

*The gender mainstreaming/diversity pilot project on industrial cleaning*

The gender mainstreaming/diversity approach included statistics on occupational accidents analysed by gender, revealing completely different accident profiles among women and among men (top for women were needlestick injuries and cuts from glass, top for men was falling off ladders); an innovative counselling approach; external cooperation (especially with guilds and trade unions) and gender budgeting criteria. A report on the assessment of businesses in the industrial cleaning sector was published as well as a code of practice and checklists for self-examination. The information is available online (in German) at

[http://www.arbeitsinspektion.gv.at/Al/Arbeitsstaetten/Arbeitsvorgaenge/reinigungsgewerbe\\_spa\\_2010.htm](http://www.arbeitsinspektion.gv.at/Al/Arbeitsstaetten/Arbeitsvorgaenge/reinigungsgewerbe_spa_2010.htm).

*Labour Inspectorate project on age and work ability (presented at the Senior Labour Inspectors' Committee Meeting in Slovenia, 2008)*

A labour inspection campaign was launched in Austria that targeted small and medium-sized enterprises (SMEs) and micro enterprises in all sectors of industry. It was based on the finding that training and chances of promotion end at the age of 45; work rates, work organisation, working hours and the structure of the work environment continue to be tailored to younger people.

Fifteen enterprises per regional labour inspectorate (300 in total) were selected for the interventions. Labour inspectors received internal training and were provided with folders and tools for consultancy. The campaign was conducted in cooperation with social partners and external experts. Gender focus was ensured by including sectors with a mainly female workforce (such as within the hospitality industry and healthcare), while ensuring that women were also covered by the labour inspection visits.

The aim was to raise awareness at the company level and show enterprises how to take account of age in risk assessment and related prevention measures. Enterprises were invited to assess the age structure of their workforce and attempt a projection of expected changes in future to assess possible effects of demographic trends. Folders, tools and brochures were developed jointly with the aim of being usable and practical to SMEs.

**Examples of gender mainstreaming in OSH activities by the Austrian Labour Inspectorate**

Gender mainstreaming and noise exposure in orchestras:

- Risk assessment for female orchestra musicians.
- Designing specific prevention measures (seating arrangements, hearing protection).

Targeted campaign in nursing homes:

- OSH in homes and care for the elderly, gender-sensitive sectoral inspection and awareness-raising initiative to assess and improve the OSH situation.

**Outputs and what was achieved**

- Internal outputs include the database of resources and practical examples relating to gender mainstreaming which is available on the intranet, and specific resources such as the revised guidance for inspection activities.
- Gender is being routinely incorporated into research investigations, good practice resources and campaigning, both generally and in specific projects.
- A gender-sensitive OSH approach has been developed and communicated both internally and externally through the activity of the Austrian Labour Inspectorate and its multipliers.
- An increasing number of OSH institutions collaborate with the Labour Inspectorates in gender-mainstreaming and diversity activities. Gender/diversity is becoming well established as an OSH issue in its own right.
- The project has boosted the competencies of the Austrian Labour Inspectorate and reinforced the quality of its work. The new risks of the working world are receiving more interdisciplinary attention through the gender-mainstreaming/diversity approach.

- The potential benefit of the Austrian Labour Inspectorate project for policy and administration lies in the exemplary design of an internal gender-mainstreaming/diversity deployment in a federal administrative division (in both its central office and its departments throughout Austria).

Gender issues are integrated thematically in OSH projects, publications and campaigns of the Labour Inspectorate. Examples of where gender has been incorporated into projects and campaigns include:

- web pages on gender mainstreaming;
- a gender mainstreaming/diversity leaflet;
- Austrian guidelines for safety and health management systems and an OSH organisation check;
- noise investigations on female musicians and the code to reduce noise in the music and entertainment sectors;
- a guide to inpatient nursing care for — ‘hard work made easy’ and the annual campaign on nursing homes
- safety representatives;
- guidance/resources on the manual handling of loads (European campaign 2007);
- manual handling assessment tables;
- age-based working and an age(s)-appropriate work design publication;
- annual campaigns on cleaning (2008, 2010) and a guide to cleaning. Research on cleaners looking at the job division by gender and the accidents/ill health by gender. Leaflet on gender and diversity in the cleaning industry;
- campaign on working time limits (retail trade – food/electronics);
- risk assessment – e.g. evaluating work-related mental stress factors;
- ergonomic and psychosocial risks in the hotel and restaurant industry (2011);
- collaboration on a safety poster series in Vienna, to show male and female pictograms.

The Labour Inspectorate was awarded a national excellence in administration award in 2010 for its innovative gender-mainstreaming programme. The judges recognised the wide-ranging and in-depth organisational development process through which various gender equality aspects were anchored in the internal organisational structure and the core tasks of the organisation. The judges viewed the quality process with self-commitment and the fact that in the course of project development various other social diversity aspects, such as age, were taken into account as being particularly noteworthy. They also recognised the wide vision of the organisation, covering clients and also reaching out to other government organisations.

### **Problems encountered**

There can be different understandings of what gender mainstreaming is and involves what is quite a complex concept and process. Effort is needed to first determine a common understanding in general about what is involved before determining how this can be applied in a specific area such as labour inspection. Requirements on public organisations to carry out gender mainstreaming are generally not legally binding so there needs to be a high level of internal motivation to do it properly.

Significant resistance to the concept of gender mainstreaming in some parts of the labour inspection had to be overcome. Not everyone understood what it was or that there was any need for it in the area of OSH. Some saw the implementation of gender mainstreaming as an additional task which was not their responsibility.

Time and resources were needed to implement gender mainstreaming, both because of the need to raise awareness, develop understanding and change attitudes and because there was not a ready-made programme for gender mainstreaming in OSH. It had to be developed internally. In any case, it takes time to embed gender mainstreaming properly into the functioning of an organisation. Investment in training is needed. New ways of working have to be developed.

### Success factors and lessons

In general the success of the project lies in a number of elements, which include:

- Equality accepted and pursued as a political goal, with a clear mandate from top management.
- Ensuring good cooperation with TQM and making use of synergies.
- Taking a holistic approach, including the subsequent expansion to cover other areas of diversity.
- Taking a systematic and participative approach.
- Investing time and resources into the process. Decisions were made on the basis of prior assessment. Implementation took place over time, taking a stepwise approach. The working group, covering the federal and local levels, steered the way.
- Raising awareness about gender equality and implementing gender-awareness/mainstreaming training for different peer groups.
- Promoting the use of networks.
- Offering gender-mainstreaming information and discussion platforms.
- Introducing 'mixed' teams: with a mixture of men and women, managers, field service staff, office staff, regional representatives and gender-mainstreaming experts.
- Choosing the 'right' topics for campaign projects, based on the organisation's needs.
- Setting language standards and checking them.
- Creating gender-mainstreaming standards and criteria for projects covering areas such as data collection, composition of team, project leaders, reporting. Both qualitative and quantitative criteria were developed.

The success elements above cover both the process used and the types of action that it led to. Two elements worth looking at in more detail are:

*Systematic and participative approach:* the implementation of gender mainstreaming/diversity in governance was undertaken in a systematic, process-oriented fashion, entailing checking, consultancy and external cooperation. This approach used an interdisciplinary knowledge and information network, and was project-based with top-down/bottom-up elements. A stepwise and participatory approach was especially important to bring those with less awareness of the issues or its relevance to OSH into the process. The need for a gender-sensitive approach can be quite surprising and difficult to understand for some working in OSH, as there has been a wide-held belief that discrimination was no longer an issue in OSH following the move away from discriminatory OSH legislation banning women from certain work to gender-neutral legislation applied in a gender-neutral way.

#### **Key messages from the Austrian Labour Inspectorate on gender mainstreaming**

Gender mainstreaming in labour protection is a strategy to ensure:

- gender-equitable working conditions;
- effective safety and health protection for all workers;
- equality of women and men in the workplace.

Gender sensitivity in OSH means:

- that the criterion is not the average male worker but gender itself;
- avoiding gender stereotyping (categorisation according to female/male attributes);
- the participation of men and women in all areas of OSH (planning, implementation, resources);
- the systematic inclusion of gender issues in risk assessment in the workplace — covering all relevant hazards, all workers, all types of workplaces including peripatetic work, building sites; health promotion; OSH services;
- information, instructions tailored to the target group (knowledge, language, who instructs whom) and checking on understanding;
- personal protective equipment that is suitable;
- preventive services that also cover MSDs, stress and violence;
- women and men appointed and represented in all areas: worker representatives, safety officers, prevention specialist, occupational physicians, first aiders.

### Transferability

Provided that attention is given to the success factors described above, the project would be transferable to labour inspection in other Member States.

### Further information, references and resources

Bundesministerium für Arbeit, Soziales und Konsumentenschutz website:

<https://www.bmask.gv.at/site/>

Gender Mainstreaming — Beauftragte der Arbeitsinspektion

Arbeits Inspektion website: <http://www.arbeitsinspektion.gv.at>

Gender mainstreaming section on the Arbeits Inspektion website:

<http://www.arbeitsinspektion.gv.at/AI/Arbeitsschutz/gender/default.htm>

Gender in projects, good practices and best practices, Arbeits Inspektion website:

[http://www.arbeitsinspektion.gv.at/AI/Arbeitsschutz/gender/gem\\_070.htm](http://www.arbeitsinspektion.gv.at/AI/Arbeitsschutz/gender/gem_070.htm)

Jäger, F. The Austrian labour inspection approach to gender mainstreaming into OSH, strategy, actions and campaigns, EU-OSHA seminar on women at work — Raising the profile of women and Occupational Safety and Health (OSH), Brussels, 9 December 2010. Presentation available for download at: <https://osha.europa.eu/en/seminars/seminar-on-women-at-work-raising-the-profile-of-women-and-occupational-safety-and-health-osh/speech-venues/speeches/spspeech.2011-08-25.7901589448>

Inter-ministerial working group on gender mainstreaming portal and tool box: <http://www.imag-gendermainstreaming.at/cms/imag/>

Risk assessment and activities of the Labour Inspectorate –Austrian experience, SLIC Thematic Day 2008, available at

[http://www.id.gov.si/fileadmin/id.gov.si/pageuploads/Splosno/SLIC2008/E.Huber\\_EN.pdf](http://www.id.gov.si/fileadmin/id.gov.si/pageuploads/Splosno/SLIC2008/E.Huber_EN.pdf)

## 4.2 The Danish interministerial gender-mainstreaming project: Action Plan 2002-2011, Denmark

### Organisations involved

- The Ministry for Gender Equality
- The Prime Minister's Office
- All 19 ministries in Denmark

### Key points

- This is a general example of gender mainstreaming.
- The Minister for Gender Equality initiated an interministerial gender-mainstreaming project, which encouraged the introduction of gender-mainstreaming initiatives and innovations into practically all ministries. The action plan of the project is based on the requirements for the introduction and improvement of gender equality policies and objectives in the ministries' core activity areas.
- The Ministry for Gender Equality set a variety of milestones that needed to be reached in order to achieve their goals. Action plans were used to move forward in a structured way, with clearly defined goals, but which also allowed adjustments to be made as the project progressed.
- Preliminary meetings were held, allowing each ministry to develop its own set of objectives and programmes in order to achieve the overarching goals of the project.
- An e-learning tool was developed to allow staff to develop a better understanding of gender mainstreaming as well as how to implement it in their offices.
- Each ministry had report on how the gender-mainstreaming policy was being implemented in their ministry.
- Collaborative networks were used to facilitate participation in the process and, for example, the development of tools.



## Introduction

Denmark adopted the gender-mainstreaming strategy United Nations Fourth World Conference on Women in 1995, where it signed the concluding document (Platform for Action). The initiative was supported by the Danish Parliament, which decided to integrate gender equality into all policies and planning. Its Act on Gender Equality (2000) was developed with gender mainstreaming as an underlying principle for gender equality. Under Section 4 of the Act, all public authorities are required to promote gender equality and include it in their planning and administration along with the special initiatives traditionally aimed at promoting gender equality. As regards the overall gender equality work of the Government, a coordinating role was naturally allocated to the Minister for Gender Equality.

This case study presents the interministerial gender-mainstreaming project being implemented in Denmark as a component of its overall gender-mainstreaming strategy. The case of the Austrian Labour Inspectorate took place within the context of an interministerial gender-mainstreaming project, and this case from Denmark looks more generally at how such an interministerial project operates and the support it can offer to gender mainstreaming in OSH authorities.

## Aims

The Danish interministerial gender-mainstreaming project aims to incorporate gender equality into all aspects of public administration and planning. Through the work of public authorities, the Danish government hopes to promote equality between men and women through proper resource allocation and examination of legislation for potential impacts in gender equality. The premise behind the project is that incorporating gender perspectives into all relevant aspects of state policy, planning and administration will help to create gender equality in public administration. The three main goals of the project are to ensure that:

- gender equality is incorporated into the principal parts of the individual ministries' core activity areas and in relevant large interministerial tasks;
- the ministries formulate gender equality policies and specific gender policy objectives within their own core areas and thereby identify gender equality policy, challenges and gender-based problem areas;
- the resources and competencies for identifying and working professionally with gender-related issues and gender equality-related challenges are in place within the ministries.

## What was done, and how

A particularly important step of the gender-mainstreaming work, and intended to set an example for the other elements of the Danish public sector, is the implementation of the gender-mainstreaming strategy in the central administration. To this end, in 2001, the Minister for Gender Equality initiated the 'interministerial gender-mainstreaming project', which encouraged the introduction of gender-mainstreaming initiatives and innovations into practically all ministries.

The interministerial gender-mainstreaming project involved all 19 ministries of Denmark. The following key elements of the project were prioritised:

- setting up the organisational structure;
- admitting the ministries' relevant gender-mainstreaming initiatives;
- developing the action plan;
- creating the website.

### *Organisational structure of the project*

To organise the gender-mainstreaming strategy, three basic elements were deemed important: the participation of management, the development of competencies and the development of partnership. These three elements determined the organisational structure of the interministerial gender-mainstreaming project, which in turn consisted of three parts:

- the setting up of the steering committee to ensure proper participation by management;
- the creation of a network to build up capacity for its members;

- the Ministry of Gender Equality's promoting the development of a partnership between its professional expertise in gender and gender equality, and the portfolio ministries.

The Minister for Gender Equality set up the steering committee in April 2001. The aim of this was to ensure that the management of the gender-mainstreaming project had sufficient authority, by including one officer from each of the 19 ministries within Denmark. As the project is ongoing, the main task of the steering committee remains the management of the overall project, while it simultaneously works on implementing the gender mainstreaming strategy in government organisations. The committee also coordinates the gender mainstreaming work and ensures the exchange of experienced staff between ministries. The steering committee meets two or three times per year.

The next important organisational action of the Minister for Gender Equality was to establish the network for the project. The network had to bring together employees from different institutions working on gender mainstreaming issues so that they could exchange knowledge and experience. External experts were also invited to take part in the network activities.

The network is designed for the respective experts in the ministries' departments, agencies and directorates; these individuals may occupy different positions (for instance, coordinator for gender mainstreaming in the ministry, project manager or employee working in a pilot project or otherwise directly related to activities in gender mainstreaming and equality). Therefore, the number of the network members is not fixed and varies depending on the projects and tasks carried out in the ministry. However, each ministry must have at least one permanent member of the network as a contact person and is free to decide the number of its representatives in the network.

In order to achieve the objective of the network, its members should participate actively in the gender-mainstreaming process, which will involve their performing the relevant tasks as well as developing their own competencies. The network members collaborate in developing tools for gender mainstreaming by integrating the experience they have gained through projects and other activities, by discussing general and specific questions of gender mainstreaming, and by presenting the results of the work in their ministries, to Parliament and on the Internet. Such activities are particularly useful in helping the members gain professional knowledge on strategic issues and key tools and to be able to respond to other questions on gender mainstreaming.

The network participates in meetings, courses, presentations and debates, which are organised for the members between four and six times per year. In addition, small working groups investigate specific questions; focus groups are also set up to exchange experiences on certain issues.

The Ministry of Gender Equality functions as the secretariat for both the steering committee and the network. The ministry has a number of key responsibilities in the project:

- arranging training;
- disseminating the project ideas;
- supporting the describing of projects;
- ensuring that a constructive relationship exists between ministries to allow cross-ministry cooperation.

#### *The ministries' gender-mainstreaming initiatives*

Many ministries had already undertaken different and interesting gender-mainstreaming initiatives before the start or from the very beginning of the interministerial gender-mainstreaming project. Some were advanced in this process, and had the first set of results, while other initiatives were still in the planning phase. All these initiatives were adopted as part of the interministerial gender-mainstreaming project.

#### *Development of the action plan*

The five-year action plan was developed during the first year of the project. This period was selected to allow enough time to introduce and develop the gender-mainstreaming strategy and allow the project participants to be able to set an achievable range of new and higher targets. The action plan was built as a framework containing an overview of the phases and content of the project and thus provided a tool intended to help the steering committee in managing the project. Simultaneously, it is a dynamic document and requires periodic completion with the actual outputs each year.

### *Creation of the website*

A website was created to develop communication and promote participation in the gender-mainstreaming activities. It also serves as a place where all involved can send relevant information and link to other gender-mainstreaming websites, thus making the network an international one.

### *Action plan 2002-2006*

The interministerial steering committee adopted the first action plan for its work on the gender-mainstreaming project, which formed the frame of reference for the work completed during 2002-2006.

The action plan consisted of the following sections:

- overall visions;
- objectives for the gender-mainstreaming project;
- the more specific objectives that are the result of the above vision and objectives;
- tools, methodology and organisation development;
- project implementation;
- evaluation of launched activities;
- activity plan.

In line with the overall vision, and seeking to achieve the overall objectives of the project listed above by 2006, the project's implementation was intended to achieve a number of sub-objectives set for the individual years. In this way, the steering committee found the means to be able to manage the overall project, and thereby to fulfil, revise or extend any underlying objectives.

Each year, the steering committee must prepare an overview of the key elements of the project implementation. This entails documenting the challenges encountered by individual ministries (how the individual ministries perceive the challenges to gender equality work and the gender-mainstreaming strategy in relation to the ministry's core tasks). The descriptions of these challenges cover both short-term and long-term challenges, some of which can become long-term priorities. It must also identify areas where the project could advantageously launch joint interministerial initiatives. Examples of such initiatives could include a collection of experience and evaluation of methods in relation to gender-targeted campaigns, workshops on the development of communication strategies for women and men, an evaluation of the possibility to make the gender data available to other units and departments, research and case studies on the gender issues, and joint activities in training and statistical data preparation, financial analysis, websites and organisation of project management.

The steering committee proposed two evaluation stages for the activities:

- the ministries evaluating their own projects and passing the progress reports to the steering committee;
- an annual evaluation of the overall project progress by the steering committee, to be based on the launched joint initiatives and progress reports from various ministries.

The steering committee initiated the preparation of special guidelines, methodologies and tools for the evaluation. For this purpose, the committee set up four working groups, on the gender equality assessment of bills, impact assessment of resource allocation, communication and campaigns, and statistics and evaluation. Under this initiative, the toolkit containing concrete tools for the gender equality assessment of bills, campaigns and data production was developed and at the same time its electronic version was made available on the website.

The action plan also detailed the timetable for the specific activities (for instance, workshops, conferences and establishment of working groups) that related to the overall project. The timetable was more detailed for 2002 and more general for the following years, as a provision was included for an annual revision based on the joint initiatives adopted by the steering committee and on the general project development. The preparation of the new action plan for the next stage of the interministerial gender-mainstreaming project was projected for 2006.

Annex 1 of the action plan presented information on the ministries' actual gender-mainstreaming initiatives in June 2002. These comprised

- launched activities;

- described initiatives;
- initiatives under preparation;
- unresolved initiatives.

The other annexes gave detailed guidelines on the following items, as described by the ministries, to provide the steering committee with details on the project's progress.

In Annex 2, information for charting the ministries' gender-mainstreaming activities was set out. In this annex, the ministries were asked to provide a short description of the following items: the ministry's objective and its core tasks; the status on gender equality; the gender equality challenges posed in the described core tasks; the gender-mainstreaming activities planned; interministerial activities that (from the viewpoint of the ministries' initiatives) needed to be launched to support the gender-mainstreaming work. Comments and observations to the steering committee were also required.

Annex 3 set out the project description for activities under the gender-mainstreaming strategy. It outlines that the description had to be between two and four pages and to cover the following phases of the project: objective and results; organisation of the work; and follow-up and embedding.

#### *Action plan 2007-2011*

In Autumn 2006, external consultants evaluated the results of the implementation of the 2002-2006 action plan, which described the advantages of and gaps in the project. On the basis of the evaluation, the steering committee developed a new action plan for the project for 2007-2011. It focused on the actual implementation and embedding of collaboration in the ministries and boosting ownership among management, and it stressed the need to differentiate further work on gender mainstreaming in the ministries.

The action plan is set out in the following sections.

*Gender mainstreaming* A brief description of the vision of gender mainstreaming in the country is presented. The differences among the ministries' core activity areas are stressed.

*The primary goal of the action plan* The three primary goals for the action plan based on the proportionality principle are provided, namely gender mainstreaming of interministerial initiatives; gender equality policies and gender equality objectives in the ministries' core activity areas; and development of competencies and understanding of the relevance of gender mainstreaming. Milestones of implementation of the goals are also indicated.

*The subgoals of the action plan* Each goal of the action plan is supported by the relevant subgoals.

*Organisation and management* The section is designed to describe the organisation and management of the project that was improved and extended during implementation of the 2002-2006 action plan.

*Monitoring and dialogue* The method is based on the reviews and reports of gender equality (which the ministries submit to the Minister of Gender Equality), the presentations made at the meetings of the steering committee, the collection of good practice examples by the Ministry of Gender Equality, their discussion at the meetings and making these available on the website.

*Evaluation* The joint action plan should be evaluated on the basis of the following criteria: the goals in the interministerial action plan; the results of the interministerial initiatives; the results of activities and competency building in the ministries. The 2007-2011 action plan also presents a short history of the interministerial gender-mainstreaming project.

#### *Evaluation of the action plan*

In addition to the information mentioned above, the steering committee performs an annual evaluation of the overall action plan on the interministerial gender-mainstreaming project. The Minister of Gender Equality presents this in the Minister's annual reports, perspectives and action plans. The project status after the period 2002-2006 is presented in the document 'Annual Report 2006 — Perspective and Action Plan 2007'.

## Outputs

- The project's steering committee with the participation of top managers from all ministries was set up.
- The network for employees and partners on gender mainstreaming was created.
- The website for gender mainstreaming was established.
- The toolkit with concrete tools for performing an equality assessment of bills, campaigns, data production and budgets was developed.
- A new e-learning tool for drawing up gender equality appraisals was developed in both Danish and English.

## What was achieved

- More than 70 descriptions of successful cases of gender mainstreaming in the public sector were collected. One of these, on gender mainstreaming in office environments, is given in the box below.
- Training days on how to implement gender mainstreaming were introduced.
- Examples of good practice of gender mainstreaming were published on the corresponding websites.
- All ministries adopted plans for competence building in relation to gender mainstreaming.
- The ministries submitted their gender equality policies and objectives in the policy areas.
- Most ministries prepared plans for developing the competence of the staff to work with gender equality appraisals.

## Problems faced

Some ministries devoted less attention to the gender-mainstreaming project initiatives than others. Differences among ministries in their core activity areas influenced the type of work carried out in respect of gender mainstreaming within the ministries.

### **Gender-mainstreaming project on office environment — Palace and Properties Agency**

After having used activity-based workstations for two years, the Palace and Properties Agency mainstreamed this area in connection with a general compilation of experience. The project studied whether women or men have different attitudes to the layout of a workstation. The aims were to disseminate the knowledge on gender mainstreaming, and use the knowledge acquired on each gender's perception of activity-based workstations to give governmental institutions better advice on their choice of workstation layout.

(Ministry of Gender Equality, 2002)

## Success factors

This case describes a project that was put in place to facilitate and promote gender mainstreaming in the work of individual ministries, such as the Ministry of Employment where responsibility for OSH resides. Gender mainstreaming in national OSH policy and activities cannot take place effectively in isolation from other areas of policy and service provision. The OSH area also needs support to understand the process and manage this effectively and learn from the experiences of other government areas. This overarching project provides a practical structure and support for individual policy areas to develop strategy and practice on gender mainstreaming in a coordinated way. Some key aspects which support the success of the project are given below.

- The gender equality duties of public authorities are clearly defined.
- The Ministry of Gender Equality is engaged in permanent purposive work on gender equality issues. It provides a framework, motivation, coordination and resources such as e-learning.
- For the purpose of the project, the Minister for Gender Equality set up the project steering committee to include representatives from all ministries.
- When developing the action plan, the steering committee consulted different groups that focus on gender equality.

- The ministries willingly entered into the project. The ministries are provided with support but they also have to take ownership of gender mainstreaming in their areas.
- The progress of the project is consistently evaluated, and this allows amendments to the action plan.
- Internal and external experts were invited to evaluate the results of the action plan.

### Transferability

This project involves a comprehensive yet very practical approach. Ideally, the mainstreaming of OSH into national OSH strategy and actions should take place within an overarching framework such as this. However, the basic approach could be adapted and applied independently to OSH gender-mainstreaming projects at ministerial institutional, municipal or branch levels, as it is an example of combining the basic elements necessary for gender mainstreaming.

### Further information, references and resources

Ministry of Gender Equality, website: <http://www.lige.dk/>

Ministry of Gender Equality, The Danish inter-ministerial gender mainstreaming project. Action plan 2002-2006, 2002. Available at: <http://km.dk/fileadmin/ligestilling/PDF/actionplan.pdf>

Ministry of Gender Equality, The Danish inter-ministerial gender mainstreaming project. Action plan 2007-2011, 2007.

International Models Project on Women's Rights: <http://www.impowr.org/projects/danish-inter-ministerial-gender-mainstreaming-project-0>

Andersen, A., The work on gender mainstreaming in the Ministry of Employment. Available at: [http://www.genderkompetenz.info/w/files/gkompzpdf/taix\\_agnete\\_andersen.pdf](http://www.genderkompetenz.info/w/files/gkompzpdf/taix_agnete_andersen.pdf)

## 4.3 Finnish Gender Equality Act, Finland

### Organisations involved

- The Equality Ombudsman
- The Gender Equality Unit
- The Council for Gender Equality

### Key points

- This is a general case on the implementation of gender equality legislation.
- Equality between women and men is a crucial part of the Finnish welfare state model. The objective is that women and men should have equal rights, obligations and opportunities in all fields of life.
- The Act places a duty for promoting equality purposefully and systematically on all authorities and employers as well as in education, teaching and research.
- The ban on discrimination in employment covers hiring, wages and other working conditions, including sexual harassment, supervision and termination of employment. Finland recognises that working conditions can also include OSH.

### Introduction

Finland has well-developed and comprehensive gender equalities legislation which has been developed over time. It includes actions to promote gender equality, rather than just avoid discrimination, at the workplace and intermediary levels. For this reason it has been included as an example of a general equalities and gender-mainstreaming action.

Under Finnish law, women and men have generally the same rights and obligations, but despite this the status of women and men can vary widely in different areas of life, especially in working life. The Finnish Gender Equality Act has been amended and revised on several occasions, the major

amendments being enacted in 1992, 1995 and 2005. The Act is of a general nature and includes two key sets of provisions. First, the Act contains provisions prohibiting discrimination in virtually all areas of life and in all social activities; secondly, the Act provides for the promoting of gender equality in the actions of the authorities, at workplaces and at educational institutions. The Act also provides for its supervision and for sanctions for violating its provisions.

### **Aims**

The aim of the Finnish Gender Equality Act is to ensure that gender equality is achieved in practice.

### **What was done, and how**

The Finnish Equality Act (609/1986) first came into force on 1 January 1987 and since then it has been amended several times. The most important changes were made in 1992 (642/1992), 1995 (206/1995) and 2005 (232/2005). The amendments of 1992 made the prohibition of indirect discrimination and discrimination on the basis of pregnancy and parenthood more explicit. In 1995, a quota provision and an obligation concerning gender equality planning were added to the Act. The main purpose of the amendments of 2005 was to incorporate EU directives into Finnish legislation, to make gender equality planning more effective and successful, and to promote equal pay.

It is required by the Finnish Equality Act (2005) that all public authorities in both central and local government must promote gender equality as part of their official duties. This means that officials working in, for example, data communications and urban planning must promote gender equality with the same vigour as those responsible for social welfare, healthcare, education and monitoring compliance with the law. The Act introduced in 2005 also broadened the promotion of gender equality to cover the availability and supply of services. Under the Finnish Government's Action Plan for Gender Equality for 2004-2007, the ministries and the bodies and organisations under their administration are required to promote gender equality through mainstreaming.

Promoting gender equality through mainstreaming means that gender equality should be taken into account in, for example, the preparation, implementation, monitoring and assessment of different matters by the authorities, and in their drafting of legislation, performance of guidance work and budgeting. State and municipal authorities should develop and introduce tools suitable for promoting gender equality, such as the means for assessing gender impacts, indicators of the current state of gender equality and consultation mechanisms. Authorities should also consider how individual bodies could organise the promotion and monitoring of gender equality.

The Ombudsman for Equality monitors the observance of the Equality Act and particularly the observance of the prohibition on discrimination and discriminatory advertising of job vacancies and training opportunities. The Ombudsman for Equality works as an independent authority within the Ministry of Social Affairs and Health and gives advice and counselling on issues relating to the Equality Act. In addition, the Ombudsman for Equality supervises the implementation of protection of gender minorities against discrimination.

The Gender Equality Unit prepares and coordinates the Government's gender equality policy.

The Council for Gender Equality is a parliamentary advisory body, which takes initiatives on gender equality issues.

The Equality Board acts as an independent committee that oversees compliance with gender equality legislation and resolves matters related to it.

The Parliamentary Employment and Equality Committee deals with employment and gender equality matters. There is also an unofficial network of women members of parliament (MPs) network in the Finnish Parliament, to which all female MPs belong.

### **Outputs**

Nearly all ministries have a gender equality working group. Many public institutions, such as Statistics Finland, the Finnish Broadcasting Company (YLE) and the universities have gender equality specialists and networks of gender equality focal points. A number of mostly large municipalities have gender equality committees and the Association of Finnish Local and Regional Authorities also supports municipal gender equality work. Labour market organisations have networks of focal points and officials

dealing with gender equality issues. The recognition of working conditions as a gender equality issue has resulted in a number of OSH-related gender programmes in Finland (see box below).

In particular, the Finnish Equality Act (2005) emphasised the following areas.

*Quotas and the principle of equitable representation* It is required that women and men must be able to participate in planning and decision-making processes in different sectors of society on an equitable basis. Thus, the proportion of both women and men in Government committees; advisory boards; working groups; other similar preparatory, planning and decision-making bodies; and municipal bodies and bodies established for the purposes of intermunicipal cooperation must be at least 40%. This quota provision does not apply to municipal councils.

*Promotion of gender equality in education and training* Women and men must be provided with equal opportunities for education, training and professional development. The obligation applies to all public authorities, educational institutions, employers and trade unions providing education and training.

*Promotion of gender equality in the workplace and gender equality plans* Public-sector and private-sector employers and employers hiring labour from others, irrespective of the number of employees, must ensure that vacant jobs attract applications from both women and men. Employers must also promote the equitable recruitment of women and men in the various jobs and provide both sexes with equal opportunities for career development. If the number of personnel working for the employer on a regular basis is at least 30, the employer must draw up a gender equality plan each year in cooperation with the personnel and must implement the plan's actions each year. The plan must contain a gender-equality assessment, measures for improving the situation, and a review of the actions from the previous year's plan.

*Prohibition of discrimination based on gender* Both direct and indirect discrimination based on gender is prohibited. The prohibition of discrimination also covers sexual harassment and gender-based harassment.

*Prohibition of discrimination in working life, educational institutions and organisations representing labour market interests* Discrimination at work may occur in connection with the following:

- employee recruitment;
- selection of employees for particular jobs or training;
- determination of working conditions, pay and other terms of employment;
- failure to adhere to the obligation to eliminate sexual and gender-based harassment;
- weakening of working conditions and employment terms after the employee has appealed to her/his rights under the Act on Equality between Women and Men;
- giving notice and lay-offs.

#### **Gender-mainstreaming programmes in Finland related to OSH**

##### *Focus on women in atypical contracts*

In Finland the WORK programme focuses on women at work especially with regard to the continuing increase in atypical employment contracts in Finland. In particular, two projects are funded by the Academy of Finland. 'Gender Inequalities, Emotional and Aesthetic Labour and Well-being in Work covers the following: mapping the practices of gender in working life more generally through qualitative case studies; analysing the practices of recruitment processes; and practices of customer service in call centres and in women's small firms. Impact of Lifestyle Modification on Pregnant Women's Work ability, Sickness Absence and Return to Employment aims to decrease sickness absence and to increase work ability and return to work after maternal/parental leave.

##### *Study on equality and multiculturalism at the workplace*

The Finnish Population Research Institute's project Equality and Multiculturalism at the Workplace promotes the participation in working life of women with an immigrant background. Target groups were workplaces recruiting immigrants and their personnel. The study showed the deep differences between the integration strategies of women from different socio-economic backgrounds. It showed the importance of personal networks and supportive colleagues to attain success at work.



*Ministry includes gender in strategic goals for National OSH Institute*

In Finland the Ministry has set a number of detailed strategic targets for the Finnish Institute of Occupational Health (FIOH). One such strategic goal is entitled 'Promoting gender equality and diversity at work'. The aim has been to increase gender equality in Finnish working life by producing new scientific knowledge and by developing tools and practical methods for HR managers and OSH professionals. The 'Work/life balance' research and action programme was launched (2005-2009) to support balance between work, family and other spheres of life. The MONIKKO project emphasised the importance of equality from a wider perspective, taking into account age, ethnicity and family situation. The Institute has drafted a Gender Equality Plan, which was prepared in close cooperation with the staff members.

*Female cancer survivors' employment*

FIOH projects on women worker cancer survivors have covered cancer survivors' employment; cancer survivors' work ability; social support from the workplace and the occupational health services for cancer survivors; and cancer survivors' work engagement.

### **What was achieved**

The Act has certainly led to advancements in gender equality over the years in Finland and supported improved practices in many workplaces. Recent studies on gender-equality planning at workplaces show that there is more gender equality planning in recent times than before, although the quality of the plans produced could be improved.

### **Problems faced**

The gender equality legislation in Finland has had a very positive impact. However, despite its well-developed and holistic approach the implementation of legal gender equality measures has not occurred in all workplaces (Holli and Kantola, 2007). For example, a study conducted in 2010 showed that only 62% of Finnish workplaces had fulfilled their legal duty of gender equality planning and only 60% of workplaces had carried out pay surveys and in 45% of these workplaces no monitoring or measurements had been done on the basis of the survey (Uosukainen et al., 2010).

Some difficulties in implementing the Act lie in the widely held belief that gender equality has been achieved in Finland in general (Holli, 2003; Holli et al., 2006; Julkunen, 2010; Raevaara, 2005) and in the workplace in particular (Saari et al., 2004). 'There is no need for mainstreaming as we are already so equal' is a common argument (Horelli, 2001). Another reason is that gender-equality planning and pay surveys do not always match well with other gender-neutral tools that are in use in workplaces for supervising the interests of wage earners. In addition, both the gender perspective and women have often been absent from negotiating processes. Another issue is that there is neither a shared understanding nor legal instruments defining which jobs are of equal worth, which can be a hindrance.

### **Success factors**

Equality between women and men is a crucial principle in the Finnish welfare state model, which has underpinned the development and implementation of the specific legislation. The Act places a duty for promoting equality purposefully and systematically on all authorities and employers as well as in education, teaching and research. The Act covers a broad range of working conditions, including OSH, which shall be looked at further in Case 4.4. It requires a proactive, explicit and systematic approach at the workplace, through the use of (equality) planning, assessment and evaluation. Ministerial commitment and requirements have led to a number of complementary gender-mainstreaming programmes in Finland related to OSH, which is important to support implementation in the workplace.

Social dialogue was used to develop the legislative approach: trade unions, employer confederations and the Finnish government worked in tripartite cooperation to promote gender equality and equal pay in workplaces, which is important for the development of a practical approach which will be acceptable in practice.

## Transferability

The principle of the Act is transferable to other countries. However, the implementation of the Act and the specific details of the Act would need to be adapted according to each country's own social and legal situations. While this is a general case, the general principles, success factors and challenges can also inform the development of OSH-specific equality actions in other Member States.

## References and resources

- Gender Equality unit and the Ombudsman for Equality, Ministry of Social Affairs and Health, 'The Act on Equality Between Women and Men', Gender Equality Publications, Helsinki, 2005.  
Available at: <http://www.hsph.harvard.edu/population/womenrights/finland.women.05.pdf>
- Holli, A. M. and Kantola, J., 'State feminism Finnish style: strong policies clash with implementation problems', in Outshoorn, J. and Kantola, J. (eds.) *Changing state feminism*, Palgrave Macmillan, Basingstoke, 2007, pp. 82–101.
- Holli, A. M., *Discourse and politics for gender equality in late twentieth century Finland*, Department of Political Science, University of Helsinki, Helsinki, 2003.
- Holli, A. M., Luhtakallio, E. and Raevaara, E., 'Quota trouble. Talking about gender quotas in Finnish local politics', *International Feminist Journal of Politics*, Vol. 8, No. 2, 2006, pp. 169-193.
- Horelli, L., *How to mainstream gender equality — experiences from the Finnish context*, 2001.  
Available at: <http://www.eurofem.org/info/wales.html>
- Horelli, L. and Saari, M., *Tasa-arvoa valtavirtaan: Tasa-arvon valtavirtaista-misen menetelmiä ja käytäntöjä* [To mainstream gender equality: Methods and practices], Sosiaali- ja terveysministeriön selvityksiä, Helsinki, 2002.
- Julkunen, R., *Työelämän tasa-arvopolitiikka* [Gender equality policies in working life], Sosiaali- ja terveysministeriön selvityksiä, Sosiaali- ja terveysministeriö, Helsinki, 2010.
- Kinnunen, M. and Korvajärvi, P. (eds.), *Työelämän sukupuolistavat käytännöt* [Gendered practices in working life]. Vastapaino, Jyväskylä, 1996.
- Lavikka, R., 'Promoting gender equality in workplaces: the Finnish experience', Presentation to the International Seminar on Women, Technology and Entrepreneurship, September 22-23, Tampere, Finland, 2005.
- Ombudsman for Equality, *Gender equality plan for the workplace*, 2006. Retrieved 13 June 2009, from: <http://www.tasa-arvo.fi/Resource.phx/tasa-arvo/english/equalityplan260906.htx>
- Ombudsman for Equality Mäkinen, *A presentation of gender equality planning and pay surveys in a seminar organised by the Programme to Promote Equal Pay for Women and Men*, Helsinki, 26 November 2008.
- Raevaara, E., *Tasa-arvo ja muutoksen rajat. Sukupuolten tasa-arvo poliittisena ongelmana Ranskan parité- ja Suomen kiintiökeskusteluissa* [Gender equality and the limits of change: gender equality as a political problem in the debates on parity in France and quotas in Finland], PhD thesis, TANE-julkaisuja, 2005:7. Tasa-arvoasiain neuvottelukunta, Sosiaali- ja terveysministeriö, Helsinki, 2005.
- Saari, M., Mustakallio, S. and Sevelius, P., *Tasa-arvosuunnittelu — henkilöstön ja johdon yhteinen asia* [Gender equality planning: a joint affair for both staff and management], Suomen Elintarviketyöläisten Liitto VvL ry (Finnish Food Workers' Union SEL), 2004.
- Statistics Finland, *Women and men in Finland*, Statistics Finland, Helsinki, 2007.
- Uosukainen, K., Autio, H. L. A., Leinonen, M. and Syrjä, S., *Työpaikan tasaarvosuunnitelma ja palkkakartoitus. Tutkimus suunnitteluvaihteen toteutumisesta sekä suunnitelmien ja kartoitusten laadusta* [Gender equality plans and pay surveys. A study of the implementation of the gender equality planning duty and of the quality of the plans and pay surveys]. Sosiaali- ja terveysministeriön selvityksiä Helsinki: Sosiaali- ja terveysministeriö, 2010:7.

Useful websites:

- <http://www.ttl.fi>
- <http://www.wom.fi> (in Finnish, with English pages)

## 4.4 Gender aspect — OSH in Finland — Strategy and practices, Finland

### Organisations involved

- The Equality Ombudsman
- Gender Equality Unit
- Council for Gender Equality

### Key points

- The broad focus of OSH in Finland.
- The broad focus of gender discrimination in work organisation.
- Employers are required to draw up equality plans and OSH is among the working conditions that plans should consider.

### Introduction

In Finland the Act on Equality between Women and Men (2005) recognises OSH as a key area for gender promotion in the workplace. The Act requires companies and organisations that employ at least 30 people to draw up an equality plan. Safety and health at work is one of the focuses of the workplace equality plan. Under this focus, sexual harassment, ergonomics and workplace design are key issues. The employer is obliged to facilitate working conditions that are suitable for both women and men. Similarly, various workplaces, working methods and equipment should be developed and arranged with a consideration of gender difference so that they are suitable for both sexes. Furthermore, the employer has the obligation to facilitate reconciliation of work and family life and to attempt, without prejudice, to provide both women and men with equal opportunities to experience parenthood. The employer is also required to prevent sexual and gender-based discrimination and to protect its employees from becoming victims of harassment.

In Finland there is also a broad coverage of working conditions by OSH authorities. They not only monitor compliance with the Occupational Safety and Health Act but also the Working Hours Act, the Annual Holidays Act, the Employment Contracts Act, the Occupational Health Care Act and the Act on the Protection of Young Workers.

### Aims

- To avoid discrimination in working conditions.
- To use equality plans to cover OSH issues.

### What was done, and how

There is a closer link between OSH and equality actions in Finland at the workplace than in some other Member States, firstly, because Finnish law and strategy on OSH sees OSH in a broad way, encompassing wider working conditions issues which fall under the remit of the Labour Inspectorate, and, secondly, because discrimination at work includes a broad view of discrimination in the organisation of work.

#### *Coverage of OSH and working conditions in workplace gender equality plans*

There has been an obligation on employers to carry out gender equality planning in Finland since 1995, when it was added to the Act on Equality between Women and Men. Amendments were incorporated into the 2005 version of the Act to make gender equality planning more effective and successful by specifying in detail how equality planning should take place and to promote equal pay. The

requirements of the equality plans are key to gender aspects of OSH being taken into account at workplaces.

If the number of personnel working for the employer on a regular basis is at least 30, the employer must draw up a gender equality plan each year in cooperation with the personnel and must implement the plan's measures each year, too. Even though the gender equality plan is drawn up on an annual basis, it may contain shorter or longer term objectives.

The content of the gender equality plan and the implementation of its measures are primarily concerned with pay and other terms of employment. *It can cover working conditions and OSH.* The plan may be incorporated into the company's personnel and training plan or its *occupational health and safety action plan*. The gender equality plan must contain a gender equality assessment, measures for improving the situation, and a review of the actions from the previous year's plan.

### 1. Gender equality assessment

The assessment must be made on the basis of necessary information about the gender equality situation at the workplace. It can, for example, cover the recruitment procedure, the current employment of women and men in different jobs, career progress, *working conditions*, personnel training, participation in working groups, reconciliation of work and family life (such as the use of family leave and work arrangements supporting this), workplace atmosphere, attitudes to gender equality, company management and *occupational safety and health*. The assessment can be drawn up using both statistical and qualitative methods and it is also important to include information derived from practical experience. Information can also be gathered by analysing other surveys carried out at the workplace (e.g. job satisfaction surveys) from the gender viewpoint. A survey of women's and men's pay in the workplace must also be conducted as part of the gender equality assessment.

### 2. Measures for improving the situation

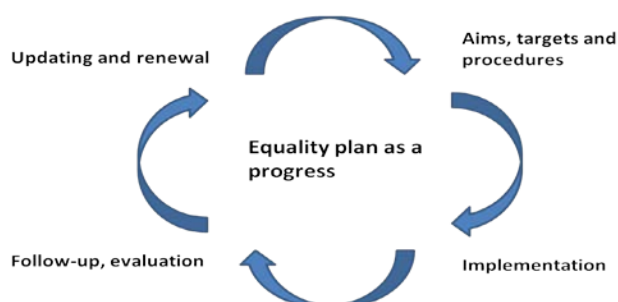
Using the assessment as a basis, the employer and the employee representatives must jointly decide which measures should be taken to promote gender equality. They should also agree on the targets, methods and timetable of the process, and the methods for monitoring the implementation of the measures.

### 3. Review of the results

The review must cover the implementation of the previous year's plan and the results achieved. The review will give important information in such matters as the functioning of the mechanisms for correcting pay differences and the areas in which improvements are still needed. The review can also be used for making the process more efficient and as a basis for the following year's plan.

The employer has an obligation to ensure that the gender equality plan is in accordance with the requirements of the Act on Equality between Women and Men and that it contains details of the employment of women and men in different jobs, and a pay survey. The employer and employees may agree locally that the assessment contained in the gender equality plan is updated at least once every three years rather than on an annual basis.

Figure 1: Equality planning as a process



Source: Saari et al., 2004

*Valmet Automotive, equality planning.* The concept of equality in this company is broad and in addition to gender includes issues related to age. The equality plan deals with the recruitment policy, on-the-job learning and task rotation, working conditions and working time, wages and rewarding, personnel training, situations related to change, family policy leaves, sexual harassment, welfare in the working community, discrimination in working life, implementation and monitoring of the equality plan. A cooperation committee monitors the implementation of the equality plan and sets new objectives for future plans.

Source: Implementing gender equality in enterprises, report on best practices and tools in Europe, Vicki Donlevy, Rachel Silvera, November 2007. Available at:  
[http://ec.europa.eu/employment\\_social/equal/data/document/0801\\_gender\\_twinning\\_en.pdf](http://ec.europa.eu/employment_social/equal/data/document/0801_gender_twinning_en.pdf)

#### *Examples of equality plan practices*

Good examples of equality plans on the promotion of safety and health in industry are the equality plans of the Valmet Automotive Plant and Cloetta Fazer Chocolates Ltd. In these cases, the organisations applied ergonomics in order to attract women into industrial work, which has been male-dominated and often regarded as too heavy for women. Meanwhile, the equality plan of the police force concentrated on recruitment policy, creating a women-friendly atmosphere and introducing zero tolerance of sexual harassment.

#### *Broad view of discrimination in the organisation of work*

The inclusion of OSH as a workplace equality issue is facilitated by the Act on Equality between Women and Men covering discrimination in the organisation of work in a broad way. The action of an employer is considered to be discriminatory if the employer manages the work, distributes tasks or otherwise arranges the working conditions in such a way that one or more employees find themselves in a significantly less favourable position than one or more employees of the opposite sex. Management of the work comprises such matters as the supervision of working hours and work, organisation of working facilities, allocation of tools for the work, and the development of employees' tasks and skills. For example, a system of distributing work in which the most monotonous and boring tasks are exclusively given to employees of one gender or the other is considered to be discrimination.

#### *Broad coverage of working conditions by OSH authorities*

In Finland, OSH authorities not only monitor compliance with the Occupational Safety and Health Act but also the Working Hours Act, the Annual Holidays Act, the Employment Contracts Act, the Occupational Health Care Act and the Act on the Protection of Young Workers. Thus, OSH in Finland covers not only safety and health at work, but also terms of employment, the conditions of the employment relationship, psychological well-being, the functioning of management and organisation, productivity and codetermination.

Family policy in Finland has many elements that support the reconciliation of employment and family life as well as gender equality. Welfare policy measures such as parental leave or public day care aim to provide equal opportunities for women and men for paid employment irrespective of their family situation. In 2003, a possibility was introduced to shorten both parents' working hours and combine part-time work with parents sharing parental leave. These possibilities are, on the one hand, expected to result in more equal positions of women and men in the labour market, for example in relation to career development and pay. On the other hand, equal sharing of care responsibilities between parents of young children is understood as key to more equal gender relations (Mahon, 2002). In OSH terms, it can help reduce stress on working women and their total workload of paid and unpaid work if it reduces the amount of caring work they carry out in the home.

#### *Finland's broad OSH strategy*

The aim of the initiative is to create and maintain the prerequisites of healthy and safe working conditions in an organisation. It is the Finnish government's stated aim to 'ensure that all citizens can participate fully in work life, contribute to longer working careers, facilitate the coordination of family life and work, promote equality and make work more attractive' (Ministry of Social Affairs and Health 2004,

2006). In relation to OSH at workplaces, the government's aims include providing resources to facilitate and enhance equality, the coordination of work and family life, psychological OSH, well-being at work and more effective monitoring of working hours, the development of good management practices and general expertise, workplace health promotion work and the special needs of the ageing workforce.

#### *Promotion of gender equality by public bodies*

Under the Finnish Government's *Action Plan for Gender Equality for 2004-2007*, the ministries and the bodies and organisations under their administration, such as the Labour Inspectorate, are required to promote gender equality through *mainstreaming*. Promoting gender equality through mainstreaming means that women's and men's concerns and experiences should be taken into account in, for example, the preparation, implementation, monitoring and assessment of different matters by the authorities, and in their drafting of legislation, performance of guidance work and budgeting. State and municipal authorities should develop and introduce tools suitable for promoting gender equality, such as the means for assessing gender impacts, indicators of the current state of gender equality and consultation mechanisms. Authorities should also consider how individual bodies could organise the promotion and monitoring of gender equality.

Nearly all *ministries have a gender equality working group*. Many public institutions have gender equality specialists and networks of gender equality focal points. A number of mostly large municipalities have gender equality committees and the Association of Finnish Local and Regional Authorities also supports municipal gender equality work. Labour market organisations have networks of focal points and officials dealing with gender equality issues.

The Act on Equality between Women and Men 2005 includes the following:

- provisions for *prohibiting discrimination* in virtually all areas of life and in all social activities;
- provisions for the promoting of *gender equality* in the actions of public authorities, at workplaces and in education and training;
- a duty for promoting equality purposefully and systematically on all public authorities, including monitoring compliance with the law;
- a ban on discrimination in employment covers recruitment, pay, access to training and other working conditions, including sexual harassment and gender-based harassment, supervision and termination of employment. Both direct and indirect discrimination based on gender is prohibited. The prohibition of discrimination also covers sexual harassment. The prohibition of discrimination in working life includes organisations representing labour market interests.

Employers' duties under the Act include the following:

- developing 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;
- ensuring, as far as possible, that an employee is not subjected to sexual harassment;
- if they employ at least 30 employees, drawing up an annual gender equality plan in cooperation with the personnel/representatives and implement the plan's actions. The plan must contain a gender-equality assessment, specific measures for improving the situation, and a review of the actions from the previous year's plan. Working conditions and OSH can be covered in the plan. The plan may be incorporated into the companies' personnel and training plan or its OSH action plan.

#### **What was achieved**

Studies on gender-equality planning at workplaces show that there is more gender equality planning in recent times, but that the quality of the plans produced could be improved. Larger organisations are more active than smaller ones in implementing plans. This suggests that smaller organisations need additional support and specific tools tailored to their needs.

## Success factors

Trade unions, employer confederations and the Finnish government work in tripartite cooperation to promote gender equality and equal pay in workplaces. The focus of OSH is broad in Finland and there is a broad scope regarding what constitutes discrimination in work organisation, both of which are backed by legislation and national strategy. This creates synergies between OSH actions and equality actions, rather than having them treated as separate issues, which is often the case. It is important that the requirement for employers to carry out equality plans can cover OSH and may be incorporated into their OSH action plan.

## Transferability

Finland's strategy on OSH and equalities, with adaptation to differing social contexts, could be transferred. As noted above, awareness-raising and adequate tools are essential to support initiatives, be they legislative or voluntary.

## References and resources

- EU-OSHA — European Agency for Safety and Health at Work, *Mainstreaming gender into occupational safety and health*, Proceedings of a seminar organised in Brussels on 15 June 2004, 2005. Available at: <http://osha.europa.eu/en/publications/reports/6805688>
- Gender Equality unit and the Ombudsman for Equality, Ministry of Social Affairs and Health, 'The Act on Equality Between Women and Men', Gender Equality Publications, Helsinki, 2005. Available at: <http://www.hsph.harvard.edu/population/womenrights/finland.women.05.pdf>
- Horelli, L., How to mainstream gender equality — experiences from the Finnish context, 2001. Available at: <http://www.eurofem.org/info/wales.html>
- Holli, A. M. and Kantola, J., 'State feminism Finnish style: strong policies clash with implementation problems', in: Outshoorn, J. and Kantola, J. (eds.) *Changing state feminism*, Palgrave Macmillan, Basingstoke, 2007, pp. 82-101.
- Horelli, L. and Saari, M., *Tasa-arvoa valtavirtaan: Tasa-arvon valtavirtaista-misen menetelmiä ja käytäntöjä* [To mainstream gender equality: Methods and practices], Sosiaali- ja terveysministeriön selvityksiä, Helsinki, 2002.
- Julkunen, R., *Työelämän tasa-arvopolitiikka* [Gender equality policies in working life], Sosiaali- ja terveysministeriön selvityksiä 2009:53, 2010, Helsinki: Sosiaali- ja terveysministeriö.
- Lavikka, R., 'Promoting gender equality in workplaces: the Finnish experience', Presentation to the International Seminar on Women, Technology and Entrepreneurship, September 22-23, Tampere, Finland, 2005.
- Mahon, R., 'Childcare: toward what kind of "Social Europe"?' *Social Politics*, 9/Fall, 2002.
- Messing, K. and Östlin, P., *Gender equality, work and health: a review of the evidence*, World Health Organization report, 2006. Available at: <http://www.who.int/gender/documents/Genderworkhealth.pdf>
- Ministry of Social Affairs and Health, *National occupational safety and health profile of Finland*, Helsinki, Ministry of Social Affairs and Health, 2006.
- Ministry of Social Affairs and Health, *Occupational safety and health in Finland*, Tampere, Ministry of Social Affairs and Health, 2004, pp. 1-21.
- Ministry of Social Affairs and Health, *Toolkit of gender equality — Equality planning at workplaces*, Office of the Ombudsman for Equality, Finland, Equality Brochures 2000, p. 1.
- Ombudsman for Equality, *Gender equality plan for the workplace*, 2006. Retrieved 13 June 2009, from: <http://www.tasa-arvo.fi/Resource.phx/tasa-arvo/english/equalityplan260906.htm>
- Ombudsman for Equality Mäkinen, *A presentation of gender equality planning and pay surveys in a seminar organised by the Programme to Promote Equal Pay for Women and Men*, Helsinki, 26 November 2008.

Saari, M., Mustakallio, S. and Sevelius, P., *Tasa-arvosuunnittelu — henkilöstön ja johdon yhteinen asia* [Gender equality planning: a joint affair for both staff and management], Suomen Elintarviketyöläisten Liitto VvL ry (Finnish Food Workers' Union SEL), 2004.

Uosukainen, K., Autio, H.L., Leinonen, M. and Syrjä, S., *Työpaikan tasaarvosuunnitelma ja palkkakartoitus. Tutkimus suunnitteluvaiheen toteutumisesta sekä suunnitelmien ja kartoitusten laadusta* [Gender equality plans and pay surveys. A study of the implementation of the gender equality planning duty and of the quality of the plans and pay surveys], Sosiaali- ja terveysministeriön selvityksiä, Sosiaali- ja terveysministeriö, Helsinki, 2010, 7.

Useful links:

- <http://www.ttl.fi>
- <http://www.wom.fi> (Mustakallio, Sinikka et al. (2008). How to succeed in equality planning).
- <http://wom.fi/yhteystiedot/summary-in-english/>
- [www.monikko.net](http://www.monikko.net)

## 4.5 Gender-sensitive design of occupational health management in the public administration of Berlin, Germany

### Organisation involved

Senate of the Interior in Berlin

### Key points

- The Senate of Berlin launched a programme for the implementation of gender mainstreaming in the Berlin administration. The Senate of the Interior took this as an opportunity to launch a project for a gender-sensitive design of occupational health management in Berlin's public administration.
- The project ended by developing practical guidelines entitled 'Gender-sensitive design of the occupational health management in the public administration of Berlin'. It dealt with the links between gender issues, health management and personnel management.
- Tools were developed for the implementation of a gender-sensitive workplace health promotion: standardised reporting with performance indicators; design of a standardised health report; a gender-specific employee survey; application of the 3R-method (assessing the project in terms of representation, resources and reality); a leaflet entitled 'Gender competence'; the inclusion of gender issues in further education; and guidelines to facilitate the self-reflection of lecturers regarding gender-sensitive behaviour. The principle of gender mainstreaming is now embedded in the personnel management and has become part of the normal working environment.

### Introduction

The change process in public administrations is increasingly focusing on gender mainstreaming. Article 3 of the German Basic Law contains the obligation on the state to ensure equal opportunities for men and women. In 1999, the German government decided to enforce this national objective as a guiding principle to promote equality between women and men using the strategy of gender mainstreaming.

Gender mainstreaming pervades administrative action at all levels and all topics. Therefore, the Senate of Berlin launched a programme for the implementation of gender mainstreaming in the Berlin administration. In line with this programme, the idea for linking gender mainstreaming and workplace health promotion arose. In health management, the principle of gender mainstreaming particularly applies: women and men differ not only physically and biologically, which has an impact on health, but both sexes deal with health and illness in different ways. The different working and living conditions of women and men and different levels of integration in work and family as well as activities in different occupational fields are factors that influence health and health-related lifestyles. The tools used for workplace health promotion and safety and health at work, but also the OSH legislation were — more or less — constructed gender-blindly. It is to be assumed that, because of the missing integration of



gender-specific aspects in workplace health promotion, chances and health potentials are not by far exhausted for both sexes.

The project ended successfully after two years in spring 2006 with the creation of the practical guidelines entitled 'Gender-sensitive design of the occupational health management in the public administration of Berlin'. It dealt with the links between gender issues, health management and personnel management. Tools were developed for the implementation, which consists of the following measures:

- standardised reporting with performance indicators;
- design of a standardised health report;
- creation of a gender-specific employee survey;
- application of the 3R-method (assessing the project in terms of representation, resources and reality);
- production of a leaflet on gender competence;
- addressing gender equality issues in further education;
- development of guidelines to facilitate the self-reflection of lecturers regarding gender-sensitive behaviour.

The instruments were tested in 2006 in the Senate of the Interior.

### **Aims**

Within the framework of the human resources management, the following main strategic objectives were defined:

- healthy, motivated and flexible staff;
- gender equality.

This means that equal access to different job fields and equal opportunities for advancement for all

- the health of female and male employees and their physical, mental and social well-being;
- diagnosing, preventing and reducing physical and psychological stress in the workplace;
- ensuring that work and family life are compatible.

And additional aims were formulated regarding further training:

- communicating the preconditions for gender equality (in terms of gender mainstreaming);

communicating knowledge on health-maintaining working conditions for the promotion of motivation, creativity female and male employees should be ensured. A gender-based assessment was carried out. This included, for example, developing strategies to enable previously gender-typical occupations and jobs to be increasingly less filled according to gender-stereotyped conditions.

Additional aims were formulated for the issues of workplace health promotion:

- ensuring, qualification and innovative ability in terms of workplace health promotion.

### **What was done, and how**

Since January 2003, the office of gender mainstreaming operates as an interface for the interdepartmental support, coordination, and evaluation of the national implementation process. Since 2005, all documents for the Senate in the State of Berlin are reassessed with respect to their effects on both sexes. This is due to the realisation that, in addition to the varying health behaviours of women and men, there are specific working pressures and risks for each sex. These must be identified and analysed to achieve needs-based healthcare in the administration in terms of health equity.

After a pilot phase, the biennial main phase of the implementation of gender mainstreaming started in summer 2004. In this phase, all Senates and district administrations introduced gender mainstreaming to all relevant areas of the organisation. Consultancy and academic support were offered to ensure the transfer of gender competency and its sustainability, these being prerequisites for the proper implementation of gender mainstreaming into different policy contexts. The Senate of the Interior used the support in the context of 'health management' to launch a project about a gender-sensitive design of occupational health management in the public administration of Berlin.

To implement this project, the administration of the Senate of the Interior formed a task force to develop a strategic link between gender mainstreaming and workplace health promotion. The project group was composed of the following members:

- experts in the fields of health promotion and OSH, human resources development and promotion of women in the workplace;
- representatives from districts, special authorities and administrations of the Senate;
- representatives of the work council;
- external consultancy, management consulting and support for the survey was supplied by the Beuth Hochschule für Technik (University of Applied Sciences).

The tasks of the project team included the following:

- developing guidelines;
- conducting an employee survey and designing a health report for Berlin;
- ensuring gender-sensitive design in the training of representatives of occupational health management.

## Outputs

A comprehensive assessment of gender-equitable employment structures (in terms of, for instance, leadership positions, working hours and work–life balance) needed background information. Data, which supply information on whether any action is needed, must be available for the responsible persons of the occupational health management. The aim was to sensitise the different stakeholders to the importance of gender mainstreaming in the design of workplace health promotion within the public administration of Berlin. The following tools were developed for workplace health promotion.

*Practical guidelines* The document 'Gender-sensitive design of occupational health management in the public administration of Berlin' demonstrates gender mainstreaming on the basis of the occupational health management. These practical guidelines contain a questionnaire that can be used for regular employee surveys. In addition, indicators for the ongoing monitoring of developments are offered by the public agency. This allows the creation of an ongoing reporting system without significant additional effort or even multiple acquisitions. The practical guidelines are meant primarily as an orientation for those involved in occupational health management.

*Standardised reporting with performance indicators* This makes it possible to evaluate gender aspects in terms of health-related criteria.

*Preparation of a health report* A health report was prepared on the basis of gender-differentiated data. This consolidated, assessed and evaluated the results of different data sources (performance indicators, disability health insurance data, in-house medical statistics, risk assessments, and information from interviews, employee surveys and health circles). It gives an overview of existing activities and an analysis of how well they achieve their objectives. The regular preparation of the health report is intended to ensure that a differentiated assessment of the success of the occupational health management can be carried out, which identifies any deficiencies, and so promotes gender equality. This makes it possible to identify where action is needed as well as to develop solution strategies.

*Gender-specific employee survey* A gender-specific employee survey was created, which aimed to assess occupational stress and risks in the workplace as well as the organisation of work from the perspective of employees. On the basis of the assessed needs, further measures to improve the organisation of work and health prevention can be developed and implemented.

*Application of the 3R-method* The 3R-method is an analytical instrument from Sweden, which systematically collects the information necessary for the implementation of gender mainstreaming. It can be used as a tool for an inventory or for the first step of the analysis for the design of projects and the design of actions. At the same time, it includes a strong activating potential, because the stakeholders themselves can be included in the study (for instance, in the design of the employee survey or the design of health circles). It may also be necessary to examine the workplace together with experts and deal with issues of different health risks and the workloads of female and male employees in their own sphere of responsibility.

3R stands for:

- representation (the numerical distribution of women and men);
- resources (the distribution of resources, for instance, money, time and free space for women and men);
- reality (this is a qualitative dimension: finding the cause of the differences in, for instance, the employment structure of the distribution for resources between women and men; furthermore, the measures in workplace health promotion examined whether the interests and needs of women and men were considered to an equal extent).

*Gender issues in further education/gender-sensitive training* These included, for instance, use of gender-neutral language, knowledge of gender-typical workplace exposure and health and behavioural concepts.

*Guidelines for lecturers* These were developed to facilitate their self-reflection regarding gender-sensitive behaviour.

### **What was achieved**

The principle of gender mainstreaming is now embedded in HR practices and has become a normal part of the work environment. The need for action can be identified so that the appropriate measures can be implemented if necessary.

### **Problems faced**

During the time of the project, there were no comparative materials available on which the project could draw. The search for materials dealing with this specific issue yielded only a few results and it turned out to be difficult to find performance indicators that provided information on gender mainstreaming. After an intense discussion, the following tools for the implementation of gender mainstreaming into the workplace health management were established:

- a practical guideline entitled 'Gender-sensitive design of occupational health management in the public administration of Berlin';
- evaluation using performance indicators;
- consideration of gender aspects in the training of health coordinators.

### **Success factors**

- development of guidelines;
- the aspects of gender mainstreaming can be brought into the administration by means of the link to the health management;
- the range of indicators for 'personnel' (indicators/performance indicators for the national and cross-sectional comparison of personnel);
- development of a gender-specific employee survey;
- development of a structure for a health report;
- practical help and the explanations of the guidelines support the work of managers and HR representatives in the implementation of gender mainstreaming through workplace health management;
- the qualification for the position of 'health coordinator' has been redesigned;
- the development of aids for teachers, which are used by the Berlin Academy of Public Administration.

### **Transferability**

The tools (in German) prepared by the Senate of the Interior can be helpful in general for the introduction of a gender-sensitive approach to occupational health management. In applying the The objective of the FS Group's Equal Opportunities Committee (CPO) was to 'defend and enhance female employment and to promote positive actions for women'.

- The CPO played a key role in carrying out actions oriented to female workers developed by the FS Group to enhance women's presence in the railway sector, and in the implementation of adequate measures to meet women's specific needs at the workplace.

Measures method to develop this gender-sensitive approach, factors such as the initial expert training in gender mainstreaming would be important.

#### Further information and resources

Gender mainstreaming web pages: <http://www.berlin.de/sen/frauen/gleichstellung/gender-mainstreaming/>

Gender budgeting web pages: <http://www.berlin.de/sen/frauen/gleichstellung/gender-budgeting/>

Pilotprojekt gender mainstreaming: [http://www.berlin.de/sen/frauen/gleichstellung/gender-mainstreaming/Practical\\_guidelines](http://www.berlin.de/sen/frauen/gleichstellung/gender-mainstreaming/Practical_guidelines) (German version)

Checkliste gender mainstreaming:

[https://www.berlin.de/imperia/md/content/balichtenberghohenschoenhausen/buergerservice-mitbestimmung/check\\_gm.pdf](https://www.berlin.de/imperia/md/content/balichtenberghohenschoenhausen/buergerservice-mitbestimmung/check_gm.pdf)

Geschlechtersensible Gestaltung des Betrieblichen Gesundheitsmanagement in der Berliner Verwaltung — Eine Handreichung, Senatsverwaltung für Inneres, 2006, Berlin:

[http://www.berlin.de/imperia/md/content/batempelhofshoeneberg/abtfinperswibuerg/gesundheitsmanagement/internet/links\\_downloads/geschlechtersensible\\_gestaltung\\_handreichung.pdf?start&ts=1412271049&file=geschlechtersensible\\_gestaltung\\_handreichung.pdf](http://www.berlin.de/imperia/md/content/batempelhofshoeneberg/abtfinperswibuerg/gesundheitsmanagement/internet/links_downloads/geschlechtersensible_gestaltung_handreichung.pdf?start&ts=1412271049&file=geschlechtersensible_gestaltung_handreichung.pdf)

## 4.6 A woman-sensitive approach focused on equal opportunities in the Italian railway sector, Italy

### Organisation involved

Italian State Railway Group (Ferrovie dello Stato S.p.A., FS Group)

### Key points

- This case study highlights a series of 'actions, activities and organisms' to ensure equal opportunities for men and women within the FS Group, given the very low percentage of female employees in the sector (about 10%) and the need to increase this.
- The approach aimed to identify and meet the particular work-related needs of female employees.
- This initiative comprised a diverse range of activities, such as research projects, training, safety information, communication, IT and so on.
- European recommendations and national law and agreements were behind the initiation of activities.
- included OSH-related and health-related measures. While men were covered, activities to improve women's health and safety often benefited men as well.

### Introduction

Actions at the European level related to improving women's access to various economic sectors in which they are less likely to enter, such as the railway sector, include the innovative proposals of the European Parliament's Committee on Women's Rights and Gender Equality, and the Mixed Working Team on Equal Opportunities' recommendations in the context of social dialogue in the railway sector, and initiatives of the European Transport Workers' Federation (ETF). This has led to an increase in the activities in which women have been involved and in their employment rate within the railway sector.

European policy actions to integrate the principle of equal opportunities in Member States' employment policies have in turn led to the enterprises in the railway sector undertaking internal actions to promote and increase the female employment rate. These actions constituted the basis for women's better integration and the assurance of equal opportunities. Despite this, certain barriers could not be

completely eliminated, such as the cultural and historical beliefs regarding women's inability to work in male-dominated sectors such as the railway sector and the image of the 'typical' railwayman; the cultural stereotypes discouraging the access of women to more technical occupations; the difficulties women encounter in coping with professional demands; the demands of family life; a requirement for shift work; and lack of self-esteem. In addition, the needs of women workers have not been considered, including in terms of work organisation, particularly as regards the reconciliation of women's work and family life. In consequence, the Italian railways have been a male-dominated sector and women have not exceeded 10% of employees within the FS Group.

This case study refers to an example of promoting equal opportunities for women within the Italian railway sector in its FS Group. In recent years, the FS Group initiated a series of 'actions, activities and organisms to realise equal opportunities' for its women employees through the allocation of an appropriate budget for this purpose and the provision of leave to employees to accomplish these activities. The Group considers the leave as working hours. OSH-related issues were included within the actions.

### **Aims**

FS Group's actions aimed at:

- enhancing female workforce employment within the Group;
- raising female workers' awareness of the scope for equal opportunities in the Group through women-oriented positive actions (such as providing adequate information on working conditions, training and local and national projects);
- boosting women's entry into technologically advanced professional sectors;
- increasing women's capability to face critical work situations through training to ensure that they gained the legally required qualifications and ensuring that their psychological and physical abilities were not exceeded;
- protecting women's health through issuing and implementing OSH regulations that seek to reduce the risks of physical and mental ill health;
- preventing cancer through specific campaigns;
- analysing the status of women working in the railway sector, through local and national research projects;
- identifying innovative solutions for an increased involvement of women in the negotiation of work contracts and providing women-oriented measures at the workplace;
- promoting the reconciliation of women's work life and family life;
- supporting women's and men's re-entry into work after maternity or paternity leave.

### **What was done, and how**

#### *Legal background*

An adequate legal framework and appropriate organisational structures at the national and regional levels constituted the key premises to set up an activity plan comprising women-oriented measures within the FS Group. The European Economic Community (EEC) Recommendation 635/84 was included in the National Collective Labour Contract (CCNL) in 1987. Consequently, the state railway enterprise set up an Observatory on the Status of Women, with the participation of the company's management and trade union representatives. In 1991, National Law 125/91 provided the legal framework for setting up 'equality organisations' to promote and defend women's rights to equal opportunities at the workplaces within the public and private sector.

In this context, the FS Group established a Bilateral Equivalency Committee (CPO) organised on a regional basis. Its main task consisted of 'defending and enhancing female employment and promoting positive actions for women'. The National Collective Labour Contract, of April 2003, set up a regulation for the FS Group which requires the Regional CPO to draw up an annual activity plan, in coordination with the national CPO and with the agreement of the social partners involved.

### *FS Group's women-oriented approach*

In recent years, on the basis of the above legal and organisational provisions, the FS Group's CPO carried out a series of 'actions, activities and organisms to realise equal opportunities' for its women employees. The FS Group assigns the necessary annual budget to support all these actions and activities. In addition, the company has provided time off, which is considered as working time, for the employees concerned to carry out these actions.

The main actions and activities developed by the company on equal opportunities particularly for the women employees consisted of the following.

*Adequate information* This has been provided for the approximately 10,000 women in the FS Group through the distribution of an online guide with detailed explanations on equal opportunities in terms of women's employment opportunities, ensuring preventive measures adapted to women's specific needs at work, women's health protection and other activities of the CPO. Information brochures were also distributed to the entire workforce on their general employment rights and proper preventive measures for OSH. Periodic meetings have been held also on the CPO's activities, with the participation of the company's management and the trade unions' representatives. Reports on these activities have been published in various magazines of the company and of the trade unions.

*Training on equal opportunities* In addition to the usual in-company training, courses have been provided on topics related to equal opportunities, particularly for newly employed women. These courses were meant to enable female employees to better consider their specific work-related needs, health and safety included, and to help them find adequate solutions to their specific problems. Some of these initiatives have been implemented through a series of projects co-financed at national level. In parallel, the trade unions organised similar training courses that covered the equal opportunities issue more deeply.

*Positive actions* These consisted of local and national projects designed and implemented upon the proposal of the CPO, largely supported out of public or EU funds. These projects mainly focused on topics such as OSH preventive solutions to meet female employees' specific needs at the workplace, research, training, communication, IT, general safety and health measures and skills audits. The projects also focused on identifying and fighting the gender-specific risks women are confronted with in the railway sector (such as verbal and physical violence, mobbing and harassment). Other significant areas of interest have been covered by the projects conducted with the CPO's support on the promotion of equal opportunities for women in the railway sector.

### *Examples of positive action projects*

*Development of new professional female profiles for the future railways* This project has promoted the entry of women into technologically advanced professional sectors.

*Security and self-confidence* This project was meant to enable female workers to appropriately manage the more risky situations they might be confronted with at work. This provided them with legal capabilities and instruments, and adequate physical and psychological abilities, to cope with possible critical situations at their workplace (such as conflicts involving verbal and/or physical violence, mobbing, and so on, that may arise between passengers and the women employed on the trains).

*Alice I and II* This project aimed at developing and disseminating information on OSH regulations and measures, particularly with regard to women's health protection at work.

*Giocolavorando & Lavorogiocando* This project was set up to support reconciliation between work and family life through a company crèche project (its Italian title means 'To work when playing and to play when working').

*Opportunità Salute* This one-year campaign entitled 'Health opportunity' was set up in 2005 to promote the mental and physical health of both female and male workers, particularly for cancer prevention and care.

*Post paternity and maternity leave* A project was also developed for the re-entry of male and female workers after their paternity/maternity leave.

*Women's situation in the work environment* National and local research projects have been also developed to analyse the situation of women in the work environment. These include the following:

- L'altra metà delle Ferrovie (The other half of the railways): the railway working environment seen through women's eyes;
- Libero Transito (Free transit);
- M&M — Sicurezza, mobbing e molestie (M&M — Safety, mobbing and harassment);
- L.O.V. — Lavoro-Orario-Vita (Employment, working hours and living conditions);
- Competenze per Competere (Skills to compete): this project had an outstanding impact, particularly in terms of women's greater involvement, in the negotiation stage of the employment contract, in working conditions' improvement and in participation in finding the most suitable solutions to their specific needs at work. The project benefited from European funding through the Leonardo da Vinci programme.

The above projects' outputs were assessed during the periodic meetings attended by the company's management and the trade unions' representatives to identify the best methods of implementation within the company, thus making visible the CPO's positive actions for male and female employees.

The CPO of the Railway Enterprise also participated in a 'corporate initiative' entitled 'Innovare per Migliorare' (Innovate to Improve) meant to promote to a much greater extent employees' involvement in finding the best solutions to their workplace-related problems.

Thus, employees were encouraged to provide innovative ideas to be assessed by company management and workers' or trade unions' representatives within open debates. Then, the best innovative solutions would be implemented at company level. Women employees' needs were particularly envisaged. The CPO was awarded a prize for this initiative by the local authorities.

In addition, the CPO in the railway sector is actively involved in defending workers' rights, such as the observance of the provisions of national laws and collective contracts, for both male and female workers, and of the directives as well (such as the Parental Leave Directive).

At local level, the CPO set up the equal opportunities network, consisting of various organisations and institutions engaged in supporting equal opportunities actions for the female workers; these actions included proposals for improvement, setting up partnerships for multi-actor projects and exchanging good practices. Male employees' work-related problems are also included in the CPO's actions.

## Outputs

A range of outputs was produced:

- information materials: online guides containing detailed information on equal opportunities for the FS Group's female employees and brochures with workplace-related information for all personnel;
- periodic meetings on the CPO's activities attended by the company's management and trade unions' representatives;
- special training on equal opportunities topics for the employees alongside the ordinary training courses conducted on a regular basis;
- local and national projects developed and/or supported by the committee with a view to promoting women's insertion in advanced technology sectors; ensuring adequate qualifications and skills for the female workers confronted with critical situations on the trains; health promotion; improved OSH preventive measures; increased workers' involvement in finding innovative solutions to work-related problems, and so on;
- a campaign (in 2005) that promoted female and male workers' mental and physical health, with a special focus on cancer prevention;
- the setting up by the CPO of an equal opportunities network at local level to support equal opportunities actions — particularly for female workers.

## What was achieved

- The FS Group's employees, especially the female workers, became more aware of the equal opportunities aspects of their work, such as employment opportunities, workplace risk prevention measures, health protection and training needs.

- The employees also improved their knowledge and skills regarding the workplace-related risks and the application of preventive measures through adequate training.
- Female workers, working on trains, were given special training and thus acquired the necessary skills to cope with more risky situations at their workplaces.
- Female workers were encouraged to improve their professional skills to facilitate their entry into technologically advanced professional sectors.
- Attempts were made to solve female employees' problems concerning 'the reconciliation of work and family life' through such measures as the 'crèche' project.
- The FS Group's CPO adopted a targeted campaign meant to promote workers' mental and physical health, especially in terms of cancer prevention and care, for both female and male workers.
- The FS Group promoted workers' participation in workplace-related debates while also encouraging them to identify innovative solutions to the problems encountered at work; one example of this is the corporate initiative 'Innovate to Improve'.
- The Group's equal opportunities approach was highly appreciated and thus a large number of its actions, such as its projects, were assigned EU funds and prizes from local authorities; the 'Innovate to Improve' initiative, which promotes innovative ideas, is an example of a prize-winning activity.
- Finally, the reports of the railway enterprises that had adopted equal opportunities policies showed that all the workplace-related improvements could benefit all workers, without gender discrimination.

#### **FS Group's activities are used in an EU project on women in railways**

FS Group's CPO, 'Actions, activities and organisms to realise equal opportunities', was highlighted within a broader EU initiative entitled 'Representation and Better Integration of Women in the Railway Occupations'. This project was initiated by a mixed working team on equal opportunities set up in the context of social dialogue in the railway sector meant to address work and work-related hazards specific to the railway enterprises.

The mixed working team consisted of representatives of the Community of European Railways (CER), member railway enterprises and representatives of the trade unions affiliated to the European Transport Workers' Federation (ETF). The main goal of this group's project was to collect more accurate information related to the presence and the particular needs of the female workforce in the railway sector that were never previously examined through 'the eyes of women', and to propose solutions in this respect. Among the particular needs of the female workforce in the railway sector the following were highlighted: facilitating female workers' access into one of the male-dominated sectors through improved qualifications and training; providing equal opportunities (such as wage equality with men) that are not privileges but legal rights for the women hired in this sector; ensuring adequate skills and capacities for female workers to cope with specific work tasks; and reducing or eliminating the risks of violence, mobbing and harassment that exist particularly when it comes to working in public spaces (particularly for the station operators and personnel working on board trains).

The mixed working team 'is convinced that this mixed nature can create a stimulating climate in all environments, thus contributing to the improvement of the performance and to an increase of overall productivity'. This statement justifies the use of such a team.

In April 2005, a final report was issued on the mixed working team's approach on women's presence in the EU railway sector, with the support of the European Commission's Directorate General for Employment, Social Affairs and Equal Opportunities.

The 'immediate and significant output' of this final report was the creation of a database intended to constitute a platform for the elaboration of an equal opportunities policy to be agreed by all the actors involved in the European railways.

In addition, 'a variety of proposals and suggestions for promoting policies and actions to enhance and develop gender equality' were obtained.

Concomitantly, 'an ideal methodological path' (in the form of a flowchart) was outlined for the implementation of 'a programme or plan to enhance human resources, with particular reference to



equal opportunities for men and women'. A distinctive element of this path consisted of the involvement of all the stakeholders, starting from the women themselves through gender representation bodies at the workplace or in the institutions and also with the social partners at the local and national level, the international sectoral associations and the European Commission (which is the body guaranteeing the entire process, one that it has promoted through recommendations, directives and substantial funding).

### Problems faced

- The most serious obstacle encountered by the FS Group in the implementation of its equal opportunities approach was the historical, cultural and educational perceptions related to women's presence in the railway sector, such that it was seen as a male-oriented sector of activity.
- Another major obstacle was the lack of full awareness on the benefits that women's presence could represent in the railway enterprises. Therefore, it was essential to show that a larger representation of women workers concomitantly resulted in improved working conditions and increased efficiency of the company alongside a better quality of the company's products and services.
- Wage levels differed between men and women; this was often justified through the claim that women were less willing to accept shift work or work overtime.
- Women frequently expressed difficulty in the reconciliation of their work and family life.

### Success factors

There were a number of success factors:

- the progress in the EU legal and institutional framework that allowed the FS Group's equal opportunities approach to take place, such as the implementation of the European directives on the status of women that contributed to the internal measures applied by the enterprises to promote a better integration of women workers;
- partnership and social dialogue and the establishing of the first CPO within the Railway Enterprise-FS Group aiming at 'defending and enhancing female employment and promoting positive actions for women';
- the enlarged partnership when it came to implementing the FS Group CPO's actions; for instance, the company management representatives, trade union representatives, regional and local authorities and the workers themselves;
- the inclusion of OSH-related and health-related issues;
- the benefits the action targeted at female employees brought to all the employees in terms of improved working conditions, greater concern for workers' health, better results at the enterprise level (such as increased productivity, a better quality of service and the improved image of the company on the labour market). Activities related to OSH and health in particular often benefited both men and women, such as measures to reduce violence from the public.

### Transferability

Similar initiatives could be carried out in other EU countries and sectors, especially as the impetus to implement woman-oriented approaches arose from strategy and actions at the EU level.

### Further information

General Director, Human Resources Director, President of the National Equality Opportunities Committee of FS Group: <http://www.fsitaliane.it/homepage.html>

### References and resources

European Project. Representation and better integration of women in the different professions of the railway sector — final report, April 2005, FS Group actions presentation. Available at: <http://www.itfglobal.org/files/extranet/-75/1502/Rail%20Women%20Project%20Final%20Report%20EN.pdf>

## 4.7 The autonomous community of Madrid and occupational risk prevention from a gender perspective, Spain

### Organisation involved

Instituto Regional de Seguridad y Salud en el Trabajo (IRSST)

### Key points

- Arising out of European strategies and recommendations, Spain promotes the adoption of a gender perspective in public policies, including OSH.
- Madrid's third Occupational Risk Prevention Master Plan included actions directed at women.
- A survey was carried out by the autonomous Community of Madrid to assess how companies from the Community included gender issues and safe motherhood in their risk assessment plans.
- A set of actions was planned by the region to raise awareness on the gender aspects, to be included in prevention policies and risk assessment.
- Gender violence in the workplace, equality and reconciling professional and personal life, preventing occupational risks to women and sexual harassment in the workplace were among the specific issues covered.

### Introduction

#### *European policy and legal background*

The current environment within Spain and the European Union promotes, though does not require outright, the adopting of the gender perspective in public policies, notably regarding occupational risk prevention. Section 69 of the 2008-2011 Equality Plan reviewed the aspects of occupational health from a gender perspective with the Minister of Labour and all other involved entities.

Moreover, one of the objectives of the European Strategy on Health and Safety at Work is to integrate gender issues into the prevention of occupational risk, which as a consequence was considered in the Spanish Strategy for Health and Safety at Work for 2007-2012.

In turn, Organic Law 3/2007 for Effective Equality, amending Law 31/1995 on Occupational Risk Prevention, requires that public administrations promote the principle of gender equality.

Spanish law grants executive and managerial powers for safety and health at work to regional administrations, such as the Community of Madrid, and enables the establishment of Regional Institutes for Health and Safety at Work whose primary objective is to improve working conditions and health and safety among workers. The Occupational Risk Prevention Master Plans for the Community of Madrid define its work programmes. Likewise, the Community of Madrid sets five-yearly Equal Opportunity Plans.

### Aims

The third Occupational Risk Prevention Master Plan for the Community of Madrid for 2008-2011 established actions that are directed specifically at some sectors and groups of workers particularly exposed to occupational risk, including women.

The actions to be implemented included:

1.1 Promote strict compliance to specific regulations relating to occupational risk prevention during pregnancy and the nursing of babies.

1.2 Perform studies, draft publications and write recommendations as follows:

- women and work: presence of risk factors and dangers to health;
- comparisons of injuries by gender;
- draft and disseminate information relating to the gender perspective and sexual harassment at work;
- analysis of the relationship between exposure to occupational risks and pregnancy;

- healthy pregnancies: recommendations for good ergonomics and a good practice guide;
- promote good practice using a training module for occupational risk in all actions undertaken by the Directorate General for Women;
- prepare studies for identifying factors conducive to risks more frequently found among women;
- carry out risk assessment studies that take into account risks to safe motherhood in all cases;
- promote awareness and information campaigns aimed at companies, employees and prevention representatives concentrating on the risks to which women are particularly vulnerable.

### **What was done, and how**

This led to a project in the framework of the fifth Equal Opportunity Plan of the Community of Madrid for 2007-2010 which was carried out under the auspices of the Regional Institute for Health and Safety at Work of the Department of Labour and Women.

The plan's specific objective was to determine the focus for preventing risks to enhance safe motherhood in the occupational risk assessment programme of companies located within the Community of Madrid.

This required a study to look at existing perceptions of the following three issues: the possible effects on pregnant working women or women with small children who are exposed to specific risks; the impacts on fetuses or babies that are nursing; and the issue of reconciling the professional and family life of women with small children.

#### *The study*

The study sought as one of its objectives to obtain the opinion of prevention professionals from designated External Services groups, because of the extent of their activity in the preventive sphere. It did not, however, exclude obtaining other professionals' opinions.

To achieve these objectives, a methodology was followed that involved thoroughly researching, compiling and analysing all documentation and information available on the issue. This documentation included studies and publications dealing with the theme of occupational risk assessment from the gender perspective, as well as all analyses of the same type carried out internationally, in Europe and autonomously.

A questionnaire with 77 items was then designed and submitted to prevention specialists operating in companies in the Community of Madrid.

The questionnaire had several types of questions, which served different purposes:

- to learn about the profile of the respondents, the services in which they work and the type of work they do;
- to assess their knowledge about the risks to mothers and women in general;
- to address the issue of risk assessment involving the risks to mothers and to women in general;
- to seek their opinion on the state of the prevention of occupational risks in relation to maternity and their proposals for improvement — in general, but also in terms of how to improve their profession.

This survey did not intend to build a statistically representative random sample of the prevention practices in the Community of Madrid, but the results obtained can be significant and allow conclusions to be drawn.

- There is a growing awareness of occupational risk to maternity among prevention specialists, particularly with regard to healthy, full-term fetuses and babies, as well as their post-birth well-being.
- There is still no widespread consensus among prevention professionals regarding specific risks to women who are not pregnant. One initial area to emphasise is the growing acknowledgement of such pressing issues to women workers as double workload and handling heavy loads.
- It can be deduced, from the data on the number of companies and the variety of sectors of the economy dealt with by each prevention specialist, that prevention planning processes and assessments are now considered a routine task. This resulted in the realisation that simply piling

up documentation could be considered more important than obtaining detailed knowledge of the preventive realities in companies. Unfortunately, this routine phenomenon sometimes resulted in just cutting and pasting information from prior documentation, as has been noted in some surveys.

- According to the majority of respondents, maternity risk prevention is becoming less prevalent for three reasons.
  - The current procedure for adopting measures can actually delay their implementation.
  - A preventive mentality is absent in many companies, with management underestimating the importance of the issue.
  - There is a lack of coordination among family doctors, gynaecologists, companies, prevention technicians and occupational health physicians about obtaining information to recommend appropriate preventive measures.
- Some survey results stressed that many women hide their pregnancies for a certain time, or accept jobs assigned to them without objection in order to avoid problems with company management.
- Prevention professionals feel that owners and management involve themselves only marginally with prevention policies. Employees and their representatives have little or no possibility of participating in the process in many companies.

#### *Study recommendations*

Prevention specialists must revise their organisation of work and increase the amount of training given, especially in relation to emerging risks.

Companies should implement active information, training and participatory policies in the entire prevention process concerning workers.

Public administrations should carry out studies to establish clear lists of all types of risks to maternity; launch campaigns for awareness-raising, information and training oriented toward professionals, business professionals and employees; completely transform the maternity risk-assessment procedure; and boost the level of activity of inspection departments verifying the status of maternity risk prevention and workers' rights, especially as they relate to pregnant women and new mothers.

Companies should carry out risk assessments in the workplace that provide detailed information about each case in every company, as well as how each person is affected. These evaluations should incorporate the health status of all employees, including age and sex, as primary relevant data. Routine assessments and generic evaluations arising from insufficient experience of daily realities must be avoided.

Public authorities should initiate public forums involving panels of experts with discussions about the gender dimension of occupational risk prevention.

#### **What was achieved**

The autonomous community of Madrid carried out several actions aimed at introducing the gender aspect into risk prevention.

#### *Supporting the fight against gender violence in the workplace*

As part of the actions implemented against gender violence, the Community is also leading the fight against mistreatment in the workplace, which it highlighted during a Gender Violence in the Workplace event. The event was held on 9 June 2011, with the primary objective of publicising the procedure and protocol to follow for preventing gender violence and taking care of its victims, as implemented through the autonomous community of Madrid.

During the event, professionals from the Specialised Centre for Integral Support of Women who are Victims of Sexual Violence (CIMASCAM) presented the actions they undertake to fully support victims of sexual violence, and showcased the legal counsel and assistance they provide in their daily work.

The Regional Institute for Health and Safety at Work also demonstrated the following: how to deal with gender violence in application of the Law for the Prevention of Occupational Risks and specific legislation; the preventive action procedure for confronting gender violence and sexual harassment risk

in companies; and the intervention procedure of the Institute's Psychological Risk Intermediation Service.

*Women and Training: core themes of the June training catalogue*

A training programme entitled 'How to Improve Training in Occupational Risk' took place in the IRSST auditorium. The purpose of the programme was to ensure continuous improvement in preventive training for professionals, and employees in general, in order to manage occupational risk prevention in companies. The themes dealt with in this phase were working women, their psychological health and fatigue. The training was intended to identify the impact of gender on the risks to which working women are subjected, as well as how to provide guidelines for designing preventive measures to avoid or reduce risk.

*Campaign for equality and reconciling professional and personal life*

The Department of Labour and Women put out a campaign to promote equality and the reconciliation of professional and personal life, with the slogan 'We're not really so different, are we? So why aren't we treated equally?'

The primary objective of this campaign was to convince society that the equal sharing of domestic chores is only fair and that it promotes equal opportunities between men and women because it allows for the personal and professional development of couples.

The campaign was an attempt to change certain habits men have developed concerning family obligations that especially affect 33 women, who end up doing most of the household chores.

The Community of Madrid's message was based on the premise that men and women resemble each other more than one might think, and that this is a good reason to eliminate such stereotypes.

The message was split into two parts. In the first an attempt was made to realistically portray this similarity by means of images showing men and women in postures generally associated with the opposite sex. The second part exhibits specific examples of reconciliation between professional and personal life, with men involved with their families and homes and women integrated professionally.

The awareness campaign regarding equality of opportunities and reconciliation between professional and personal life was implemented through such media as the press, radio, television, magazines and the Internet. The regional government allotted €2 million for this.

*Publications*

Among the actions that are part of the Occupational Risk Prevention master plans for the Community of Madrid is the preparation of Occupational Risk Prevention guides, which deal with the relationship between gender and risk prevention.

*Manual for the prevention of occupational risks to women*

This technical document focuses on existing risks and preventive measures among the female population and includes such aspects as reconciling professional and personal life and issues during pregnancy and the post-partum stage.

*Sexual harassment in the workplace I and II*

Figure 1: Brochure on sexual harassment in the workplace



In as much as sexual harassment is a clear form of gender discrimination that is based on sex, and that it is a problem occurring frequently in the workplace, the Regional Institute for Health and Safety at Work deemed it vital to produce a series of brochures that define what constitutes sexual harassment and how it should be confronted (see Figure 1).

The first brochure's primary objective is to establish what behaviour to adopt prior to and subsequent to a harassment situation, as well as how to find organisations that provide information and help. Existing legislation in the domain is included as well.

The second brochure concentrates on preventive, protective and management actions to take against the risk of sexual harassment in companies. This brochure provides indications on issues that case-management committees or groups should understand, as well as general recommendations pertaining to the investigation and resolution of cases.

*Legal framework and legislative aspects of working women*

Figure 2: Brochure on legal framework and legislative aspects of working women



The brochure displayed in Figure 2 brings together both generic and specific legislation that most appropriately impacts working women, in view of their more significant integration into the various sectors of the economy. It also provides the legal framework for the EU, Spanish and the Community of Madrid environments.

Psychological factors at work — the gender perspective

Figure 3: Brochure on psychological factors at work — gender perspective



A series of informational brochures on gender were produced (Figure 8). These analyse the way in which gender affects the quality of life, health and well-being of male and female employees and how to take this into account when structuring preventive measures intended to protect their health and safety and eliminating inequalities (Figure 3).

The first brochure describes the *necessary actions and tools for ensuring balanced participation of both sexes* in all areas of a company, as well as for determining whether both sexes are benefiting from them in the same way.

The second brochure outlines the most relevant texts that detail *equality and occupational risk prevention policies* at all levels: internationally, at the EU level, nationally and at the level of the Autonomous Community of Madrid.

The third brochure describes *the risk assessment process* in more detail, indicating which guidelines should be used to properly assess the scope of risks, with the purpose of eliminating or reducing them through prevention measures.

The fourth brochure emphasises the way in which *gender affects the quality of life, health and well-being of male and female employees* and how to take this into account when structuring preventive measures to protect their health and safety and eliminating any existing inequalities.

The fifth brochure, dealing with women and fatigue, stresses *horizontal segregation by task type, and vertical segregation by place in the occupational structure* and polarisation of the female labour force, which results in men and women being exposed to different occupational risks. The consequences of inequality in sharing out work schedules and domestic chores and care was analysed.

*Protection of maternity*

Maternity, and consequently pregnancy, childbirth and nursing, are accorded special protection in the working world, and are even bolstered to ensure good health at work during the span of this biological process.

**Success factors**

National OSH and national equalities strategies and legislation, which in turn have their origin in European strategy and recommendations, were the drivers for the strategy and actions taken by the Community of Madrid.

The success of this initiative is based on the commitment of the autonomous region to promote gender equality and mainstream it in its prevention policy. The number of actions demonstrates this, and enables coverage of a broad variety of subjects related to risk prevention and gender. Prior research was important to establish the key issues and how to address them. The cooperation and joint working between those responsible for OSH and those responsible for equalities was also crucial.

The dissemination of information by means of small brochures, each dealing with a specific aspect of one subject (for example, psychosocial factors) is a good way of reaching workers and offering an

easy-to-read support measure, rather than a long brochure or guidelines that workers would not have the time to read.

### **Transferability**

This initiative can be transferred to other regions or countries but needs cooperation between all the stakeholders interested in the subject within the region, in order to join forces and disseminate the information more broadly.

Awareness campaigns can also be transferred to other regions or Member States, and can reach more people than publications, but they require a large budget and strong support from political elements or parties.

### **Further information, references and resources**

Instituto Regional de Seguridad y Salud en el Trabajo (IRSST). IRSST web page:

<http://www.madrid.org/cs/Satellite?c=Page&cid=1109266101003&idConsejeria=1109266187254&idListConsj=1109265444710&idOrganismo=1109266228581&pagename=ComunidadMadrid%2FEstructura&pid=1109265444699&sm=1109266101003>

## **4.8 Integrating gender mainstreaming in occupational risk prevention for Navarra, Spain**

### **Organisations involved**

- Navarra Occupational Health Institute (Instituto Navarro de Salud Laboral — INSL)
- Navarra Equal Rights Institute (Instituto Navarro para la Igualdad)

### **Key points**

- Gender items were inserted into the regional working conditions survey to enable a better understanding of the need for a gender-sensitive approach and to set priorities.
- The creation of an internet portal dedicated to women and occupational health.
- The design of an online tool (Gender Equality in Companies, Igualdad de Genero en las empresas (IGE)), which provides guidelines for diagnosing gender equality in a company. The section on occupational health covers both the information that is to be collected for the study and the tools necessary to do this from a gender-analysis perspective.
- There was a close cooperation between the regional OSH institute and the regional equal rights institute.
- Spanish and European Community strategy and laws were the drivers for the work.

### **Introduction**

Gender mainstreaming was an acknowledged requirement for the Spanish Strategy for Health and Safety at Work 2007-2012. It was also recognised as an objective of the second Occupational Health Plan for Navarra 2007-2012.

The second Occupational Health Plan for Navarra set out the following actions related to occupational risk prevention amongst working women:

- implement improvements in working conditions for women that emphasise reducing the double workload of working women, promoting equality policies and creating codes of conduct and means of encouraging equal opportunities;
- ensure the protection of pregnant women and those who are nursing babies by strictly enforcing laws specifically related to preventing occupational risk during these periods; to accomplish this, information on the subject will be prepared and distributed; training and communications actions are also being conducted in cooperation with the Navarra Institute of Women on the subject of preventing occupational risks identified by this collective organisation.



Spanish law establishes that 'public administrations shall effectively propagate the principle of equality between men and women. They will take into account the variables related to gender both in data collection and processing systems and in studies and general research in the area of occupational risk prevention with the objective of detecting and preventing possible situations where work-related injuries could appear linked to the gender of workers' (article 5.4 of Law 31/1995, on Occupational Risk Prevention, supplemented by Organic Law 3/2007, for the Effective Equality between Men and Women).

*The second Navarra survey on health and working conditions and analysis from a gender perspective*

Between 2004 and 2005, the Research and Epidemiology Section of the Navarra Institute of Occupational Health carried out the Second Navarra Survey on Health and Working Conditions using a similar methodology to that of the First Navarra Survey, which was done in 1997, and the Fifth National Survey on Working Conditions, done by the National Institute of Safety and Hygiene at Work (Instituto Nacional de Seguridad e Higiene el Trabajo) in 2003. The survey was expanded to include the aspects of health and double workload and to carry out a specific study on working women engaged in activities where they are prevalent.

The fieldwork was performed in the second half of 2004 and the first half of 2005.

In all, 2,724 workers were interviewed in the General Survey for Industry, Construction and Services, as well as 1,373 women in the Women's Survey.

When the results from the 2005 study were compared with the 1997 survey results, it was clear that women in Navarra continued to work proportionally in the same jobs, and that the percentage of part-time jobs they occupied had increased from 12% to 16%, as had that of the morning jobs in which they worked, rising from 28% to 36%. At the workplace, training provided by companies had increased from 41% to 74.8%. Results related to standard risks and exposure to harmful or toxic substances increased from 11% to 18%. The survey also showed more effort-related strains and posture issues, primarily in the neck and upper back, rising from 16% to 18% and 38% to 32% respectively. As for respondents' perception of their state of health, the proportion of those who considered that their health was 'good' had decreased from 90% to 88%, while the proportion for those who consider it 'average' rose from 8% to 11%, with a greater frequency of stress-related symptoms and statistically significant differences in the lower percentage of women who have time for leisure activities (that proportion falling from 73% to 39%).

In conclusion, including gender in the survey revealed that while women did not have a worse perception of working conditions, findings indicated that they considered their health to be worse and they had more stress-related symptoms. It also revealed gender differences between work at home and on the job, which could be determinants in findings on health. The survey helped to underline the need for a gender-sensitive approach and where priorities might lie.

## **Aims**

The objective of the Autonomous Community of Navarra is to promote equality between men and women in the evaluation of risks and other occupational health-related actions carried out by companies.

## **What was done, and how**

### *Actions taken by the Navarra Occupational Health Institute*

The Navarra Occupational Health Institute (INSL) formed an interdisciplinary work group that, since the end of 2009, has developed actions and programmes of awareness from an OSH perspective for the integration of the gender perspective in the workplace, also with the collaboration of the rest of the technical and health professionals of this institute. The following actions are being taken.

#### *1. The 'Women and Occupational Health' portal*

The INSL set up a specific portal on its web page entitled 'Women and Occupational Health' with the aim of introducing the gender perspective in evaluating risk and preventive measures so that the situation of women can be taken into account with regard to health and safety at work.

The portal provides content related to maternity, pregnancy and nursing issues, such as manuals outlining good practices, prevention of risk, social services, and similar factors. It also includes methods of evaluating occupational risk, information on equality and reconciling family and working life (to include equality plans in companies), legal information and grants, material on sexual harassment with a focus on prevention, action procedures and manuals for union intervention, and other legal aspects, documentation and links related to all of these aspects.

The portal is broken down into various themes that provide health-related materials from a gender perspective.

*Occupational risk and health viewed from a gender perspective* This part includes studies, research, guides, assessments and action concerning gender issues related to health and safety at work. It includes publications from EU-OSHA, the European Foundation for the Improvement of Living and Working Conditions, the International Labour Organisation (ILO), the National Institute for Security and Hygiene at Work (Instituto Nacional de Seguridad e Higiene en el Trabajo (INSHT)) and various other Spanish institutions.

*Maternity, pregnancy and breastfeeding* This section refers to the legal rules and official advice and guides given during pregnancy, maternity and breastfeeding. It is linked to social security benefits. The legislative basis for this section is in the Maternity Protection Law 31/1995, amended by Law 39/1999 for the promotion of reconciling work and family life for working people. Also cited is the Organic law 3/2007 for Effective Equality between Men and Women, supplemented by Royal Decree 298/2009, which approves the Prevention Services Regulation relating to measures to improve health and safety at work among pregnant women, either after birth or during nursing.

*Methods of evaluating occupational risk* This section serves as a reference point for choosing risk-evaluation methods from the gender perspective and in situations involving pregnancy, breastfeeding and recent birth. The legislation pertaining to prevention requires specific protection of the health of vulnerable workers. To achieve this, evaluations of risk must take into account groups of workers subject to special risks and specific procedures must be clearly defined.

*Equality and reconciling work and family life: laws, documentation and subsidies* This section gives an understanding of the application of the rules and offers documents related to the realisation of the Equality Plans and implementation of methods for the reconciliation of family and working life, as well as existing subsidies for this purpose. Organic Law 3/2007 looks at equality and reconciling personal, family and work life. It also covers Equality Plans in companies and other equality promotion measures. It is mandatory in companies with more than 250 employees to draw up an Equality Plan; it impacts companies with collective agreements that establish this type of plan and is optional for the remainder of companies after consultation with employee legal representatives.

*Sexual harassment and gender-based harassment* This section examines the studies of European legal development on this topic and the proposals to tackle sexual harassment and discrimination because of gender. Law 3/1989, which increases maternity leave to 16 weeks and establishes measures promoting equal treatment of women at work, indicated clearly the need for preventing sexual harassment in its Explanatory Statement. Organic Law 3/2007 for Effective Equality between Men and Women defined sexual harassment and gender harassment as discriminatory situations. It states that it is mandatory for companies to promote working conditions that avoid this phenomenon and to set out specific procedures to prevent it and to set up channels for making complaints of this nature.

*Documentation available at INSL* This section contains materials found in the INSL library that can be consulted and borrowed: reviews of relevant journals and books on the topic, a specific collection of articles and other materials from INSL. It is also possible to access press releases relating to the actions of the specific work subgroups. There is an additional section giving links of interest.

## 2. *The publication of materials on general health and safety in the workplace.*

Informative documents have been elaborated (prevention data sheets), which may help in the task of mainstreaming gender into prevention at work. They are uploaded to the website of INSL when they are completed.

3. *The development of training programmes on general health and safety in the workplace of Navarra companies*

In October 2010, a day was set aside to assess the objective of promoting the equality of men and women with regards to risk evaluation and other actions related to work health carried out by companies. It involved EU-OSHA, the Regional Office for Work, the Navarra Institute for Equality and professionals from the INSL. This event was one of the actions of the Navarra region's Second Health Plan dedicated to gender issues; its objectives include introducing ways to improve working conditions for women, developing the aspects of occupational risk prevention and securing the protection of pregnant and nursing women at work. For the final half of 2011, a training session was planned on health and safety for professionals at INSL, who are the agents for the promotion of the prevention of occupational risk in relation to equality issues.

*Actions by the Instituto Navarro para la Igualdad (Navarra Equal Rights Institute)*

The Navarra Equal Rights Institute (Instituto Navarro para la Igualdad) is an organisation that provides impetus, coordination and management of gender and equal opportunity policies for men and women in the Navarra Region. This equal rights institute and the OSH institutes have cooperated closely on mainstreaming gender into OSH activities and OSH into workplace equality actions.

*Background to the Gender Equality in Companies procedure (IGE)*

The Gender Equality in Companies procedure (Igualdad de género en las empresas de Navarra (IGE)) is the Navarra Government's procedure used to assist companies that wish to implement gender equality in their organisations. This is done using a systematic procedure for preparing, implementing and evaluating these gender equality plans. The methodology used presents all the elements that influence an equality plan: the protagonists and the tools for drawing up, developing and achieving the expected results of a plan. The plans are designed to be implemented in organisations through an external consulting entity. It is relevant to all companies regardless of size or sector.

IGE is a procedure for companies that wish to incorporate gender equality in their organisation and work procedures. It consists of a five-phase work sequence — preparatory stage, diagnostic stage, equality plan conception, implementation and evaluation — rounded into a work cycle. The methodology has been designed and validated as a work procedure in companies in Navarra, and applies to all company sizes and economic sectors.

Once an IGE itinerary is complete, from the preparatory through to the evaluation phases, a new cycle may be initiated to improve the process that identifies areas of action and strategies to follow, which is subsequently set out in a new gender equality plan.

*Diagnosis of OSH issues in the IGE (Gender Equality in Companies procedure)*

The diagnostic phase determines the starting point for the company with respect to integrating gender equality. This allows for a determination of the status of the issue, making it possible to identify areas for improvement and allowing the drafting of a document that will kick off the design of the gender equality.

In this phase, the functional areas of a company's organisational structure are analysed as defined by a European Foundation for Quality Management (EFQM) model of excellence, including area four, the analysis of the kind of information related to risk prevention and occupational health.

Using the tools in its arsenal, the IGE procedure provides guidelines for diagnosing gender equality in a company. The section on occupational health picks, in detail, both the information that is to be collected for the study and the keys necessary to allow this to be done from a gender analysis. For a range of issues, specific questions are asked, which are detailed below.

Assessment and prevention of occupational risk:

- Does assessment go beyond effort-related and traditional physical risks to include psychological risks, such as those associated with carrying out simultaneous tasks, reproductive risks, repetitive tasks and accumulated stress from a double workload for women?

- Is a specific image, or specific clothing or work equipment, required depending on the sex of workers? If this is the case, in workplaces for women are safety and convenience emphasised or are aesthetic factors emphasised?
- Do company medical analyses include health issues specifically oriented towards women such as checks of ferritin levels? <sup>(3)</sup>
- Are there sizes and designs of personal protective equipment (PPE) specifically for women?
- What is the scope of the occupational risk prevention plan? Is more emphasis given to risks associated with male jobs?
- What is the composition by sex of the prevention team? Have members received equality training?

The assessment also looks at:

- the number of medical leave days taken by men and by women and the reasons for these;
- whether occupational risk prevention plans exist and what their scope is;
- certification in prevention standards;
- designation of persons or teams responsible for prevention.

Assessing strategies to combat violence against women:

- Are there support measures in place for victims of gender violence? What are the measures?
- Has a procedure been established to follow when cases of violence are detected that affect company personnel or when persons are identified in the company who have been subjected to violence?
- Have information and prevention campaigns been carried out?

Dealing with sexual harassment and gender-based harassment:

- Have harassment situations occurred?
- Does the corporate mentality tolerate harassment situations?
- Is this categorised in a collective agreement?
- Is there a complaint and sanctions procedure? Are there teams or persons designated and competent to act in the event that this occurs?
- Have preventive measures been implemented?

The guidance on the IGE also explains the keys for gender analysis, such as:

- From the gender perspective, it is important to keep in mind that men and women, as products of differing social gender expectations, have different approaches to risk, and have different internal ideas about safety. This means that data must be analysed not in a general way but in a fashion that takes into account these differences.
- It is important to ensure that the risks to which men and women are exposed are evaluated specifically without using discriminatory criteria, given that the risks women are exposed to are often considered less serious and, therefore, sufficient safety equipment and procedures are not provided. For example, using certain cleaning products could have an adverse health impact, or being required to juggle numerous tasks in stressful conditions.
- The existence or absence of means to prevent objective risk situations and adapting to men's and women's different physical forms (ergonomic considerations, adapting for pregnancies, other psychosocial risk factors, and so on) help to determine whether a company has a deficit in terms of occupational risk and gender equality.
- Special attention should be paid to the specific problems of gender harassment and gender-based violence in the company.

---

<sup>(3)</sup> A ferritin blood test checks the amount of ferritin in the blood and shows how much iron is stored in the body. Low ferritin levels often mean an iron deficiency is present. This concerns mainly women as it can be caused by long-term (chronic) blood loss from heavy menstrual bleeding or following a pregnancy.

### *Manuals for the prevention of sexual harassment*

In order to help companies in preventing sexual or gender harassment, the Navarra Institute for Equality has prepared two manuals on sexual harassment.

The first is entitled 'Understanding sexual harassment and gender-based harassment: A starting point for preventive action'. The objective of this manual is to help eliminate both types of gender discrimination by helping companies understand the necessary theoretical and legal aspects for properly putting in place preventive measures and for taking various actions.

The second manual is entitled 'Sexual harassment and gender-based harassment: Practical application'. This manual provides companies with recommendations for drawing up a prevention and action protocol in this area, with a discussion on how to act in the event of sexual or gender-based harassment in an organisation; it also illustrates the practical application of a protocol in a typical organisation.

To complement this material, the Navarra Equal Rights Institute offers companies awareness-raising information under the heading 'Committing to a Respect-based and Equal Work Environment', which explains what sexual harassment and gender-based harassment are in companies, and thereby helps organisations to set up measures to deal with these situations.

### Awareness-raising and grants

Once the joint definition phase of the process was complete, efforts were focused on raising awareness among and educating those involved in the process, from both the companies and consulting agencies. In addition, annual grants are made available to help pay for the technical assistance that the process requires. Among the requirements that entities must meet to access these grants is a commitment to work under the IGE procedure and the definitions of process indicators, outcome and impact. It is understood that equality plans are working tools, part of the ongoing process of securing equality between the sexes.

### **What was achieved**

The INSL will use its survey on health and working conditions of Navarra, statistics on accidents at work and occupational diseases, or on temporary incapacity, to support evaluation of the work.

There are also various indicators suggesting that there is a clear interest generated by both the procedure and the tools and that companies are taking action in the area.

The web page on gender-sensitive risk prevention was launched in March 2010 and the number of visits to the web page has been very high since. It is nowadays one of the most visited web pages on the INSL portal. This includes hits on the web page where the IGE procedure and its tools have been made available and downloads of the document based on the IGE procedure and the guidelines on sexual harassment and gender.

The number of grants for the development of gender equality plans in companies in Navarra during 2007-2011 was 90.

### **Success factors**

The initial drivers for the action lay in European Community recommendations, standards and strategy concerning gender mainstreaming and OSH and in Spanish law and strategy arising out of these.

The focus on gender awareness and its implementation in occupational risk prevention was done in collaboration between different organisations of Navarra, which led to the development of information and communication between them, resulting in common programmes between INSL, the local labour inspectorate and the Navarra Institute for Equality, together with the development of a joint training day.

This subject has also raised high expectations in companies and the aim is now to have companies develop gender-based risk prevention policies.

The Navarra Institute for Equality is aware of the time and resources that are necessary for a new procedure to be designed and applied with success, more so if it relates to gender equality in business, which is considered less of a priority, with fewer resources being directed to it.

### Transferability

The creation of working groups involving various public organisations to work on raising awareness of gender-sensitive occupational risk prevention can be transferred to other regions or Member States.

The Spanish Ministry of Equality made a visit to the Navarra Institute on 28 May 2009 with the aim of learning from the experience and materials and seeing how they might be transferred.

Although the IGE procedure was intended for companies in Navarra and has been validated in actual companies of various size and economic sector in that Community, its flexible and open structure makes it easily adaptable to any other company nationally or in other countries.

### Further information

Instituto Navarro de Salud Laboral:

[https://www.navarra.es/home\\_es/Gobierno+de+Navarra/Organigrama/Los+departamentos/Salud/Organigrama/Estructura+Organica/Instituto+Navarro+de+Salud+Laboral/portada+INSL.htm](https://www.navarra.es/home_es/Gobierno+de+Navarra/Organigrama/Los+departamentos/Salud/Organigrama/Estructura+Organica/Instituto+Navarro+de+Salud+Laboral/portada+INSL.htm)

Instituto Navarro para la Igualdad:

[https://www.navarra.es/home\\_es/Gobierno+de+Navarra/Organigrama/Los+departamentos/Asuntos+ Sociales+Familia+Juventud+y+Deporte/Organigrama/Estructura+Organica/INA/](https://www.navarra.es/home_es/Gobierno+de+Navarra/Organigrama/Los+departamentos/Asuntos+ Sociales+Familia+Juventud+y+Deporte/Organigrama/Estructura+Organica/INA/)

### References and resources

Mujeres y Salud Laboral

[https://www.navarra.es/home\\_es/Gobierno+de+Navarra/Organigrama/Los+departamentos/Salud/Organigrama/Estructura+Organica/Instituto+Navarro+de+Salud+Laboral/Publicaciones/Salud+y+sociedad/MujeresySalud+Laboral.htm](https://www.navarra.es/home_es/Gobierno+de+Navarra/Organigrama/Los+departamentos/Salud/Organigrama/Estructura+Organica/Instituto+Navarro+de+Salud+Laboral/Publicaciones/Salud+y+sociedad/MujeresySalud+Laboral.htm)

IGE Igualdad de género en las empresas de Navarra

[http://www.navarra.ccoo.es/comunes/recursos/17441/pub58703\\_El\\_papel\\_de\\_la\\_mujer\\_en\\_la\\_Estrategia\\_Navarra\\_2030.pdf](http://www.navarra.ccoo.es/comunes/recursos/17441/pub58703_El_papel_de_la_mujer_en_la_Estrategia_Navarra_2030.pdf)

FTP nº 34: Mujeres y salud laboral: información on line sobre salud laboral desde la perspectiva de género. Available at: <http://www.navarra.es/NR/rdonlyres/D91FE499-4898-4EDD-AA09-213A8AF122EA/167193/FTP34MujeresySaludLaboral.pdf>

FTP nº 35: Mujeres y salud laboral: prevención de riesgos laborales desde la perspectiva de género. Propuestas de intervención. Available at: <http://www.navarra.es/NR/rdonlyres/D91FE499-4898-4EDD-AA09-213A8AF122EA/185024/FTP35MujeresySLPRL.pdf>

(All web pages are in Spanish.)

## 4.9 Development and implementation of a diversity programme by a national OSH authority, United Kingdom

### Organisations involved

- Health and Safety Executive (HSE)
- Department for Work and Pensions (DWP)
- Trades Union Congress (TUC)
- Internal and external stakeholders

### Key points

- HSE, as with all other public authorities in UK, is required to set out how it intends to fulfil its general and specific duties to promote equality in terms of disability, gender and race.
- HSE prepared and published equality schemes for disability, gender and race.
- In respect of gender equality, HSE initially developed the Gender Equality Scheme and later the Single Equality Scheme, which replaces HSE's schemes for race, gender and disability and is in line with good practice across the public sector.
- The actions cover its role and activities as a public body and regulator and as an employer.

- Consultation and participation have been an important part of the development and implementation process.

## Introduction

The Health and Safety Executive (HSE) is an independent public body and regulator committed to ensuring the health and safety at work of all people in the UK, and this, *inter alia*, would include being aware of workforce diversity, eliminating discrimination and promoting equality of opportunity.

HSE is sponsored by the Department for Work and Pensions (DWP). In addition to inspection and enforcement, key activities include research, introducing new or revised regulations and codes of practice, alerting duty holders about new and emerging risks, providing information, consulting and promoting training.

As HSE promotes workers' equality and tackles discrimination, the success of its actions depends on the clear understanding of a diverse society and the impact of its policies and operations on the society to carry out these operations with sensitivity and respect for people's different needs, vulnerabilities and perspectives on life.

The case study presents the practical aspects of HSE's remit on exploring solutions to diversity issues by the development and implementation of its Gender Equality Scheme and its Single Equality Scheme.

## Aims

The aims of HSE in respect of its equality schemes were to establish the following:

- How it will work with stakeholders on objectives and actions on communication, policies, procedures and research to deliver improved health and safety outcomes for all, whatever their background.
- The actions it will take to ensure a working environment where all staff are treated with professionalism, dignity and respect and are able to deliver and develop to the best of their ability without having to face discrimination or harassment.
- How it will meet its statutory duties and ensure that equality and fairness are embedded in all areas of its work, planning and employment.

## What was done, and how

### *Race equality scheme*

HSE constantly paid attention to diversity issues but much of its work in this area was not explicitly done, activities could be ad hoc and there was no clear strategy to follow. The first significant step in the diversity area was made in 2002 when the HSC and the HSE, with reference to the requirements of the Race Relations (Amendment) Act 2000, developed a Race Equality Scheme. The scheme had to cover the promotion of race equality by HSE for all groups in society when carrying out its work and solving race equality issues for its own staff. An interim joint Health and Safety Commission (HSC) and HSE scheme was first published in May 2002, but then after relevant consultations and revision the final version was published in February 2004. This indicated the progress made against the actions and set out future actions. The renewed Race Equality Scheme was published in October 2004.

### *Previous approach to gender*

As regards gender equality, HSE had already been targeting particular sectors or specific health and safety issues which were more relevant for women (such as specific resources for the healthcare and education sectors, research and guidance on musculoskeletal diseases (MSDs) for cleaners, research on home workers, attention to health risks such as stress and dermatitis — not just accident risks). It had begun to break down its statistics by gender. It had previously classified deaths and serious injuries from violence from members of the public as reportable accidents. But these actions can be described as implicit as it did not have an explicit policy towards gender.

### *Diversity Steering Group (DSG)*

In 2005, HSC and HSE set up a Diversity Steering Group to steer and drive diversity in HSC and HSE. The steering group, which included representatives of the HSE's staff networks and HSE's trade unions, had to monitor progress against HSC and HSE schemes and initiate action where required to ensure delivery.

### *Joint Disability and Gender Equality Scheme and Equality Scheme Framework*

Following relevant requirements of the amendments to the Disability Discrimination Act in 2005 and the Sex Discrimination Act in 2006, HSC and HSE developed joint Disability and Gender Equality Schemes setting out how they will meet their duty to eliminate unlawful discrimination and promote equality of opportunities.

An internal *Equality Schemes Working Group* was set up to develop the schemes, including as members HSE Board representatives for disability, women and race, and representatives of HSE's organisational groups (such as policy, operations and others). The drafts were prepared with reference to the guidance in the relevant Equality Act Codes of Practice. From an early stage in the drafting process, HSE's legal advisors, the trades unions and other internal and external stakeholders were consulted. (These other stakeholders included the HSE Board, HSE's staff networks, the Equal Opportunities Commission, the Trades Union Congress (TUC) and the Plain English Campaign.) The lessons learned from the review of HSE's Race Equality Scheme (such as insufficient attention to the potential business benefits of the scheme, that actions relate more to process than outcome, an unrealistic work plan, the insufficient coordination of action across the organisation) were particularly useful. The agreement of the HSE's DSG and the Equality Schemes Working Group on the progression of the Equality Schemes and the adoption of a single framework with links to these schemes and action plans for disability and gender substantially influenced development of the schemes. The draft framework and schemes were presented on the HSE's website and sent to key external and internal stakeholders for consultation. This resulted in refocusing some actions and the inclusion of additional action points. The Equality Scheme Framework, the Disability Equality Scheme and the Gender Equality Scheme were published on HSE's intranet and internet sites on 4 December 2006.

The *Equality Scheme Framework* was developed as an overarching framework to structure and integrate the two schemes. It outlined the mission and purpose of the HSC and the HSE, their approach to diversity and how that has influenced development of these schemes. The framework first presented the renewed HSE's vision for diversity: 'Our vision is "to gain recognition of health and safety as a cornerstone of a civilised society". That society is a diverse one. To achieve our vision, we must protect everyone's health and safety in the workplace whatever their race, gender, disability, age, religion or sexual orientation — indeed whatever their background and outlook on life. Our ability to improve health and safety outcomes depends on this — it's a business imperative' (HSE, 2006, p. 3). Along with the aforementioned factors of success of the action (such as an understanding of the diverse society and the impact of the HSE's policies and operations on that society), encouraging and valuing diversity among HSE's own staff was stressed as a key to success and effectiveness.

*Eight key priorities* were agreed upon in order to make the vision a reality:

- raise awareness among HSE's staff about diversity and the need for further progress;
- build, and make better use of, evidence in HSE's policies and operations;
- design HSE's interventions to take account of different needs among particular groups of workers;
- reach out to people with a particular understanding of diversity to help HSE to improve its policies and delivery;
- improve the diversity of HSE's workforce;
- continue to take positive action to improve career progression for under-represented groups in HSE;
- encourage and support disability, women and race through HSE's staff networks;
- reward good behaviour and tackle unacceptable behaviour among HSE's staff.

*Planned actions* Seeking to realise its vision, HSE planned to have accomplished the following results within three years:



- improved communications so that everyone has equal access to information about, and protection from, workplace health and safety risk and their control;
- enhanced understanding of HSE's audience's needs to improve service targeting and delivery;
- evolved into an organisation free from barriers to the recruitment, progression and success of a diverse workforce, playing to the different strengths of all its staff to ensure that it provides a service that reflects society.

*Gender equality scheme: public authorities' duties regarding gender*

The general and specific duties on public authorities bearing on the HSE were listed in the Gender Equality Scheme. The general duty to promote gender equality meant that HSE, as a public authority, was required to:

- eliminate unlawful discrimination and harassment;
- promote equality of opportunity between women and men.

The specific duties attributed to HSE to help meet the general duty were grouped into two categories: one covering policy development and service delivery, and the second covering HSE's role as an employer.

*Gender equality scheme: priorities for action*

The Gender Equality Scheme presented the key priorities for action in relation to gender identified by HSE. The first set of priorities applied to everyone (HSE staff, HSE stakeholders, duty holders, public):

- encourage more involvement of women in health and safety decision-making by working with others, such as the TUC, to persuade more women to volunteer to become safety representatives or representatives of employee safety;
- improve the diversity of HSE's advisory bodies;
- review and consolidate the international research on gender sensitivity in workplace health and safety;
- include pregnancy-related risk assessment in a campaign in 2007-08;
- review and further develop HSE's website on gender factors;
- promote reduction of occupational skin diseases among hairdressers and beauticians through a targeted HSE communications campaign in partnership with local authorities and industry bodies.

The second set of priorities applied to HSE's staff (at the organisational level):

- improve career development opportunities for women, particularly to increase representation at higher job bands;
- steer through the programme of pay reform in the three-year deal period (2005-2008) to help close pay gaps.

The *gender equality action plan* provided responsibilities to HSE groups for working on the priorities of the scheme and the relevant milestones.

*Gender impact assessment tool*

HSC and HSE also developed and launched an equality impact assessment tool intended to help policy-makers and persons designing and delivering relevant services, to ensure the consistent integration of equality considerations into day-to-day activities. The first stage included an initial check to assess whether the proposed policy, service, project or procedure has potential equality importance for different groups. A full assessment related to detailed analysis of evidence, stakeholder engagement and consideration of alternative approaches. The tool assessed the impact of the proposed schemes with further activity involving its promotion and monitoring of its use. However, following a statement from the Prime Minister in December 2012, formal equality impact assessments are no longer carried out, although equality impacts are still considered when policies and initiatives are under development.

### *Review and monitoring*

It was intended to review the progress of the equality schemes every 12 months and conduct a full evaluation of each scheme after three years to set a new agenda for action. The stakeholders and HSE staff were to be involved as part of the process. The monitoring of the progress against the schemes was to be accomplished by the DSG, with obligatory involvement of external stakeholders.

The DSG met regularly and has monitored plans and provided guidance on how to progress the work. The progress of the Gender Equality Scheme can be assessed from the DSG's annual Diversity Progress Reports 2007-08 and 2008-09.

By the regular reviews of progress with the Equality Scheme actions, the Diversity Progress Report 2007-08 (the first year after development of the Gender Equality Scheme) showed that, although HSE's legislative requirements were met, there were areas, such as gender actions, where progress has been limited and some priority for these was to be given in 2008-09. The explanation for this occurrence was that there were higher priority demands on the External Diversity Team, restricting its progress with this work.

Progress on gender issues in 2008-09 was much better, particularly in the development of the HSE's website on diversity and the review and the consolidation of existing research (on such topics as male and female reproductive health, older workers and pregnant workers).

### *Single Equality Scheme (SES)*

Besides the Diversity Priorities for 2009-10, HSE also prepared the Single Equality Scheme (SES), as Government departments, seeking to fulfil the requirements for public authorities to publish equality schemes for race, disability and gender and to set out how they will meet their duty to promote equality, began to produce single equality schemes instead of producing separate schemes for each of these areas.

The preparation of the HSE's SES started at the end of 2008. HSE's departments were asked to review their functions and policies against equality legislation, to decide and prioritise actions required to achieve equality outcomes in health and safety. The SES was developed following this review and in consultation with internal and external stakeholders. The draft SES and priorities were published on the HSE's intranet and internet sites for public consultation in August 2009. The final version of the SES was published in April 2010.

The SES was built on the progress that HSE had previously made on race, disability and gender equality issues made since the first equality schemes were introduced in 2002 and taking into account changing business priorities. It will be observed that the SES, contrary to the previous equality schemes, had two separate parts (one on external diversity and one on internal diversity). However, the structure and clauses of each part are similar to the Race Equality Scheme 2008–2011 or a combination of the Equality Scheme Framework and the Gender Equality Scheme 2006. When preparing the SES, as in the previous schemes, the main guidelines for equality were followed with detailed consideration of the most recent legislation, results of research and consultation and trends in the diversity area. *Lessons learned* from the diversity management experience showed a need to improve HSE's action planning by focusing on fewer actions that will make a key difference, tighter performance measures, and clear evidence of performance monitoring. A review of the SES was foreseen every 12 months and a full evaluation should be carried out within three years to set a new agenda for action.

The majority of provisions or actions of the Single Equality Scheme were generic for race, disability and gender equality and some are specific for each equality type. Examples of actions foreseen in the External Equality Objectives and Action Plan 2010 onwards for gender and associated outcomes and performance measures are presented in Table 1. Additional actions are given in the box.

Table 1: External equality objectives and action plan 2010 onwards — actions related to gender

Action and timing	Outcomes and performance measures
Identifying sectors where women and/or men are particularly at risk and ensuring that example risk assessments for these areas include gender occupational health and safety issues	Occupational health and safety issues related to gender are mainstreamed in, for example, risk assessments used by employers and other stakeholders
Integrating specific points from EU-OSHA Fact Sheet 43 and the TUC gender sensitivity checklist for occupational health and safety into topic inspection packs (2010 onwards)	Gender issues are included in the content of new and existing topic inspection packs; existing topic packs needing updating are identified. Packs updated and gender issues mainstreamed into HSE's work
Further development of gender web pages (2010 onwards)	To promote gender-specific messages about risks to health in the workplace Work with the TUC to promote the web pages by attending the TUC's committee Gender Occupational Safety and Health (GOSH) meetings
Addressing issues in relation to correct face fit of respiratory protective equipment (RPE), particularly in relation to female face size/shape and the need for other means of protecting bearded workers (March 2010)	Research on behavioural aspects towards RPE resulting in a report for dissemination to HSE and stakeholders; research on supply of RPE in the construction industry and development of a model simulation for face fit
Continuing to work with the TUC's GOSH group to progress the gender work stream (ongoing)	HSE and key stakeholders to progress gender work, sharing experience and good practice Regular communication between External Diversity Team and GOSH

After the first year of the SES's existence, the High-Level External Diversity Progress Report 2010/2011 and the External Priorities for 2011/2012 from June 2011 emphasised the good progress made in achieving HSE's external diversity objectives for 2010-11, with particular respect to the equality considerations in day-to-day business. The DSG plays a key role in helping to sustain and progress action. It was also noted that the new single general Equality Duty on public bodies came into force on 5 April 2011; therefore, HSE has had to review its policies and action plan considering these regulations and consulting on any changes.

#### Some activities under the 2010-13 Single Equalities Scheme

- To promote gender-specific messages about risks to health in the workplace on the website.
- Research into the reported association of shift work and breast cancer and other major diseases.
- Agriculture and food sector scoping study on respiratory disease in the bakery industry to include diversity issues of gender, age and race.
- Research the risk of mesothelioma in females as well as males.
- Continuation of research to estimate the occupational cancer burden in the UK, including breast and prostate cancer.
- Encourage more involvement of women in health and safety decision-making.

## Outputs

The key outputs are listed below:

- The setting up of a permanent Diversity Steering Group (and External Diversity Team).
- The development and publication of the Equality Scheme Framework and Gender Equality Scheme.
- The development and launching of the Equality Impact Assessment Tool.
- Training new policy recruits and existing colleagues on Equality Impact Assessment.
- The development of a page on HSE's website on gender to suit the needs of different stakeholders — improving accessibility to information, research, case studies and good practice.
- The development and publication of the Single Equality Scheme.

## What was achieved

- In order to define main work directions, HSE functions and policies were assessed for their relevance to gender duties (public duties and duties to HSE staff) and prioritised for future action.
- After establishing links with a wide range of stakeholders in the field of health and safety, it was recognised that it was more useful to link with people working on the gender-sensitive OSH agendas.
- The input by the Equality Schemes Stakeholder Group of the DWP (HSE's parent department) was extremely helpful when seeking views on proposed action plans.
- The analysis of HSE workforce data by gender, race, disability, age, location, length of service, time in current post, salary, hours of work, and temporary and permanent employment status supported the results of the internal consultation.
- Significant progress was made in consolidating gender research and identifying future actions, such as male and female reproductive health, pregnancy and older workers.
- The sectors with gender-specific risks and examples of risk assessments relevant to this were identified.
- Occupational health and safety issues related to gender were mainstreamed into new risk assessments produced to meet HSE's strategy goals on customising support for small and medium-sized enterprises (SMEs).
- A form of words, which incorporates the TUC's gender sensitivity checklist for occupational health and safety, was agreed on and was included in the topic inspection packs for Health and Safety Inspectors as they were being revised.

## Problems faced

- Gender has to compete with other diversity areas which may have higher priority demands on the External Diversity Team.
- The review of the HSE's progress on external diversity showed a need to focus on fewer actions that will make a key difference, have tighter performance measures and ensure clear evidence of performance monitoring in order to improve action planning.

## Success factors

- Equality duties of public bodies are clearly defined.
- HSE does permanent purposive work on diversity issues.
- HSE set up an internal Equality Schemes Working Group, which cooperated with a permanent Diversity Steering Group (the DSG) and an External Diversity Team.
- In developing the Gender Equality Scheme, HSE consulted and involved its diverse internal and external audiences.
- Policy-makers, operational staff, facility management managers, staff networks and trade union representatives were involved in the process.
- HSE's trade unions and staff were consulted about HSE's duties as an employer and diversity issues (including gender) and asked for their views on priorities for action.

- Comprehensive monitoring and annual review of the progress against the schemes and initiative of action where required was assigned to the Diversity Steering Group, which included experts from HSE's staff networks and trade unions.
- To ensure external monitoring and review of the priority actions, HSE committed to support its networks and relationships with interested stakeholders.
- HSE continues to build a working relationship with the TUC's GOSH group and the main health and safety practitioners' group.
- Support was rendered by the Department for Work and Pensions/Equal Opportunities Commission.

### Transferability

Both the process and the content of the action could be transferred to other public bodies, as it is based on requirements for improvement gender equality in all areas of their work, planning and employment.

### Further information, references and resources

EU-OSHA — European Agency for Safety and Health at Work, 'Including gender issues in risk assessment', Facts 43, 2003. Available at: <http://osha.europa.eu/en/publications/factsheets/43>

Health and Safety Executive, Diversity web pages, 2011. Retrieved 16 August 2011, from: <http://www.hse.gov.uk/diversity/gender.htm>

Health and Safety Executive, 'Health and Safety Executive Board HSE/10/55 — High-Level Diversity Progress Report 2009/2010 and External Diversity Priorities for 2010/2011', 2010. Available at: <http://www.hse.gov.uk/aboutus/meetings/hseboard/2010/300610/pjunb1055.pdf>

Health and Safety Executive, 'HSC/06/91 Annex A. Equality Schemes Framework. Disability Equality Scheme. Gender Equality Scheme', 2006. Available at: <http://www.hse.gov.uk/aboutus/meetings/hscarchive/2006/071106/c91a.pdf>

Health and Safety Executive, 'Single equality scheme', 2010. Available at: <http://www.hse.gov.uk/diversity/single-equality-scheme.pdf>

Health and Safety Executive, 'Single Equality Scheme Consultation', 2009. Available at: <http://www.hse.gov.uk/consult/condocs/cd223.htm?ebul=hsegen/01-sep-2009&cr=7>

Trades Union Congress, 'TUC Gender and Occupational Safety and Health "Gender-sensitivity" Checklist', 2008. Available at: <http://www.tuc.org.uk/workplace/tuc-14179-f0.pdf>

## 4.10 Purple Boots Campaign, United Kingdom

### Organisation involved

Women's Engineering Society

### Key points

- Women are under-represented in the UK's engineering and construction industry; one reason for this is ill-fitting PPE.
- The Women's Engineering Society (WES) conducted a large-scale safety clothing and footwear survey to explore this further.
- The results showed there is a lack of availability of PPE clothing specifically designed for women and that women's PPE is often uncomfortable and not fit for purpose. Often 'women's' sizes are just smaller version of men's. WES partnered with Dunlop Safety to design and retail a new range of safety boots for women; these boots had a high comfort factor.
- The survey results have raised the profile of the suitability of PPE for women and started a conversation on the topic.

## Introduction

The WES is a professional, not-for-profit society of women engineers, scientists and technologists offering inspiration, support and professional development. Working with Arup, Women and Manual Trades, the Association of Women in Property and Women in Safety Engineering (WISE), WES runs a campaign to inspire young women to enter engineering, science and technical careers. The broad campaign's three objectives are as follows:

- celebrating women's contribution to engineering, technology and the built environment;
- working safely, staying healthy;
- revealing opportunities and rewards for women in areas of STEM (science, technology, engineering and mathematics) and the built environment.

The construction sector in the UK remains one of the least diverse sectors, dominated by a male workforce. Only 13.5% of the workforce in construction is female, compared with 46% of the working population, with up to 80% of those women in the sector working in administrative and clerical roles.

Research from the Chartered Institute of Building (CIOB) identified that the number of women who leave the sector is disproportionately high, citing lack of opportunities, workplace culture and discrimination throughout their careers. Furthermore, the reasons behind the low representation of women in the construction industry are varied and complex. Organisational culture has an influence and those construction companies that are predominantly made up of firms of fewer than 10 people rarely employ women, due to a perceived increase in risk. One of the barriers to women working in construction and related industries is poorly fitting and unsuitable PPE. This is an issue that should be addressed, since the Equality Act (introduced on 1 October 2010) emphasises equal treatment and equal opportunity for all.

## Aim

To investigate and improve the availability of suitable PPE for women working in construction.

## What was done, and how

### *Preliminary investigation of PPE suppliers*

In 2006 WES conducted a survey by e-mail of PPE suppliers. The results suggested that, although suppliers were aware of women's PPE issues, resolving these was not seen as a priority. While some distributors did stock PPE in women's sizes, these were often just an extension of men's clothing and are designed around a male mannequin.

### *Phase 1: online survey*

WES then, to add to the previous research, conducted a larger-scale survey on safety clothing and footwear. The online survey was developed and hosted on the WES website. The survey's aim was to address the following questions.

- Is there a real issue with PPE for women?
- What type of PPE is most problematic?
- What could be improved?

The survey went live in September 2009. In order to increase participation in the survey, it was publicised through newsletters, journals, women's networks, the trade unions Prospect and Unite, and personal connections of the partner organisations. It was also endorsed through the engineering press. Additionally, two WES members took part in a BBC Radio 4 Woman's Hour discussion (see Figure 1).

Figure 4: Publicity material



The survey was conducted over five months. Over 550 responses were generated. The age distribution of the women respondents covered a broad spectrum with the majority being in the early part or middle of their career.

The survey generated over 550 responses including 45 men. Over 90% of the respondents were employed, and the age distribution of the women respondents covered a broad spectrum, with the majority being early- to mid-career. Ninety-one per cent of female respondents were employed, 2.8% were between jobs and 4.4% were students. Just 0.7% were on a career break

and the same percentage were retired. Twenty-one per cent worked in construction, 20% worked in professional, scientific and technical roles and 11.2% in electricity, gas, steam and air-conditioning supply. Of the 21% who described their work in other areas, the most commonly mentioned were archaeology and environmental work (including conservation). Respondents had a variety of educational backgrounds: professional, managerial, skilled trades, apprentices/students where 15% had obtained a vocational training, a foundation degree or a City and Guilds qualification; half were educated to degree level; and one-fifth had a professional qualification.

#### Survey results

- The majority (75%) of PPE worn by the women respondents was designed for men and a small percentage, almost a fifth, did not know or said it was not applicable whether the PPE was designed for men or women. Only 8% wore PPE designed for women.
- There were significant discomfort levels among PPE wearers. Half described their PPE as comfortable or very comfortable, while half described it as uncomfortable or very uncomfortable. When the 45 male respondents were filtered out, satisfaction levels fell.
- A cross-comparison of women who wore PPE designed for women showed a big increase in the levels of comfort; however, they still have issues with fit.
- Of the women who wore PPE designed for men, only 2% described it as very comfortable and 42% as comfortable. Almost 60% described it as uncomfortable or very uncomfortable with male respondents saying this was not applicable. PPE can fit better when worn while pregnant.
- Over half of respondents reported that their PPE has hampered their work in some way, with one-quarter reporting this as significant.

The survey demonstrated how widespread the issue of obtaining suitable PPE for women is in the construction and engineering sectors. The results also show there is a lack of awareness of the availability of PPE clothing specifically designed for women and that, often, women's PPE is still not sufficiently comfortable or fit for purpose and so hampers their work and efficiency and can be a factor in deciding to quit working in the sector.

#### Survey responses:

"..shaped for men. Pops open in places. Arms and legs too long .."

#### Phase 2: collaboration with a safety boots manufacturer

A partnership was developed with Dunlop Safety, utilising the results of the survey responses to design, develop and make available a new range of boots for technical women. This included the development of an online shop for the purchase of the new PPE. WES is also working on the development of collaborations such as with Women and Manual Trades and Women in Property to raise awareness of

these daily challenges for women who use PPE; it also urges procurement executives, suppliers and designers to consider this when designing PPE.

### *Phase 3: broader collaboration and promotion*

WES worked collaboratively with other organisations to increase sustainability, supply of fit-for-purpose women's PPE, revenue generation and regional events connecting technical women and to fund activities and generate excitement within schools, colleges and universities about working in non-traditional areas.

### **What was achieved**

- The boot design was hailed as a great success with a high comfort factor, though the boots were expensive, retailing at GBP 85 (EUR 108 as at 17 August 2012). However, this included a contribution of 27% towards the wider campaign.
- Many companies heard the voice of women and women now feel it is permissible to ask for better kit. In addition, woman-specific PPE is now an open topic of conversation.
- By having a positive message and developing outreach projects around the survey, WES was able to raise awareness of a serious issue and at the same time not be perceived simply as a group of complaining women.
- The campaign received public recognition from HSE.

Future steps involve WES, along with the partner organisations, developing a wider campaign around the Purple Boot theme. This campaign aims to:

- publicise the need for women's fit-for-all PPE with some technology built into the design;
- build links with manufacturers;
- develop a dedicated range of PPE in women's sizes with some technology built in;
- promote safety clothing and the people who wear it in a major campaign connecting the wearers with young people to share the excitement of their jobs with others.

### **Problems faced**

- Volunteers, technical working women, ran the campaign, so the main challenge was accessing expertise and following up leads.
- Marketing the boots from a small supplier was also a challenge, given the limited resources available.
- The boot supplier, Dunlop Safety, is a small business that sells only by online retailing. However, the fact is that the large customers of PPE buy through approved sales channels and these are fiercely protected. This is an issue that needs to be addressed; for instance, gloves seem to be a major issue yet to be tackled.

### **Success factors**

- Undertaking a survey and getting a strong response helps to build a clear evidence base and a business case to a known but unquantified problem.
- Starting with one issue, the boots.
- Working in a positive way and seeking out the partnership with the boot supplier.
- Establishing strategic meetings with PPE catalogue suppliers to gain access to large companies.
- Working with partners, both to gain the survey evidence and to gain publicity for the project.
- Campaigning approach, which was valuable to convince men about an issue relevant mainly to women. WES felt that it showed that modifications that improve conditions for women would also improve conditions for men.



### **Transferability**

The project, process or method is transferable. The survey can be used as it is now, in other countries translated into different languages. The survey report can be delivered to senior figures such as presidents of professional bodies and this can be promoted.

### **Further information, references and resources**

Women's Engineering Society: <http://www.wes.org.uk>

Survey results: <http://wes.org.uk/?q=content/ppe-clothing-survey-0>

## **4.11 Promoting a workplace approach to testicular and prostate cancer, United Kingdom**

### **Organisation involved**

Unite

### **Key points**

- Various ongoing activities have been carried out to increase the attention given to prostate and testicular cancer in the workplace.
- Some activities focus on work-related causes and their prevention.
- Some activities focus on improving awareness in general and workplace health promotion.
- Workplace safety representatives and their employers are encouraged to develop workplace policies.

### **Introduction**

Unite is a trade union. Its approach to health and safety at work includes taking a gender-sensitive approach, focusing on issues that may be of particular importance for women or men and adapting what it does to suit the target group. Support and tools to help ensure that women's OSH is properly taken into account include checklists on gender issues and advice on the menopause. But Unite is also concerned that some men's health issues are neglected, including within the workplace, and need special attention. Two such health issues are testicular cancer and prostate cancer. Prostate cancer is the most common male cancer in the UK, with 36,000 men diagnosed each year and 10,000 deaths. It is estimated that 250,000 men are currently living with the disease. Despite these statistics, thousands of men over 45 years of age do not know enough about it, and do not go to their doctors and clinics for regular examination, which can save and extend lives. While there is good public awareness about the more common forms of cancer and screening programmes, particularly for cervical and breast cancer, screening for male cancers such as testicular and prostate cancer have tended to receive less publicity. In addition, men are more reluctant than women to seek medical advice, making action via the workplace particularly important.

Unite is therefore running an ongoing campaign to promote awareness of testicular and prostate cancer.

### **Aims**

- To raise awareness in the workplace and as a workplace issue.
- To campaign for improved screening.
- To prevent workplace risks.
- To introduce workplace policies.

### **What was done, and how**

The trade union Unite is campaigning for paid time off for men to have cancer screening, having already run similar campaigns for women on cervical and breast cancer screening. There is currently no national screening programme for either prostate or testicular cancer in the UK. Unite is combining this

initiative with actions to ensure good risk prevention and health promotion. In summary, Unite carries out various activities to highlight relevant workplace health and safety issues; give guidance on negotiating a workplace policy and a campaigning agenda; and help its members to be more aware of their bodies. This helps to ensure that cancers are detected early and treated. Specific supporting activities include conducting seminars and publishing materials (such as factsheets).

#### *Workplace OSH risk prevention activities*

Unite points out that there is some evidence that workers as diverse as farmers, rubber industry workers, and people doing sedentary work may be at greater risk of prostate cancer. Difficulty in getting access to toilet facilities may create a range of health problems; this particularly affects members who are drivers. Exposure to certain radioactive substances for workers in the nuclear industry may increase the risk of prostate cancer. Therefore, Unite raises awareness of the importance of a safe and healthy workplace and environment and provides its workplace representatives with specific information about the relevant laws, measures to prevent workplace exposure to possible cancer-causing agents and about how to negotiate improvements.

The trade union points out that hygiene is crucial. Those who work in jobs where they come into contact with chemicals, oil and other substances which may accidentally splash on them or soak through clothing and gloves should ensure that the employer provides appropriate protective clothing free of charge. They also point out that it may be advisable for workers to wash their hands before using the toilet to reduce the risk of contamination.

#### *A workplace cancer-prevention policy*

Unite's workplace representatives are encouraged to negotiate workplace policy with their employers. Unite outlines what such a workplace policy should cover.

- It should apply to all workers regardless of such factors as age, employee status, hours worked and length of service.
- It should comply with health and safety legislation, in terms of, for example, carrying out risk assessments, controlling (and preferably preventing) exposure to hazardous substances, substituting hazardous substances with safer alternatives and consulting workers.
- Employees with cancer should not be discriminated against on grounds of disability.
- Improved occupational health provision focusing on preventing injuries and ill health is important. This could include providing workplace-based National Health Service (NHS) screening facilities and counselling for workers having screening or who have been diagnosed with a problem. The process should be confidential and the results of any screening should not negatively impact job or career prospects.
- Employers should raise awareness and encourage health promotion in the workplace.
- Schedules (for drivers, for instance) should allow for adequate toilet breaks and access to facilities.
- It should include time off with pay for regular cancer and other screening for men and women. In the USA, for example, federal and local government workers get four hours per year for this purpose, and time off with pay for treatment.
- It should include improvements in workplace conditions. These include healthy eating options in the staff canteen, a smoke-free environment, paid time for workers to attend smoking cessation programmes, programmes to reduce stress at work and flexible working.

#### *Advice*

Unite has been providing simple information via its publications and leaflets distributed in the workplace about testicular and prostate cancer. These cover what the cancers are and who is at risk and state that prevention and early detection is extremely important as, for example, testicular cancer responds well to treatment. Practical advice on regular self-examination and detecting symptoms is given. One of the aims is to overcome the embarrassment men may feel in checking themselves and to encourage them to seek medical advice. Information is also given about medical tests and treatment. Unite also

provide advice about workplace risks and lifestyle issues such as diet. Most workers with cancer are covered by disability discrimination legislation. Unite also provides advice about this.

#### *Awareness-raising events, health promotion and campaigning*

Unite also runs awareness-raising events. For example, it has run seminars on prostate cancer awareness in such workplaces as British Nuclear Fuels Limited (BNFL), Bombardier and Rolls Royce, and has promoted the issue at its annual conferences. It supports the activities of non-governmental organisations (NGOs) and health organisations working in this area. Finally, Unite also encourages its members and workplace representatives to carry out broader activities such as lobbying for improved NHS screening services and promoting health awareness through individual workplaces, for example by inviting a speaker on men's health to a workplace trade union meeting.

#### **What was achieved**

Unite's work in this area is ongoing: awareness-raising and campaigning are long-term activities. Precise information is not available, but its information materials have been well received by its members and employers. Many workplaces where it has branches have introduced policies and improved their occupational health provision as a result. Cancer-awareness organisations and other partners have keenly supported Unite's activities.

Unite has also focused on other men's health issues, such as male reproductive risks; for example, from exposure to dangerous substances in the workplace.

#### **Success factors**

Success factors include understanding the issues and planning the activities accordingly, especially men's attitudes to their health and behaviour regarding seeking medical advice; providing materials suitable for a male audience and bringing awareness-raising to the workplace; combining a variety of activities such as broader campaigning and joint activities with partners; and working with employers to negotiate workplace policies and improvements.

#### **Further information and references**

Unite: <http://www.unitetheunion.org/>

Transport and General Workers' Union (T&G; now Unite), *Men's health factsheet: testicular and prostate cancer*, June 2006.

Unite, *Unite promotes prostate cancer awareness*, press release, Unite, 31 March 2009. Available at [http://archive.unitetheunion.org/news\\_events/archived\\_news\\_releases/2009\\_archived\\_press\\_releases/unite\\_promotes\\_prostate\\_cancer.aspx](http://archive.unitetheunion.org/news_events/archived_news_releases/2009_archived_press_releases/unite_promotes_prostate_cancer.aspx)

## **4.12 Mainstreaming gender into the activities of an international occupational health professional society**

### **Organisation involved**

International Commission on Occupational Health (ICOH)

### **Key points**

- A scientific committee on women, health and work was established.
- The process involved setting up a working group to develop a proposal.
- The aims of the committee include working with other committees to integrate women and health across the work of the professional society.

## Introduction

ICOH is an international non-governmental professional society, which aims to foster the scientific progress, knowledge and development of OSH in all its aspects. It has a membership of 2,000 professionals from 93 countries. The ICOH is recognised by the United Nations (UN) as a non-governmental organisation (NGO) and has close working relationships with the International Labour Organization (ILO), the World Health Organization (WHO), the United Nations Environment Programme (UNEP) and the International Social Security Association (ISSA). The most visible activity of ICOH is the triennial World Congresses on Occupational Health, which are usually attended by 3,000 participants. ICOH has 35 scientific committees. Most of these committees have regular symposia, publish scientific monographs and review the abstracts submitted to the International Congresses. A working group is set up to draw up proposals for a new scientific committee.

## Aims

The aim of the initiative is to mainstream gender throughout all ICOH activities, including within its congress sessions and the work of its scientific committees, and set up a specific scientific committee on women's health and work. The overall aims include:

- making women's work-related health issues more visible;
- the inclusion of the gender factor in research and empirical analysis about working conditions and health;
- promoting the development of a gender-sensitive approach to research in health and safety — one that takes into consideration both the need for equality and the need to protect workers when they are vulnerable.

## What was done, and how

A core group of ICOH members decided that there was a need to explicitly integrate gender issues into the activities of ICOH and to integrate gender into its scientific structures. While gender should feature in all areas of ICOH's work and its scientific committees, it was felt that women, health and work also warranted its own scientific committee to further the aims outlined above. Scientific committees are an important part of the structure and functioning of ICOH. Having a scientific committee on women, health and work would integrate the topic into the formal structures and operation of ICOH.

### Role of scientific committees in ICOH

Scientific committees are encouraged to hold scientific symposia or conferences at least once between the ICOH international congresses with an open invitation to scientists and other interested persons. A minimum of two scientific meetings per triennium are encouraged, one in conjunction with the triennial international congress and one between the international congresses. Scientific committees are encouraged to collaborate with other scientific committees, with national secretaries and national organisations in host countries, and with WHO, the ILO and other professional organisations in organising joint meetings and symposia. ICOH scientific committees can jointly organise activities with scientific organisations. Scientific committees are encouraged to develop scientific reports, books, and articles for scientific journals. They may draw up ICOH publications: position papers; guidelines; statements; reports. Each scientific committee is encouraged to develop a website using the ICOH template as a communication tool with scientists in the field of interest. They must draw up and report their work plan, midterm and final triennial reports and business meeting reports.

*The establishment of the committee* went through several phases, including:

- formation of a network;
- setting up the working group to propose the scientific committee;
- formation of a scientific committee;
- implementation of the scientific committee.

### *The network*

A starting point was the establishment of an ICOH network on women, work and health (with a web page at [http://www.icohweb.org/site\\_new/ico\\_report\\_network\\_women.asp](http://www.icohweb.org/site_new/ico_report_network_women.asp))

The purpose of the ICOH Network on Women, Work and Health was to make women's work-related health visible. The formation of the network was announced at the end of the ICOH 2000 Congress in Singapore. The ICOH Board assigned two of its members to support the network. A constitutional meeting of the ICOH network for Women, Work and Health was held at the ICOH Congress in 2000. The meeting gathered 15 participants representing Africa, Asia and Europe. One of the goals set up during the first meeting of this network during the 2000 Singapore ICOH congress was that the gender issue should be introduced into every ICOH subcommittee, and at its seminars, workshops or conference there should be either a lecture or a symposium that addresses the gender aspect within the field.

### *Working group to propose a scientific committee*

According to ICOH's guidelines on scientific committees, ICOH members who share a field of scientific interest may establish a working group to develop a proposal for a new scientific committee (proposal, list of members, scope of activities and so on) to the ICOH officials in charge of scientific committees. The ICOH board reviews the proposal. So, in keeping with ICOH's working methods, an ICOH working group was set up in September 2005 to propose a scientific committee.

The working group developed the proposal and scope of activities for a scientific committee on women, health and work. This outlined women's health problems at work and identified and prioritised areas where ICOH could play a role through research work and other means within its remit.

The working group organised a session on women, work and health at the ICOH World Congress held in June 2006. The participants at the session voted unanimously that the working group should be elevated to the status of scientific committee.

### *Formation of the Scientific Committee on Women, Health and Work (SCWHW)*

The creation of the new ICOH Scientific Committee on Women, Health and Work (SCWHW) was decided and approved by the ICOH Board at its midterm meeting in March 2008. The formation of SCWHW was publicised with an ICOH Vice President calling for involvement in the committee. The SCWHW was formally launched at the ICOH 2009 World Congress in Cape Town, when it also held its first 'business meeting'. At the congress, prior to the business meeting and in the same room, two special sessions on issues of women workers took place. The first business meeting of the SCWHW was scheduled to take place early in the congress to encourage interactions and additional gatherings throughout the week.

### *Role and activities of the SCWHW*

Based on the recommendations given by the working group, the attendees at the first business meeting of SCWHW at ICOH World Congress in Cape Town 2009 agreed the following as the focus and aims of the ICOH SCWHW (ICOH SCWHW Minutes, 2009):

- addressing issues that specifically affect women's health and well-being in developed and developing countries;
- addressing OSH issues for women, particularly under certain special working conditions such as pregnancy, migration and hazardous exposures;
- advancing health promotion for working women;
- addressing issues concerning gender public policies, laws and regulations, and their application in different countries;
- encouraging research, raising awareness, and promoting education of specialists in the area;
- sharing information/networking with other groups on gender mainstreaming at work;
- working collaboratively with other ICOH scientific committees on the relevant issues aforementioned.

The SCWHW established a work plan that sought to:

- organise business meetings, as required by ICOH;
- organise and attend a series of conferences, seminars, workshops and courses;
- contribute to publications and guidelines;
- establish the organisation and means of communication of the committee;
- plan sessions for the ICOH 2012 congress;
- actively collaborate with other ICOH committees;
- collaborate with and provide support to WHO, ILO and other UN and regional intergovernmental organisations (IGOs);
- cooperate with organisations outside ICOH.

All the special focus areas of the ICOH scientific committees should address the risks of working women in the formal and informal sectors. The SCWHW therefore actively engages and collaborates with the other scientific committees. ICOH members have the right to sit on up to three scientific committees, and members of the SCWHW are encouraged to bring gender issues to the other scientific committees of which they are members.

SCWHW has considered and planned strategies to enhance communication and information sharing within the group, and to assist awareness-raising about SCWHW and encouraging others to join. Methods implemented include: periodically issuing a SCWHW newsletter, which is circulated to ICOH members and also interested non-ICOH members; providing notes and news about SCWHW's activities for publication in the ICOH newsletter; a discussion email list; a standard PowerPoint presentation in English and Spanish for use at conferences and meetings to help raise awareness and help encourage involvement in the SCWHW; and a competition to establish a logo for the committee.

SCWHW views as particularly important: sharing information and practices on women's health and safety at work; working collaboratively with others both inside and outside ICOH; and networking with other organisations involved in gender activities. It forms collaborative alliances with other organisations such as the International Ergonomics Association (IEA) and its Gender and Work Technical Committee; the Gender, Ethnicity and Health Office of the Pan American Health Organization (PAHO); and the ILO Gender and Non-Discrimination Programme. It collaborates with both those involved in OSH activities and those involved with gender equality.

Another key activity of SCWHW within ICOH is to ensure that women, work and health features within the triennial congress events, by organising specific sessions (with other ICOH scientific groups where appropriate), and encouraging its inclusion in other sessions. SCWHW was involved in organising the following sessions at ICOH 2012: a special session on women and work–life balance; a special session on women and ageing, organised with the ICOH scientific committee on Ageing and Work; a special session on gender perspectives in health, agriculture and work in Latin America; a special session entitled 'The debate: building capacity, research, and networking for gender mainstreaming at work: A glance to global achievements'; a double 'free paper' session on women, health and work; and a poster on women, work and health. In addition, a member of the SCWHW gave one of the semi-plenary presentations on the inclusion of gender in research.

## Outputs

The Committee's outputs comprise:

- newsletters;
- meetings;
- Congress sessions;
- a standardised PowerPoint presentation;
- the presentation of SCWHW and promotion of its aims at external conferences and elsewhere.

Between April 2009 and March 2012, SCWHW carried out the following activities: three business meetings in Africa, Europe and Central America; organising or participating in 13 conferences and workshops covering Asia, Americas and Europe; an article for publication; a standardised PowerPoint presentation; the publication of two newsletters; collaboration with 10 ICOH scientific committees; collaboration with WHO and ILO; collaboration with eight non-ICOH organisations, particularly with the International Ergonomics Association (IEA); broadening its networking activities; organising five sessions on women, work and health at the ICOH 2012 (listed above).

## What was achieved

The SCWHW is a well-established and active committee within the ICOH. At the SCWHW business meeting held during the ICOH 2012 congress, the officers of the committee were expanded to include focal points representing the different continents. Topics relevant to women, work and health featured throughout the ICOH 2012 congress in oral and poster sessions, including a semi-plenary presentation by one of SCWHW's members, in addition to the five congress sessions dedicated to women, work and health issues that the SCWHW organised.

The SCWHW highlighted some achievements itself in its midterm report for April 2009 to October 2010 to ICOH:

*Starting to run and make presence with the SCWHW has been a successful experience given the fact that the SC did not exist before. It has not only been a great challenge for us, but it has also helped us to deliver the gender approach message in many regions of the world where it is needed. For example, we designed a standard presentation and wrote an article of our SCWHW and it is available in English and Spanish, with which we have made ourselves and our work known throughout many places in the world.*

*As well, we have managed to combine women's issues with particular economic activities where women are the leading workforce, such as in agricultural settings in Asia, Africa and Latin America, and in healthcare services.*

*Our newsletter had a great impact achieving two goals: making ourselves visible and making collaboration alliances with other non-ICOH organisations such as IEA.*

## Success factors

The success factors of the SCWHW initiative are listed below:

- seeking to both mainstream women and health across the society in tandem with setting up a specific committee;
- using the structures of the organisation, both in terms of establishing end goals and working to achieve them;
- establishing clear arguments for the need for the committee, its role and goals, and its work plan;
- establishing a plan to enhance networking and communication;
- active engagement and discussion with interested parties and looking for synergies, starting by working with organisations where members already have an involvement.

## Transferability

The approach used here could be used in other societies. The objectives, ways of working and activities set for the scientific committee are generally applicable. As here, it is necessary to use and work through the structures of the organisation to promote women and work as a mainstream topic.

## Further information

- ICOH: <http://www.icohweb.org/>
- ICOH network on women, work and health:  
[http://www.icohweb.org/site\\_new/ico\\_report\\_network\\_women.asp](http://www.icohweb.org/site_new/ico_report_network_women.asp)
- New Scientific Committee on Women, Health and Work:  
[http://www.icohweb.org/site\\_new/ico\\_news\\_detail.asp?id=25](http://www.icohweb.org/site_new/ico_news_detail.asp?id=25)
- [http://www.icohweb.org/site\\_new/multimedia/news/pdf/Invitation%20to%20New%20SC%20Women%20Health%20and%20Work.pdf](http://www.icohweb.org/site_new/multimedia/news/pdf/Invitation%20to%20New%20SC%20Women%20Health%20and%20Work.pdf)
- Guidelines on ICOH scientific committees  
[http://www.icohweb.org/site\\_new/multimedia/core\\_documents/pdf/Guidelines%20for%20Scientific%20Committees.pdf](http://www.icohweb.org/site_new/multimedia/core_documents/pdf/Guidelines%20for%20Scientific%20Committees.pdf)
- ICOH 2012 programme database, where details of the sessions on women, health and work can be found: <http://icoh.confex.com/icoh/2012/webprogram/start.html>
- SCWHW newsletter Volume 1, Nos. 1 and 2

- ICOH 2009-2012 Triennium midterm scientific committee report for April 2009 to October 2010 submitted by SC Women, Work and Health
- ICOH 2009-2012 Triennium final scientific committee report for November 2010-March 2012 submitted by SC Women, Work and Health
- Rodriguez-Guzman, J. and Kauppinen, K, 'ICOH scientific committee on Women, Work and Health: Working jointly on women's issues to improve work and life quality', unpublished paper prepared for the International Conference on Gender and Development in the World of Work, 25-27 March 2010, Bundelkhand University, Jhansi, India.

## 4.13 Incorporating gender into WHO's healthy workplaces model, WHO

### Organisation involved

World Health Organization (WHO)

### Key points

- WHO takes a gender-based approach to public health. By identifying the ways health risks, experiences and interests are different for women and men, boys and girls, it can act accordingly. As it includes occupational health in public health, this gender-based approach should extend to this area of its work too.
- WHO mainstreams OSH into its actions on women and health, such as the investigations and recommendations of the Global Commission on Women's Health.
- In 2012 WHO launched a new approach to promote the institutionalised mainstreaming of gender, equity and human rights and with the goal of it being a core value for all WHO staff members.
- Gender is seen as a cross-cutting issue and responsibility for implementing its strategy on gender lies with WHO staff at all levels. This includes occupational health.
- The work is supported by a merged Gender, Equity and Human Rights team, whose role includes developing tools.
- The healthy workplaces model and framework and its incorporation of gender differences are based on the available evidence and combining principles of health protection and health promotion.
- WHO has developed its strategy on gender and occupational health through cross-policy collaboration with the ILO and broad consultation.

### Introduction

#### *Gender equality in health*

WHO, as a directing and coordinating authority for health across the world, is responsible for providing leadership on global health matters, the formation of health research directions and setting norms, standards and policy options, including in the area of occupational health.

Gender equality and health equity are incorporated into the WHO's Constitution. In general terms, WHO's objective of the attainment by all persons of the highest possible level of health covers *inter alia* occupational health, gender equality and health equity: 'The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition'. In terms of occupational health, it was summed up in WHO's functions of preventing accidental injuries and promoting improvement of working conditions.

The attainment of equality within health is influenced by various factors, particularly from the viewpoint of gender equality. Traditionally, women and men have different roles, opportunities and resources in



societies and may not be able to exercise their human rights, including those of healthcare. The different gender roles in interaction with other social and economic factors result in different and sometimes unacceptable exposure to health risk, as it may mean different levels of access to and different ways to utilise adequate health information, care and services. It is obvious that these differences in turn may result in significant impact on the health outcomes. WHO therefore takes a gender-based approach to public health, including occupational health.

**Q: What is a gender-based approach to public health?**

A: A gender-based approach to public health begins from the recognition of the differences between women and men. It helps us to identify the ways in which the health risks, experiences and outcomes are different for women and men, boys and girls, and to act accordingly.

In most societies, women have lower social status than men, producing unequal power relations. For example, women have lower status in families, communities and society: they have less access to and control over resources and they have less of a say in decision-making than men. These factors have led to a systematic devaluing and neglect of women's health.

In the past, work on women's health was focused on the health problems of women during pregnancy and childbirth. A gender-based approach has broadened our understanding of women's health problems and helped identify ways to address them for women of all ages. Cardiovascular disease, for example, is now known to be a major cause of death among women. However, this is not well recognised, leading to delays in treatment-seeking and diagnosis among women. The identification of gender differences in cardiovascular disease has made it possible to develop more effective health promotion and prevention strategies that have improved women's health in many countries.

Integrating gender perspectives into public health means that the different needs of women and men are considered at all stages of policy and programme development. The ultimate goal is to achieve gender equality. Gender mainstreaming in public health means addressing the role of social, cultural and biological factors that influence health outcomes, and in doing so improving programme efficiency, coverage and equity.

An example of the application of this approach can be seen in an HIV intervention in South Africa that addressed poverty, violence and the lack of power to negotiate safe sex as factors contributing to high HIV rates among women. The project – Intervention with Microfinance for AIDS and Gender Equity – offered women access to microfinance to become economically self-sufficient, and to gender-sensitive HIV education to help them better negotiate sexual relationships and challenge negative attitudes within the community. The project contributed to a 55% drop in the incidence of intimate partner violence, a key factor in HIV transmission, among a group of poor South African women.

Source: WHO Online Q&A, 7 March 2007, What is a gender-based approach to public health?  
<http://www.who.int/features/qa/56/en/index.html>

*Integrating gender analysis and actions into the work of WHO*

Following a series of international mandates such as the ECOSOC Resolutions in 1997 and 2006 and the Beijing Platform for Action and resolution WHO60.25 adopted by the Sixtieth World Health Assembly in May 2007, WHO takes a gender-based approach to its work. This is in line with the UN system-wide strategy to mainstream gender.

The WHO Gender Strategy implements actions to ensure that gender equality and health equity are incorporated into the organisation's work, including planning and management processes. WHO seeks to strengthen its capacity to analyse and address the role of gender and sex in all its functional areas: building evidence, developing norms and standards, tools, guidelines, making policies and implementing programmes.

WHO strategy elaborates four strategic directions that aim to enhance and expand WHO's capacity to analyse the role of gender and sex in health and to monitor and address systemic and avoidable gender-based inequalities in health, as follows:

- Building WHO capacity for gender analysis in planning and programming.
- Bringing gender into the mainstream of WHO management, including reflecting gender in WHO's programme budgets.
- Promoting the use of sex-disaggregated data to set up successful gender interventions and gender analysis.
- Establishing accountability.

It is intended for all WHO managers, technical and administrative staff because gender is a cross-cutting issue and responsibility for implementing the strategy lies with WHO staff at all levels. The process for implementing the strategy is catalysed by its Gender, Women and Health Network. The network has developed various tools to build the capacity of WHO staff for implementing the strategy.

#### *Institutional mainstreaming of gender, equity and human rights*

As part of a reform process, in 2012 the World Health Organization launched a new approach to promote and facilitate the institutional mainstreaming of gender, equity and human rights, building upon the progress that has already been made on these areas at all three levels of the organisation. The goal is 'to achieve a WHO in which each staff member has the core value of gender, equity and human right in his/her DNA'.

The coherent approach to mainstream all three areas is reflected in the way WHO works and what it delivers — through technical cooperation, policy advice and dialogue, setting norms and standards, knowledge generation and sharing, convening stakeholders, and other enabling functions.

Particular efforts are geared towards enhancing WHO Country Office capacity to support countries in incorporating gender, equity and human rights within their national strategic health plans, other policies and activities on the ground, and monitoring efforts.

The mainstreaming process is carried out jointly by all the clusters in WHO Headquarters, Regional and Country Offices, and will be rolled out in a spirit of joint accountability. To facilitate this, a Gender, Equity and Human Rights (GER) team was created, bringing together previous teams on gender, equity and human rights.

#### *Occupational health*

WHO deals with all aspects of health, including occupational health, and aims to mainstream occupational health into its public health policy and actions. Occupational health is no different from other areas of health in that problems may be influenced by gender differences, and WHO applies its gender-based approach to this area of its work as well. The success of its activities to promote gender equality and health equity at work in the area of occupational health depends on the clear understanding of the relationship between gender and occupational health and the impact on the society of its policies and operations in this area.

#### **Aims**

To take a gender-based approach to WHO policy and actions in the area of occupational health. This includes policy and actions to encourage its Member States to work towards full coverage of all workers with essential interventions and having basic occupational health services in place to address the primary prevention of occupational and work-related diseases and injuries; to prepare guidance on the development of healthy workplaces; to promote health at the workplace; and to consider gender diversity in this work.

#### **What was done, and how**

##### *Development of WHO's occupational health policy, which enshrines equality and gender mainstreaming and bringing gender mainstreaming into occupational health*

WHO's work on gender issues in occupational health has evolved in tandem with the ILO's activities in this field and through collaboration between both organisations. There was particular collaboration to develop strategy during the 1980s and 1990s and this close collaboration continues.

*Timeline of a gender-based approach to OSH in the work of WHO and the ILO: some selected dates*

1982: ILO mid-term plan includes women workers as one of six global themes.

1982: The WHO's Regional Office for Europe organises an expert group meeting on Women and Occupational Health Risks which focuses on problems of occupational health arising from working women's exposure to toxic chemicals and to physical, biological, psychosocial and ergonomic factors.

1984: ILO Employment Policy Recommendation (no. 169). ILO conclusions concerning future action in the field of working conditions and environment outlined.

1985: ILO resolution on equal opportunities and equal treatment for men and women in employment (which includes items on the working environment) promoted.

1989: The ILO organises a tripartite meeting of experts on 'special protective measures for women and equality of opportunity and treatment'.

1991: WHO's Regional Office for Europe commissions a study to explore the situation regarding women at work in Europe.

1992: The ILO/WHO Joint Committee on Occupational Health recognises that women and men have specific occupational health needs as workers because of their age, physiological build, gender, communication barriers and other social factors.

1992: The Global Commission on Women's Health established by Resolution 45.25 of the World Health Assembly, with a remit to address all aspects of WHO's work on women's health.

1994: Women's health problems related to occupational hazards covered in some of the articles in the WHO publication 'Anthology on Women, Health and Environment'. These included issues such as pesticide exposure and reproductive outcomes, exposure to neurotoxins in the microelectronics industry, psychological and ergonomic stressors in garment workers, repetitive strain injury and occupational tasks, and silicosis in Swedish women.

1994: WHO's collaborating centres in occupational health approve a Declaration on Occupational Health for All which recognises equality issues in occupational health matters: in seeking to implement the fundamental right of each worker to the highest attainable standard of health, access to occupational health services should be ensured for all workers of the world irrespective of age, sex, nationality, occupation, type of employment, or size or location of the workplace.

1994: The WHO collaborating centres in occupational health propose a Global Strategy on Occupational Health for All. They draw attention to the urgent need to improve OSH, especially as it relates to gender issues. Issues include: the challenges around heavy physical work and the poor working methods that women experience in developing countries, the unsuitability of machinery and tools that have been designed according to male anthropometry, informal work (such as that carried out on small-scale enterprises, home industries and small farms) where all family members (including children, pregnant women and elderly people) are affected by workplace exposures, and the problems of reproductive health caused by occupational hazards that both male and female workers may face.

1996: The WHO Global Strategy on Occupational Health for All adopted by Resolution 49.12 of the World Health Assembly. The Resolution urges the WHO's Member States to develop national programmes on occupational health for all, based on the Strategy, with special consideration of full occupational health services for the working population (including migrant workers, workers in small industries and in the informal sector, and other occupational groups at high risk and with special needs).

1999: An issues and policy paper 'Women and Occupational Health' is prepared for the Global Commission on Women's Health. The paper presents a comprehensive expert analysis of women's health problems related to their working conditions. On the basis of this, the Commission makes a number of recommendations.

2004: The WHO booklet 'Gender, health and work' summarises the most important information on gender and occupational health relationships.

2007: A Global Plan of Action on Workers' Health (GPA) 2008-2017 is endorsed by Resolution 60.26 of the Sixtieth World Health Assembly in May 2007. This represents an important shift from

occupational health to the broader concept of workers' health to better relate occupational health to public health.

2007: World Health Assembly adopts Resolution 60.25 'Strategy for Integrating Gender Analysis and Actions into the Work of WHO'. The strategy is adopted following broad consultation throughout WHO, with representatives from the ministries of health and with external experts.

2011: WHO's information sheet 'Gender, work and health' presents the latest overview of the differences and inequalities between women and men as these relate to work and health and emphasises those issues that may be of particular importance to women.

2011: WHO makes the presentation 'Considering Gender Differences in Building Healthy Workplaces' at the XIX World Congress on Safety and Health at Work.

2012: WHO launches a new approach to promote and facilitate the institutional mainstreaming of gender, equity and human rights.

**Recommendations of the Global Commission on Women's Health on women and occupational health**

1. Issues of women's occupational health should be examined within the context of gender-specific analyses of occupational health.
2. Such gender-specific analyses should identify the specific occupational health risks of particular industries, occupations and tasks not only for the individual worker but for other family members.
3. Women's work in the informal sector, in agriculture and in the home has to be conceptualised and measured if the specific occupational health risks of women are to be addressed.
4. The use of methodologies such as time-use surveys and record-linkage in longitudinal studies to identify and assess occupational health risks should be extended.
5. Legislation addressing women's occupational health needs should be reassessed to ensure that it neither discriminates against women nor overlooks potential occupational health risks among men.
6. International agreement about the classification of reproductive hazards (such as chemicals) and on the precautions needed to protect both men and women from those hazards should be developed.
7. The need for a greater priority in addressing the occupational health needs of both men and women requires commitment and close collaboration on the part of the various international agencies concerned, such as WHO and the ILO.
8. Interdisciplinary research with a strong social science component is essential for the understanding of gender-related issues in occupational health. WHO and its appropriate collaborating centres should take the lead in the identification and coordination of such research (Kane, 1999, p. vi).

*The Global Plan of Action on Workers' Health, Healthy Workplaces Model and gender*

The Global Plan of Action on Workers' Health (GPA) 2008-2017 represents an important shift from occupational health to the broader concept of workers' health to better relate occupational health to public health. The specific objectives of the plan are to:

- devise and implement policy instruments on workers' health;
- protect and promote health at the workplace;
- improve the performance of and access to occupational health services;
- provide and communicate evidence for action and practice;
- incorporate workers' health into other policies.

WHO has developed the healthy workplaces model for action, which is evidence-based and combines the principles of health protection and health promotion (WHO, 2010a,b). In this model, WHO suggested the following definition of a healthy workplace:

'A healthy workplace is one in which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety and well-being of workers and the sustainability of the workplace by considering the following, based on identified needs:

- health and safety concerns in the physical work environment;
- health, safety and well-being concerns in the psychosocial work environment including the organisation of work and workplace culture;
- personal health resources in the workplace;
- enterprises participating in the community to improve the health of workers, their families and other members of the community.' (WHO, 2010b, p. 89)

WHO mainstreams gender into its global action plan on worker health and its healthy workplaces model for action.

*How gender differences can be incorporated into the healthy workplace model*

WHO, in its presentation 'Considering Gender Differences in Building Healthy Workplaces' at the XIX World Congress on Safety and Health at Work in Istanbul in September 2011, proposed how gender differences can be incorporated into the WHO healthy workplace model. For each of the four avenues of influence it made a number of suggestions.

For the physical work environment it suggested:

- adapting PPE to the user;
- protecting pregnant women from hazardous exposure;
- protecting men and women from physical and verbal abuse and assault in high-risk jobs;
- adapting ergonomics to the requirements of the person.

For the psychosocial work environment it suggested:

- protecting men and women from harassment, including sexual harassment;
- enabling a balance of work and personal life;
- adapting the workload and providing sufficient control.

For personal health resources in the workplace it suggested:

- providing healthy food if there is a canteen;
- providing smoke-free environments;
- providing fitness and rest facilities, if possible.

In terms of enterprise community involvement it suggested:

- providing primary healthcare (PHC) for the whole family;
- going beyond legislative requirements for gender or disability issues;
- providing literacy education for the whole family.

Suggestions for each of the above-described steps of the process for implementing a healthy workplace programme are as follows:

1. *mobilise*: commitment for change, diverse populations and gender equality;
2. *assemble*: striving for gender balance in the healthy workplace team (health and safety committee);
3. *assess*: do not make assumptions about hazards and individuals at risk; acknowledging differences in social and economic power; collecting gender-segregated qualitative and quantitative data;
4. *prioritise*: being careful about gender bias; ensuring equal contributions;
5. *plan*: assessing the implications of the actions or policy for men and women; ensuring all workers are provided information and training;
6. *do*: implement the plan with equal participation of men and women; developing indicators for evaluation;
7. *evaluate*: finding whether the action results in equal outcomes for men and women; finding whether the action was effective;
8. *improve*: learning lessons; adjusting actions.

*WHO guidance on gender, health and work*

One of the roles of WHO is to provide tools to support others in achieving its goals for health.

In 2004 it published the booklet 'Gender, health and work', which summarised the most important information on gender and occupational health relationships (the jobs considered as women's and men's; occupational health, biological, psychological and social differences; health implications; specific problems for women and men; and the relevant legislation and policy). On the basis of this information, the need for relevant research (that was gender sensitive and with attention given to women's needs) and implications for work-related health policies and programmes (women's empowerment so that they can protect their health, the protection of workers' family life, and equal treatment for women and men at work) were stated.

WHO's information sheet 'Gender, work and health' (2011) presents an overview of the differences and inequalities between women and men as these relate to work and health and emphasises those issues that may be of particular importance to women. The publication presents gender differences for paid and unpaid work, the issues that relate to child labour, the coexistence of conditions of social disadvantage and biological differences between women and men. The influence of various factors (such as globalisation, informal and flexible employment, migration and global economic crisis) on the gender and occupational health issues are also discussed. The conclusions are that workers, their families and communities may be affected by the health problems related to work, and the impact can be direct and indirect, such as the effect on employers through higher rates of absence and increased workers' compensation costs. The most common factors determining these problems are the different experiences of women and men when it comes to occupational health, their engagement in different types of work with different risks and different work-related health problems, and the different impacts on their bodies within the workplace. This information sheet also provides suggestions for action that could be taken by the participants of the process to improve working conditions, occupational health and well-being from a gender equity viewpoint — for governments, employers, workers and researchers.

**Suggestions for action given in WHO's information sheet 'Gender, work and health' (2011)**

The suggestions for governments include the following:

- extend labour legislation to all female and male workers (without exclusion on the basis of occupation, migration status, employment relationship and other factors, and including informal sector and unpaid workers) in order to guarantee minimum labour standards, avoid discrimination, ensure OSH and compensation in the case of injury or illness and so on;
- adopt or expand legislation on work–family balance (maternity, paternity and child-care leave, including short periods of leave for healthcare, and leave due to the prolonged illness of a family member), and to facilitate this balance through public programmes (for instance, child care services in and outside the workplace and clinics opened after working hours);
- implement gender-based analysis to identify the different vulnerabilities and needs of female and male workers and to ensure those needs are considered in legislation, programmes and policies and duly addressed;
- ensure the different health vulnerabilities of working girls and boys are addressed and that there is the pursuance of avenues for their schooling.

The suggestions to employers include the following:

- respect legislation covering labour, health and equity;
- identify and reduce the risks in traditional 'women's jobs' and 'men's jobs' (including risks to male and female reproductive health) while ensuring that women's access to jobs is not restricted;
- increase proactive initiatives (in, for instance, ergonomic design or use of ergonomically sound implements);
- tackle workplace violence;
- ensure the systematic education and training of workers on specific occupational risks and of managers and supervisors on work–family balance, workplace violence, and other gender-related health and safety issues;

- arrange work while considering work–family balance (such as the use of flexible time schedules, self-scheduling, periodic unscheduled leave, setting up workplace day-care for children during working hours and after school, and designating spaces for breastfeeding or expressing breast milk);
- provide gender-sensitive health/medical and counselling services at the workplace;
- ensure that workplace initiatives involve the participation of both women and men;
- build relationships with governments, workers' compensation boards, physicians, trades unions, community organisations and researchers to develop or introduce workplace health and safety programmes.

The following suggestions are made to workers:

- operate through the trade unions to ensure women's meaningful participation at all levels in health and safety and also in trade union activities;
- (for both women and men) develop and participate in capacity-building initiatives (in the workplace or community), which will improve their working and living conditions through education, as well as advocate for policy and legislative change.

It is recommended that researchers focus on:

- the health and safety issues in informal and flexible employment and in domestic work (paid and unpaid);
- the role of sociodemographic characteristics (such as gender, ethnicity, migration and income) for women's and men's occupational health experiences;
- the impact of new technologies on health (including reproductive health);
- the influence of cumulative exposures to OSH risks at work, at home and in the community on the health outcomes for women and men of different social groups.

### **What was achieved**

- Incorporation of gender into the Healthy Workplace Model and its presentation in line with the Global Plan of Action for Workers' Health.
- The development and publication of suggestions for action that can be taken to improve working conditions, occupational health and human well-being from a gender equity viewpoint.
- The development and publication of the guidance for employers and worker representatives for building healthy and equitable workplaces for women and men.

As part of its objective of equality of health for all, WHO has systematically mainstreamed gender into all its activities, recognising gender inequalities in health, and applies this to its activities in the field of occupational health as well. WHO is engaged in permanent purposive work on occupational health and gender equality issues.

### **Success factors**

- Addressing gender issues in occupational health within the context of existing objectives, commitment and actions of WHO towards equality of public health for all, which include actions and tools in the field of gender equality.
- Mainstreaming occupational health into its strategy and actions on gender and health equality and mainstreaming gender into its work on OSH.
- Basing its healthy workplaces model for action and its strategy on gender and occupational health on evidence approaches and combining principles of health protection and health promotion, including gender differences.
- Partnership approach, cross-policy cooperation with the ILO and broad consultation when developing strategy.

## Transferability

WHO's overall work aims to provide leadership on global health matters, shape the health research agenda, set norms and standards, elaborate evidence-based policy options, provide technical support to countries and monitor and assess health trends. Therefore, its general approach, solutions and products are presented in such a way that they could be easily adapted in diverse countries and companies. The healthy workplace model and the suggestions to incorporate gender differences into it can also be applied in both large and small enterprises with appropriate consideration of local peculiarities.

## Further information, references and resources

World Health Organization: <http://www.who.int/>

EU-OSHA — European Agency for Safety and Health at Work, *Gender issues in safety and health at work. A review*, 2003. Available at: <http://osha.europa.eu/en/publications/reports/209/view>

ILO — International Labour Office, *Women's empowerment: 90 years of ILO Action*, Geneva. Available at:

[http://www.ilo.org/wcmsp5/groups/public/@dgreports/@gender/documents/publication/wcms\\_105088.pdf](http://www.ilo.org/wcmsp5/groups/public/@dgreports/@gender/documents/publication/wcms_105088.pdf)

Kane, P. (ed.), *Women and occupational health. Issues and policy paper prepared for the Global Commission on Women's Health*, World Health Organization, 1999. Available at:

[http://www.who.int/occupational\\_health/publications/womandoh/en/index.html](http://www.who.int/occupational_health/publications/womandoh/en/index.html)

WHO — World Health Organization, *Global strategy for health for all by the year 2000*, Geneva, 1981. Available at: <http://whqlibdoc.who.int/publications/9241800038.pdf>

WHO — World Health Organization, *Global strategy on occupational health for all: The way to health at work, Recommendation of the second meeting of the WHO Collaborating Centres in Occupational Health, 11-14 October 1994, Beijing, China*, 1995. Available at:

[http://www.who.int/occupational\\_health/publications/globstrategy/en/index.html](http://www.who.int/occupational_health/publications/globstrategy/en/index.html)

WHO — World Health Organization, *gender, health and work*, 2004. Available at:

[http://www.who.int/gender/other\\_health/Gender,HealthandWorklast.pdf](http://www.who.int/gender/other_health/Gender,HealthandWorklast.pdf)

WHO — World Health Organization, *Healthy workplaces: a model for action: For employers, workers, policymakers and practitioners*, 2010a. Available at:

[http://www.who.int/occupational\\_health/publications/healthy\\_workplaces\\_model\\_action.pdf](http://www.who.int/occupational_health/publications/healthy_workplaces_model_action.pdf)

WHO — World Health Organization, *WHO healthy workplace framework and model: Background and supporting literature and practices*, 2010b. Available at:

[http://www.who.int/occupational\\_health/publications/healthy\\_workplaces\\_background\\_documentfinal.pdf](http://www.who.int/occupational_health/publications/healthy_workplaces_background_documentfinal.pdf)

WHO — World Health Organization, 'Building healthy and equitable workplaces for women and men: A resource for employers and worker representatives', *Protecting Workers' Health Series No. 11*, 2011a. Available at: [http://whqlibdoc.who.int/publications/2011/9789241501736\\_eng.pdf](http://whqlibdoc.who.int/publications/2011/9789241501736_eng.pdf)

WHO — World Health Organization, *Gender, work and health*, 2011b. Available at:

[http://whqlibdoc.who.int/publications/2011/9789241501729\\_eng.pdf](http://whqlibdoc.who.int/publications/2011/9789241501729_eng.pdf)

WHO — World Health Organization, About WHO web page, 2011c. Retrieved 26 October 2011, from: <http://www.who.int/about/en/>

WHO — World Health Organization, Gender, women and health web page, 2011d. Retrieved 28 October 2011, from: <http://www.who.int/gender/en/>

WHO — World Health Organization, Governance web page, 2011e. Retrieved 26 October 2011, from: <http://www.who.int/governance/en/>

WHO — World Health Organization. Occupational health web page 2011f. Retrieved 28 October 2011, from: [http://www.who.int/occupational\\_health/en/](http://www.who.int/occupational_health/en/)

WHO — World Health Organization. Gender mainstreaming web page.

[http://www.who.int/gender/mainstreaming/integrating\\_gender/en/index.html](http://www.who.int/gender/mainstreaming/integrating_gender/en/index.html)



## 5 Case studies: approach at the workplace level

### 5.1 A gender-sensitive approach to MSD prevention in a printing company, France

#### Organisation involved

Regional association for the improvement of working conditions (Agence Régionale pour l'Amélioration des Conditions de Travail, ARACT), in Basse-Normandie

#### Key points

- This ergonomics intervention examined tasks, work methods and equipment design and layout but also looked at broader organisational issues and gender differences.
- Women were much more likely to continue working in the print finishing jobs, where there was a high prevalence of MSDs, and which were characterised by repetitive work, compared with male staff. Men who started in these jobs tended to progress quickly to other types of work.
- It was demonstrated by looking at all aspects of the working conditions of the men and women that the working conditions these women endure are not the same as those that men experience, and that the strain of work and exposure over time was greater for them than for their male counterparts.
- Recommendations were made to reduce MSD risks in the specific job, e.g. to improve working postures, but also to improve career progression for the women workers.

#### Introduction

A printing company employing 225 people and belonging to a group consisting of five companies involved in the publishing process, from traditional printing to sorting and postage, required an intervention to address the various disorders and absenteeism affecting its staff in its finishing workshop, the majority of whom are female.

The production site of this company comprised two workshops: the printing workshop and the finishing workshop. The latter was where booklets that had been printed were put together using glueing machinery that had to be supplied with the printed sheets and covers at various stages. For the most part, the two workshops were split by gender, with more men in the printing workshop and more women in the finishing workshop.

#### Aims

In order to deal with the upsurge in staff complaints about aches and pains, to increase productivity and to improve working conditions, the company decided to undertake research on the tasks most likely to be at the root of the disorders, particularly among the women who work with the splicers in the finishing workshop. It wished to understand why these disorders appeared in the first place.

Moreover, absenteeism among women constantly increased for several months, focusing the business's attention on that segment of its workforce.

#### What was done, and how

The business approached ARACT in Basse-Normandie for help in understanding what was happening within the company.

ARACT started by training a steering committee to understand the issues surrounding MSDs in the business: what were the factors that caused these disorders? How these could be addressed? This steering committee was composed of three employees (two women and one man), the head of the workshop, the head of security, the director of human resources and the company director. The committee met at the start of ARACT's involvement and later, when it reported its findings. After that report the steering committee continued to meet, and indeed still does, approximately every two months.

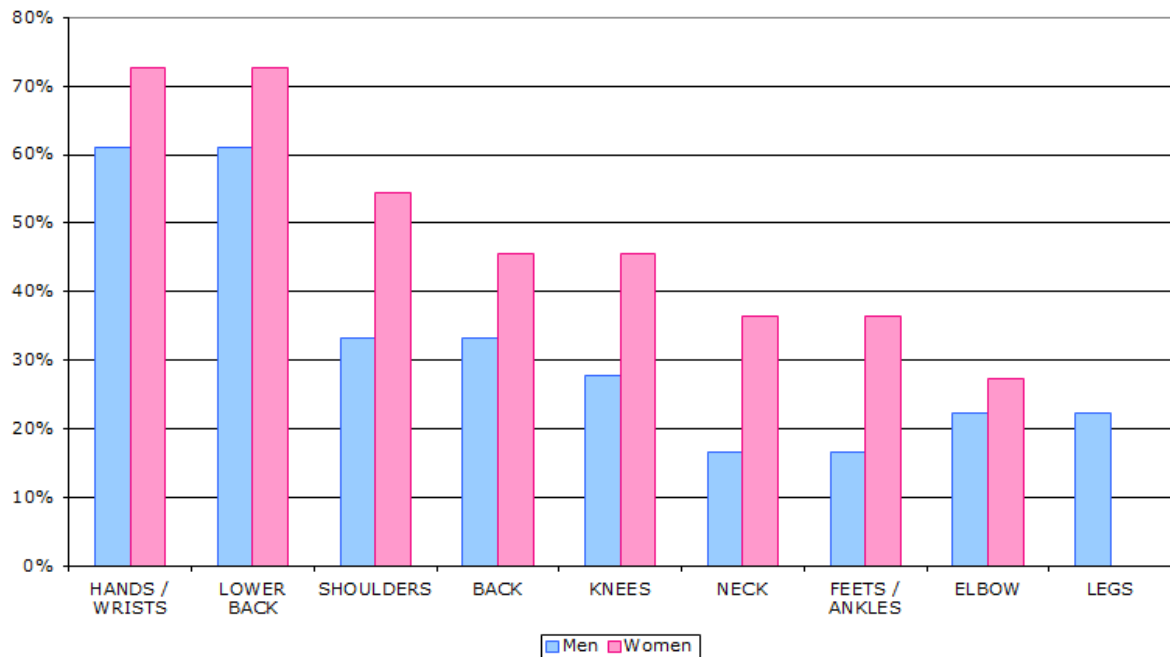
At first sight, the worsening health statistics, and in turn production statistics, could be attributed to the women employees, as they were the ones most affected by the disorders and showed the highest level of absenteeism. But was the issue linked to the sex of the employee or, rather, to age and the length of time that the employee had worked in the company? Indeed, the statistics showed that the women who were off work for the longest period tended to be considerably older and to have worked in their current position for a considerably longer time. It was necessary, therefore, to look at the situation in an objective light and to avoid jumping to conclusions based on immediately available statistics.

Health statistics were obtained by an anonymous questionnaire filled in by all employees, and by figures for absence. They show the predominance of the disorders in the finishing workshop. In five years, this workshop was responsible for 35% of the sickness absence figures, even though it accounted for only 27% of the company's employees. Figure 1 provides an overview of the sickness-absence patterns of the finishing department.

The role of finishing assistant seemed to be particularly affected. Representing 39% of the workshop's staff, this job was responsible for 68% of days off, 88% of accidents at work and 100% of the occupational illnesses in the workshop.

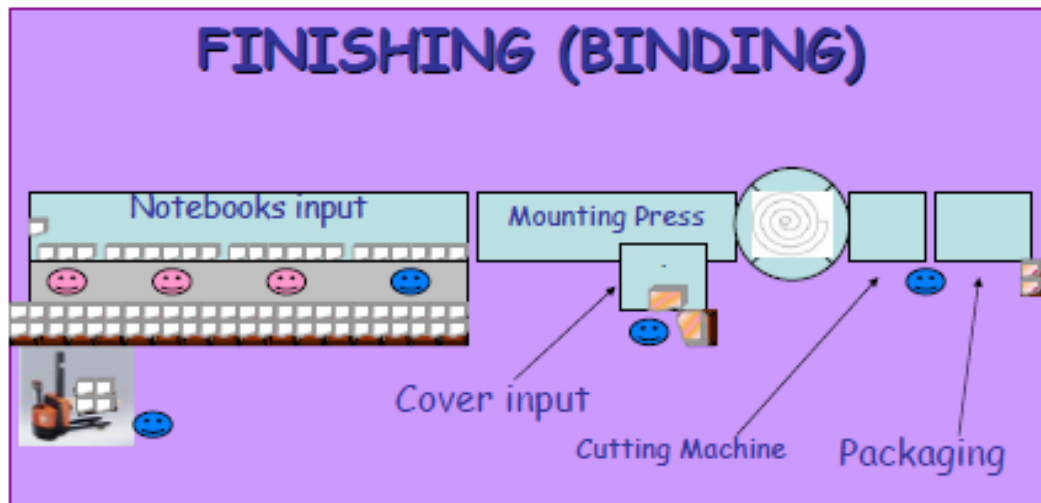
The analysis of the questionnaire showed a disparity between men and women. Men were affected by the conditions when they were young, while they tended to appear with women after 40 years old, reflecting the ages present in the workshop. Further, men and women tended not to hold the same positions and were, therefore, subjected to different working conditions.

Figure 1: Disease location in the finishing department workforce, by gender (December 2009)



Within the company, the finishing assistants tended to be women, while the machine operators were exclusively men. Indeed, the work of finishing assistants was particularly punishing because of the postures they were required to adopt. These were linked to: the nature of the products worked on; space management; the strain required to lift heavy loads (up to 11 tonnes per worker per day); and the way suppliers packaged the booklets. Figure 2 shows the production line for the finishing department.

Figure 2: The production line of the finishing department



Overall, the finishing production lines were all organised according to the same format:

1. a warehouse labourer (a man) brings the booklets to the machine feeders, which will be formed into books;
2. these machine feeders, also known as finishing assistants (a single man if the book is not thick, accompanied by women if the book is a thick one) supply the splicer, which puts the booklets together;
3. a machine operator also keeps the machine supplied with covers;
4. a guillotine operator cuts the books to the appropriate dimensions and packs them into palettes ready for transport.

Women occupied very specific positions characterised by the need for repetitive actions, bearing of weight and the adoption of constricting postures (see Figures 3 and 4).

Figure 3: Repetitive actions



Figure 4: Constrictive postures



Here we see the motions required of staff when loading the machine with the printed booklets, and 'arms in the air' work.

The work done by female workers also involved carrying loads: some of the printed booklets formed into 'cartouches' or 'bricks' weigh up to 35 kg. During ARACT's observations, the cartouches weighed 20 kg; the operators picked up one every 45 seconds, coming to around 11 tonnes per worker per working day (see Figure 5).

**Figure 5: Physical strain on the production line**



The work of the operators was also marked by difficulties in reaching the bottom of palettes when they were close to empty.

It was clear from the studies that the workforce could be divided into two distinct populations: men, many of whom were young and new to the company, and women, who were considerably older and had spent longer with the company.

Looking at ages and lengths of time spent at the company, we see that the company had developed a tendency in the recent past of recruiting younger men, in particular for positions as machine operators.

A more in-depth look shows that the majority of women working in the company occupied positions as finishing assistants, while men tended to have more senior roles that involved less physical strain.

The absence of potential professional development for women also seemed to be a factor in the prevalence of these conditions among women. Indeed, the majority of the women in the workshop had never been promoted and many had, therefore, endured the strains of their jobs for more than 15 or even 25 years. At the same time, the men, many of whom were hired initially for the same jobs as women, had ended up being promoted to machine operators, where the occurrence of these conditions was less prevalent.

### **What was achieved**

Various 'standard' ergonomic solutions were put in place to reduce the physical strain among finishing assistants.

- The work in the preliminary stages with the booklet suppliers was adapted so as to combat the risks at source: reducing the size of the cartouches, reducing the height of the palettes, reducing the depth of the palettes, inserting dividers fitted with handles to facilitate access to the final layers of booklets in the palettes.
- A process of reflection is ongoing with one of the booklet suppliers to install a palette turner at the exit of the presses so as to reduce the extent to which the cartouches have to be moved before being put on the assembly line, thus reducing the strain required of workers.
- Modifications to the workshop were made, in particular regarding the storing of the palettes; a store over several levels was installed and freed up space on the factory floor: this allowed new solutions for the positioning of workstations (rotating platforms for the palettes, and the possibility to work either side of the assembly line).

Further proposals were made concerning improvements to the career development for the women.

The project has stimulated change in the way members of staff are represented, notably permitting voices to be heard regarding the pain caused at workstations (work had been assessed according to out-of-date criteria) and, above all, improving the representation of women.

Indeed, the company became aware that the absenteeism that was widespread among women, and their susceptibility to MSDs, was due not to their gender but to the working conditions they were particularly exposed to, and to the complete absence of career development.

Some months after the observation, a new position — that of ‘assembly operator’ — was created. This has meant that the skills developed by the female staff were recognised and this would allow them to develop for positions of greater responsibility. Regarding the question of promoting the women to other positions, the company has become aware of the issues, in particular those relating to the ageing of its workforce. A special study on these questions was proposed.

### **Success factors**

The broad approach to risk assessment, looking at organisational issues as well as specific tasks and equipment was crucial to uncover the root causes of the MSDs and therefore the gender differences.

The training phase for the steering committee on MSDs was extremely important because it allowed everyone around the table to take on board just how complex prevention-related issues are, and to put paid to hasty conclusions about their causes.

ARACT’s feedback was a chance for the steering committee to combat myths such as the ‘fragility of women at work’. It was demonstrated that the working conditions these women endure are not the same as those that men experience, and that the strain of work was more severe for them than for their male counterparts.

This fact led to a rethink of the company’s human resources (HR) policy and allowed the company to combat issues at source.

The involvement of both the management of the company and the workers themselves was a great source of success for this initiative.

### **Transferability**

The concept is transferable to other enterprises. Indeed, it is crucial to look at the totality of working conditions for women so as not to focus uniquely on the risks they are exposed to, but also why they are the ones who are the most exposed. Professional development plays an important part, and there are many organisations where, for one reason or another, women stay in one post, without promotion or a change in duties or tasks, which can be at the root of an acute increase in certain health risks.

### **Further information**

ANACT: <http://www.anact.fr/>

### **References and resources**

Quand la pénibilité n’est pas affaire de sexe: [http://basse-normandie.anact.fr/portal/page/portal/DETAIL/SWAM\\_3\\_PORTAIL/CAS\\_ENTREPRISE?p\\_thingIdToShow=16405560](http://basse-normandie.anact.fr/portal/page/portal/DETAIL/SWAM_3_PORTAIL/CAS_ENTREPRISE?p_thingIdToShow=16405560)

Gender equality, occupational health and working conditions in France, Florence Chappert, ANACT - French national agency for the improvement of working conditions. ETUI Conference on the European Health and Safety Strategy 2013-2020, 26-27 March 2013, Brussels. Available at: <http://www.etui.org/content/download/8715/81731/file/Chappert+en.pdf>

MSD prevention — Working with chronic progressive diseases: outcomes of two projects on Health at Work in France. Anne-Marie Nicot, Eric Peltier and Dominique Baradat. EU-OSHA Seminar on women at work — Raising the profile of women and OSH, 9-10 December 2010, Brussels. Available at: <https://osha.europa.eu/en/seminars/seminar-on-women-at-work-raising-the-profile-of-women-and-occupational-safety-and-health-osh/speech-venues/speeches/spspeech.2011-08-25.5402393325>

## 5.2 Supporting women employees and a family-friendly company culture, Germany

### Organisation involved

ConSol\* Consulting and Solutions Software GmbH

### Key points

- A medium-sized company that supports work–life balance for all employees, both female and male, through its corporate and management culture
- An organisation in which equal opportunity is an integral part of its corporate culture
- A strong focus on ‘women’s issues’, which includes health and well-being and the advancement of women within the organisation
- Reconciling women and a family-friendly working environment with operational interest
- A strong focus on worker participation, including a separate forum for women
- A participative approach to health and well-being which takes account of the needs of both women and men
- A women’s forum for discussing issues, including OSH issues

### Introduction

Consulting & Solutions (ConSol\*) Software GmbH is a well-established and growth-oriented high-end information technology (IT) consultant and software development company that was started in 1984. It provides expert consulting and uses latest generation software technologies in its operations. Its head office is in Munich, Germany, with subsidiaries in Austria, Poland and the USA. The organisation is medium sized, employs around 180 persons and emphasises organic growth in all areas of its business. The IT sector is male dominated and ConSol\* wished to recruit and retain more women workers.

### Aims

By allowing employees flexibility and ownership in their work patterns and influence over their working conditions, ConSol\* hoped to gain employees who are not only loyal, but display creativity, competence and motivation, which are essential assets for an organisation operating within IT.

### What was done, and how

‘We learned at an early stage that economic success and a family-friendly company policy are not mutually exclusive but positively complement each other and make a positive overall contribution to the success of the company.’ (Dr Ulrich Schwanengel, founder and chief executive of ConSol\* Software GmbH)

#### *Holistic approach*

ConSol\* takes a holistic approach to its business practices, which entails linking its economic drivers to its personnel drivers. To assist with this approach, ConSol\*’s company culture has the individual as a key concern, with equality of opportunity as one of its core components.

ConSol\*’s corporate culture is based around three robust principles:

- equal opportunity;
- work–life balance;
- transparency.

These principles exist to ensure continuous improvement in its working practices, through the following processes and procedures:

- flat system structure;
- family-friendly focus;
- objective performance measures;

- flexible working models;
- vocational training;
- mentoring;
- democratic management;
- management by objectives;
- communication;
- participation;
- health and well-being;
- developing technical expertise;
- ensuring the development and promotion of women within ConSol\*:
  - recruiting qualified women;
  - integration of new women employees;
  - vocational training;
  - personal development of highly qualified women;
  - pay and employee benefits based on performance;
  - women's forum.

This description focuses on the work–life balance and health and well-being elements and the process to provide opportunities for women to discuss issues of importance to them.

#### *Flexible working models*

The working patterns that are available to staff are diverse and include flexitime, working from home, job sharing and parental leave. Even when on parental leave, employees have the option to work part-time or job share. Couples can share jobs also if they are on parental leave. Wherever possible, ConSol\* tries to accommodate parents when proposing working hours and methods. These patterns are used successfully within the organisation and benefit the crossover between work and family. The patterns are not limited solely to the office/home environment: if employees are away on business or seconded abroad, the individual employee's private circumstances are considered when making any decisions that might impact on their work patterns.

The flexible working hours do not have a core period and employees are allowed to work to suit their own way of working, while ensuring that they complete their tasks and attend any essential meetings. If a project requires more intense hours, then this is done with employees taking a break once the project is finished. Employees who live further away are allowed to work from home, while others who wish to pursue another activity can work a set pattern or on weekends. Sabbatical leave is also available.

One specific example of these flexible patterns involves two employees whose wives' jobs were transferred to the USA. The employees worked for the USA's subsidiary, ConSol Inc., doing the night shift for the 24/7 European support.

Employees can also bring children and pets into the office if required. Lunch breaks can be extended to cope with any care situation that may arise unexpectedly, to do with children or elderly relatives.

#### *Management by objectives*

Targets are clearly defined, but employees have the freedom to choose how to accomplish the goal. This freedom includes the scope of working hours in which the targets can be achieved.

#### *Family-friendly corporate culture*

In support of the family-friendly focus of the organisation, employees bring their families to the summer party and to the Christmas celebrations.

#### *Communication*

The organisation ensures that employees regularly receive information on the topic of 'Work and family', such as state benefits for parents (parents' money) and daily allowances for child care. Employees also have the opportunity to take part in seminars about reconciling family and work.

The internal communication platforms include an employee newspaper, an intranet and a ConSol\*-Wiki.

### *Health and well-being*

Health and well-being are integral to the organisation's holistic approach to its business practices. Employees work together to set the operational health policy. Employees are involved in developing the practices of maintaining healthy staff. They include the organisation of sporting activities which can be described as more male-orientated, such as football, and more female-orientated, such as yoga classes, on the premises.

Ergonomic improvements which benefit both female and male employees include ergonomic furniture, such as adjustable desks (Figure 1) so they can stand and work if required, which is good for the back, and dynamic sitting and back-muscle training (BAuA, 2008).

**Figure 1: Employee using an adjustable desk**



Source: ©INQA/Uwe Voelkner

### *Women's forum*

Female employees are represented on the organisation's working group on strategic corporate decisions. In addition, there is a women's forum. The women's forum is part of the measures to ensure the development and promotion of women and was initiated by ConSol\*'s female employees. The women meet on an irregular basis to discuss women's issues and any problems that arise. This can include health and safety issues, which may be general issues related to all workers or more specific issues for the women workers. Female employees have their own mailing list to exchange ideas between the women's meetings.

### *Feedback about the effectiveness of the measures from the women*

The organisation receives feedback on its processes by a regular administered internal grass roots questionnaire, which gives employees the opportunity to offer constructive criticism and put forward proposals for improvement.



### What was achieved

- The absenteeism rate is below the national average.
- Across the organisation, there is low turnover of staff as employees remain with the organisation over the long term. Employees remain strongly loyal to the company. The organisation finds it easy to recruit new staff, especially as the first-class employees attract further excellent employees.
- The organisation has a supportive working atmosphere and increased application and commitment amongst staff. There is increased employee motivation and contentment.
- The organisation shows increased productivity and has better innovative ability.
- The organisation has improved its company's image, which is shown in the positive perception of the company amongst the public and customers. The organisation has a high quality of work and high customer satisfaction.
- In 2008, the organisation received the Bavarian State Ministry for Employment and Social Structure, Family and Women's Affairs award for the promotion of women's prospects. ConSol\* was recognised for its innovative and forward-thinking policies and arrangements for equality in all areas of an IT corporate and management culture. One reason for the award was that ConSol\* showed that a women- and family-friendly working environment can be reconciled with operational interests.
- ConSol\* also secured the first place (in 2007) and the second place (in 2008) in the 'Best Workplaces in Europe' competition and in 2008 was presented with the special award 'Credibility', in recognition of the company's excellent results in the communication culture category.
- In 2008, ConSol\* was awarded the German Employee Health Award by the European Commission and Federal Association of Company Health Insurance Funds (BKK) for the company's outstanding achievements in promoting employee health.

When it won the Bavarian award for the promotion of women's prospects, ConSol\* took the opportunity to give all ConSol\*'s women employees multidisciplinary vocational training. This was in the form of a joint seminar that covered gender-specific behaviour patterns. The participants were very receptive towards the seminar.

### *Future development*

As part of its planned measures to promote highly qualified women, ConSol\* wishes to install an internal nursery on the company's premises.

### Success factors

- There is respect for staff's individual needs.
- A high level of management commitment and credibility exists.
- The management's work is transparent and the organisation ensures that there is an ongoing scrutiny of management.
- A set and transparent reward system contributes to motivation for everybody.
- The need for flexible working was prioritised and the concept of flexibility is broad.
- Regular communication is maintained and allows the employees to know what is going on within the organisation.
- The forum for women ensures that they have additional space to discuss and raise issues.
- Worker participation is strongly promoted, and the needs of women and men are looked at regarding health and well-being measures.

### Transferability

ConSol\* is a medium-sized organisation and many of its working practices could be transferred easily to other SMEs and to other EU Member States. The focus of what the organisation does to maintain a family-friendly work environment is worker involvement. This is a principle in which many organisations should engage to achieve staff loyalty and improve employees' well-being.

It is relatively inexpensive to involve workers within the organisation, such as setting up a working group, as ConSol\* did to monitor organisational strategy. The costs would become more significant if continuous training programmes and supporting health campaigns are put in place.

### Further information

ConSol\* Software GmbH: <http://www.consol.de/>

### References and resources

BAuA — Bundesanstalt für Arbeitsschutz und Arbeitsmedizin, *Up and down — up and down. How dynamic sitting and standing can improve health in the office*, Dortmund, 2008. Available at: <http://www.baua.de/en/Publications/Brochures/A65.html>

Bergemann, A. and Riphahn, R., 'The introduction of a short-term earnings-related parental leave benefit system and differential employment effects', August 2010. Available at: [http://www.lsw.wiso.uni-erlangen.de/userfiles/team/riphahn/Sch\\_JB.pdf](http://www.lsw.wiso.uni-erlangen.de/userfiles/team/riphahn/Sch_JB.pdf)

ConSol\* Software GmbH, press release. 'ConSol\* ranks again among Germany's Best Employers'. Available at: <http://www.consol.com/news/consol-ranks-again-among-germanys-best-employers-2/>

INQA.DE — INQA Initiative Neue Qualität der Arbeit, *Talente Gewinnen, Teamwork Fordern* (Attract talent, promote teamwork). Available at: [http://www.inqa.de/SharedDocs/PDFs/DE/Gute-Praxis/Unternehmensportrait-ConSol.pdf?\\_\\_blob=publicationFile](http://www.inqa.de/SharedDocs/PDFs/DE/Gute-Praxis/Unternehmensportrait-ConSol.pdf?__blob=publicationFile)

INQA.DE — INQA Initiative Neue Qualität der Arbeit, *Unternehmens-Beteiligung: Das Münchener IT-Unternehmen ConSol\* hat ein Beteiligungsmodell entwickelt, bei dem alle profitieren*. Available at: <http://www.inqa.de/DE/Lernen-Gute-Praxis/Top-100-Gute-Unternehmenspraxis/Personalfuehrung/ConSol-Unternehmens-Beteiligung.html>

INQA.DE — INQA Initiative Neue Qualität der Arbeit, *Praxisbeispiel. Work-Life-Balance — Erfolgsformel für zufriedene und hochmotivierte Mitarbeiter bei ConSol\* Software* [Practical example. Work-life balance — success formula for content and highly motivated staff at ConSol\* Software]. Available at: <http://www.inqa.de/DE/Lernen-Gute-Praxis/Top-100-Gute-Unternehmenspraxis/Personalfuehrung/ConSol-Work-Life-Balance.html>

## 5.3 Gender mainstreaming in the risk assessment of psychological stress, Germany

### Organisations involved

- Sujet GbR Organisationsberatung (organisational consulting)
- Hans Böckler Foundation, ver.di (multi-service trade union)

### Key points

- Interventions in three companies showed that significant stereotypes of masculinity and femininity existed in all of these organisations. These attributions describe women and men incorrectly in many cases. Existing skills are not perceived, not used and not accepted. This affects the development of professional opportunities, the evaluation of job performance, the assessment of workloads and the availability of resources.
- By looking at gender differences in jobs, roles, expectations on performance and assumptions, and the existing resources and managerial support for tackling the problems that they give rise to, stress could be more effectively controlled for women and men.
- Ways also had to be found to overcome women's reluctance to speak up about problems.
- Using the experiences, a practical guide was published which describes the steps of the project and provides information about gender mainstreaming in the risk assessment of psychological stress and how to develop solutions.

## Introduction

Psychological stress factors include the organisation of work, cooperation, leadership, dealing with customers, cohesion among colleagues, career opportunities and much more. Because of gender differences men and women may have different working conditions in the same company, or experience those working conditions differently, or carry out the work differently and/or experience the work differently even if they have the same job.

Experience with the integration of gender perspectives in other fields of activity has shown that the concepts and practices must change if existing gender relationships, with their discrimination and distorted perception, are to be changed in order to control risks more effectively for women and men. To properly tackle work-related stress for both women and men it is necessary to recognise assumptions regarding how women and men experience their work, and, instead, look at how women and men really experience their work and how it really affects them and the differing expectations placed upon them, and the differing recognition of their problems and availability of support.

## Aims

Gender mainstreaming as a key strategy process is based on the following objectives:

- improving the participation of women and men in the company;
- improving the capabilities of men and women;
- reducing gender gaps and stereotypes.

These goals of gender policy should also be applied to risk assessment in order to organise working conditions that are more humane, reduce loads and enhance organisational resources/management support to effectively tackle problems.

The aim of the project was, firstly, to explore the links between perceptions of gender roles and work-related stress and the availability of resources and managerial support to address the problems that they give rise to. Secondly, on the basis of the study and the methodologies developed and used in the study, the aim was to develop practical approaches and guidance on carrying out a risk assessment for psychological stress from a gender perspective. Thirdly, the study was to be used to provide practical examples and suggestions, advice and experience for the guide. Finally, the practical guide aims to provide motivation to adopt this approach and show that it is not only easy but also quite practicable.

## What was done, and how

### *The study*

The project 'Gender/Stress', which was carried out from July 2007 to September 2009 by Sujet and was funded by the Hans-Böckler-Foundation and ver.di. The project was carried out in three organisations: a clothes store, a tax office and an IT/telecommunications company.

The study was able to show that requirements and framework conditions of work in the same organisation can have a different effect on workloads and resources for women and men. In the project, gender roles were evaluated in terms of mental stress and resources through interviews and questionnaires.

In the three organisations, employees were interviewed about their concept of gender and work-related stress and organisational support.

Results showed that the images of masculinity and femininity that exist in society are also reflected in the businesses taking part in the project in terms of stress and resources. Femininity was, for example, associated with kindness, weakness and communication skills, while masculinity was associated with assertiveness, career interest and technical competence. These attributions incorrectly describe women and men in many cases. These images often do not match the reality: certain demands and loads are not perceived or others are overvalued.

It was shown that gender roles had a significant impact on the actual characteristics of the workload for women and men. At the same time, these gender roles characterise what is perceived as a load and what is taken for granted; as they are 'normalised', they are regarded as unproblematic. If existing

skills are not perceived, not used and not accepted this affects the development of professional opportunities, the evaluation of job performance, the assessment of workloads and the availability of resources.

Key elements of stress were found to be underestimated, such as that suffered by the shop assistant dealing with difficult customers, yet who is expected by their employer to remain friendly at all times (an example of emotional labour) and also thought not to need support as she is by nature capable of dealing well with such customers.

The results of the interviews with the employees led to an intense debate about gender roles in the workplace. It was anticipated that during the process some stereotypes could be explored. On this basis, three different approaches to psychological stress and resources were developed or adjusted to each company for the process of risk assessment, according to the needs and requests of the company.

- In the department store for clothing, a survey was designed and a questionnaire developed that matched the needs of the business.
- In the tax office, workshops for managers and employees regarding individual workload and resources issues were arranged. Thereby, the problems were described in detail and measures for improvement were developed.
- In the IT/telecommunications company, the ongoing restructuring was seen as a major burden. Workshops were carried out on dealing with change processes, and recommendations for changing practice were developed.

#### *Developing the guide*

The results and experiences gained during the study were used for the development of a guide on risk assessment for work-related stress from a gender perspective. The risk assessment process and recommendations described in the guide are based on the practical methodologies developed and tested in the three organisations during the study. The results of the study were also used to provide concrete examples of the differing gender-related stress issues and how the implementation processes worked in three companies. Key recommendations include: measures to obtain worker views and facilitate worker involvement that address the fact that women may be reluctant to put forward their views; having HR personnel who deal with equal opportunities involved in the stress working group; and gender competence of those involved as a precondition for risk assessment.

#### **Examples of gender stereotypes, biases in the perception and evaluation**

The project 'Gender/stress' formulated the gender perceptions of respondents, for example men being the breadwinners. However, the fact is that many women are the sole or the main earner. However, career advancement opportunities for women were worse than for men, as the view prevailed that advancement was more important for men. Therefore, fewer promotion opportunities is a greater burden for women than for men. This scenario is a burden for both women and men:

- women are disadvantaged in career development;
- men are under increased pressure to progress.

#### *The guidance on gender mainstreaming in stress risk assessments*

A summary of the process of gender mainstreaming in the stress risk assessment described in the guide is given below.

Before the risk assessment

A. Check the initial situation

At first it is important to clarify which structures and experiences exist in the company using risk assessment. The conditions for the health of employees are examined and improved, and the inventory could reveal weaknesses in the operation, in which the work could be organised better or aligned more clearly to the customers or clients.

## B. Create structures

The entire process will be more useful for the organisation and employees if a steering group is in charge of the process. From a gender perspective, many different perspectives of the organisation should be represented in the control group. This is to avoid the dominance of certain perspectives (such as those of technical OSH, the management or the long-time members of the works council) within the process.

This group should include people from different divisions of the organisation. However, it would be useful if the group includes the following:

- representatives of the employer;
- works council;
- professionals for OSH (company medical officer, specialist for OSH);
- equal opportunity commissioner;
- human resources (HR) managers;
- representatives of middle management.

## C. Gender competence of those involved as a precondition for risk assessment

For conducting a risk assessment that promotes gender equality, the development of gender expertise among stakeholders is necessary. This means that those who control the process need to understand how workloads and resources are influenced by gender distribution and stereotypes. They need knowledge and skills regarding how the risk assessments can be controlled, so that gender-related misinterpretations are avoided, equality between the sexes improves and the scope of action for women and men is extended. This is not a one-off process of learning; the examination of gender role models is an ongoing, lifelong process.

## D. Information and participation

Employees should understand what is now happening in the organisation and what purpose these activities serve. Thereby, reservations and mistrust of the risk assessment approach should be avoided or reduced.

Participation, from a gender perspective, is the core aspect of gender-sensitive risk assessment. The 'right' type of participation is also the main factor in the success of risk assessment. The whole process will only succeed if the employees are recognised for their work as the real experts for workloads and resources.

### *The process of risk assessment*

#### A. Formulate objectives

At the beginning of the process, the parties should agree on the aims of the risk assessment. Improving gender equality is already in itself a significant aspect of the improvement of working conditions. At the same time, risk assessment is also an excellent opportunity to examine and refine gender equality in the organisation.

#### B. Detect hazards (questionnaire, workshops/health circle, interviews)

The next stage of the project is to get a comprehensive picture of the workloads and resources. At present, there are no methods or procedures for detecting hazards that take gender sufficiently into consideration. The advantages and disadvantages of any method or procedures to detect hazards should be taken into account from a gender perspective. The findings of the examination of gender role models are to be integrated in the approaches and methods. Before deciding which method or procedure measures are appropriate, their impact on workloads should be debated. Previous experiences and the reflection of gender roles should be consulted. This step in the process is often considered the 'actual' risk assessment. Certainly it is a very important step, but meaningful results and developments will be accessible only if the other process steps are well integrated. The following methods are applicable in finding out individuals' perceptions of the issues: surveys, workshops/group discussion/circles and face-to-face interviews.

### C. Evaluate results

The next step involves the screening and evaluation of the previously collected information. A summarised assessment of the workload and resources must be created. The operating parties have to agree on a joint assessment. This is the basis for all further steps.

### D. Develop measures

Based on the evaluation of existing workloads and resources, new measures are to be developed that lead to an improvement of the situation. The measures should, in terms of the stated objectives that contribute to reducing the workload, work towards strengthening the resources and consolidate equality in the operation. The combination of the two aspects of assessment and development is a useful one, since the pursuit of one objective can support the other objective. The themes that have become visible and are discussed through the gender perspective are an important basis for the development of measures. As an orientation for the development of measures, the aim to expand the scope of action for women and men should apply. Conversely, those measures that confirm and consolidate gender roles and attributions should be avoided.

### E. Implementation of the measures

Multiple stakeholders operating at different hierarchical levels should now implement the measures. Everyone should be able to participate in the planned action, including part-time personnel. It is helpful to appoint a commissioner for the implementation and to create a task and time schedule. The commissioner shall periodically review the status of implementation.

### F. Evaluation

After an agreed period the measures have to be verified. The approach described here leads to two important questions for the evaluation:

- To what extent has the well-being/health of employees improved?
- To what extent have gender roles changed?

To answer these questions, concrete goals need to be formulated in the beginning. The main criteria for the evaluation should already be included in the formulation of the aims. The formulated objectives should be accessible, concrete and measurable. A comprehensive evaluation may also constitute the entry into a new risk assessment by focusing on new workloads or resources, or needs for improvement in the proceeding risk assessment. With the completion of an evaluation, the date for a new risk assessment should already be set.

### G. Documentation

The documentation must be designed so that even people who did not participate in the risk assessment can understand it after several years.

#### *Appendix of the practical guide*

The practical guide contains an appendix that discusses the following topics:

- checklist on gender in the company/administration;
- participation of the works councils and personnel board;
- criteria for the assessment of mental stress;
- guidelines for the verbalisation of targets;
- methods of assessing mental stress.
- 

#### **Extract from the guide: checklist on gender in the company/administration**

The following questions will help you begin to explore the process and make visible the operation of gender roles and images.

##### Operating structure

- What departments are there?

- How are the families represented in the departments?
- In which departments are women mainly working, and which are predominantly men?
- What work is done in the respective departments?
- What is the reputation of the departments in the company?
- What work is recognised by the company? Which departments will be considered as particularly important and which as less important?
- Is there evidence of why the sexes are unevenly distributed?

The following questions may be answered for the entire operation or in relation to individual departments:

#### Hierarchy

- What hierarchy levels are there?
- What is the distribution of women and men in the hierarchy levels?
- Is there evidence of why the sexes are unequally distributed?

#### Labour requirements

- What are the main requirements of work here?
- What things are expected without anyone thinking about it?
- Sometimes it is said: 'If you cannot/like/want this or that you cannot work here — why could this be?'

#### Gender roles

- Are there things that women or men are better at here or with whom they get along better?
- Are there tasks/areas of work where more women or more men are employed? Why is that?

#### *Some practical examples from the study included in the guide*

In the *clothes store* the professionalism consists of dealing with clothing and the presentation of products and giving advice to customers. These competencies are more likely to be attributed to women. The gender role image means that all assume that women already possess these skills. They are so self-evident that the stresses connected are rarely discussed; after all, the saleswomen opt for this job. However, there is stress from the emotional work involved.

It requires constant friendly contact with customers. If a salesperson is annoyed or feels offended by a customer, they cannot show it. So they hid their feelings and must exhibit other feelings. This is exhausting and can lead to stress.

In the clothing store a particular burden to be addressed is difficult situations with customers. Female employees are more likely to experience bad treatment by customers. This should be handled by different measures:

- Executives, especially of the divisions, now learn about this stress factor. The managerial staff should learn to recognise this situation, when to intervene and how to support the employee. A bad customer experience affects the ability to receive the next customer in a friendly and open way.
- The employees explore these situations in workshops. They describe what they experience and what exactly could help them.
- Emotionally demanding work is addressed in various meetings and at different levels in the company. This recognises that the topic plays a major role.

At the clothes store the steering group studied the problem of stress from dealing with customers and provided ideas on what should be considered from a gender perspective in the process:

The majority of employees are women, most work part time and the salary alone is not sufficient for living, and instead merely contributes to the household income. Many women are reluctant to voice difficulties and do not respond directly.

After the information session, the feedback of the employees was taken and the targets revised again:

- The target is to investigate the specific loads of men and women on the sales floor.
- Dealing with customers is checked.
- The impact of the opening times on the way of life of employees is discussed.
- The same promotion and further development opportunities for women and men should be created.
- Meetings and forms of communication should be developed to appeal and be accessible to all.

On the contrary, identifying that women find it difficult to cope with demanding customers should not result in the conclusion that it is actually easier for the male colleagues. Instead, the approach should be to eliminate the source of stress or strengthen the resources that can reduce the stress.

At the *tax office* the first inventory did not provide a very good picture of executives. They were often regarded as uncommunicative and unsupportive. It also became clear that important stress factors such as how to deal with weaknesses, errors and excessive demands had much to do with the behaviour of managers. Executives themselves were therefore involved in the next step of the risk assessment and involved managers. Executives and employees developed their view of the problems. During exchanges it was observed that many views differed less than previously thought. Managers were able to communicate and cooperate with employees. This allowed common approaches to be developed for improvement.

**Criteria for the recognition of psychological stress given in the guide include:**

This listing provides an orientation as to which subjects should be considered in the hazard assessment training.

Work task

- Professional, methodological, social and emotional needs
- Diversity
- Responsibility for people, property and goals
- Manoeuvre
- Wholeness
- About call
- Underuse
- Development opportunities
- Relationships with external (customers, clients, etc.)
- Appearance
- Meaningfulness
- Uniqueness

Labour organisation

- Timelines
- Control forms (goals, budgets, etc.)
- Personnel assessment
- Working time
- Participation
- Design their own jobs
- Availability of information
- Interruptions
- Power and control behaviour
- Boundaries between life and the world of work

Social relationships

- Communication
- Feedback
- Social climate with colleagues
- Social climate with superiors



- Support from colleagues
- Support from supervisors
- Conflicts
- Changing jobs
- Error culture

### **What was achieved**

The results in the organisations included in the study included the following:

- Sensitivity to the importance of gender in terms of stress and resources.
- Awareness of different scopes of action and workloads for women and men working in the same job.
- Recognition that the core requirements of a profession/work task are taken for granted and very closely associated with gender role perceptions and stereotypes.
- The issue of existing workloads are generally difficult to broach within the organisation and it would not have been recognised and dealt with without the focus on gender.
- The managers at various levels often also experience stress. This circumstance should be considered in the processes.
- In one company an existing questionnaire ('IMPULS Test' — a method for the analysis of stress) was extended to include missing gender aspects
- Qualitative interviews are suited to gain information that ensures the visibility of workloads and resources, which are otherwise not perceived due to gender stereotypes
- It could be shown that for all aspects (job demands, work organisation, social relationships, social environment) the dimension of gender plays a role. Assumed female attributes such as attractiveness, emotionality, fear of attacks, are not yet recognised, undervalued or insufficiently considered a strain on the individual. Meanwhile, characteristics that are associated with male attributes are generally rated higher than those attributed to female attributes, such as assertiveness versus friendliness.

### **Problems faced**

The following problems were encountered in the organisations that took part in the study:

- The assumptions in the participating companies that gender is not an issue, that it is all about skills, and that men and women within a department have the same workload.
- The difficult economic situation of companies.
- Little in the way of time and personnel resources for the process (other issues being deemed more important).
- The complexity of the topic: stress affects all divisions across an organisation and is usually combined with other operational processes, which have to be handled together. Cross-departmental thinking and working could contribute to a high percentage of employees experiencing higher levels of job stress, running counter to corporate policy. For example, a human resources concept was developed parallel to the project for stress without coordination between the two in one organisation.

### **Success factors**

- Openness of the participants/no prejudices against the topic of gender and stress.
- Support through works councils and trade unions.
- The topic of stress made accessing gender issues more approachable.
- Plenty of participation and publicity on the themes, outcomes and processes in the company.
- The determination of the participants to continue with the initiative, ability to see and organise complex processes, ability to see and use the connection between topics.
- An interest in reducing stress and improving the working conditions for all employees.

- A guide based on real interventions, which therefore has validity.

### Transferability

Recommendations for the approach to mainstream gender into the risk assessment of mental stress have been developed; these can be considered as highly transferable to other companies. This applies especially with regard to the following:

- the inclusion of diverse players in the process control;
- the consideration of work strains and resources from managers in the risk assessment and the development of measures;
- the discussion on gender roles in the organisation at the beginning of the process;
- the importance of participation and the use of gender-sensitive methods;
- the extension of the objectives for risk assessment for the purpose of gender equality;
- the relevance of qualitative methods (interviews, workshops/circle/group discussions) for the evaluation of psychological workloads and the development of measures;
- the relevance of the assessment of the evaluated workloads and resources including the gender roles in the organisation;
- the development of measures based on these findings, which try to change the existing gender stereotypes.

### Further information and resources

Sujet GbR Organisationsberatung: <http://www.sujet.org/>

#### Brochure

Hans Böckler Foundation, 'Arbeitsbedingungen beurteilen — Geschlechtergerecht. Gender Mainstreaming in der Gefährdungsbeurteilung psychischer Belastungen':

[http://www.sujet.org/Handlungshilfe\\_GenderStress.pdf](http://www.sujet.org/Handlungshilfe_GenderStress.pdf)

IMPULS-TEST: <http://www.impulstest.at/>

HIRES, *Health in Restructuring, Innovative Approaches and Policy Recommendations*, HIREs, Rainer Hampp Verlag, 2009.

## 5.4 A positive initiative for female workers' safety in the transport sector at Met.Ro. SpA Group, Italy

### Organisation involved

Metropolitana di Roma (Met.Ro. SpA Group)

### Key points

- The woman-sensitive initiative at Met.Ro. SpA Group (Italy) was in response to a general situation that arose in the transport sector in Europe, in terms of female employment in various subsectors of the transport industry and the poorer working conditions women had to face in comparison with their male colleagues.
- The initiative was the result of a joint approach by Met.Ro. SpA Group and the Italian Ministry of Labour and Social Policies, in terms of both project implementation and the assurance of necessary funds.
- This was the first women-oriented initiative run by the Met.Ro. SpA Group due to the increased number of women (an extra 200) who had been hired as metro station operators. The project goals aimed at improving the skills of the 200 female station operators working in two underground lines of Rome's underground network.

- In essence, the project's objective was to enable the female operators to appropriately manage possible conflicts that may occur in the metro stations between members of the public and metro station operators.
- Among the project benefits were the improved safety at work of both female employees and male employees hired in similar positions, and the improved safety and quality of the services provided by the public transport company.

## Introduction

### *Background*

In general, women's presence in the transport industry in Europe is still low. Studies suggest that women employed in the transport sector experience poorer working conditions in comparison with male workers in similar workplaces. This rendered the transport sector less attractive for women.

### **Barriers limiting women's employment in the transport sector in the EU**

A series of barriers have been identified as the cause for the transport sector seeming less attractive to the female workers. Some of these inequity factors (such as accessing employment, professional training, equal pay and working conditions) were highlighted by the European Transport Workers' Federation (ETF) in 2005.

- Pregnancy and family status: these can have negative effects upon women's recruitment chances and career prospects: employers may fear women taking career breaks due to pregnancy, child care or elder care.
- Family 'unfriendly' working hours are particularly relevant for certain mobile professions where prolonged absences from home are part of the job.
- Significant pay gaps exist because of gender segregation in transport. These might be explained by the fact that male employees occupy mostly technical jobs implying more skills and a higher level of education, while women are predominantly employed in administrative and customer-related services that are less well paid in comparison with technical jobs.
- Women working in the transport sector very often have to adapt to working conditions, working environments and workplace ergonomics that are designed to meet the needs of male workers, who predominate in the sector's workforce. Similarly, OSH-related aspects at the workplaces are mostly male centred, which may result in poorer working conditions for the female workers confronted with similar jobs and work tasks.
- In certain transport subsectors (women driving on the night shift in urban passenger transport, customer-related services, such as underground station operators and airline cabin crew), women are more prone to exposure to external aggression or violence from customers and/or they might suffer from bullying and harassment at the workplace by their work colleagues.
- Discrimination occurs in terms of assigning female workers in the transport sector to a lower workplace status or role, whereas male workers are generally assigned a higher professional status.

Structural changes in the sector have increased employment opportunities for women. For example, this is the result of changes in the transport sector driven by technological progress, an increased demand in transport-related services and more office-based jobs. A response was needed to address the issue of women's increased presence in the transport sector and make the sector more attractive to recruit and retain women workers. Among these gender equality measures to assist female workers' integration into traditional male-dominated jobs was the project that Met.Ro. SpA Group (Italy) initiated and implemented: 'Project of positive action for the safety of female workers in the sector of the Met.Ro. SpA Group'.

The Met.Ro. SpA Group operates the 'A' and 'B' underground lines in Rome and the regional railway services Roma–Ostia Lido, RomaPantano and Roma–Viterbo. When the project was launched,

Met.Ro. SpA had 2,600 employees, of whom about 11% (283) were women (compared with the 39.1% they represented of total national employment). Women mostly worked in two major job categories: office operators (30) and station operators (164), where they comprised almost one-half of the total workforce.

### Aims

- To promote and support an increased female presence within the company, thus improving women's employment in Rome's underground urban transport.
- To provide a better integration of female workers in traditionally male-dominated jobs, for instance as station operators.
- To identify specifically female needs at the workplace in terms of working conditions, the working environment and safer and healthier workplaces.
- To provide better training and improved skills to the female workforce operating within two underground lines of Rome's underground network as station operators.
- To enable the female station operators to appropriately manage possible conflicts that may occur in the metro stations with members of the public in the metro stations, thus avoiding or reducing the risk of violence at work.
- To identify further directions and opportunities, such as workplaces and sectors where this initiative could be successfully implemented.

### What was done, and how

#### General

The regulation of the equality between women and men at work, Law 125/1991 of 10 April 1991, enacted a series of EU guidelines and represented a key point when it came to setting up equal opportunities at work for women. An innovative measure arising from this law provided the establishment of a so-called 'quota mechanism' to foster women's employment in traditionally male-dominated sectors.

Met.Ro. SpA Group launched an initiative for the safety at work of the 200 female workers employed as station operators at its two underground lines and railway stations (Met.Ro. SpA Group 'A' and 'B' underground lines of Rome and the railway stations of Roma–Lido and Roma–Viterbo). This initiative consisted of the 'Project of positive action for the safety of female workers in the sector of the Met.Ro. SpA Group' [*Progetto di Azione Positiva per la sicurezza delle lavoratrici nei settori dell'esercizio di Met.Ro. SpA*]. The company and the Italian Ministry of Labour and Social Policies funded the project as per the provisions of Law 125/1991. The project ran between 2001 and 2002 and aimed to improve their 'skills and competences'. Prior to this period, female workers were quite rare at the Met.Ro. stations. In addition, they were mostly employed in administrative positions. The female workers who took part in the Met.Ro. SpA Group project were on average 27 years old. Some 70% were in the 20–30 years age group, and four per cent were over 40 years old. In terms of educational background, 82% had a secondary school certificate while 18% were university graduates.

The company initiative sought to enable the women to manage the risks of conflict situations that might arise in the underground and railway stations with the public, thus increasing women's safety at work and the quality and safety of the services provided by the company as well.

The Met.Ro. SpA Group project consisted of four main steps as follows:

1. investigation stage;
2. implementation stage;
3. training activity;
4. feedback from the participants.

**Step 1 — Investigation stage** This first stage of the project aimed at identifying the female workers' needs in terms of the competencies and the skills they expected to acquire through adequate training. The 200 workers participating in the project were asked to complete a questionnaire-based survey to

get their opinions on the security standards envisaged, given the particularities of the jobs they had within the company. Follow-up research aimed to identify other relevant experiences in the area in Europe. Information was gathered from the transport sector of EU Member States and countries outside the EU (Croatia, for instance).

**Step 2 — Implementation stage** The second stage of the project involved organising training to cover various relevant topics, as well as training schedules, in collaboration with the lecturers/teachers providing these training sessions.

**Step 3 — Training activity** Training activities were conducted during this phase of the project. These provided practical knowledge and solutions to the participants, thus enabling them to safely manage the risk of conflicts with the public in the underground stations in which they were employed. The participants came up with suggestions and concrete proposals on the follow-up training and on the job-related requirements to be considered in the design of these workplaces. There are some other points related to the training.

- It was delivered by specialists in the local area and supervised by an education coordinator from within the organisation.
- The training content was previously discussed and set up by the company in collaboration with the trade union representatives.
- It consisted of 11 training modules over a two-day period delivered to each of the participants (the female station operators) including: practical approaches and solutions; simulations of real situations; acquiring improved skills in terms of ‘observation, listening and body language’; and better capabilities for evaluating and managing the conflict situations they may face in their jobs with the public.

**Step 4 — Feedback from the participants (female station operators)** At the end of the training stage, the participants were asked to complete post-evaluation questionnaires on behalf of the company to determine to what extent the training sessions met their expectations, their degree of satisfaction with the training, and the usefulness of the knowledge and skills acquired.

## What was achieved

### *Outcomes*

- Improved knowledge and skills for the participants in the project enabling them to successfully manage the risk of critical situations that may arise when accomplishing their work tasks with the public at Met.Ro. SpA Group.
- Safer workplaces for the female station operators in the two underground lines and railways of the Rome network considered in the Met.Ro. SpA Group project.
- Increased safety and quality of the services provided by Met.Ro. SpA Group.
- Successful integration of the female station operators into jobs previously dominated by male workers.
- Better employment opportunities for female workers at Met.Ro. SpA Group and in the transport sector in general.

### *Feedback from the participants*

The participants in the project provided feedback via a questionnaire that they all completed at the end of the training to determine the extent to which the training responded to their job-related needs and expectations.

- Just under half (45%) stated that they were fully satisfied by the course as compared with their work requirements; 54% found the course interesting but only partly suited to their work-related needs, while only 1% gave a completely negative evaluation.
- 82% of the participants considered the training content good or very good while 18% considered it ‘merely sufficient or insufficient’ to their needs.
- In terms of the lecturers’ competency and the student–teacher relationship, 90% of the participants rated them favourably and 94% very favourably.

- Only 67% of the trainees considered the organisational aspects good or very good.
- About 50% of the participants rated the training positively in terms of its usefulness for their job-related problems, such as the management of conflict situations.
- Participants highlighted the possibility that the training gave them the opportunity to share information and exchange experience with their colleagues from similar workplaces.

#### *Suggestions for improvement from the participants*

The participants made suggestions for improvement, such as:

- 'more practical information', especially on ensuring more efficient communication with the public;
- the possibility of providing similar training to their male colleagues at the workplace when confronted with similar risks;
- increased training opportunities to progress their careers and the need for more consistent training stages in terms of the allocated training hours, and more diverse topics to consolidate and improve on the results obtained (the duration of training should be made longer — most of the participants in the Met.Ro. SpA Group project claimed that the duration was insufficient to allow them to acquire all the skills and knowledge expected in their role);
- improving communication between company management and employees.

#### *Social partners' views*

- A positive view was expressed by both the employer, the Met.Ro. SpA Group, and the employees' representatives on the benefits of training to facilitate female workers' successful integration into this job category, which traditionally was male dominated.
- This gender equality action increased the possibilities for female workers' employment in similar positions within the transport sector.
- The employer, Met.Ro. SpA Group, positively appreciated the success of this initiative in terms of raising the company's awareness of female workers' specific needs and the workplace risks they had to face in their day-to-day work. However, the trade union claimed that the duration of the training needed to be increased and that the training approaches offered for certain work-related issues needed to be improved.

#### *Overall achievements*

The Met.Ro. SpA Group project was the first women-oriented initiative developed by the company. Alongside the increase in the rate of female employment in the company, the number of women-oriented actions carried out by the company has increased. In most of the cases, the company encourages further women-oriented actions to address work–family balance issues. This initiative was welcomed by male employees, who received similar training alongside their female colleagues to improve their skills in terms of successfully managing similar workplace risks.

#### **Success factors**

- The commitment of the Met.Ro. SpA Group at the level of company leadership and with respect to trade union representatives and the workers themselves.
- The four-step project structure allowed an adequate approach of the project objectives for the target groups it was meant to address.
- The method used could also be applied to the problems encountered by male workers as well.

#### **Transferability**

The Met.Ro. SpA Group gender-oriented action has a considerable potential for transferability to other job categories of the transport sector in order to make them more accessible and attractive to women, when it comes to dealing with the public and related risk of conflict. Thus, the four-step methodology (evaluating women's job-related needs, organising training, providing training, analysing participants' feedback) used in this project can be applied to any job category in the transport sector that involves contact with the public: railway ticket vendors, for instance, or airline cabin crew.

The training methodology may be easily applied to any other training requirements from different areas and various target groups and not necessarily the transport sector.

In addition, these training stages proved to be beneficial for both the female workers and male employees confronted with similar job-related risks.

#### Further information and resources

ATAC Roma: <http://www.atac.roma.it/>

Corral, A. and Isusi, I., Eurofound (European Foundation for the Improvement of Living and Working Conditions), *Innovative gender equality measures in the transport industry*, Dublin, 2007. Available at: <http://www.eurofound.europa.eu/pubdocs/2007/43/en/1/ef0743en.pdf>

European Foundation for the Improvement of Living and Working Conditions:  
<http://www.eurofound.europa.eu>

European Monitoring Centre on Change (EMCC): <http://www.eurofound.europa.eu/emcc/>

Marta, G. C. and Micocci, E., *Progetto azione positive per la sicurezza delle lavoratrici nel settore dell'esercizio di Met.ro. Spa Company* [Positive action project for safety of female workers in the Met.ro. Company], Rome, September 2002.

Transport Association (Associazione Trasporti): <http://www.asstra.it>

General Confederation of Italian Workers (Confederazione Generale Italiana del Lavoro, CGIL):  
<http://www.cgil.it>

Istituto Nazionale di Statistica (National Institute of Statistics): <http://www.istat.it>

## 5.5 PE corresponding to women's needs at work within various economic sectors — Romania

### Organisations involved

- FORNAX Group
- S.C. MENTOR SRL
- 'Aeroporturi Bucuresti' National Company S.A.
- Romanian Air Traffic Services Administration (ROMATSA)
- 'Henry Coanda' International Airport of Bucharest, Otopeni
- S.C. MarMih SRL
- National Research and Development Institute on Occupational Safety (INCDPM)
- 'Alexandru Darabont' Bucharest (the production unit of protective ointments a

### Key points

- *A wide-reaching partnership approach*, which brought together beneficiaries/women end users from a large variety of economic sectors (such as gas distribution networks, healthcare units, the cleaning services provider of the biggest Romanian airport), a national OSH research unit and PPE manufacturers.
- *The high number of women employed in most of the categories of workplaces* listed previously, with specific OSH requirements demanding increased comfort and a customised clothing design.
- *The increasing number of women working in categories of workplaces*, such as gas stations, that have high OSH risks and specific OSH requirements.
- *A non-discriminatory protective measure addressing both women and men* with better results in terms of skin protection (such as protective ointments with enriched formulas), even if they were initially meant for the female workers only.
- *A close collaboration with a research unit* when it came to improving and adapting the OSH properties of PPE to women's needs.

- *A mainly top-down approach to risk prevention* consisting of management's adequate commitment and actions based on the female employees' specific requirements at the workplace.
- *A high potential for transferability at the national level* to similar services/organisations/companies and other sectors of activity employing a significant number of women.

## Introduction

This case study refers to a woman-sensitive joint approach to safety and health taken by Romanian PPE manufacturers, an OSH research organisation and female end-users from beneficiary companies of various sectors of activity within Romania.

The beneficiary companies belonged to various sectors of activity: gas distribution (for instance, major gas station networks such as Rompetrol, Petrom, Lukoil, Shell Gas); the healthcare sector (hospitals of the national healthcare system, the National Ambulance Service, SMURD); and service providers (a major cleaning services provider, the Romanian Air Traffic Services Administration (ROMATSA) at the 'Henry Coanda' International Airport at Bucharest, Otopeni, Romania's largest airport).

Some of the above-mentioned sectors have a significant number of female workers (for instance, the healthcare sector) while women have more recently become employed on a larger scale in other activities (such as the gas stations increasingly distributed all over the country).

The Romanian PPE/protective clothing manufacturers highlighted in this case study are as follows: FORNAX Group; S.C. MENTOR SRL; the National Research and Development Institute on Occupational Safety (INCDPM); 'Alexandru Darabont' Bucharest (the production unit of protective ointments as well), S.C. MarMih SRL.

INCDPM acted as the research and development (R&D) and consulting entity for both the PPE manufacturers and the beneficiary companies of the above-mentioned sectors.

This joint approach aimed to meet women's needs in terms of OSH-specific requirements at the workplace within different sectors of activity for women carrying out similar work tasks to their male colleagues.

The wearing of adapted PPE to the women's physical differences, and to suit their changing body shape as a result of pregnancy, resulted in more comfort when accomplishing their work tasks, thus ensuring greater protection against workplace-related risks, as well as the changing and, at times, unfavourable weather conditions due to the different seasons.

## Aims

The PPE to be used by women at work was adapted in a number of ways; for instance, adequate sizes and cuts were used to suit their physical differences, increased attention was paid to the design and colours, and an enriched formula of protective ointment was used. These adaptations had a number of goals:

- to ensure increased comfort when wearing PPE at the workplace;
- to facilitate women's movements when accomplishing the work tasks assigned;
- to reduce the risk of accidents that might occur through trips, slips and falls because of wearing oversized clothes resulting in discomfort and imprecise movements;
- to make women-friendly PPE, so that the female workers would opt to wear it on a regular basis as another protective layer against the work-related risks to which they are exposed (such as chemical agents, biological agents, contamination hazard and ignition within potentially explosive atmospheres);
- to take into account the design of protective clothing, including the colours and different accessories that could be made available that may contribute to women's well-being at work, by improving their perception of how they look;
- to create additional personal protection measures that could be used by both women and men, if this benefits their health (such as providing protection against skin diseases through enriched formula protective ointments).



### What was done, and how

This case study presents a series of successful examples of woman-sensitive approaches to the adapting of certain categories of PPE to women's needs in terms of OSH and work task requirements at different workplaces within a large variety of activity sectors. These organisations are listed below.

#### *FORNAX Group: Strict OSH requirements and protective clothing adapted for women in the oil industry*

FORNAX Group is a Romanian manufacturer of PPE that provides goods to sectors such as heavy industry, power generators, the nuclear sector, large sea harbours, shipyards and the hotels, restaurants and catering sector. This case relates to the antistatic protective clothing to be used within potentially explosive atmospheres (filling stations) by women at work.

Since the early 1990s, the emerging Romanian market has seen a spectacular increase in the number of vehicles, such as private cars, taxis and commercial vans, and consequently an increasing number of women have found work in petrol filling stations.

Confronted with this increase and the specific OSH requirements of the clothing required for the job (such as antistatic properties), the manufacturer diversified the range of clothing for women, bringing in skirts and/or trousers adapted to women's sizes, T-shirts with a specific design, and clothing for unfavourable weather conditions during winter and summer to enable women to work outdoors.

The manufacturer consulted with INCDPM when it came to making a series of changes to women's protective clothing to ensure maximum comfort and compliance with the PPE's specific requirements in terms of OSH as well.

The organisation often asked for tailor-made PPE for the women working in the filling stations and provided the sizes and dimensions of the personnel for the particular filling stations concerned.

Figures 1–4 shows the autumn/winter protective antistatic clothing for women (waistcoat, padded waistcoat, pullover) made by Fornax for Rompetrol filling stations.

**Figure 1: A padded waistcoat for women at Rompetrol filling stations and the equivalent clothing item for men**



Figure 2: Pullover for women at Rompetrol filling stations



Figure 3: Pullover for women at Rompetrol filling stations and equivalent item for men



**Figure 4: Autumn suit: jacket, trousers and padded waistcoat for women at OMV Petrom filling stations and equivalent jacket and waistcoat for men**



These new designs resulted in greater comfort and safety at work for the women wearing this clothing for prolonged durations and often in unfavourable weather conditions (in both winter and summer).

Figures 5 and 6 show summer suits for women at OMV Petrom filling stations, consisting of a lighter weight blouse and trousers with pale pink insertions. The men's clothing, by contrast, has olive green insertions.

**Figure 5: Summer blouse for women at OMV Petrom filling stations and similar summer shirt for men**



Figure 6: Summer suits for women at OMV Petrom filling stations and equivalent suit for men



FORNAX Group also produces footwear for men and women from various sectors of activity. The Group's shoe manufacturers also made footwear adapted to women's sizes and needs, at the organisation's request.

The OSH R&D unit, INCDPM, is always consulted when it comes to making more important changes; for instance, in the materials used and other characteristics of both the customised work wear and footwear. These are specifically designed for women to ensure the OSH requirements are met fully in terms of ensuring employees' protection against the risks to which they are exposed at their workplaces.

*S.C. MENTOR SRL: Direct collaboration between end-users in healthcare sector and the clothing manufacturer*

There was direct collaboration between uniforms and PPE producer S.C. Mentor SRL with its beneficiaries from the healthcare sector in order to provide tailor-made protective clothing for all the categories of medical personnel, particularly for women. Protective clothing requirements, aside from protection against dangerous substances, include, for instance, greater comfort to allow easier movements when accomplishing the work tasks, such as handling patients, and emergency-related operations.

Confronted with the work-related needs of various categories of healthcare personnel in terms of PPE and other protective clothing, S.C. Mentor SRL greatly diversified its range of clothing for women employed in the healthcare sector (skirts and/or trousers, shirts, surgery coats, aprons), adapting it to women's sizes and dimensions and to other particularities such as specific cuts to meet women's physical characteristics. The company also carries out special orders for working pregnant women, for overweight women or for those women with other physical differences who would benefit from non-standard clothing.

The manufacturer and the healthcare units (beneficiaries) have a direct collaboration in terms of tailor-made clothing. For instance, the producer's specialist often goes to the hospitals or the hospitals' sections concerned to take women's measurements. This ensures that women's specific sizes and physical differences are catered for.

Meanwhile, the manufacturer consulted with INCDPM when it wished to bring in a series of changes upon customers' requests to ensure maximum comfort for the employees, but also to comply with the PPE-specific requirements in terms of OSH. This resulted in increased comfort and safety at work for

the women wearing this clothing in the healthcare sector (female surgeons, nurses, hospital attendants, laboratory personnel, emergency services staff and so on), working for prolonged durations and carrying out a large variety of work tasks. This collaboration resulted in a close partnership between the beneficiary, INCDPM and the PPE manufacturers.

*'Henry Coanda' International Airport of Bucharest, Otopeni: collaboration between cleaning service end-users and manufacturer of protective ointments*

The OSH representative of Romanian Air Traffic Services Administration (ROMATSA), the cleaning services provider for 'Henry Coanda' International Airport of Bucharest, Otopeni, Romania's biggest airport, made a special request to INCDPM via its PPE Department, to enrich the protective ointments used by the cleaning personnel, mostly women, given the harmful action of the cleaning materials upon women's skin. This request aimed at providing a higher-quality protective ointment with increased repairing properties for damaged skin exposed to harmful agents, with a gentle touch and natural ingredients.

INCDPM enriched the formula of the protective ointments with marigold (calendula) extract with outstanding skin repair properties. The ointments' composition also has a higher vitamin A content, which has well-known nourishing effects upon the skin in general and increased repairing properties for the damaged skin in particular (Figure 7).

**Figure 7: Example of enriched protective ointment produced by INCDPM**



Note: Label reads 'Protective care ointment'

The improved composition of the ointment resulted in increased repairing properties for the women's skin and mitigated the chemical and physical risks arising from the use of harmful cleaning products, risks that could not be prevented by wearing protective gloves only.

In addition, the women became tempted to use these protective ointments on a more regular basis once they came to consider them as a beauty care product as well.

The male workers in the cleaning services were given the same protective ointments as their female colleagues, and they welcomed this initiative. The male personnel could use this protective ointment, as it does not contain ingredients such as perfumes that may act as irritants on some individuals, and it ensures increased protection and repairing properties for the damaged skin exposed to harmful chemical and physical agents.

Later, the OSH representative of the airport asked for the same enriched formula protective ointments to be provided to other categories of personnel such as air cabin crew and cashiers.

*S.C. MarMih SRL: a woman-sensitive approach to PPE in the national medical emergency services*

PPE manufacturer S.C. MarMih SRL collaborates closely with INCDPM on PPE research and testing, certification and consultancy. The company initiated a large-scale manufacture of adapted PPE for women from the healthcare sector, especially for the medical emergency services (such as the National Ambulance Service and the Mobile Emergency Service for Resuscitation and Extrication (Serviciul Mobil de Urgență, Reanimare și Descarcerare, SMURD)).

Since the early 2000s, the Ambulance Service has had an increasing number of women working in almost all the positions in that service. They accomplish a wide range of work tasks they were not used to before, using new rescue equipment and techniques, and involving the lifting and transportation of injured or ill persons. The National Ambulance Service carried out a survey among the women working in the service to identify women's specific needs regarding the wearing of PPE at work.

Based on the results of the survey (initially carried out within the Ambulance Service of Bucharest, and later extended across the country), S.C. MarMih SRL widened the range of PPE manufactured for all categories of medical emergency personnel (inclusive of doctors, nurses, paramedics, including a significant number of women) and brought in changes to meet their needs at work.

Thus, the company started to produce PPE adapted for women that simultaneously meets OSH requirements (high visibility for the night operations, adapted materials for unfavourable weather conditions, and high resistance of materials to physical, chemical and biological hazards) while also providing adequate sizes, dimensions, and special cuts to meet the particular characteristics of women's bodies (such as reduced width of the vests; see Figure 8).

Moreover, it has been demonstrated that the use of inadequate PPE (vests that are too large, trousers that are too long and so on) by women participating in rescue or medical emergency operations could lead to serious work accidents such as slips, trips and falls, in addition to increased difficulty of movement and less comfort.

The company has asked for INCDPM's input whenever necessary, for instance when it comes to special changes in women's PPE and protective clothing, so that these changes ensure both women's continued protection against work-related risks factors and increased comfort and easier movements.

**Figure 8: Work suit adapted for women**



Note: badges indicate the type of emergency service (National Ambulance Service) and category of medical personnel (MD)

Encouraged by the positive feedback received from the women employed within the Ambulance Service of Bucharest, the company extended its beneficiaries to other National Ambulance Services in the country and medical emergency services, such as SMURD. SMURD has numerous bases in Romania that are used during the most severe emergencies. Close collaboration exists between the National Ambulance Service and SMURD, and this acts as a complementary service.

**What was achieved**

- Customised PPE/protective clothing for the women working in a large variety of activity sectors such as healthcare, medical emergency services, gas distribution, cleaning services.
- Increased OSH protection against workplace-related risks (physical, chemical and biological risks; ignition hazard; unfavourable weather conditions; night work; and skin diseases).
- More efficient protection against harmful compounds in the workplace (protective ointments with enriched formula ensuring increased skin protection against physical and chemical factors for both women and men in the cleaning services).
- Increased comfort due to more suitable clothing that in turn may indirectly influence well-being at work.
- The women reported increased satisfaction when wearing better fitting PPE/protective clothing; no additional survey has been carried out, but OSH coordinators from the healthcare units, for

instance, reported positive feedback from all categories of medical personnel, especially from the medical emergency services such as the National Ambulance Service and SMURD.

- An increased commitment by the PPE manufacturers, and by the beneficiaries from a large range of sectors, to provide customised PPE for women at work.

#### **Problems faced**

- The partners have not reported any major problems as these measures were not imposed upon them; rather, there has been a commitment from top management, based on employees' suggestions.
- The manufacturers did not face major obstacles, as they asked for OSH consultancy from INCDPM whenever the beneficiaries' requirements required the services of OSH experts.

#### **Success factors**

- A significant success factor is the partnership approach that occurred in all the cases: manufacturers or beneficiaries from a wide range of activity sectors and OSH R&D unit provided expertise when it came to adapting PPE/protective clothing for women.
- The commitment of the OSH coordinators in the healthcare units who persuaded the hospital managers to invest in high-quality clothing adapted to women based on the women workers' suggestions, despite the limited funding generally allocated to the healthcare sector.
- The consultation with the OSH representatives and the workforce to find out problems and needs, such as the survey among women carried out by the National Ambulance Service.
- The manufacturer's willingness to produce a very diversified range of clothing for personnel (for instance, in the healthcare sector and in gas distribution), which resulted in higher production costs than standard production processes.
- The non-discriminatory use of a protective ointment for both women and men, with better results in terms of skin protection, thus encouraging further improvements in terms of OSH.

#### **Transferability**

In all the cases, a high potential for transferability is apparent, given the variety of beneficiaries: the healthcare sector with a significant number of female workers; the medical emergency services at national level (which implies that no further adaptation or costs are required); and the filling stations, where clothing can be adapted simply by changing the oil company logo).

The protective ointments with improved protection characteristics have already been used in other sectors of activity, such as personnel in the State Archives who can be exposed to high levels of biological risk.

Both INCDPM and the manufacturers encourage an increasing number of undertakings to adopt and promote the use of PPE adapted to women.

The collaborative methodologies to investigate and produce the different examples of PPT can readily be transferred.

#### **Further information**

FORNAX Group: <http://www.fornax-group.ro>

S.C. MENTOR SRL: <http://www.mentorcraiova.com>

INCDPM PPE Laboratory: <http://www.inpm.ro>

'Aeroporturi Bucuresti' National Company S.A.

Romanian Air Traffic Services Administration (ROMATSA)

<http://www.bucharestairports.ro>

<http://www.otp-airport.ro>

S.C. MarMih SRL, Bucharest

## 5.6 Bringing gender equality into the ergonomic design of food preparation areas, United Kingdom

### Organisation involved

Greggs plc

### Key points

- Workstations were designed to take into account the stature of 'average' and 'small' women to allow them to reach forward and generally work comfortably.
- New food preparation benches were tested, then the company worked with the manufacturer to provide a bench adapted for the largely female staff.

### Introduction

Food and drink is the UK's biggest manufacturing sector and it is estimated that approximately 300,000 people are employed in the commercial sandwich sector (The British Sandwich Association, 2011). Each year in the UK, over three billion sandwiches are purchased from retail or catering outlets; workers in retail bakeries perform many tasks that could impact negatively on their musculoskeletal structure. These include lifting heavy items; engaging in repetitive actions such as buttering, cutting and slicing bread; cutting and slicing other food items; and packing the finished sandwiches. Work-related upper limb disorders (WRULDs) from repetitive tasks account for around 23% of cases of occupational ill health in food and drink manufacture (HSE, 2011). One of the largest retail bakeries in the UK is Greggs plc, which employs 19,000 staff in 1,487 shops (Greggs, 2011). Greggs plc employs men and women in both its bakeries and its retail bakeries, although the majority of workers employed in the retail bakeries are female. The company is large, but the individual bakery shops are small.

When expanding and taking over other premises Greggs acquired existing equipment and machinery and found that some of them were not only outdated, but in some cases were not designed with basic ergonomic principles in mind. It wanted to ensure that the standards of equipment and machinery were consistent across all its sites and from ensuring that its design took into account the physical attributes of all its workers.

### Aims

Greggs plc aimed to reduce the risk of upper limb disorders to its predominantly female workers through the following steps:

- conducting risk assessments of the tasks in its retail bakeries;
- refurbishing the retail bakeries and its equipment to create a better working environment for the workforce;
- providing an occupational health service to provide advice and guidance on individual cases.

This case focuses on the refurbishment and the provision of new sandwich-making benches.

### What was done, and how

'...How can we make the process as efficient as possible but also how could we design the equipment so it fitted the majority?'

#### *The sandwich-making process*

The process for making sandwiches in bakery shops is straightforward but involves a number of repetitive tasks. To prepare a sandwich, the bread, which is also called the 'carrier', is brought to the workbench where it is cut and buttered. Fillings are then selected from the gastronomes (food containers) behind the worktop and placed in the 'carrier'. The finished sandwich is then packaged for the self-service counter, which requires that the worker reaches to the rail and shelf above the bench to select wrappers and sandwich labels. A small retail bakery may have only one workbench and the number of workers involved in the task of preparing the sandwiches will vary depending on local conditions. The height and stature of the workers would vary also and it is important that this fact is



incorporated into the sandwich-making process. The assembled sandwiches are then taken to the counter for sale. Most sandwiches are made between 07:30 and 11:30 and although the number of sandwiches prepared will vary depending on location, a small town retail bakery might typically prepare approximately 400 sandwiches a day.

#### *Considering female workers in workstation design*

One important measure to help reduce the risks of musculoskeletal injuries to female workers from repetitive tasks is to ensure that workstations are designed taking account of body measurements of women, for example height and reach, so that the majority of those tasks can be carried out within the normal working area for the female population. This means taking account of smaller women, not just those of average size and stature.

If a worker has to carry out a task that requires them to reach forward, this puts strain on the spine and back muscles as they support the weight of the body and also the weight of the shoulders as they move forward. If this position is held for long periods it becomes uncomfortable and increases the risk that the worker will acquire a back injury through cumulative damage. Therefore an assessment of any workstation needs to consider the normal working area within which the worker can carry out their tasks without extending their arms excessively, while retaining a neutral posture. A neutral posture means that the worker should be able to stand upright and the items should be within comfortable reach. The assessment should also take into account the maximal working area, which is the limit of comfortable reaching, where items less frequently used can be placed. Reach guidelines for a standing position for 95% of women are available, and these are lower than those required for 95% of men (HSE, 2002).

#### *Provision of new sandwich-making benches*

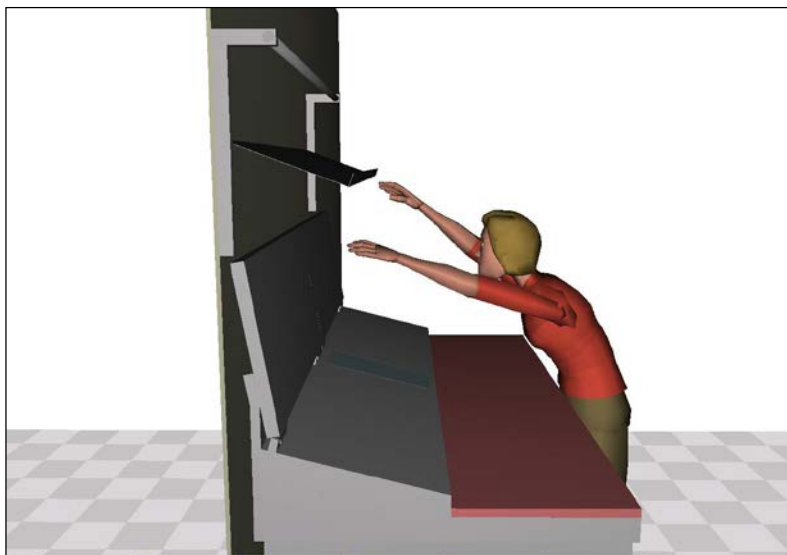
As part of its refurbishment programme Greggs decided that it would replace the Silverwing/Cornelius (referred to as Cornelius) food preparation benches, which were installed in most of its retail bakeries. Greggs chose a replacement with an updated design from another manufacturer (henceforth referred to as Bench B) but its dimensions differed from the Cornelius benches that were in use. Bench B had an increased work surface depth that could affect the workers' forward reach to the gastronomes (containers with individual items of food), the label rail and shelf. To help them decide whether to use Bench B as part of its refurbishment plans, Greggs consulted external ergonomists for advice. The ergonomists carried out an assessment of the two types of benches to see which would be the most suitable for its workforce.

The majority of the staff employed by Greggs in its retail bakeries are female, so the ergonomists used a female manikin to illustrate the reach capabilities of females of 'average' and 'small' stature. The models were designed to represent British females aged between 19 and 65 years. The average model was based on 50th percentile data for this population, and had a stature of 1,610 mm and a weight of 63 kg. The 'small' model was based on 25th percentile data for this population, and had a stature of 1,568 mm and a weight of 55 kg. Smaller models are typically between the 1st and 5th percentile<sup>(4)</sup> of the population but the ergonomists had to take into account the extent to which the design could be modified and still work so the 25th percentile was considered a practical compromise (Bunn and Birtles, 2005).

#### **Figure 1: Reach capabilities for a 25th percentile female when positioned at Bench B**

---

<sup>(4)</sup> A percentile is a value given to a variable that is divided into 100 equal parts: so, for example, if a 'small' model is based on the 25th percentile of the population of British females between the age of 19 and 65 years, that means 25 out of 100 of those females are of small stature and there are 75 out of 100 of those females who are not.

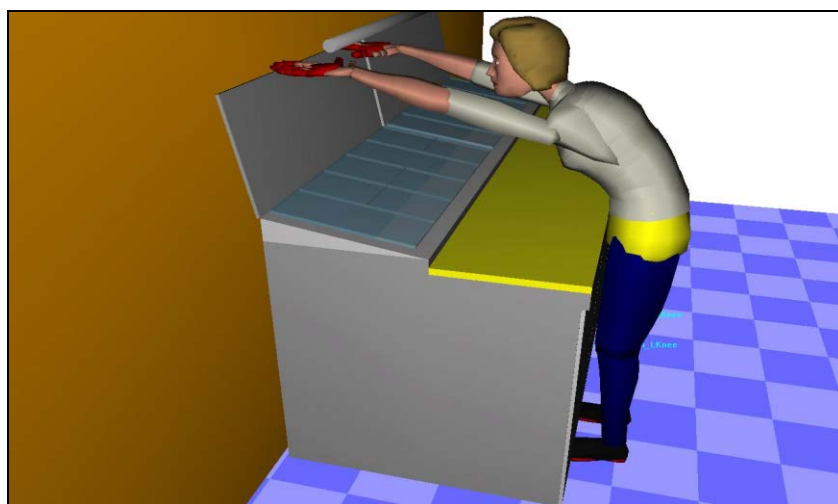


Source: Bunn and Birtles (2005)

The ergonomists found that a female worker standing upright could easily reach items on the work surface of Bench B and at the front of the gastronomes. However, to reach the back of the gastronomes and items on the rail and shelf attached to the wall, the female worker would have to stretch forward quite significantly to reach them (Figure 1).

The ergonomists carried out a similar exercise with the Cornelius workbench. They found that the dimensions of the Cornelius workbench were smaller than Bench B, so workers could comfortably reach within the normal work areas but would still have to stretch to reach items on the rail and shelf on the wall or to the back of the gastronomes (Figure 2) They also found that the heavier lid weights of the gastronome lids on some of the older bench designs potentially put the workers at risk of lower back injury.

**Figure 2: Worker reaching to rail and shelf**



Source: Bunn and Birtles (2005)

Overall, they found that the Cornelius bench had been designed along good ergonomic principles in that it had an appropriate work surface height, foot clearance and worktop depth, but certain features such as the upper shelf, the label rails and the gastronome lids had not taken into account the reach of the 'average' female worker.

At a meeting between Greggs, the ergonomists and the manufacturers of Bench B, it was decided that the ergonomists would provide specifications based on the reach capabilities of the majority of Greggs' female workers to guide future bench design. Subsequently, a design was agreed on and installed when Greggs retail bakeries were being refurbished (Figure 3). Until such time as all the retail bakeries could be refurbished, Greggs continued to use the Cornelius bench, and its safety, health and environment teams were made aware of some of its limitations and the impact these might have on the workers.

Figure 3: Food preparation bench used in Greggs plc



Source: Greggs (2011)

### What was achieved

By updating its equipment to make it suitable for its predominantly female workforce, Greggs now says that it has 'very few issues with repetitive strain injuries (RSIs)' in its retail bakeries, particularly on the sandwich preparation side. It found that sandwich preparation became a safer and healthier process.

In addition, business benefits stemmed from the change: making sure the tasks could be performed within a comfortable working area made the process more efficient.

### Success factors

The factors that enabled Greggs to take stock of its workstations and in particular look at the risks to its female workers within its retail bakeries include:

- having a 'People Plan', which is its overall plan for human resource management within the Group — the health and safety of its workforce is an integral part of the Plan;
- having an employee engagement programme and working closely with the trade unions; there are worker representatives to represent those employees who choose not to be affiliated to a union;
- having a framework of safety, health and environmental teams across its businesses that discuss issues and possible solutions, including which control measures to put in place;
- bringing to the attention of senior management any issues that cannot be decided on by the safety, health and environmental teams;
- having an occupational health service within the business to ensure that Greggs meets the requirements of UK legislation and to carry out health surveillance — the occupational health service provides a support service to the retail bakeries, giving advice to managers and staff;
- getting external expert advice when needed and, in this case, working with a supplier.

### Transferability

Although the case study is primarily about taking gender into account in the design of food preparation work benches, it can be applied to any number of industries including food manufacturing, retail or electronics.

In a job that requires a woman to prepare, make or build an item from a number of constituent parts at a workstation, it will be useful to consider the following questions:

- Has it been considered whether the workstations in the organisation or country are suitable for women whose height falls within the 50th percentile ('average' stature) and for those between the 1st and 5th percentile ('small' stature)?
- Can most of the task be carried out within the 'normal' working area?

### Further information

Group Safety Health and Environment Manager  
Greggs plc, Newcastle Upon Tyne s

### References and resources

Bunn, J. and Birtles, M., *Ergonomics specifications for sandwich preparation benches*, 2005, Heath & Safety Laboratory (HSL) letter report. Buxton, UK.

Greggs, About Greggs web page, 2011. Available at: <http://www.greggs.co.uk/about-greggs>

HSE — Health and Safety Executive, *Seating at work*, Series HSG57, HSE Books, Sudbury, 1997.

HSE — Health and Safety Executive, *Upper limb disorders in the workplace*, Series HSG60, 2002, HSE Books, Sudbury, 2002.

HSE — Health and Safety Executive, *Musculoskeletal disorders*, 2011. Retrieved 1 July 2011, from: <http://www.hse.gov.uk/food/musculoskeletal.htm>

The British Sandwich Association: <http://www.sandwich.org.uk/>

## 5.7 Olympic Delivery Authority's 'Women into Construction' project, United Kingdom

### Organisation involved

Olympic Delivery Authority (ODA)

### Key points

- The ODA facilitated the inclusion of more women on the Olympic construction site by devising inclusion policies, such as attention being paid to women's care responsibilities. Equalities awareness training and preventing harassment were covered. Mentoring was also offered.
- The project wished to increase the number of women engaged in training and pursuing job opportunities on the Olympic Park. This training included certificated OSH training.
- Excellence in health and safety was also a key priority for the ODA. The provision of suitable welfare facilities for women was recognised as important.
- Contractors were covered.

### Introduction

The Olympic Delivery Authority (ODA) was established on 30 March 2006 to develop and build the venues and infrastructure for the London 2012 Olympic Games and Paralympics Games and their use afterwards. The London 2012 construction programme encompassed the Olympic Park, the largest regeneration project in Europe, the Athletes' Village, Europe's largest new housing project, and several other sites remote from the park.

As part of the aspirations of the ODA, construction work had to incorporate six key themes: Safety and Security; Equality and Diversity; Employment and Skills; Design and Accessibility; and Sustainability and Legacy. The six themes had to be interwoven across all of the projects during every phase.

#### *Increasing the number of women in construction*

The ODA as a public body was required to comply with the public sector equality duties for disability, gender and race. Under the Equality and Diversity theme the ODA aimed to eliminate unlawful sex discrimination and sexual harassment and promote equality of opportunity between women and men. The ODA wished especially to encourage young women and those women returning to work from a career break (for instance, breaks taken for childbirth, child care or caring for dependent relatives) to work within the construction sector (ODA, 2007b). This was to increase the skills pool and diversity in the construction and to promote equality.

There is evidence that suggests that considerably more women pursue training in construction than are employed in the industry (although these numbers are still small). For example, in London nearly 9% of the first-year trainees in construction courses in further education colleges are women, yet just 2% of manual construction workers in London are women (ODA, 2007b). Some of the reasons for such disparity include the difficulty women face in gaining work experience, which is critical to gaining employment, as the formal qualifications that are earned in college do not necessarily lead to entry into the industry unless they are complemented by practical work placements (GLA, 2007). In addition, construction has a pattern of irregular and long work hours and changing sites (GLA, 2007), which may be difficult for women to maintain as permanent jobs due to their other 'work' as main carers within family units.

The ODA's Women into Construction project aimed to increase the number of women taking up training and job opportunities on the Olympic Park, as well as to challenge existing perceptions about women who work in construction (ODA, 2011a), and thereby break down pre-existing gender barriers. The London Development Agency (LDA) and ConstructionSkills (the industry's sectoral skills council and training board) funded the London 2012 Women into Construction project. The strategy involved a whole range of interrelated measures which are not described in this case study.

#### *The safest and healthiest build ever*

Another aspiration of the ODA was to achieve the safest and healthiest build ever, and another of the six key themes for the project was Safety and Security.

The OSH strategy was based on a combination of contractor involvement, good communication and strong leadership in managing potential risks combined with worker engagement. They targeted both health and safety. As well as focusing on preventing harm, the ODA implemented occupational health facilities — Park Health and Village Health — to ensure the well-being of all involved in the project. Over 2,000 workers were seen each month by the health teams on the Park and in the Village. Measures also included a behavioural safety programme. The ODA took a strategic role, setting safety as a priority, and integrated this into the organisations involved from the outset, through standards and requirements. These were clear throughout the supply chain, including the desire for a consistent commitment to the same health, safety and environmental standard.

This case study looks at the link between these two key priorities for the ODA.

### **Aims**

The intervention had a very specific goal of increasing the number of women working in construction as seen through listed number of specific objectives. Those with the most obvious link to OSH are listed below:

- to supply women with information, training and practical work experience in and about the construction industry, to allow them to consider it as a career option;
- to ensure that the recruitment and management processes for all employees working to build the venues and infrastructure (including employees working within the supply chain) are demonstrably fair, make reasonable adjustments where necessary and offer equal opportunities to all;

- to work with partner organisations to combat workplace discrimination;
- to display good practice in equality and diversity as an employer;
- to ensure that the workplace at all sites for London 2012 projects is welcoming for women;
- to provide bespoke support to women and establish a 'Women on Site' network;
- to take proactive steps to combat onsite sexual harassment and discrimination;
- to provide resources and support to contractors and, through its Corporate Social Responsibility (CSR), bring together key employers, public bodies, non-governmental organisations (NGOs), trade unions and other projects where relevant to coordinate activity and influence practice.

### What was done, and how

We intend to leave a lasting legacy for equality: a built environment which is a model for inclusively and accessibility; a step-change in equality practice in the construction sector; and sustainable skills and experience gained by employees from diverse groups in east London and across the UK.

(ODA, 2007a, p. 4)

**Dual commitment for equality and OSH integrated into management** The ODA had both a strong commitment to promoting equality and diversity and to ensuring high standards of health and safety. It developed and implemented comprehensive strategies and actions for both areas. The two strategies needed to be closely linked to take account of all the needs of women working on site. The prerequisite for achieving this was that health and safety was seen as integral to managing the project and equality was also seen as an integral part of management. The ODA incorporated equality impact assessment into the process of developing business cases for its major projects. The ODA carried out a public consultation on its draft Equality and Diversity Strategy.

**The Women in Construction project** featured a number of positive action measures to improve the recruitment and retention of women included training, workshops, mentoring, a jobs' brokerage scheme, work experience/apprenticeships, work placements, an outreach programme and marketing campaigns. Health and safety will have featured as part of the delivery of these messages.

For example, the outreach programme sought suitable candidates from the local community to undergo vocational training, which included Construction Skills Certification Scheme (CSCS) card, fire marshalling, first aid, manual handling, working from heights and other construction skills and Institution of Occupational Safety and Health (IOSH) recognised training, if these were not already held by the women. This training supplemented their existing skills and helped to make them more employable. They were then placed in jobs and work placements throughout the Park and Village (ODA, 2011a and b).

**Focus on removing barriers** The project used information gained in previous and current projects that studied women in construction. The project concentrated on those other barriers that women face, such as the reluctance of employers to take women on, women's disproportionate need for child care and their disproportionate lack of driving licences compared with men, and the need of women to gain additional confidence-building and support to enter what is often perceived as a 'man's world'.

**Good general OSH for all** This is important for raising standards for both women and men. A demonstrable strong commitment to creating a good safety culture and working environment will have a positive effect on the motivation of women workers to work in construction. But in addition it needs to take account of gender issues. The health and safety standard for contractors contained items on women's welfare to make work on site more 'women friendly' (see box).

In relation to **physical facilities on site**, the ODA built gender equality into its Health and Safety Standard. This Standard was adopted by the ODA Board, and formed part of the Works Instructions for every ODA construction contract and against which compliance was audited. The Standard covered welfare facilities meeting the needs of both women and men, specified in relation to toilets (including sanitary dispensing and disposal), showers and changing facilities. Contractors were also required to work in line with the Respect for People initiative.

In relation to **workplace culture**, which can be hostile to women, the ODA required all its contractors to actively promote gender equality, to operate an effective anti-harassment policy and procedure and

to operate an effective flexible working policy and procedure. The ODA operated an equality assurance process in relation to these requirements.

**Promoting worker involvement** was a key feature of the health and safety strategy. This will have been important for ensuring that safety issues related to women workers could be raised by them and addressed. On the other hand, the Women in Construction project aimed to empower women working on the Olympic Park, which will have helped them to raise any OSH issues and participate in OSH.

**Extracts from the Health and Safety Standard relevant to a woman-friendly site**

6.9 General behaviour

The supplier shall ensure, through its policies, training and supervision, that all personnel are aware of basic requirements including:

- respect for good site practice and avoidance of horseplay;
- prohibition on urination other than in provided toilets; and
- respect for other people, including no use of foul, abusive or racist language, no aggressive or violent behaviour, harassment or bullying.

The supplier shall have explicit policy statements on good site practice, horseplay, harassment and bullying. Such policies shall be supported by a complaints procedure accessible to all employees.

Appendix 10 — Welfare facilities

....

Female facilities

Facilities shall be provided that meet the needs of women working on site, taking into account that 15 per cent of site workers (including engineers) may be women, and 15-30 per cent of site office staff. There shall be a separating system to control access. In addition to sufficient quantity (WCs and wash basins) calculated for women as indicated above, the following shall be addressed:

- provision (including maintenance and filling) of sanitary towel/tampon dispensers;
- provision (including maintenance and emptying) of sanitary towel/tampon disposal units; and
- where provided, separate shower facilities.

**What was achieved**

*Outcomes*

- 1,028 women have worked on the Olympic Park; 2% of the workforce in manual trades were women, which was above the national average of between 1% and 2%.
- Of the site apprentices, 6% were women, significantly more than the national average of between 1% and 2%.
- High health and safety standards being maintained throughout the project. Construction of the main 2012 venues and infrastructure involved around 62 million working hours with an accident frequency rate of 0.17 per 100,000 hours, less than half the construction industry average and below the national average for all workplaces.

*Contractor attitudes*

The Women into Construction project has had a positive impact on contractors who have been impressed with the quality of the women candidates coming through.

The contractors have stated that the women working on site are efficient, productive and have added value to the overall project, because of the high calibre of their performance and skills ... This has significantly contributed to creating a positive work environment which is conducive to high productivity. The project has increased access to a broad pool of talent, creating a workforce that is more diverse, whilst maintaining high levels of qualification and skills.

(Equality and Inclusion Manager, ODA)

### *Legacy*

The Women into Construction project was scheduled to end in December 2010 but was extended until June 2011 due to its success. The employment and skills managers are working with contractors to decide how best to take the work forward.

Contractors have experienced the benefits of employing women in a wide range of jobs — from traffic marshals, architects and bricklayers to engineers and ecologists — and hopefully will continue the good practice established by the project.

(Equality and Inclusion Manager, ODA)

### *Recognition*

- The Women into Construction Project won the Women in Science and Engineering partnership award in November 2009. The offer of tailored support, training, encouragement and job opportunities made a difference to both the women taking part and the industry as a whole (GLA, 2010).
- The ODA's gender equality programme was recognised for its innovation in the 2010 awards of Opportunity Now (part of Business in the Community), the industry umbrella body for companies committed to creating an inclusive workplace for women. The award citation said: 'The programme fits with the organisation's public sector duties to actively promote equality of opportunity between men and women. But the organisation believes there is a compelling business imperative, which goes further than legal obligations. It strongly believes that increasing diversity contributes to creating a good work environment, which is conducive to high productivity. It also believes that championing diversity is key to addressing current skills shortages as well as a way of recruiting the highest possible calibre of talent' (GLA, 2010).
- Opportunity Now praised the fact that women working on the Olympic Park were empowered and supported to use their skills to further develop their careers. It further noted that contractors felt that the project had positively changed the way they viewed women in construction.
- The Royal Society for the Prevention of Accidents (RoSPA) awarded the ODA its Silver Jubilee Award in 2012 for its health and safety achievements during the construction of the Olympic Park.

### **Success factors**

- Positive commitment from the top to best practice in both equalities and OSH.
- Dedicated resources and expertise.
- Setting clear objectives and targets and policies to achieve them.
- Embedding both OSH and equalities throughout the management process.
- Collaborative involvement of contractors, through partnership and support. Leading by example.
- Partnership with contractors, local community, trade unions and external bodies.

An important aspect of the project was the involvement of its contractors in both its equalities measures and its OSH measures, placing requirements on them but also providing resources, support and motivation.

### **Transferability**

The whole project could be replicated at national level in other Member States. Individual construction companies could use the health and safety standard and elements relating to site facilities, workplace culture, worker involvement, workplace culture, and support to women and attention to removing barriers such as lack of child care facilities.



### Further information

Olympic Delivery Authority, London E14 5LN

<http://www.london2012.com/oda>

### References and resources

Craw, M., Clarke, L., Jefferys, S., Beutel, M., Roy, K. and Gribling, M., *The construction industry in London and diversity performance*, Greater London Authority, 2007. Available at: [http://legacy.london.gov.uk/mayor/equalities/docs/construction\\_industry\\_feb07.pdf](http://legacy.london.gov.uk/mayor/equalities/docs/construction_industry_feb07.pdf)

Equal Opportunities Commission, *Free to choose: tackling gender barriers to better jobs*, 2005, as quoted in Craw, M., Clarke, L., Jefferys, S., Beutel, M., Roy, K. and Gribling, M., *The construction industry in London and diversity performance*, Greater London Authority, 2007. Available at: [http://legacy.london.gov.uk/mayor/equalities/docs/construction\\_industry\\_feb07.pdf](http://legacy.london.gov.uk/mayor/equalities/docs/construction_industry_feb07.pdf)

Equal Opportunities Commission, *Plugging Britain's skills gap: challenging gender segregation in training and work*, 2004, as quoted in Craw, M., Clarke, L., Jefferys, S., Beutel, M., Roy, K. and Gribling, M., *The Construction industry in London and diversity performance*, Greater London Authority, 2007. Available at: [http://legacy.london.gov.uk/mayor/equalities/docs/construction\\_industry\\_feb07.pdf](http://legacy.london.gov.uk/mayor/equalities/docs/construction_industry_feb07.pdf)

GLA — Greater London Authority, *Working towards an inclusive Games 2009-10: The second annual report of the London 2012 Equality and Diversity Forum*, GLA, London, August 2010. Available at: <http://www.london2012.com/documents/general/working-towards-an-inclusive-games-2009-10.pdf>

Learning Legacy, ODA Health Safety and Environment Standard. Available at: <http://learninglegacy.independent.gov.uk/documents/pdfs/health-and-safety/44-hs-e-aw.pdf>

Lucy, D., 'Leadership and worker involvement on the Olympic Park', in *Employment Studies, The IES public employment policy research newsletter*, Spring 2012, Issue 15. Available at: <http://www.employment-studies.co.uk/news/empstudies15.pdf>

ODA — Olympic Delivery Authority, The Learning Legacy, London, 2011a. Available at: <http://learninglegacy.independent.gov.uk/documents/pdfs/equality-inclusion-employment-and-skills/197-equality-and-inclusion.pdf>

ODA — Olympic Delivery Authority, Employment and Skills Update — January 2011, London, 2011b. Available at: <http://www.london2012.com/documents/oda-publications/jobs-skills-futures/jsf-bulletin-january11.pdf>

ODA — Olympic Delivery Authority, Equality and Diversity Strategy, July 2007, London, 2007a. Available at: <http://www.london2012.com/documents/oda-equality-and-diversity/equality-and-diversity-strategy.pdf>

ODA — Olympic Delivery Authority, Gender Equality Scheme 2007-2010, April 2007, London, 2007b. Available at: <http://www.sel.org.uk/uploads/ODA-Gender-Equality-Scheme.pdf>

WISE — <http://www.wisecampaign.org.uk/about-us/our-projects/past-projects>

## 5.8 'Male-friendly' staff wellness programme reduces absence at Royal Mail, United Kingdom

### Organisation involved

Royal Mail

### Key points

- The aim was to reduce sickness absence by tailoring a health promotion programme to engage both male and female employees.

- A health awareness guide based on the style of a maintenance manual was used.
- The advice of a men's health NGO was used to develop the initiative.

### **Introduction**

Royal Mail seeks to improve its service to customers through employee engagement. This has included links to sickness absence and sickness presence. Employee engagement was one of the key factors for providing a broad, pro-active health promotion campaign, which recognises the special differences of communicating with a male-dominated workforce specialising in manual work. Royal Mail also ensured that the programmes were relevant to and reached the women in the workforce; however, this case description focuses on the steps taken to make the initiative 'male friendly'.

Health improvement initiatives delivered in the workplace are of particular importance for men for a number of reasons. Men are less likely than women to make use of almost all other forms of primary health provision. For example, men see their general practitioner (GP) on average only three times annually compared with five times for women (ONS, 2004), men are less likely than women to have regular dental check-ups (just over half of men compared with two-thirds of women, ONS, 1998), and are less likely to seek health advice at a pharmacy (PAGB, 2005). Men are also acknowledged to be less likely to participate in public health improvement programmes of all kinds.

There is a growing and convincing body of evidence that health improvement initiatives in the workplace are effective at engaging men and are also welcomed and valued by them. In this sense, workplace interventions have gained an endorsement from men that may have been lacking in previous population-level initiatives.

### **Aims**

- To improve the quality of service to customers through employee engagement.
- To reduce sickness absence through a proactive staff wellness programme.
- To engage all employees, male and female, in the staff wellness programme.

### **What was done, and how**

Royal Mail was anxious to improve the quality of service to customers through employee engagement, including through a proactive health promotion campaign. Of particular concern was the need to reduce the high rate of sickness absence.

The company realised that it was important that any workplace health-improvement services be 'male-friendly' as well as 'female-friendly'. Royal Mail employs 180,000 people, 85% of whom are men, so engaging male manual workers in the programme was particularly important if it was going to be successful.

Royal Mail took a number of steps to help ensure that it was communicating effectively with the male-dominated manual workforce. To help it identify and meet the special needs of targeting a male-dominated workforce within its broad-based occupational health approaches, they worked in partnership with a specialist NGO, the Men's Health Forum (MHF). Suitable awareness-raising resources were needed and one of the actions they took was to provide staff with booklets produced by the MHF, which had been specially written to be more attractive to men. The booklets are in the format of a Haynes car maintenance manual. These Haynes manuals are extensively used to assist individuals to carry out maintenance on their own cars. Their format for car maintenance is well known and considered practical and functional.

To complement the direct communication, Royal Mail also sought to communicate with men via their wives and partners on some issues. This included a programme to encourage women to help their partners understand, recognise and deal with issues such as prostate disease or testicular lumps, as well as more general diseases that impact both sexes.

Other actions by Royal Mail have included sponsoring the UK Men's Health Forum to support health promotion programmes and publications such as 'Men and Cancer' and 'Men and Obesity'.

### What was achieved

A report by the London School of Economics (LSE) found that the company achieved significant reductions in absence between January 2004 and May 2007. The reduction (from 7% to 5%) was the equivalent of an extra 3,600 employees in work. Parcelforce Worldwide alone reduced rates of absence from 7% to 4.5% between January 2004 and May 2007 (equivalent to an extra 104 employees in work).

As well as reduced levels of sickness absence, the programme contributed to lower staff turnover and greater employee satisfaction.

The LSE calculated that if the 13 sectors in the economy with the highest absence rates followed Royal Mail's example, the resultant reduction in absenteeism would be worth £1.45 billion to the UK economy.

### Success factors

The case shows that men's health can be improved by simple measures that any employer can take. Importantly, Royal Mail recognised the particular differences in communicating with a male, manual occupation workforce and obtained advice on how to do this.

The MHF manuals, presenting wellness information in a format to which men can relate, were an important part of the solution to help boost men's health at work.

MHF president Dr Ian Banks said of the initiative: 'A first-class result from Royal Mail showing conclusively that workplace health interventions make sense. Once again the effort to "go where men are" while also addressing the better delivery of services has proven its worth.'

The case shows how the workplace offers considerable untapped potential as a setting for the improvement of population health, particularly for men as they spend far more of their lives in the workplace and develop some diseases such as heart disease earlier in life than women do (Fodor and Tzerovska, 2004). The case of Royal Mail shows that it makes sound business sense too.

The MHF believes that a policy shift by the National Health Service in favour of delivering health improvement services in the workplace would significantly improve male health in England and Wales.

### Transferability

The initiative took place in a large organisation. However, the general approach could be used in organisations of various sizes with a predominantly manual workforce.

### Further information, references and resources

Corporate Social Responsibility, Royal Mail, Fleet, GU51 2UY, UK

<http://www.royalmailgroup.com/>

*The Value of Rude Health Report*: a report for the Royal Mail, David Marsden, Simone Moriconi, London School of Economics, Centre for Economic Performance and Department of Management. London 2008. Available at: <http://eprints.lse.ac.uk/5148/>

The Men's Health Forum: <http://www.menshealthforum.org.uk/>

Men's Health Forum, Improving male health by taking action in the workplace: A policy briefing paper, MHF, 2008. Available at: <http://www.mhfi.org/menatwork.pdf>

Fodor, J. and Tzerovska, R., 'Coronary heart disease: is gender important?' *Journal of Men's Health and Gender*, Vol. 1, No 1, 2004, pp. 32-37.

ONS — Office for National Statistics, *Adult dental health survey*, Stationery Office Books, Norwich, 1998.

ONS — Office for National Statistics, *General household survey*, National Statistics Online, 2004.

Price Waterhouse Coopers LLP for Department of Work and Pensions, *Building the case for wellness*, Price Waterhouse Coopers LLP, London, 2008.

PAGB, Proprietary Association of Great Britain (PAGB) and Reader's Digest. *A picture of health: a survey of the nation's approach to everyday health and well-being*, PAGB & Readers Digest, London 2005.

## 6 Snapshots

### 6.1 Approach by national and intermediary organisations

#### 6.1.1 *Women and OSH, Australia*

##### Lead organisation

Public Service Association (PSA) of New South Wales (NSW)

##### The action

Women's violation issues, equality and participation in the workforce are among the trade union's priorities. It explicitly integrates gender into the services it offers on OSH, and PSA's section 'Women and OSH' offers consultation for women on improvement of their health and safety at work.

##### Further information

Public Service Association of NSW: <http://www.psa.labor.net.au/> and <http://psa.asn.au/women-2/>

#### 6.1.2 *A gender-sensitive approach to OSH integration within SMEs' organisational culture; a Brazilian–Canadian project (EOHSBI), Brazil, Canada*

##### Lead organisations

- Canadian Occupational Health and Safety Consortium (COHSC)
- Serviço Social da Indústria (SESI), Brazil

##### Issue

The Enhancement of Occupational Health and Safety in Brazilian Industry (EOHSBI) project was the result of a Brazilian–Canadian partnership between Serviço Social Da Indústria (SESI) Brazil and the Canadian Occupational Health and Safety Consortium (COHSC), under the coordination of Ryerson University. The project aimed at integrating OSH into Brazilian SMEs' organisational culture, with gender mainstreaming occupying a significant role.

##### The action

- The EOHSBI project was a two-year project (from 2004 to 2006) funded by the Canadian International Development Agency (CIDA) and ABC Transfer of Technology Fund for Brazil.
- The project faced barriers associated with the development, implementation, management and evaluation of gender-oriented OSH services and programmes within the SMEs in Brazil; for instance, the systemic discrimination against women in terms of institutions and OSH mechanisms and practices, the underestimation of women's work-related hazards, and OSH mechanisms adopting 'a gender neutral or gender blind' approach.
- A strategy was drawn up, which included gender mainstreaming when considering the diversity of women and men and the local context, systemic analysis of the resources and benefits, and education on gender issues.
- OSH checklists were elaborated to carry out a gender-based OSH analysis.
- These checklists comprised a series of questions to facilitate a gender-sensitive approach on 'the ways in which gender and other social factors that structure life may affect the experience and opportunities of workers, and about the gender specific hazards workers may face'.

##### Results

- A strategy emphasising gender-mainstreaming objectives was drawn up when integrating OSH into the Brazilian SMEs' organisational culture.

- The results consisted of a series of gender-focused tools (a gender-related website and gender-sensitive OSH checklists).

#### Further information

Canadian Centre for Occupational Health and Safety (CCOHS):  
<http://www.ccohs.ca/ccohs/partner.html>

CCOHS, *Collaborative projects: working together to improve workplace safety and health*. Available at: <http://www.oshanswers.com/ccohs/PDF/partnerships.pdf>

Serviço Social Da Industria (SESI) Brasil: <http://www.sesi.org.br/>

World Health Organization, *Promotion of OSH in small enterprises and the informal sector*. Available at: [http://www.who.int/entity/occupational\\_health/topics/oehtf8.pdf](http://www.who.int/entity/occupational_health/topics/oehtf8.pdf)

### 6.1.3 Canadian Women's Health Network, Canada

#### Lead organisation

Canadian Women's Health Network

#### The action

The Network was created in 1993 as a voluntary national organisation to improve the health and lives of girls and women in Canada and the world by collecting, producing, distributing and sharing knowledge, ideas, education, information, resources, strategies and inspirations. It acts as a forum for debate, contributes to health research, planning and policy and monitors emerging issues. It addresses issues of OSH according to various social and economic factors (including family, education, gender).

#### Further information

The Canadian Women's Health Network: <http://www.cwhn.ca/>

### 6.1.4 PPE for women, Canada

#### Lead organisations

- Industrial Accident Prevention Association (IAPA)
- Ontario Women's Directorate

#### Issue

- The limited availability of PPE for women is a critical workplace health and safety issue.
- Lack of adequate PPE can be a barrier to equality of employment opportunity for women.
- Ill-fitting protective clothing and equipment may cause women to fail to perform efficiently the given tasks of the job.

#### The action

Over 100 manufacturers and suppliers of PPE, both in Canada and the USA, were surveyed by mail. These companies were selected from the *Occupational Health and Safety Canada — 1990 Buyer's Guide*. Any company that provided at least one of the following types of protection most commonly worn by women was targeted for the survey: eye/face; foot; hand; head; and hearing. Interviews were conducted in person and by telephone with 35 key stakeholders. These included:

- women who wear PPE in their work;
- representatives of employers and unions;
- PPE manufacturers and suppliers;
- other participants representing government, standard setting agencies, and specialists in the area of PPE issues relating to women.

A series of checklists was developed (for head, eyes, hearing protection, gloves, foot protection and bodyguards) that could be used by women workers to assess whether their PPE fitted properly; these were based on survey and interview results.

#### **Further information**

Industrial Accident Prevention Association: <http://www.iapa.ca/>

### **6.1.5 Implementation of gender issues in OSH: national approach and strategy, Czech Republic**

#### **Lead organisation**

Czech Republic/State Labour Inspection Office

#### **Issue**

Implementation of a national strategy and approach on gender and OSH by the Czech Republic's State Labour Inspection Office, which has developed a national strategy and approach for including gender in its OSH work.

#### **The action**

- Inspectors of the State Labour Inspection Office check the position of women in terms of both health and safety within their control (that is, compliance with legal requirements and in accordance with risk assessment and risk prevention, and adapting working conditions to admit women to perform prohibited work and work that was too demanding for their abilities).
- Another consideration is the prevention of health risks and workloads and the control of work and workplaces that are prohibited for pregnant and breastfeeding women and new mothers until nine months after childbirth.
- Furthermore, PPE must be adapted to physical characteristics and respect ergonomic requirements.
- Inspectors of the State Labour Inspection Office integrate gender issues into the inspection activities devoted to specific industries employing women. These include the retail, medical equipment, and the textile and car industry, and deal with, for example, the manual handling of loads and other requirements specific to women workers.

#### **Further information**

Czech Republic State Labour Inspection Office: <http://www.suip.cz/> (with link to documents in English)

### **6.1.6 World of Management Ltd, Finland**

#### **Lead organisation**

World of Management Ltd

#### **Issue**

This is a general example on support for gender equality actions in the workplace. It is one example of how such external support can be provided. In Finland, companies and organisations that employ more than 30 people are legally obliged to draw up an equality plan. The Finnish Equality Act, which was amended on 1 June 2005, specifies in detail how equality planning should take place (see also case 4.3). World of Management (WoM) Ltd provides training and consultancy in the design and implementation of equality plans for private- and public-sector organisations. WoM specialises in tools for promoting equality at work.

### The action

WoM provides employers with support to develop an equality plan, which is a tool for accomplishing equality in the workplace. It is drawn up in cooperation between the employees and the employer. Management awareness and commitment is critical to the successful and appropriate advancement of equality.

An equality plan is a tool for developing employee competence and creating equal workplace practices. An equality plan works best when it is practical and concrete. WoM consultants provide process guidance and examples of best practices in equality planning. Their approach is to tailor each equality plan to meet the needs of the company or organisation, but the experiences of other organisations can and should also be utilised in the process.

WoM provides:

- training in equality issues in working life;
- training and process consulting on gender equality plans in work organisations;
- questionnaires on equality in workplaces;
- training for leaders on equal leadership;
- equality audits in work organisations.

### Further information

World of Management Ltd: <http://www.wom.fi/>

## 6.1.7 Guidelines for Practice ‘Occupational Health for Women’, Germany

### Lead organisation

Hans Böckler Foundation (Hans Böckler Stiftung)

### Issue

To raise awareness and provide practical advice.

### The action

A brochure was produced, with the aim of sharpening the critical ‘gender view’ in all areas of OSH and encouraging working women to be committed to the improvement of their working conditions. It gives suggestions to women on how and where they can get involved to give OSH a ‘female face’. It is aimed at working women, members of the work councils and trade unions, OSH experts and equal opportunity commissioners. The brochure provides practical guidance and advice on how safety and health for women can be improved and addresses the following topics:

- gender mainstreaming: the need to include the gender perspective in OSH;
- OSH: a short review;
- insurance coverage for statutory accident insurance;
- employment of women and risk assessment;
- risks and loads at workplaces of women;
- measurements: health promotion and prevention;
- information on OSH, women, health, health promotion and similar topics available on the internet.

### Further information

Hans Böckler Stiftung: <http://www.boeckler.de>

Kannengießler, U. C., *Arbeitsschutz für Frauen. Ein Leitfaden für die Praxis*, available at [http://www.boeckler.de/pdf/p\\_edition\\_hbs\\_144.pdf](http://www.boeckler.de/pdf/p_edition_hbs_144.pdf)



### **6.1.8 Developments in Diversity Europe Project, Germany**

#### **Lead organisation**

Central Scientific Unit of the Technical University Dortmund (Sozialforschungsstelle Dortmund, sfs)

#### **Issue**

This is a general example on diversity tools for the workplace. There is a need to increase the ability of those engaged in vocational education and training to better manage diversity. The aim of the project was to transfer specific innovative diversity content and results, gained mainly from the Diversity and Gender Experts for Europe (Grundtvig DiGe\_E) project, and adapt it to new sectors and target groups.

#### **The action**

- Two key products were developed from the project: an online Diversity Self-Assessment Tool and Quality Standards and Training Plans.
- The online Diversity Self-Assessment Tool was developed as a self-assessment tool for German enterprises and organisations. In the Developments in Diversity Europe (DIDE) project, the tool was tested in other European countries. It enables businesses and public/private institutions of all sizes in all industries to test how well they deal with a diverse workforce. It is available on the internet free of charge (in German only). This tool is for learning and information and provides a practical self-analysis and empirically based evaluation. It focuses on age, gender, migrant background and the integration of people with variable capacity for work. It covers several areas of action: diversity as corporate strategy; HR management; work organisation and work design; pay and performance; management and corporate culture; health; representation of interests; product and service development; and marketing and public relations (PR).
- The Quality Standards and Training Plans contain a set of quality standards for training and trainers as well as training concepts for basic and advanced training. It also contains specific modules and training plans in different aspects of diversity and for different target sectors. It is available in several European languages.

#### **Further information**

Sozialforschungsstelle Dortmund (sfs): <http://www.sfs.tu-dortmund.de/cms/de/Aktuelles/>

### **6.1.9 Gender-sensitive legislation and actions on OSH, Hungary**

#### **Lead organisation**

The Hungarian Labour Inspectorate

#### **Issue**

The Hungarian legislation has provided an enlarged and updated regulatory framework focused on a woman-sensitive approach, given the increasing number of women working in different economic sectors and the need to comply with the requirements of European OSH directives. This framework aims to protect women at work with positive results.

#### **The action**

The legislative framework enlarged its regulatory area with a series of provisions for the improvement of women's health and safety at work (the Hungarian Constitution, the Labour Code, Act XCIII of 1993 on labour protection, and so on).

This framework facilitated a number of elements: the implementation of adequate measures to protect women during pregnancy (appropriate resting facilities for pregnant or nursing mothers in the vicinity of the workplace); facilities for working mothers' children, such as nurseries; the elimination of 'unequal employment for women'; health promotion measures (a medical examination financed by the company); better working conditions (such as the use of modern patient-handling equipment to reduce

or eliminate manual handling-related risks in the healthcare sector). Legal restrictions were put in place with respect to pregnant women's exposure to chemical and biological risk factors at the workplace.

#### Further information

Hungarian Labour Inspectorate: <http://www.ommf.gov.hu>

### 6.1.10 'Women and work' contest in Umbria, Italy

#### Lead organisation

Provincia di Perugia and Istituto Nazionale Assicurazione contro gli Infortuni sul Lavoro (INAIL)

#### Issue

The competition entitled 'Women and work' in the Umbria region aims at increasing awareness of OSH at the regional and institutional level, emphasising the point of view of women in a gender perspective of OSH.

#### The action

The competition has been running for several years. In 2011, to accomplish an even more widespread awareness on prevention and safety in the workplace, the priority was to use mobile phone messages. It consisted of writing a brief sentence or thought, as a mobile phone message or on the web, on the issue of OSH and prevention in the workplace. The maximum length was 140 characters. The contest is open only to women and girls older than 14 years. All messages received are subject to a pre-selection by a jury made by site visitors, who can vote only once. The winners of the competition won a cheque: €800 for the first prize, €500 for the second prize and €300 for the third prize. An example of a prize-winning sentence: 'Safety is teamwork. Women know.' ('La sicurezza è un lavoro di squadra. Le donne lo sanno'.)

#### Further information

<http://www.donneelavoro.it/>

### 6.1.11 Integration of gender dimension into national policy by training, Luxembourg

#### Lead organisation

Ministry of Equal Opportunities

#### Issue

The Ministry of Equal Opportunities, Luxembourg, aimed to develop a method to integrate gender equality and diversity into initial training and lifelong learning for civil and local servants (this would include labour inspectors). This involved developing tools, teaching material and methodologies for the trainers of the national institute of public administration as well as raising awareness among the trainers about gender-sensitive training.

#### The action

- The project in Luxembourg was conducted from November 2008 to October 2009 and was supported by the European Community: Programme for Employment and Social Solidarity (PROGRESS).
- Basic mandatory gender-specific training was developed for civil and local servants.
- The basic gender-specific course included:
  - basic gender awareness (knowledge about gender, gender equality and diversity);
  - gender-assessment skills (analysis of public policies and their impact on gender);
  - gender skill to implement policies;

- improvement of the effectiveness and the impact of public policies;
- knowledge of national and international frameworks.

In a separate, but linked, activity, the Ministry of Equal Opportunities was a partner in the EU Leonardo da Vinci project 'Gender Equality and Diversity Planning at Workplaces (GED-PLAN)'. The project developed quality standards for GED (gender equality and diversity) consultancy at workplaces, a qualification — 'GED consultant at workplace' and an e-learning training programme for 'GED consultant at workplace'. The outline training curriculum included a module on working conditions and healthy workplaces.

### Results

Mandatory basic gender-specific training for civil and local servants with supporting resources:

- a handbook on gender equality in training;
- a booklet with guidelines for trainers;
- a gender-specific basic course for civil servants.

### Further information

Ministry of Equal Opportunities, Luxembourg

GEDplan: <http://www.gedplan.eu>

GEDplan, Gender Equality & Diversity Planning at Workplaces: State of Art Review, 2009. Available at: [http://www.europaforum.public.lu/fr/temoignages-reportages/2009/12/ged-plan/State\\_of\\_Art\\_Review\\_GED\\_Plan\\_171109.pdf](http://www.europaforum.public.lu/fr/temoignages-reportages/2009/12/ged-plan/State_of_Art_Review_GED_Plan_171109.pdf)

## **6.1.12 Brochure 'Desire to have children, pregnancy and substances at work', The Netherlands**

### Lead organisations

TNO Kwaliteit van Leven, Ministry of Social Affairs and Employment (Ministerie van Sociale Zaken en Werkgelegenheid)

### Issue

This is an example on reproductive hazards which covers both men and women. Everyone at work is in contact with materials. Some of these substances can be harmful to health. A specific group of substances, which are toxic to reproduction, has effects on fertility and offspring. For men and women with a desire to have a child or employees who are pregnant or breastfeeding, the exposure to such substances in the workplace could be more hazardous. Good information makes employees aware of the risks of working with reproductive toxins, and gives them information on how to control the exposure.

### The action

The brochure has a range of content:

- definition of reproductive toxins and their effects regarding fertility, reproduction and offspring;
- outlining which substances are among the reproductive toxins;
- recognising whether a substance is a reproductive toxin;
- good examples: the use of reproductive toxins in two different industries (hospitals, dry-cleaners);
- voluntary measures and legal regulations for dealing with reproductive toxins;
- measures to minimise exposure, such as ventilation, structural measures and protective equipment;
- documentation (required by law) about the use, exposure to and handling of reproductive toxins;
- information sources on reproductive toxins.

### Further information

Ministerie van Sociale Zaken en Werkgelegenheid, 'Kinderwens, zwanger en stoffen op het werk'. Available at: [http://fwncwww14.wks.gorlaeus.net/images/uploads/szw\\_kinderwens\\_zwanger\\_en\\_stoffen\\_op\\_het\\_werk.pdf](http://fwncwww14.wks.gorlaeus.net/images/uploads/szw_kinderwens_zwanger_en_stoffen_op_het_werk.pdf)

### **6.1.13 Information campaign in the workplace about pregnancy and reproductive toxins: 'Babyproofbox', The Netherlands**

#### Lead organisations

Federation of Dutch Trade Unions (FNV) and FNV Bondgenoten and FNV Bouw

#### Issue

This is an example on reproductive hazards which covers both men and women. The Federation of Dutch Trade Unions (FNV) developed a 'Babyproofbox' that provides employers with information about reproductive toxins. Workers are particularly exposed to these substances in the chemical, pharmaceutical, metal, painting, furniture and timber industries.

The reason for the development of the box is based on the research of the two trade unions, FNV Bondgenoten and FNV Bouw.

- The research showed that many workers did not know whether they work with substances that will affect fertility or pregnancy.
- Broken down by sector, the figures were more alarming: 47% of painters and workers in the furniture and wood industry, as well as 44% of metal workers, were unaware that they are using toxic chemicals.
- The poll results for the chemicals industry were more positive: most workers knew which substances they work with, but 15% did not know.
- The Dutch Centre for Occupational Diseases, in its Alert Report 2006, confirmed the need to educate workers about reproductive toxins.
- The same institute suggests that when women wish to get pregnant, that not only the work of the woman, but also the operational hazards for the man should be addressed during a consultation with a doctor or the company physician.

#### The action

The 'Babyproofbox' is filled with practical information on which substances are dangerous during pregnancy, how to recognise them, the risks workers face and what individuals can do to improve the use of hazardous substances in the metal, chemical and pharmaceutical industries. The box contains the following:

- brochures with information about reproductive toxins;
- a list of reproductive toxins and where they occur in the metal/chemical industry;
- four best practice examples;
- a checklist, allowing the employee to assess how well the employer is doing in terms of reproductive toxins;
- a sample letter, which can be send to distributors asking for information about the substances they provide and whether they are toxic to reproduction.

#### Further information

'Babyproofbox': [http://www.fnvbondgenoten.nl/werk\\_en\\_inkomen/dossiers/zwangerschap/](http://www.fnvbondgenoten.nl/werk_en_inkomen/dossiers/zwangerschap/)

### **6.1.14 Coaching for women trying to return to work, The Netherlands**

#### **Lead organisation**

Arbocoaching

#### **Issue**

Women wanting to return to work need support.

#### **Action**

This is an example of a general measure on coaching for women which incorporates OSH aspects. In this project, (Coachingstraject voor reïntegrerende vrouwen), Arbocoaching provides training and coaching for women who want to (return to) work. The training tackles issues that are especially relevant for women, such as the gender pay gap, anxiety, stress, burnout, time management and work fulfilment. The training is also available to men who struggle with these issues.

#### **Further information**

<http://www.arbocoaching.nl/doelgroepen/vrouwen>

### **6.1.15 Fewer women with a work disability pension, The Netherlands**

#### **Lead organisation**

Ministry of Social Affairs and Employment and Astri Leiden

#### **Issue**

To promote workplace practices to retain women with a disability.

#### **Action**

A leaflet ('Minder vrouwen in de WAO', Fewer Women with a Work Disability Pension) provides employers with 14 good practices of companies that have a work disability policy that is either specifically aimed at women or is aimed at workers in general, but has turned out well for women.

#### **Further information**

Ministerie van Sociale zaken en Werkgelegenheid, *Minder vrouwen in de WAO! Hoe bedrijven kunnen voorkomen dat vrouwen arbeidsongeschikt raken. 10 voorbeelden*, 2003. Available at: [http://docs.szw.nl/pdf/35/2003/35\\_2003\\_3\\_4274.pdf](http://docs.szw.nl/pdf/35/2003/35_2003_3_4274.pdf)

### **6.1.16 Healthy working for young, educated women, The Netherlands**

#### **Lead organisation**

Stichting WAHO (the WAHO Foundation)

#### **Issue**

Young women may be overlooked concerning actions to prevent work disability.

#### **Action**

The aim of the WAHO Foundation is to help to reduce the proportion of young women who obtain a work disability pension, to increase the number of women that return to work and to boost awareness among employers, supervisors and occupational physicians of the importance of paying attention to the health of young, educated women. Furthermore, the WAHO Foundation aims to increase the body of knowledge and expertise regarding healthy working for women.

### Further information

Stichting WAHO (the WAHO Foundation): <http://www.waho.nl>

## **6.1.17**      *The diversity quick scan, The Netherlands*

### Lead organisation

Arbounie

### Issue

Simple tools to access diversity issues in the workplace, which include health and well-being, are needed.

### The action

This is an example of a general, practical tool on diversity at work which includes well-being aspects. Arbounie (a large occupational health organisation) has developed a diversity quick scan. This diversity quick scan provides organisations with information about the diversity (along such lines as gender, age and cultural background) of their workers.

The aim is to make it possible for organisations to develop specific policy aimed at these groups of workers in order to make all employees feel socially safe in their jobs, and in order for them to function better at work.

### Further information

<http://www.arbounie.nl/Diversiteitsquickscan-2008.htm>

## **6.1.18**      *Integrating gender into a trade-union safety representative guide, United Kingdom*

### Lead organisation

Unite

### Issue

To advise trade union safety representatives on how and why to take account of gender issues in their workplace activities.

### The action

- The guide contains a separate section on gender-sensitive health and safety.
- The appendices include a comprehensive gender sensitivity checklist.
- The guide provides examples of gender insensitivity to help explain why gender sensitivity is important, including the following:
  - standard protective overalls being issued without considering differences in the physical characteristics of men and women;
  - workplace equipment being provided that has been designed with the average European man in mind; for example, kitchen worktops that are too high or too low, or linen trolleys, used by hotel room cleaners, that are an unsuitable size; these can cause musculoskeletal problems;
  - inadequate sanitary and washing facilities for men and women;
  - machinery and plant being difficult to access or operate because people are of different heights or sizes;
  - menopausal women being accused of poor hygiene;

- 'hot-desking', with the result that assessments of workstations are unlikely to be valid for all users.
- It includes an example of how the trade union worked with an employer to solve a gender issue in a practical way. In the forestry industry, there are women workers who are not office based. They work in woodlands located beyond walking distance from toilet and washing facilities. So that no one would be inconvenienced, local bathroom facilities were identified, which workers can use at any time during the working day. There are several public recreation sites nearby, which helps this arrangement. Line managers and staff are aware of the nearest facilities to the workplace and it is agreed that staff may use the employer's official transport if and when these facilities are needed.
- The guide includes examples of actions taken to improve 'women's work', such as improved rest facilities for cleaners, an ergonomically designed coin trolley for cashiers in a bank and ergonomic support for those who develop musculoskeletal disorders.
- The section on bullying, violence and harassment mentions sexual harassment and also describes how a domestic violence ban impacts on the workplace.
- The section on stress mentions work–life balance.
- The Unite website also contains a section on health and safety and gender with links to resources.

#### **Further information**

Unite, *Unite health and safety guide*, 2011. Available at:

<http://www.unitetheunion.org/pdf/Unite%20H&S%20Guide%20q7%20reduced.pdf>

Unite health and safety and diversity web page: <http://www.unitetheunion.org/unite-at-work/informationresources/healthsafetyresources/equalitydiversity/>

### **6.1.19 Developing guidelines on menopause and work, United Kingdom**

#### **Lead organisation**

Trades Union Congress (TUC)

#### **Issue**

Menopausal women can experience hot flushes, headaches, tiredness, sweating, anxiety attacks and an increase in stress levels. The TUC believes that employers need to recognise that women of menopausal age may need extra consideration, as changes during the menopause can affect how a woman does her work and her relationship with her boss and colleagues. The TUC wanted to provide guidelines on the menopause as part of wider activities on women's OSH.

#### **The action**

The work of the TUC in this area dates back to 1998 when it conducted a survey of female safety representatives with the aim of identifying the health and safety concerns of women members. One of the findings of this survey was that more work was needed to investigate the health and safety problems facing women working through the menopause. The survey report stated that 22% of safety representatives said that women at work were raising the menopause as a problem made worse by work. This was a significant response, so the TUC decided to look further into the factors contributing to discomfort during the menopause, workplace policies for time off and flexible working conditions for women going through the menopause.

Another TUC survey of 500 safety representatives was carried out, exploring further the workplace health and safety implications of the menopause. This survey sought more detailed information from safety representatives about women workers' experiences of the workplace health, safety and welfare issues involved. The aim was to find out more about what workplace health and safety problems women were experiencing in connection with the menopause; what they thought the most important issues were; and what action is needed to prevent any risks.

The results were used to develop advice for taking action in the workplace and recommendations for change. It proposed a number of actions that could be taken in individual workplaces and by trade unions. None of them is particularly complicated or expensive. They mostly require people to acknowledge and understand the effect of work on the menopause (and vice versa): it is not usually an unpredictable event, or one that persists, but it does affect nearly the whole working female population at some stage in their lives. Measures identified for prevention and control in the workplace (and updated in 2011 and 2013) include:

- adjustable working temperature, adjustable humidity levels and additional, individual ventilation;
- access to suitable rest and toilet facilities and cold drinking water;
- adequate and flexible rest breaks and toilet breaks;
- suitable uniforms (layered and loose clothing) and protective clothing;
- access to natural light;
- providing better seating;
- reducing long hours and stress;
- healthy eating options, for example in canteens or snack vending machines;
- working policies for time off for treatment, flexible working conditions and constructive handling of sickness absence;
- facilitating access to information and advice;
- providing a sympathetic and supportive working environment and training line managers about what adjustments may be necessary.

Drawing from the research and from what women members and trade union representatives of both genders have told them, the TUC identified some recommendations for the major health and safety stakeholders — employers, unions and the government:

- *trade unions* providing training for safety representatives, giving guidance and listening to and representing the views of women on the menopause;
- *employers* treating women going through the menopause with respect, developing menopause policies in consultation with trade unions, ensuring that risk assessments are sensitive to the needs of women passing through the menopause, and reviewing their procedures (especially sickness absence and disciplinary procedures) to eradicate discrimination against women experiencing the menopause;
- *government bodies* devoting more attention to the menopause, with the national OSH authority (the Health and Safety Executive) producing advice for employers and employees on the health aspects and researching into women's experiences; government generally should also act as a good employer in this regard.

## Results

The TUC has made the menopause a standard part of its work on OSH by integrating it into its regular surveys and the production of advice. To coincide with International Women's Day in 2011, the TUC published new guidance on how employers and union representatives can work together to support women through the menopause at work. It updated and reissued its guidance for safety representatives again in 2013. Its guide says risk assessments should consider the specific needs of menopausal women. The latest guidance is drawn from the experience of union health and safety representatives and research published by the British Occupational Health Research Foundation (BOHRF) in conjunction with the University of Nottingham. It takes account of developments such as the requirements of the 2010 Equalities Act.

## Further information

Paul, J., *Health and safety and the menopause: working through the change*, Trades Union Congress, London, 2003.

TUC, *Employers must do more to support women through the menopause*, press release 8 August 2011. Available at: <http://www.tuc.org.uk/workplace/tuc-19265-f0.cfm>



TUC, *Supporting women through the menopause*, 2011. Available at: [http://www.tuc.org.uk/sites/default/files/Supporting\\_Women\\_Through\\_the\\_Menopause.pdf](http://www.tuc.org.uk/sites/default/files/Supporting_Women_Through_the_Menopause.pdf)

TUC, *Supporting women through the menopause*, 2013. Available at: [http://www.tuc.org.uk/sites/default/files/TUC\\_menopause\\_0.pdf](http://www.tuc.org.uk/sites/default/files/TUC_menopause_0.pdf)

### **6.1.20 Mainstreaming gender into the OSH activities of a trades union confederation, United Kingdom**

#### **Lead organisation**

Trades Union Congress (TUC)

#### **Issue**

To mainstream gender and develop a gender-sensitive approach in order to identify the real issues and effectively raise awareness of and campaign and influence policy regarding OSH and gender.

#### **The action**

The national trades union confederation, the TUC, carries out regular surveys of workplace safety representatives to identify problems, set priorities and develop guidelines and recommendations. Having decided that it needed to explicitly mainstream gender into its health and safety activities, in 1998 it conducted a survey of female safety representatives with the aim of identifying the health and safety concerns of women members. Out of this grew its activities on gender and occupational safety and health (GOSH) overseen by its Women's Health and Safety Working Group.

The TUC works with a group of health and safety specialists employed by its affiliated trade unions to steer its work. It set up a Women's Health and Safety Working Group comprising a limited number of these union specialists to oversee and promote the TUC's work in this area. The Group focuses on a gender-sensitive approach to OSH and ensuring equal rights to protection for all workers. The group makes proposals about what should be done and among other things is consulted over resources that the TUC produces. It has been instrumental in shaping the work on gender and diversity of the UK's national OSH authority (the Health and Safety Executive, HSE).

Overseen by the group, the TUC has carried out further studies and produced various guidelines, practical tools and recommendations for the workplace and policy development and action by stakeholders. It has a specific part of its web pages on health and safety dedicated to GOSH. It uses its web pages to raise awareness, inform about its campaigns, provide access to tools and information (its own and those of other organisations) and to provide information about new developments concerning gender and OSH: reports, new research, activities of the national OSH authority (HSE) etc. Issues highlighted have included: women's jobs and lung cancer; breast cancer and shiftwork; and older women. An example of a tool provided by the TUC is its ready-to-use checklist 'How gender-sensitive is your workplace?'. It has also developed advice on OSH and menopause (see Snapshot 6.1.19).

The TUC often carries out work in partnership with other stakeholders. For example, in 2001, the TUC and the Pennell Initiative for Women's Health published a study of older women's health and safety which showed that, even compared with women's health and safety generally, older women received very little attention, and were even more invisible to traditional health and safety.

The TUC also campaigns generally for trade unions, employers and other stakeholders to take a gender-sensitive approach to OSH and mainstream gender into their activities. Issues that it has raised have included: raising the need for sufficient toilet breaks at work, something that can be particularly problematic for women; issues around standing work (women are more likely than men to have to work in static standing postures than men, but there is a lack of attention to the issue); and concerns over the existence and adequacy of workplace risk assessments for pregnancy.

A network has been set up so that safety representatives can post details of recent research on GOSH information and about what is happening in the UK, Europe and other regions, as well as requests for

information on particular topics, experience of dealing with gender and health and safety issues, and debates about the best way to develop a gender-sensitive approach.

The TUC continues to address this area. Its most recent report on women over 50 in the workplace is based on information extracted from the Labour Force Survey and qualitative research to obtain the views of women over fifty. It looked at a whole range of issues of women aged 50 and over, including health and well-being at work.

#### **Further information**

TUC gender and OSH web pages:

<http://www.tuc.org.uk/workplace/index.cfm?mins=168&minors=167&majorsubjectid=2>

TUC women and health and safety web pages:

<http://www.tuc.org.uk/workplace/index.cfm?mins=178&minors=124&majorsubjectID=2>

TUC Gender and Occupational Safety and Health 'Gender-sensitivity' Checklist, 2008. Available at:

<http://www.tuc.org.uk/workplace/tuc-14179-f0.pdf>

Risk assessment for new and expectant mothers This briefing for safety representatives explains what their employers should do to ensure the protection of pregnant women and new mothers, 2005

TUC, *Age immaterial: women over 50 in the workplace*, 2014. Available at:

[http://www.tuc.org.uk/sites/default/files/Age Immaterial Women Over 50 Report 2014 LR.pdf](http://www.tuc.org.uk/sites/default/files/Age%20Immaterial%20Women%20Over%2050%20Report%202014%20LR.pdf)

### **6.1.21 Liberty Mutual Manual Materials Handling Tables, USA**

#### **Lead organisation**

Liberty Mutual Research Institute for Safety

#### **Issue**

- The aim should be to ensure that manual handling tasks are within the capabilities of women and men. Manual material handling capability tables needed to cover both groups.

#### **The action**

- The new tables are designed in consideration of gender differences when performing tasks of manual materials handling and were improved on the basis of the results of purposive ergonomic laboratory and field-based investigations and research collaboration.
- The tables provide percentages of both the male and female populations who are capable of performing manual material handling tasks without overexertion, rather than maximum acceptable weights and forces.
- The manual materials handling analysis tool is based on the same tables and can be used to perform ergonomic assessments of lifting, lowering, pushing, pulling and carrying tasks.
- The primary goal of assessments is to support ergonomic design interventions.
- The illustrations, instructions and principles contained in the material are based on published research.
- This method can be easily used at companies in order to improve OSH by ergonomic design interventions for both male and female workers.

#### **Further information**

Liberty Mutual Research Institute for Safety, Liberty Mutual Group, Inc.

<http://www.libertymutual.com/>

### **6.1.22 Women in the construction workplace: providing equitable safety and health protection, USA**

#### **Lead organisation**

United States Department of Labor

#### **Issue**

The need for a study was determined by the increasing numbers of women entering the construction trades, and the growing concerns about their health and safety. A report on OSH and women in construction was submitted by the Advisory Committee on Construction Safety and Health (ACCSH) and Health and Safety of Women in Construction (HASWIC) workgroup to the Occupational Safety and Health Administration in 1999.

#### **The action**

- A report outlining the safety and health issues, presenting data and anecdotal information that illustrate the problem and providing recommendations to address these emerging issues.
- The provision of information on seven subject areas where safety and health issues for women occur: workplace culture; sanitary facilities; PPE and clothing; ergonomics; reproductive hazards; health and safety training; and injury and illness data and research.

#### **Results**

- It is an example of how purposive activities to advise governmental bodies on the safety and health issues in specific areas of industry and for specific workers' group could be carried out.
- At present, the results and recommendations of the study remain relevant and are referenced by various organisations and companies, as the problem continues to exist.

#### **Further information**

United States Department of Labor, Occupational Safety and Health Administration, Washington, DC 20210, USA

### **6.1.23 Wear BLUE, USA**

#### **Lead organisation**

Men's Health Network

#### **Issue**

- Men's health and well-being are affected by a lack of awareness, poor health education and culturally induced behaviour patterns in their work and personal lives. The workplace can be used to raise awareness about men's health issues, but resources appropriate to male workers are needed for this to be effective.

#### **The action**

- The campaign Wear BLUE was created by Men's Health Network to raise awareness about men's health issues.
- A Wear BLUE event can educate men, women and their families of the need to raise awareness about men's health.
- The information, tools and resources on the Wear Blue site can be used to help people plan a Wear BLUE event in their workplace.

### Further information

Men's Health Network: <http://www.menshealthnetwork.org/wearblue/>

## 6.1.24 *Designing safer truck cabs for a diverse workforce, USA*

### Lead organisation

National Institute for Occupational Safety and Health (NIOSH)

### Issue

To obtain and share body measurements of the current, more diverse, truck driving population in order to design safer cabs based on body dimensions.

### The action

Truck drivers spend long hours behind the wheel, working an average of 41.5 hours per week. Therefore, a well-designed truck cab can make a significant difference to the working conditions of a truck driver.

Truck manufacturers consider the body dimensions of truck drivers as they design truck cabs. However, until recently, the most current body measurement data for truck drivers dated from the early 1980s. The composition of the trucker workforce has changed dramatically in the past 30 years, with an increase in the diversity of ethnic groups and the percentage of women working in this profession.

In 2006, researchers at the NIOSH began a four-year study to measure the body dimensions of the current truck driver workforce. With the active support of multiple trucking industry partners, researchers were able to recruit a diverse group of nearly 2,000 truck drivers nationwide and record their weight, height and 33 other body measurements. These measurements showed significant differences between the current truck driver workforce and truck drivers 30 years ago.

This information has been shared with the trucking industry, and is being widely used to update and improve truck cab design. Four truck manufacturers and three parts suppliers have utilised the data to create truck cabs with increased visibility, better fitting seatbelts and easier entry.

The design software RAMSIS is being updated with the new measurement information for use in truck cab design across the industry. In addition, the Society of Automotive Engineers has affirmed its plan to update multiple truck cab standards based on the new data.

### Further information

NIOSH — National Institute for Occupational Safety and Health, *A story of impact: Improved safety for truck drivers: designing safer cabs based on driver body dimensions*, 2011. Available at: <http://www.cdc.gov/niosh/docs/2011-188/pdfs/2011-188.pdf>

## 6.1.25 *IEA's Gender and Work Technical Committee, International*

### Lead organisation

International Ergonomics Association (IEA)

### Issue

IEA is an international professional body for researchers and practitioners. Its activities include work on international labour standards and practices. IEA uses technical committees to support its work. In 2006, the president of IEA asked some members to create a Gender and Work Technical Committee (GWTC) to provide a gender perspective in ergonomic analysis.

### The action

The committee's objectives are to:

- advance understanding of the interactions between gender, sex and the science and practice of ergonomics;
- advance understanding of gender issues in the context of work, in relation to the science and practice of ergonomics;
- enhance the contribution of the science and practice of ergonomics to ensure the equal access of men and women to economic, physical and psychological well-being.

In line with the objectives of IEA, the committee has the following work plan:

- identify and suggest priorities for actions by IEA;
- prepare and encourage relevant workshops, symposia and presentations at the meetings of IEA and national ergonomics societies;
- encourage and mentor emerging ergonomists and researchers in the best possible methodologies for rigorous gender-sensitive ergonomics;
- issue a triennial call for research in specific areas, in order to identify needs for research on gender and ergonomics or on ergonomics in women's work;
- issue a triennial list of needed interventions in the relevant areas;
- establish a list of data sources and relevant publications on 'gender at work' and 'women's work' accessible by the internet.

Most of the committee's activities take the form of promoting scientific meetings and exchanges. For example, at the IEA meeting in 2009 in Beijing, papers were presented on such topics as:

- improving women's work in agriculture;
- job demands in women's office work; scheduling problems in relation to work–family balance in cleaning, bus driving, police work and healthcare;
- intergenerational issues in scheduling women's work, physical demands and exposures in housework;
- perimenstrual symptoms and work performance;
- gendered work values;
- effects of gender, age and walking speed on foot symptoms.

The committee has sponsored several special sections or editions of scientific journals: a special section of the *Scandinavian Journal of Work, Environment and Health* (Vol. 35, No. 2, 2009) on sex, gender and MSDs, a special issue of *Work* (vol. 40, Supplement, 2011 <http://www.metapress.com/content/103190>) on how workers manage the interface between work and family and a special issue of *Ergonomics* (Vol. 55, No. 2, 2012) on gender, women's work and ergonomics (<http://www.tandfonline.com/toc/terg20/55/2>).

Joint sessions were organised at the IEA 2012 triennial meeting with two other technical committees (Agriculture and Training) and these sessions and others dealing with gender are available at <http://iospress.metapress.com/content/q66420837m77>.

In response to an appeal from IEA for input into the ISO standard-setting process, the committee suggested that gender-based analysis be formally incorporated into the process.

## Results

Since its establishment, the committee has made a major contribution to the visibility of gender issues in ergonomics. The committee raises the visibility of gender issues in ergonomics, facilitating their inclusion in scientific events and journals and in standard setting and other IEA activities.

## Further information

IEA website/technical committees/gender and work:

[http://www.iea.cc/02\\_about/Technical%20Committees/Gender%20and%20Work.html](http://www.iea.cc/02_about/Technical%20Committees/Gender%20and%20Work.html). Here the committee's membership, scientific justification and mission statement, as well as some of its reports, can be accessed.

### **6.1.26 Incorporating OSH into a global project on women in the informal economy, International**

#### **Lead organisation**

Women in Informal Employment: Globalizing and Organizing (WIEGO)

#### **Issue**

WIEGO is a global research policy action network that seeks to improve the status of the working poor, especially women, in the informal economy. WIEGO is concerned that OSH does not usually cover informal workers and where they work: on the streets, in their own homes, on rubbish dumps at landfills and so on, and does not see workers in the context of family and living and working in very poor conditions.

WIEGO aims to investigate how to develop OSH to better meet the needs of informal workers, and explore new ways of supporting informal workers (including support from governments, and from those who profit from the work of informal workers but do not contribute to improving their place of work).

#### **The action**

- The OSH project started in Ghana and Brazil, working through WIEGO affiliates of informal workers, with street vendors, waste pickers, home-based workers, and others.
- The project's format: working in one city in each country; working with in-country researchers and informal workers' organisations; holding workshops with workers' organisations, to find out about their needs; examining who defines, regulates and controls OSH in the country; arranging dialogues between the workers' organisations and those in government and in the industries in which informal workers work; and developing materials for workers, for advocacy around OSH issues.
- Questions:
  - What data sources exist on OSH in the informal economy? How can these be improved?
  - What are the key health and safety risks faced by informal workers, by occupation group and place of work?
  - What do informal workers say would improve their working environments?
  - Are there examples of successful and enforced regulation, which can be adapted to those at risk in the informal sector in other settings?
  - If the promotion of health and safety in the informal sector is in some instances more realistic than regulation, what has worked well before? Why did it work well?
  - What could the role of organised labour be in assisting in improving the extension of OSH support and regulation or assisting with self-regulation?
  - What are possible alliances between informal workers and other social movements around OSH issues?

#### **Results**

An OSH web page including resources and a newsletter reporting project activities.

#### **Further information**

Women in Informal Employment: Globalizing and Organizing (WIEGO), web pages on OSH: <http://wiego.org/ohs>

## 6.2 Approach at the workplace level

### 6.2.1 *Improving the treatment of gender in ergonomic interventions and epidemiological investigations, Canada*

#### Lead organisation

Centre de recherche interdisciplinaire sur la biologie, la santé, la société et l'environnement (CINBIOSE), Université du Québec à Montréal, Canada

#### Issue

The development of a research approach and recommendations on how to take account of gender effectively in research and interventions.

#### The action

CINBIOSE and its collaborators have studied the treatment of gender in research and in interventions for more than two decades. They have sought to highlight the problems of failing to address gender appropriately and have looked for practical ways for improvement and associated methodologies. Conclusions drawn from their own practical research and collaborations with ergonomists, epidemiologists, public health experts and trade unions include the following:

- Gender is not something that can be acted on like a poor work schedule or a wrong table height.
- In empirical research with workplace populations it is often hard to distinguish whether observed male–female differences are due to biological or social factors.
- There is a need to examine the potential mechanisms linking sex, gender, the workplace and health.
- You can't rely on job titles to assess exposure due to within-job gender differences in task assignments: Conversations with cleaners revealed that gender stereotyping was at the root of an informal re-division of tasks. 'I don't clean toilets at home, why should I clean them at work?' asked one man.
- Sex-related differences can also influence exposure differences within the same job. For example, taller or shorter workers may be more exposed to chemical fumes from a given source.
- Gender potentially determines intrastratum confounding. For example, a research question may be 'Do you lift heavy weights of over 25 kg?'. However, it was observed in one study that where both male and female cleaners lifted weights (25 kg or more) regularly at work, men lifted somewhat heavier weights so exposure was not the same even if the answer to the question was the same.
- For the above reasons epidemiological studies should refrain from adjusting for gender, since this procedure may result in overadjusting. Instead epidemiological and other researchers should generate hypotheses regarding how gender intervenes in the pathways linking exposures and outcome.
- In analysing the data, researchers need to look at the re-division of labour that occurs after women enter a non-traditional job, to see if there are specific exposures of women. For example, by looking at a selection of these jobs or exploring whether the training women are given in how to carry out manual tasks is appropriate for their specific biology.
- For men, equality means (among other things) protection of their health. In some manual jobs, women do more physical tasks but men do more of the tasks with visible, dramatic risks. Therefore, whether these additional exposures are producing specific risks for men should be looked at.
- From the beginning of an epidemiological study, researchers should examine the different workplace processes involving women and men, from the point of hiring: selection, task assignments, turnover, and how they experience, report and claim for compensation for health problems. This will lead to enhanced understanding of the data and better analyses.

One important step to avoid gender-based assumptions when investigating OSH risks is to look at the real work done, including through the participation of women workers. CINBIOSE developed an action-oriented research approach to workplace interventions that it has used to look at ergonomic problems in predominantly female work. The principles behind the approach are: empowerment; using workers' knowledge; questioning established assumptions about risks at work; recognition of gender-based issues in the division of labour; and power relations. The aim is to incorporate knowledge of men and women workers into all stages of the interventions. On-the-spot observation of those doing the work and questioning of this group, as well as of their supervisors and trade union representatives, are used to suggest changes based on real work and set priorities. Methods used include: group interviews; systematic observation and analyses of the real work activities, including the collection of quantitative and qualitative measurements, observation of workers and using questionnaires and interviews with the workers concerned; and feedback and validation, by presenting and discussing the results with workers, supervisors, union representatives, safety committees, and such like.

### Results

- Improved understanding about the effect of ignoring gender or making assumptions based on gender on the quality of research conclusions and ergonomic interventions. Improved understanding about the scope and complexity of the influence of gender in OSH.
- Practical proposals for dealing with gender in epidemiological research and ergonomic interventions.

### Further information

CINBIOSE, Université du Québec à Montréal, Montréal, Québec, Canada.

<http://www.cinbiose.ugam.ca/>

CIHR team in gender, environment and health: <http://www.geh.ges.ugam.ca/PageEn/default.aspx>

Messing, K. (ed.) (1999), *Integrating gender in ergonomic analysis: strategies for transforming women's work*, Trade Union Technical Bureau for Health and Safety, Brussels.

Messing, K. (2012), 'Ergonomic studies and treatment of gender in epidemiological investigations', *30th ICOH Congress 2012, Cancun Mexico, 18-23 March 2012 SP26*.

<http://icoh.confex.com/icoh/2012/webprogram/Session2746.html>

Messing, K. and Stellman, J. M. (2006), 'Sex, gender and health: the importance of considering mechanism', *Environmental Research* 101(2): 149-162.

Messing, K., Stock, S. and Tissot, F. (2009), 'Should studies of risk factors for MSDs be stratified by gender? Lessons from analyses of musculoskeletal disorders among respondents to the 1998 Québec Health Survey', *Scandinavian Journal of Work Environment and Health* 35(2): 96-112.

## 6.2.2 A gender-sensitive OSH approach in railway transport, Croatia

### Lead organisations

The Croatian Railways Ergonomic Association; Croatian Railways; The Railway Workers' Trade Union of Croatia

### Issue

The Croatian Railways Ergonomic Association wished to address, through a gender-sensitive initiative, the continuous limited presence of women in the transport sector and their poorer working conditions when compared with the male workers from the same sector. The Association believed that one of the leading factors could be a lack of adequate policies and actions.

### The action

The key elements include:



- A survey conducted by the Croatian Railways Ergonomic Association highlighted unfavourable working conditions for the administrative workers (e.g. unsuitable desks and chairs; poor heating/air conditioning; unsuitable uniforms, wardrobes and sanitary conditions). Sick leave absences were reported because of these unsuitable working conditions.
- Croatian Railways, the national railway company, took a series of measures to upgrade the working conditions by improving the workplace ergonomics.
- In 2007, a pilot project was conducted to meet the female workers' needs through, for instance, providing redesigned furniture, separate wardrobes and toilets, and tailor-made uniforms.
- The above measures were initially implemented at the ticket selling points of Zagreb Central railway station and then extended to the rest of the country. Additionally, the workers who sold tickets were no longer required to work night shifts.

### Results

- The case study represents an improvement of the working conditions and promotes equal opportunities for the female workers of this sector.

### Further information

Croatian Railways (Hrvatske Željeznice, HŽ): <http://www.hznet.hr/eng/>

The Railway Workers' Trade Union of Croatia (Sindikat Željeznicara Hrvatske, SŽH): <http://www.szh.hr/>

Corral, A. and Isusi, I., Eurofound (European Foundation for the Improvement of Living and Working Conditions), *Innovative gender equality measures in the transport industry*, Dublin, 2007. Available at: <http://www.eurofound.europa.eu/pubdocs/2007/43/en/1/ef0743en.pdf>

## 6.2.3 Flexible hours and health programme to retain older care workers, Denmark

### Lead organisation

Vordingborg municipal care home service

### Issue

To improve working conditions in order to prevent early retirement of older female care workers.

### The action

The Midland home care district in Vordingborg Municipality in southern Zealand currently employs about 100 staff, all women. The average age of the workforce is 42 years: 25% are aged 50 years or older, and just under 10% are aged 60 years or older. The work involves personal and cleaning services for clients. Many employees retire between the ages of 60 and 62 on early retirement benefits, partly on account of the physical demands of the work, but also, more importantly, because of the mental stress involved. Varying working hours, different and changing clients, and unplanned overtime at short notice (the result of illness among staff) were the principal reasons for the home care staff taking early retirement.

A project originally aimed at retaining senior employees led to flexible working practices for all employees. The efforts to retain senior staff have been based on two main elements: flexible working hours and prevention of damage to health. All staff are offered individually adjusted working hours, on a daily, weekly or monthly basis. Since there is no extra funding for such schemes, all reductions of working time are financed by the employees themselves; only the flexibility is offered. The health prevention programme is based on agreements and rules for occupational safety, overseen by a special task force consisting of occupational therapists and physiotherapists.

Social dialogue regarding measures takes place through formal discussions and negotiations with the local representatives of the two trade unions involved in the area.

### Further information

Eurofound — European Foundation for the Improvement of Living and Working Conditions, Vordingborg Municipal Home Care, Denmark: Flexible working practices, 2007. Retrieved 7 July 2011, from: <http://www.eurofound.europa.eu/areas/populationandsociety/cases/dk009.htm>

Eurofound — European Foundation for the Improvement of Living and Working Conditions, Drawing on experience: Older women workers in Europe, 2009. Available at: <http://www.eurofound.europa.eu/pubdocs/2008/85/en/2/EF0885EN.pdf>

## **6.2.4 Improving working conditions for pregnant employees in the magistrate of Bremerhaven, Germany**

### Lead organisation

Magistrate of Bremerhaven

### Issue

The magistrate of Bremerhaven implemented a project to improve the working conditions of pregnant employees, which was initiated by the staff council and the women's employee representative. The starting point was the observation that the administrative offices handled Germany's Maternity Protection Act differently and pregnant women were often labelled a disruptive factor. Therefore, the aim was to integrate the 'normality of pregnancy' into everyday operations, so that women feel comfortable at work and do not report sick.

### The action

The concept was developed by a working group, which included the following experts:

- Internal experts — OSH experts; works council; human resources; company physician; women's employee representatives; representative body for disabled employees.
- External agencies — Commercial Inspectorate; Chamber of Labour Bremen; Central Office to Promote Equal Opportunities for Women (ZGF), Bremen.

The concept included the following key points:

- raising awareness for the theme in newly created organisational structures;
- working groups in the fields of action 'industrial safety', 'work organisation' and 'advice for pregnant women';
- information events for employees;
- dispatch of a leaflet to all employees;
- publication of all necessary data and information on the intranet and in the online magazine.

### Results

The project group developed the following work tools:

- creation of checklists for assessing risks of pregnant women in the workplace and possible violations of the Maternity Protection Act for various professions to improve OSH;
- preparation of a leaflet that gives pregnant women and nursing mothers all the important information in the workplace;
- preparation of a notification for the Labour Inspectorate, a cover letter for pregnant woman, and documentation; the documentation for the course of action of the work organisation assures a quick and seamless process in the personnel office.

In 2010, this project was awarded the Special Prize of the German Employee Committees.

### Further information

Magistrat der Stadt Bremerhaven, Arbeitssicherheit/Gesundheitsmanagement  
Wurster Str. 49, 27580 Bremerhaven, Germany

Magistrat der Stadt Bremerhaven, Arbeitssicherheit  
Postfach 21 03 60, 27524 Bremerhaven, Germany

*Brochure*

'Ein freudiges Ereignis?! Arbeitsschutz in Schwangerschaft und Stillzeit'. Available at:  
<http://www.bremerhaven.de/buergerservice/gesundheit-und-soziales/broschuere-zum-thema-baby-und-beruf-arbeitsschutz-bei-schwangerschaft-und.28425.html>

*Internet*

<http://www.frauen.bremen.de/>

<http://www.arbeitnehmerkammer.de/politikthemen/gleichberechtigung/beruf-familie/beruf-und-familie.html>

## **6.2.5 Tackling gender health inequalities at work by use of gender-disaggregated data, Germany**

### **Lead organisation**

North Rhine-Westphalia Institute of Health and Work

### **Issue**

To apply the informational approach advocated by WHO to provide knowledge about gender inequities and develop gender-sensitive health indicators to identify key differences between women and men in relation to health and in the social determinants of health in order to support policy change at company level.

### **The action**

Following the recommendations of WHO, gender equality and gender equity can be addressed by using various approaches, including legislation, organisational processes and information gathering (an informational approach). Identifying the health gap between men and women at work by the informational approach must include the collection, management and analysis of gender-disaggregated data, for planning and policy purposes as well as for monitoring and evaluating the impacts of interventions.

The main database used is the North Rhine-Westphalia (NRW) Observatory of Health Risks at Work, which provides information on specific worker groups, exposures, health outcomes and industrial sectors. The sources are a combination of administrative registers and statistics (occupational disease registers, exposure registers) as well as surveys. Routinely collected data is disaggregated by gender. This is supplemented by additional surveys.

Analysis of gender-disaggregated data has been used to help to generate evidence about the gender gap in health at work and facilitate change in approaches to health by setting new policy targets and identifying appropriate measures.

### **Further information**

Tackling gender health inequalities at work by use of gender-disaggregated data, Eleftheria Lehmann, Abstract Symposium 1: The Gender Dimension in OSH Policies and Practices, September 12, 2011, XIX World Congress Safety and Health at Work, Istanbul, Turkey.

## **6.2.6 *Creating new professional opportunities for highly qualified women through information and training in health and safety, environmental and quality management, Greece***

### **Lead organisation**

Hellenic Institute for Occupational Health and Safety (ELINYAE)

### **Issue**

During the period 1998 to 2000, a project was carried out under the EU programme Employment NOW (New Opportunities for Women), with a main purpose of supporting female scientists and especially those who would like to reintegrate into the labour market. Training women on OSH management was part of this.

### **The action**

ELINYAE led the project, and worked with the Greek Women's Engineering Association (EDEM), the Hellenic Association of University Women (SEE), General Secretariat of Equality, the Greek Organisation of Employment (OAED) and three private companies (NETSMART, EUROSPACE, and Delta Film International S.A. T.V. Productions). CFAS European Training Centre was a partner from France.

The first stage involved information and consultation. For this reason, a regional telematics network was developed in Athens and Thessaloniki. This network focused its activities on the collection and distribution of information. The central node of the network was the Hellenic Institute for Occupational Health and Safety. EDEM and SEE were the local nodes, offering local information and consulting services on professional issues and in particular on OSH and environmental protection. The purpose of this project was to create a network of information exchange among various women's organisations, state agencies, national and European organisations.

At the second stage, an educational seminar on new scientific topics of OSH and environmental protection was organised, through which 15 women acquired the necessary skills for their competitive re-entry into the labour market. The total duration of the course was 650 hours, of which 342 were on OSH, 90 hours on environment, 66 on total quality management (TQM) and 36 on equal opportunities. At the end of the training programme, trainees carried out a thesis on risk assessment on various sectors, with ELINYAE publishing several of these. Ten of the trained women were employed by Greek enterprises with the financial support of OAED. The employed women were scientifically supported by ELINYAE during their first year of work. The companies participating in the project continued to employ the women even after the end of the financial support.

Later, interconnected networks of female organisations were established with the employment groups, for the support of female professionals, on a two-way exchange of information on employment issues on the above scientific topics. Databases on the unemployed, working female scientists and companies were developed. These databases were used through the network and will function as a mechanism of job seeking for women and as a roster for seeking specialised scientists for the companies.

At the end of the project, special information material was published, in order to inform the public about the new support mechanisms for women and to enhance the sensitivity of the social partners and the public opinion for the necessity of equal employment opportunities for women.

While the example is about creating employment opportunities for women, women are under-represented among OSH professionals. Having more women working in OSH would be likely to support a more gender-sensitive approach to OSH.

### **Further information**

EL.IN.Y.A.E — Hellenic Institute for Occupational Health and Safety

### 6.2.7 Improving the work capacity of older female workers, Finland

#### Lead organisation

Food Service Centrum

#### Issue

To implement a well-being programme to support the work ability and well-being of kitchen workers, half of whom were aged over 45 years, and improve the company's productivity.

#### The action

- Food Service Centrum (FSC) of the Finnish city of Espoo provides catering services for educational facilities, social and health services, and the central administration of Espoo.
- The initiative introduced by the company is notable because it concerns primarily the situation of women. It is conscious of the ageing of its workforce and has invested in measures to promote its work capacity.
- Older workers can access a part-time pension and, if their work capacity is limited, their daily performance requirements are reduced. In addition, the company has implemented measures aimed at increasing skill levels and functional capacity.
- An interesting feature was the establishment of a group to discuss the health issues of women aged over 45 years, known as the Senioriitta group.
- Participants in the Senioriitta group were highly satisfied with the measures, particularly the information they received about the physiological and psychosocial aspects of women's ageing, and insights offered into how to manage these changes.
- The opportunity to discuss issues with women of the same age was rated as very important.
- The group is in addition to and complements the social dialogue that takes place in FSC between industrial safety representatives, the trade union and management.

#### Further information

Eurofound — European Foundation for the Improvement of Living and Working Conditions, *Food Service Centrum, Finland: health and well-being, training and development, redeployment*, 2005. Retrieved 7 July 2011, from: <http://www.eurofound.europa.eu/areas/populationandsociety/cases/fi004.htm>

Eurofound — European Foundation for the Improvement of Living and Working Conditions, *Drawing on experience: Older women workers in Europe*, 2009. Available at: <http://www.eurofound.europa.eu/pubdocs/2008/85/en/2/EF0885EN.pdf>

### 6.2.8 Ergonomics and employability in a car manufacturer, Slovenia

#### Lead organisation

Reeves: Renault Group

#### Issue

Ergonomic improvements as part of a programme to improve employability.

#### The action

Revoz is the only car manufacturer in Slovenia and the biggest Slovenian exporter. In 2003, it became part of the Renault Group.

One of the group's measures, aimed at boosting the employability of its workers, involves introducing ergonomics as part of the group's health and safety at work policy (a priority for the Renault Group).

As a result of this measure, ergonomics in all units have been considerably improved.

Although this measure is not age or gender specific, it indirectly helps to address the issues of an ageing workforce and the employment of workers with impaired productivity. Furthermore, the employability of workers aged over 45 years, especially women, has improved.

The initiative is highly advantageous for the company, particularly in light of the characteristics of the regional labour market, namely the shortage of male workers and the availability of a well-qualified female workforce.

#### **Further information**

Eurofound — European Foundation for the Improvement of Living and Working Conditions, *Revoz, Slovenia: Ergonomics and job design*, 2005. Retrieved 7 July 2011, from: <http://www.eurofound.europa.eu/areas/populationandsociety/cases/si004.htm>

Eurofound — European Foundation for the Improvement of Living and Working Conditions, *Drawing on experience: Older women workers in Europe*, 2009. Available at: <http://www.eurofound.europa.eu/pubdocs/2008/85/en/2/EF0885EN.pdf>

### **6.2.9 Impact of laughter yoga and therapy on occupational stress, South Africa**

#### **Lead organisation**

University of KwaZulu Natal, South Africa

#### **Issue**

Since 1994, affirmative action has facilitated gender equity in the workplace in South Africa, but women managers have experienced work, family and individual stress. Here a different approach to stress reduction among female managers is taken.

#### **The action**

- A sample of African women appointed into managerial positions.
- Study done in both public and private sectors to assess career obstacles and stressors experienced by women managers, including racism, discrimination, glass-ceiling effect, work/family conflict.
- Interventions of laughter sessions used on the managers.
- Level of stress assessed pre- and post-laughter sessions.
- Coping methods used by managers were not effective, but exposure to laughter yoga and therapy sessions showed a significant reduction in stress levels post test.

#### **Further information**

University of KwaZulu Natal, South Africa

### **6.2.10 Urban and interurban bus drivers: psychosocial risk factors, and the development of suitable working clothes for women bus drivers, Spain**

#### **Lead organisations**

- Trade Union Federation of communication and transport of CCOO (Federación de Comunicación y Transporte de CCOO)
- FENE-Bus (Federación Nacional Empresarial de Transporte en Autobús)
- Trade Union Federation of transport, communications and sea of UGT (Federación de Transportes, Comunicaciones y Mar de UGT)

- Foundation for the Prevention of Occupational Risks (Fundación para la Prevención de Riesgos Laborales)

### Issue

The initiative had the following aims:

- to improve the work environment for female bus drivers;
- to alter negative perceptions of women drivers (in the past women have not been accepted by either their peers or their passengers);
- to detect psychological risks faced by female bus drivers in a typically male-dominated occupation;
- to take appropriate prevention measures for those psychosocial risks;
- to provide female bus drivers with suitable clothing for their occupation.

### The action

An interview-based study was carried out among eight groups of urban and interurban women bus drivers in five Spanish cities. Male drivers also took part in this study in three of these groups. Safety engineers and personnel managers were also interviewed. The identified risks were bad ergonomics, workload, personal hygiene, lack of training and social relationships; included in this last risk were the issues of working hours, the balance between work and family life, and stress.

Among the prevention measures suggested were: better bus cabin design; permitting appropriate breaks; providing sanitary infrastructure in collaboration with municipalities; training with specific vehicles; implementing measures to tackle stress and violence, with support from psychologists; adapting work schedules to the real conditions of driving, such as allowing for heavy traffic conditions; creating induction and integration policies specifically for women drivers; and putting in place child care centres, with opening hours adapted to work schedules; and providing career development measures.

In addition, recommendations were made regarding uniforms such as polo shirts and trousers, covering: sizes and styles adapted to women; a variety of clothes and shoes to cover different weather conditions and seasons; and garments suitable for pregnant women.

A short prevention guideline was developed based on the results of the study. It is in two parts and covers psychosocial risks and adequately designed uniforms for women.

### Further information

Trade Union Federation of communication and transport of CCOO (Federación de Comunicación y Transporte de CCOO), Plaza de Cristino Martos, 4-6ª planta — 28015 — Madrid

URL: <http://www.fct.ccoo.es>

*Prevention guideline:* Fundación para la Prevención de Riesgos Laborales, Conductoras de autobuses urbanos e interurbanos. Factores de riesgos psicosociales. Vestuario femenino, 2008. Available at: [http://www.fsc.ccoo.es/comunes/recursos/31/69897-Ver\\_guia.pdf](http://www.fsc.ccoo.es/comunes/recursos/31/69897-Ver_guia.pdf)

EU-OSHA, *Managing risks to drivers in road transport*, 2011a. Available at

[http://osha.europa.eu/en/publications/reports/managing-risks-drivers\\_TWE11002ENN](http://osha.europa.eu/en/publications/reports/managing-risks-drivers_TWE11002ENN)

## 6.2.11 Inclusion of gender in OSH in the region of Cantabria, Spain

### Lead organisation

Cantabrian Institute of Safety and Health at Work (Instituto Cántabro de Seguridad y Salud en el Trabajo, ICASST)

### **Issue**

To include gender in the Cantabrian region's Strategy for Safety and Health at Work 2008-2012 and the planning of specific programmes to promote protection in these situations.

### **The action**

ICASST, as the responsible body for advising on policies for preventing occupational risks, decided to consider gender differences when elaborating Cantabria's strategy for safety and health at work. This covered a prior diagnosis of the situation. It also addressed specific lines of work to develop with business/trade associations, trade unions and the administration. For instance, a training/information activity was carried out between ICASST and the trade union CCOO about reproductive risk prevention and exposure to chemical agents in December 2010. In addition, promotion and dissemination programmes have been implemented, aimed at raising awareness about these issues. An awareness-raising initiative is to be developed in 2011 about the importance of gender in safety and health at work, which will involve a range of experts.

### **Results**

Since 2009, all statistics and studies have included information broken down by sex, including for work accidents, annual reports, specific or sector studies.

### **Further information**

Instituto Cántabro de Seguridad y Salud en el Trabajo: <http://www.icasst.es>

## **6.2.12 Inclusion of gender in OSH in the region of Galicia, Spain**

### **Lead organisation**

Instituto Gallego de Seguridad y Salud Laboral (ISSGA)

### **Issue**

The inclusion of gender in OSH activities.

### **The action**

The autonomous Spanish region of Galicia has been integrating gender into its work programme in various ways. For example, the Commission for the Integration of Equality has the objective to advise and orientate in aspects related to the integration of equality in occupational risk prevention policies, in particular:

- to give impetus to actions such as proposing guidelines about risk assessment for the health of pregnant women and new mothers;
- to advise on special actions carried out by the regional administration that concern preventing risks in sectors employing a high proportion of women;
- to respond to requests for advice, providing criteria and alternatives for the correct application of occupational risk prevention, in accordance with article 6 of Law 14/2007, which created and regulates ISSGA.

The region has produced and published a document about preventing occupational risks in sectors employing a high percentage of women. With this work it seeks to:

- generate interest in the reader regarding the adaptation of jobs and workstations occupied in the majority of cases by women;
- generate real interest in the problems that women at work can face.

Gender is incorporated into studies and investigations. For example, a project with the objective of investigating and developing suitable PPE for seafood fishing and collection carried out on foot will take account of the needs of both male and female workers in the sector. The project will cover the



ability of PPE to provide the necessary physical protection, avoidance of musculoskeletal disorders, and ergonomics of PPE (in terms of individual comfort, ease of use, thermal properties and comfort).

### Further information

ISSGA, Riesgos y prevención en sectores laborales feminizados:

[http://www.issga.es/html/public/servizos\\_publicacions\\_detalle.php?idioma=es&publicacion=109&listar=0](http://www.issga.es/html/public/servizos_publicacions_detalle.php?idioma=es&publicacion=109&listar=0)

## 6.2.13 *Actions to incorporate gender into OSH in the Catalan region, Spain*

### Lead organisation

Department of Work and Social Security/Directorate General of Labour Relations (Departament de Treball de la Generalitat de Catalunya/Direcció General de Relacions Laborals)

### Issue

To mainstream gender into OSH strategy and actions.

### The action

The Catalan region of Spain has a number of actions, completed and ongoing, to mainstream gender systematically into its OSH activities.

*Gender was explicitly included in the Catalan Strategy on Safety and Health at Work (ECSSL) 2009-12:* Transversal objective 4 states that the strategy is to guarantee a gender perspective in all actions regarding OSH and specifically:

- to include and promote gender in studies and publications;
- to include and promote gender in training and advice;
- to monitor each of the strategy's programmes and actions from a gender perspective.

*The incorporation of gender in the resolutions of the Department of Work and Social Security:* The systematic incorporation of gender in the drafting of resolutions of the Department of Work and Social Security directed at those agents involved in the prevention of occupational risks. This is an ongoing activity.

*Recommendations for negotiating collective agreements:* The recommendations regarding equal treatment and opportunities for women and men are the first agreement established by the social partners in the Commission of Equality and Working Time of the Board of Industrial Relations (la Comisión de igualdad y del tiempo de trabajo del Consejo de Relaciones Laborales). Recommendations for collective negotiations regarding OSH are being developed. The gender perspective is being included in the recommendations.

### *Publications to raise awareness and support the inclusion of gender in OSH*

Information sheets have been published that include the following points:

- gender in relation to OSH — key points;
- the inclusion of gender in risk assessment;
- men and women with different exposures and health problems;
- key aspects for risk assessment and prevention activities that are sensitive to gender;
- lines of action for integrating the gender perspective.

### Further information

Departament de Treball de la Generalitat de Catalunya/Direcció General de Relacions Laborals

## 6.2.14 *Inclusion of gender in occupational risk prevention by the regional government of Andalusia, Spain*

### **Lead organisation**

Andalusian Institute of Occupational Risk Prevention (IAPRL), Junta de Andalucía

### **Issue**

The integration of gender into OSH activities in Andalusia and OSH into equality plans.

### **The action**

The regional government of Andalusia has a strategy to mainstream gender into OSH. Some of the steps taken and activities are given below.

*Promotion of best practices:* For example, a manual of best practices to promote prevention from a gender perspective, within promotion activities, focusing on sectors, professions and specific risks and regarding prevention organisation and gender plans;

*Investigation of the labour market and working conditions of women and men in Andalusia:* For example, a study of the segregation of workers of both sexes by analysing market rates of activity, employment and unemployment and horizontal and vertical segregation, as well as the temporary and part-time employment rates, the different exposure to the several working risks affecting both sexes, the differences in their labour contribution over the life cycle and wage discrimination.

*Promotion of protection policies on reproductive risks:* This is with particular regard to pregnancy, maternity and breastfeeding cases.

*Study of the legal framework* and policies and practices of assessment and preventive planning, as well as agents, processes and working conditions that may involve some risks.

*Study of Public Administration practices on risk assessment:* medical reports of the National Health System.

*Guides relevant to sectors where women work:* Andalusia has also produced a guide to preventing domestic risks.

### **Further information**

Andalusian Institute of Occupational Risk Prevention

Seguridad y salud laboral: [http://www.juntadeandalucia.es/empleo/www/index\\_tematicas\\_prl.php](http://www.juntadeandalucia.es/empleo/www/index_tematicas_prl.php)

Guide to domestic risks: *Guía de Prevención de Riesgos Domésticos:*

[http://www.juntadeandalucia.es/empleo/www/herramientas/biblioteca\\_virtual/bibliotecaDetalle.php?id=1784](http://www.juntadeandalucia.es/empleo/www/herramientas/biblioteca_virtual/bibliotecaDetalle.php?id=1784)

## 6.2.15 *Women and PPE, United Kingdom*

### **Lead organisation**

Women's Engineering Society (WES)

### **Issue**

Ill-fitting and inappropriate PPE for women can be a safety problem and also a barrier to women working in engineering. WES wanted to investigate and take action on this OSH issue for women.

### **The action**

- The WES safety clothing survey was conducted among 600 people during winter 2009-10 to assess the suitability of PPE for women. Over 550 people responded, including 45 men.
- The survey found that most of the PPE worn by women was designed for men, with only 8% of respondents wearing PPE designed for women.

- Women who wore PPE designed for men generally found it uncomfortable (60%) and this was specific to design, size and fit.
- The worst offenders were reported as jackets (76%), gloves (59%), shoes (57%), trousers (56%) and headwear (29%).
- The respondents noted that oversized clothes could be a safety hazard, while oversized gloves make it difficult to work safely or accurately.

### Results

- The results of the survey promoted a campaign to get women to obtain proper fitting PPE.
- WES provides, via its website, access to a bespoke range of modern safety footwear (boots and shoes) that is suitable for women.

### Further information

The Women's Engineering Society  
c/o The IET, Stevenage SG1 2AY, UK

URL: <http://www.wes.org.uk/>

See also Case 4.10.

## 6.2.16 Grampian Fire and Rescue Service's Gender Equality Scheme, United Kingdom

### Lead organisation

Grampian Joint Fire and Rescue Board

### Issue

The Grampian Fire and Rescue Service's first Gender Equality Scheme was published in June 2007. There are 42 fire stations, with 930 staff of whom 829 are operational. The aim of the Fire and Rescue service was partly to attract a workforce that reflected the population of the region, which is approximately 50% women. As part of its scheme it has reviewed the sleeping accommodation on whole-time operational fire stations.

### Results

Its equality scheme 2010-12 provided information about the steps that a male-dominated organisation is taking to address the balance in its workforce by looking at the welfare facilities of its female firefighters.

### Further information

Grampian Joint Fire and Rescue Board, *Gender equality scheme 2010-2012*, 2010. Available at: <http://www.grampianfireandrescueservice.org.uk/>

## 6.2.17 Gender equality planning in transport, United Kingdom

### Lead organisation

Transport for London

### Issue

As part of its 'Dignity at work' policy, London Underground:

*...improved facilities for women in its operational settings, including providing female train operators with keys for all toilet facilities and ensuring they know their locations; ensuring line control managers at all stations are aware of how long it takes to reach the nearest toilet facility; committing to a review*

*of the physical conditions of toilets and changing facilities, to ensure improvements have been and continue to be delivered.* (Transport for London, Gender Equality Scheme 2007-2010)

### **Results**

This is an example of another organisation improving its existing welfare facilities so that women can have better access. However, these changes also have a positive benefit for both male and female workers, particularly older workers who may need more regular toilet breaks.

### **Further information**

Transport for London, *Gender equality scheme 2007-2010*. Available at:

[http://www.tfl.gov.uk/assets/downloads/corporate/Gender\\_Equality\\_Scheme\\_2007-2010.pdf](http://www.tfl.gov.uk/assets/downloads/corporate/Gender_Equality_Scheme_2007-2010.pdf)

EU-OSHA, *Managing risks to drivers in road transport*, 2011a. Available at

[http://osha.europa.eu/en/publications/reports/managing-risks-drivers\\_TEWE11002ENN](http://osha.europa.eu/en/publications/reports/managing-risks-drivers_TEWE11002ENN)

## 7 Additional examples

This section contains some additional descriptions of a range of initiatives and experiences on gender and OSH. As they were encountered when the project was already in progress, they are not included in the analysis. The examples are very varied, ranging from simple, small steps to more wide-ranging practices and actions. The inclusion of them in the report helps to show the full diversity of what it means in practice to ensure that both women and men are included in OSH activities and the kinds of steps that can be taken. While some may appear to be very sector specific, often the types of issues, the approaches or the solutions are readily applicable to other situations.

### Toilets for women workers

Being gender-sensitive to OSH can be as simple as providing both male and female workers with toilet facilities. Following pressure from women trade union members, UK transport workers union TGWU (now Unite) negotiated the provision of toilets for women in several workplaces. The first step in some cases is to get the trade union to recognise it as an issue that needs attention. Women bus workers in Bristol, acting through the trade union, raised the issue of toilets for women and started a wider campaign with a resolution at the International Transport Federation (ITF). This inspired women at other workplaces to raise the issue of the provision of a toilet for women with their employer through the trade union. This included negotiations at the port of Folkestone, which resulted in the harbour master announcing the opening of a women's toilet where previously only men had been catered for. The women were keen to point out that easy access to adequate toilet facilities is a health issue for men too.

#### *Further information*

ITF Women's network — Network News No. 9: <http://www.itfglobal.org/>

ITF's activities on women in transport

- <http://www.itfglobal.org/women/>
- <http://www.itfglobal.org/road-transport/road-transport-1058.cfm>

### Making women's working conditions a priority in an international trade union federation

The International Transport Workers' Federation (ITF) has undertaken various activities to investigate and promote appropriate working conditions for women in the road transport sector. Starting with a meeting of women road transport workers, some new initiatives were developed. A survey of women in road transport focusing on health and safety issues was carried out, which was used as the basis for a report: 'Women on the Road to a Safe and Healthy Working Environment'. The guide is aimed at trade unions, with the object of encouraging them to work closely with women workers in the sector. It contains information about women's experiences, good practice advice and examples, and guidance on how to consult and involve women workers. Sharing information about what takes place is important, so ITF continues to give a voice to initiatives in this area on its website and journals, as in the previous example on toilets for women.

#### *Further information*

- EU-OSHA, *Managing risks to drivers in road transport*, 2011a. Available at [http://osha.europa.eu/en/publications/reports/managing-risks-drivers\\_TEWE11002ENN](http://osha.europa.eu/en/publications/reports/managing-risks-drivers_TEWE11002ENN)
- ITF website: Women in road transport: <http://www.itfglobal.org/road-transport/road-transport-1058.cfm>

### A national OSH institute investigates the concerns of tradeswomen

It is the policy of the National Institute of Occupational Safety and Health (NIOSH) in the USA, to integrate gender issues into its work. For example, it ensures a gender balance within its research programme through the industries it covers and the types of risks. However, it has also looked at women in traditional male jobs. One area it has investigated is tradeswomen employed in the construction industry or closely related trades. For example, one study sought to obtain tradeswomen's perspectives of OSH in such jobs using qualitative investigation methods. The study group was based

on purposeful rather than random sampling; trades groups that were represented included carpenters, welders, electricians, plumbers, labourers, mechanics and millworkers. Data were collected through focus groups, in-depth interviews and open-ended self-administered questionnaires. The total sample size was 51 respondents. Researchers found the major concerns were exposure to chemical and physical agents; injuries from lifting, bending, twisting, falling and being cut; lack of proper education and training; and health and safety risks related specifically to tradeswomen (inadequate protective clothing and tools and so on). They also concluded that many of these concerns were amenable to change through engineering, behavioural and/or administrative interventions and that appropriate changes should help to make the construction site a healthier and safer place for workers of both genders.

NIOSH also carried out research to look at the differences in accidents and fatalities to men and women in construction and the jobs they do. Women have a different pattern of fatal injuries and some non-fatal injuries than men. While both men and women face many of the same risks, there are some unique issues that are of greater concern to women. Tradeswomen are more likely than their male counterparts to die in job-related motor vehicle accidents or from job-related homicide and less likely to die from falls. Of women killed by motor vehicles, 30% worked as 'flaggers' (directing traffic through a construction site). Another type of research has been to look at the design of protective equipment for women and men. For example, 25 subjects tested 18 models of facepiece filtering respirators by using simulations to look at the effect of participant characteristics (gender and face dimensions) and respirator features (design style and sizes available) on respirator fit. Based on the findings from this and other studies, the conclusion is that measuring face length and width should be used to define the panel for half-facepiece respirators.

#### *Further information*

NIOSH web pages:

- <http://www.cdc.gov/niosh/topics/women/construction.html>
- <http://www.cdc.gov/niosh/topics/women/ppe.html>

#### **Guides on reducing static sitting in office work, a key issue for many women workers**

While both men and women office workers may sit for long periods of time at their desks, women's work is more often characterised by factors such as lack of control over how they work and the pace at which they work. In short, of the many women working in offices, very many of these are 'tied' to their desks and chairs. Long periods of static sitting at a desk at work can cause a variety of musculoskeletal disorders, including the typical neck, shoulder and back pains. Therefore, guides concerning the 'ups and downs' of sitting in the office that give practical advice on building motion into daily routines, work organisation and motion-friendly furniture address a problem that affects many women workers. The New Quality of Work Initiative (INQA) of BAuA in Germany recognised that this issue deserved attention and produced two practical guides providing simple advice on dynamic sitting and sit-stand working. They are suitable for employees and employers, explaining in simple terms the problem and what can be done, including a range of practical tips. The guides are available in German and English.

#### *Further information*

BAuA — Bundesanstalt für Arbeitsschutz und Arbeitsmedizin, *Up and down — up and down. How dynamic sitting and standing can improve health in the office*, Dortmund, 2008. Available at: <http://www.baua.de/en/Publications/Brochures/A65.html>

BAuA — Bundesanstalt für Arbeitsschutz und Arbeitsmedizin, *The ups and downs of sitting — Sitting at work and elsewhere*. Available at: <http://www.baua.de/en/Publications/Brochures/A66.pdf>

#### **Working as a pregnant surgeon**

A consultant orthopaedic surgeon was interviewed about surgery being a male-dominated profession on BBC Radio in the UK. She said that working as a surgeon has a reputation for being a very physical specialty and, by inference, this creates difficulties for pregnant women. But she described how it is largely a matter of awareness and support: there are a number of practical things that can be done for

a pregnant surgeon. Some are required by law, such as adjustments to the work based on risk assessment. These adjustments to work practices are often small. But people often do not know this; they often have never before experienced working with a pregnant registrar and they react by saying 'You can't work with that', 'You can't work on call', 'You can't work with X-rays' when in fact you can.

#### *Further information*

BBC Radio 4, 'Why is surgery still male-dominated?', *Woman's Hour*, broadcast on 13 February 2012, 10:00 a.m. Available at: <http://www.bbc.co.uk/programmes/p00p44j8>

#### **Gender and OSH initiatives identified at an EU-OSHA seminar**

In a seminar on mainstreaming gender into OSH organised by EU-OSHA (EU-OSHA, 2005) a variety of different gender and OSH initiatives and proposals for actions were reported.

The Danish Confederation of Trade Unions (LO) started to *coach shop stewards* 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 competencies to identify where and how gender issues are present at the workplace. There is a specific focus on change processes and they discuss 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 in particular towards improving mental well-being at work, maintaining working ability, and work-life balance through, for example, flexible working-time arrangements. In addition, the particular 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.

Ireland and Northern Ireland were engaged in transposing the Voluntary Protection Programme (VPP) from the USA. The VPP is a programme run by the Occupational Safety and Health Administration (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) ran a pilot programme with eight companies participating, all of them US companies. One of the objectives of the project's joint steering group was to ensure the inclusion of the gender dimension.

*It is important for a group of workers to be listed in a compensation scheme* as this promotes action in the workplace in order to avoid compensation payment. For example, following some research, textile workers became eligible for compensation, and at that point workplace improvements began to be made.

In Denmark, during the last 30 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 pregnant women to continue in the job.

There was a *company-level intervention in Johnson & Johnson in France to facilitate work-life balance*: employees' families are regularly invited to the workplace for free-time activities and sport activities. The aim was to integrate the families into the company spirit. There are children's club activities and a big event, the 'family day', once a year.

#### *Further information*

EU-OSHA, 'Seminar on women at work — Raising the profile of women and occupational safety and health (OSH)'. Available at: <http://osha.europa.eu/en/seminars/seminar-on-women-at-work-raising-the-profile-of-women-and-occupational-safety-and-health-osh>

#### **Mail bags**

When women were first employed as letter carriers in the UK, the mailbags were too heavy for some of them to carry and smaller mailbags were used. As a result the musculoskeletal injury rate fell for both sexes.

#### *Further information*

WHO — World Health Organization, 'Building healthy and equitable workplaces for women and men: A resource for employers and worker representatives', *Protecting Workers' Health Series* No. 11. Available at: [http://whqlibdoc.who.int/publications/2011/9789241501736\\_eng.pdf](http://whqlibdoc.who.int/publications/2011/9789241501736_eng.pdf)

#### **Loan of car seatbelt adapters to pregnant workers**

Mutualia (one of the Spanish mutual associations which provides statutory workplace insurance services related to work accidents, ill health and prevention) lends its pregnant staff a car seatbelt adapter designed specifically for use by pregnant women, which allows the seatbelt to be worn in the correct position. To accompany this initiative, it developed awareness-raising information, which it gives to all its female employees. The information explains the risks of incorrect seatbelt use during pregnancy to the pregnant woman and the fetus, how to wear a seatbelt correctly (below the 'bump'), and how to get the special seatbelt on loan. They also make their equality plan available on their website.

#### *Further information*

Mutualia, Memoria Plan De Igualdad 2008-2009. Available at: <http://www.mutualia.es/images/stories/pdf/memoria%20igualdad%202009%20mutualia.pdf>

EU-OSHA, *OSH in figures: Occupational safety and health in the transport sector — An overview*, 2011b, p. 50. Available at: [http://osha.europa.eu/en/publications/reports/transport-sector\\_TERO10001ENC](http://osha.europa.eu/en/publications/reports/transport-sector_TERO10001ENC)

#### **Surveys on gender and working condition in the transport sector**

A first stage to look into gender issues can be a survey, to get worker and employer views. Below are some examples from the transport sector. The sector is male dominated, but there is an increasing interest in improving working conditions in order to recruit and retain more women and improve equality within the sector.

Following discussion at the European Transport Federation's (ETF) conference in 2005, the ETF Women's Committee proposed to include a gender debate on the agenda of one of their bi-annual meetings and further analysed the outcome of these discussions. The results were summarised in a booklet that also gives recommendations on how to adapt workplaces in transport to women. The brochure also provides links to factsheets addressing specific issues: workplace mapping for safety; exposure to diesel exhausts; and body mapping to identify health problems. In 2007-08, the ETF subsequently launched a one-year EU-funded project aimed to guide and mobilise trade union action to make the transport industry a more attractive workplace for women and to eliminate the risk of gender inequality at work. More details of the findings of the discussion are available in EU-OSHA (2011a,b).

In Belgium, the Social Fund for Transport of Goods carried out a market research study (called TRANSAM) of the sector, which covered 440 companies. The study included both quantitative and qualitative data. Employers and employees were asked several questions regarding gender differences and their views on why women did not work in the sector. For more information about the survey results see EU-OSHA (2011b, p. 50).

#### *Further information*

EU-OSHA, *Occupational safety and health in the transport sector — An overview*, 2011a. Available at [http://osha.europa.eu/en/publications/reports/transport-sector\\_TERO10001ENC](http://osha.europa.eu/en/publications/reports/transport-sector_TERO10001ENC)

EU-OSHA, *OSH in figures: Occupational safety and health in the transport sector — An overview*, 2011b, p.50. Available at [http://osha.europa.eu/en/publications/reports/transport-sector\\_TERO10001ENC](http://osha.europa.eu/en/publications/reports/transport-sector_TERO10001ENC)

#### **Gender mainstreamed into EU-OSHA reports on the transport sector**

It is the strategy of EU-OSHA to explicitly cover gender in its reports as appropriate, through data, examples and in discussion and conclusion sections. Two EU-OSHA reports on the transport sector present information on gender, including examples of initiatives targeting women workers in the sector



and covering gender/women in the discussion and conclusion sections, so they are an example of mainstreaming gender in an OSH activity.

#### *Further information*

EU-OSHA, *Managing risks to drivers in road transport*, 2011a. Available at [http://osha.europa.eu/en/publications/reports/managing-risks-drivers\\_TWE11002ENN/](http://osha.europa.eu/en/publications/reports/managing-risks-drivers_TWE11002ENN/). For example, transport sector cases are given on pp. 46-50.

EU-OSHA, *OSH in figures: Occupational safety and health in the transport sector — An overview*, 2011b, p. 50. Available at [http://osha.europa.eu/en/publications/reports/transport-sector\\_TERO10001ENC](http://osha.europa.eu/en/publications/reports/transport-sector_TERO10001ENC). See examples on: investigating and promoting appropriate working conditions for women, International Transport Workers' Federation, p. 103; partnership project on the work environment and uniforms of female bus drivers, Spain, p. 189; Transport for London, action plan for women drivers, p. 191.

#### **Seniors programme at Finnish food manufacturer Saarioinen**

The company has a large female workforce. Workers of 55 years and over are given tasks that are less physically demanding; they do not need to work three shifts; they do not have to rotate between different tasks; holiday bonus can be changed to annual leave with an additional 15 days' holiday; and they can apply for alternation leave, a Finnish sabbatical leave system. The programme allows the workers to combine more flexibly their care duties with work schedules. In making the arrangements, the role of shopfloor-level bosses is central and puts new demands on their skills for negotiation. 'I asked for some time for recuperation from heavy care duties, and with more flexibility at work I feel better,' says Leila Marin. 'Nearly everyone applies to join the programme,' says company director Ms Tuohimaa. In 2011, the average retirement age rose to around 61.5 years.

Source: presentation by Kaisa Kauppinen, FIOH at ORP 2012, Bilbao, 23–25 May 2012

#### **Women in Safety Engineering (WISE), American Society of Safety Engineers**

In the USA, the structure of the American Society of Safety Engineers (ASSE) includes common interest groups (CIGs). The CIG Women in Safety Engineering (WISE) has been established to foster the advancement of women in the safety, health and environmental (SH&E) profession through the objectives contained in its mission statement:

- fostering an environment that allows members to share ideas;
- ongoing evaluation of the state of women in the SH&E profession;
- mentoring women in the SH&E profession;
- networking to strengthen professional relationships;
- obtaining professional certifications;
- promoting the development and peer review of written material related to issues specific to women in the workplace as well as within the SH&E profession.

In addition, WISE's objectives include: publishing a triannual newsletter; developing a presence at the Society's Professional Development Conference through professional networking and educational sessions; having a forum to enable discussion that encourages and promotes women to make a greater impact within the safety profession. It produces resources such as an online resource for products geared to women and women-owned SH&E businesses.

#### *Further information*

WISE's newsletters and other resources are available from its website: <http://www.asse.org/practicespecialties/wise/>

#### **National OSH authority promotes recruitment of female worker safety representative, UK**

Women are under-represented in the health and safety decision-making process. In particular, more women are needed to be safety representatives. As part of its 'Do your bit' initiative to promote worker participation, the Health and Safety Executive collaborated with the Office of Rail Regulation and

Trades Unions to produce a leaflet aimed at encouraging women to take on the role of trade union safety representative. The leaflet explains why safety representatives are needed and describes the role they perform and the benefits of being a safety representative.

*Further information*

The leaflet is available at: <http://www.hse.gov.uk/involvement/doyourbit/resources/female-reps-leaflets.pdf>

### **Eurofound's long-standing commitment**

The European Foundation for the Improvement of Living and Working Conditions is a European Union body set up to contribute to the planning and design of better living and working conditions in Europe. Eurofound maintains a long-standing commitment to the issue of equal opportunities for women and men in their social and working life. In recent years, Eurofound has devoted even greater attention to gender-based inequalities, including the gender pay gap, through studies on equal opportunities, through its European Working Conditions surveys, and by mainstreaming a gender perspective across its other activities. It carries out a separate secondary analysis of its Working Conditions surveys to further investigate gender issues. Another example of how it integrates the gender issue throughout its work can be seen in its projects on sustainable work. It also carries out projects on issues more specifically related to working women such as work–life balance, notwithstanding the fact that Eurofound makes clear that this is an issue for men too.

*Further information*

Eurofound web pages on gender: <http://www.eurofound.europa.eu/areas/gender/index.htm>

### **Pregnancy parking spaces**

One way to make a woman's life easier during pregnancy, especially during the later stages, is to reduce the amount of walking she has to do. Some companies provide their pregnant employees with parking spaces near the entrance.

### **GED-PLAN — integrating working conditions into a curriculum on workplace gender plans**

The EU Leonardo da Vinci project 'Gender Equality and Diversity Planning at Workplaces (GED-PLAN)' had the following objectives: to create quality standards for GED (gender equality and diversity) consultancy at workplaces; to create an innovative qualification (GED consultant at workplaces); and to support vocational education and training practices by developing an e-learning training programme for the GED consultant at workplaces. The outputs included an Outline Curriculum for Gender Equality and Diversity (GED) Consultant at Workplaces, an associated training programme and an e-learning platform. Working conditions and healthy workplaces were integrated into the project and its training resources.

Taking the 'Outline curriculum for gender equality and diversity (GED) consultants at workplaces' as an example, module 3.8 covers working conditions and healthy workplaces.

The specific objectives of the module are to:

- provide knowledge and enable trainees to identify inequality problems in workplaces in this area;
- raise awareness about the benefit for organisations from arranging workplaces suitable for both men and women;
- present the benefit from maintaining a healthy workplace environment;
- develop trainees' skills to set up concrete objectives and measures for a GED plan in this area and to identify the indicators for monitoring.

The module presents the results of some European surveys on the benefit for organisations from implementing a healthy environment and ensuring good working conditions: social image, loyalty of employees, good psychological climate, productive cooperation, etc. It introduces some good initiatives to decrease horizontal segregation in organisations by rearranging workplaces to make them suitable for both men and women. The necessity to pay special attention to the needs of pregnant and breastfeeding women is emphasised. The module presents good practices on carrying out annual

interviews with employees to assess their satisfaction with working conditions and environment. These interviews serve as a base for further development of the measures to be included in the GED plan. Practical exercises are offered for developing actions/measures to be taken by an employer to create work conditions and a healthy environment suitable for all at workplaces. The module analyses the possible indicators to monitor the equality and diversity situation in this area.

Other modules cover work–life balance and work culture (harassment).

*Further information*

<http://www.gedplan.eu/>

### **ILO policy and strategy on gender equality and mainstreaming**

The ILO's policy on equality between women and men, expressed in the Director-General's Circular no. 564 (1999), calls for mutually reinforcing action to promote gender equality in staffing, substance and structure. This is achieved by mainstreaming gender equality into all aspects of ILO work. The Bureau for Gender Equality provides office-wide support to this process. The promotion of gender equality is reflected in the ILO programme and budgets for which the entire organisation shares responsibility. The overall strategy is to intensify the mainstreaming of gender equality into all ILO programmes, including Decent Work Country programmes and national poverty reduction policies and strategies. The ILO supports constituents in this process through the collaboration of its gender specialists and gender focal points.

The ILO approach to gender mainstreaming is two-pronged and based on analysis that considers the specific and often different needs and interests of women and men in the world of work. On the one hand, awareness of these different needs and interests is integrated into all policies, programmes, projects and institutional structures and procedures. On the other hand, especially where inequalities are extreme or deeply entrenched, they are addressed through gender-specific measures involving women and men, either separately or together or through measures designed explicitly to overcome inequalities. Mainstreaming can include gender-specific actions where necessary.

The organisation has developed a single, overarching Action Plan for Gender Equality 2010-15, which operationalises the 1999 ILO policy on gender equality. The ILO uses participatory gender audits, both within the organisation itself and with other organisations, to promote individual and organisational learning on ways to mainstream gender in order to help achieve equality between women and men and provides a manual among its gender resources on its website.

*Further information*

ILO and gender equality web page: [http://www.ilo.org/gender/Aboutus/ILOandGenderEquality/lang--en/index.htm#P2\\_23](http://www.ilo.org/gender/Aboutus/ILOandGenderEquality/lang--en/index.htm#P2_23)

ILO and participatory gender audits:

[http://www.ilo.org/gender/Informationresources/Publications/WCMS\\_113746/lang--en/index.htm](http://www.ilo.org/gender/Informationresources/Publications/WCMS_113746/lang--en/index.htm)

ILO participatory gender audit: a tool for change. Available at:

[http://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms\\_101030.pdf](http://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_101030.pdf)

Resource guide on gender equality in the world of work. Available at:

<http://www.ilo.org/public/english/support/lib/resource/subject/gender.htm>

Gender equality and decent work: good practices at the workplace. Available at:

[http://www.ilo.org/public/libdoc/ilo/2005/105B09\\_60\\_engl.pdf](http://www.ilo.org/public/libdoc/ilo/2005/105B09_60_engl.pdf)

### **The Gender Dimension: Integrating the Gender Perspective in Occupational Safety and Health Policies, ILO**

As part of its Safe Work programme, the ILO carries out specific actions to address the integration of gender issues into occupational safety as well as incorporating gender into its general actions on OSH. For example, its encyclopaedia on OSH includes articles on gender.

The ILO promotes gender mainstreaming in OSH and provides the following *advice on its website*:

- Health promotion policies for working women need to take into account all three of their roles: housewives, mothers and workers. The effects of gender on health need to be more carefully explored to develop a better understanding of the relationship between women's health and the social and economic roles of women as they match those of men. These findings need to be incorporated into policy-making.
- If health promotion policies in the field of OSH are to be effective for both women and men, they must be based on more accurate information about the relationship between health and gender roles. A broad strategy for the improvement of women workers' safety and health has to be built up within a national policy on OSH, particularly in those areas where many women are concentrated. The effects on health of each role have to be looked at separately and the potential conflicts and contradictions between them need to be examined. A coherent framework should be developed to ensure a coordinated national approach.
- A national policy on OSH should include the specific protection of women workers' safety and health as a goal. It should provide guidance to enable employers, trade unions and national authorities to identify problems, make the appropriate links with general safety and health activities for all workers and develop specific programmes to ensure that the needs of women workers are taken into account in occupational and industrial restructuring processes at the national level, particularly in the areas of legislation, information and training, workers' participation and applied research.
- In the case of research on OSH, occupational epidemiology should be sufficiently sensitive to identify any gender-based disparities.

More detailed resources to support the adoption of a coherent national policy on OSH and action at the national and enterprise level are available on the ILO website.

*Further information*

[http://www.ilo.org/safework/info/WCMS\\_108287/lang--en/index.htm](http://www.ilo.org/safework/info/WCMS_108287/lang--en/index.htm)

Gender and occupational safety and health web page:

<http://www.ilo.org/safework/areasofwork/gender-and-occupational-safety-and-health/lang--en/index.htm>

### **Moving towards decent work for domestic workers: actions by the ILO**

The EU-OSHA report of 2003 on gender and OSH highlighted that domestic workers are excluded from the EU Framework Directive on OSH. As this group is female dominated, this is an example of indirect discrimination. The International Labour Organization (ILO) has taken a number of initiatives over the years within their strategy and activities to progress the situation of domestic workers. The adoption of international labour standards on domestic work (Convention No. 189 and its accompanying Recommendation No. 201) by the ILO at its 100th International Labour Conference in June 2011 represents a key milestone in its goal to achieve decent work for domestic workers. Following this, a comprehensive report on domestic work across the world was published, the first research of its kind conducted by the ILO.

*Further information*

ILO Convention and Recommendation on domestic work

[http://www.ilo.org/dyn/normlex/en/f?p=1000:12100:0::NO::P12100\\_ILO\\_CODE:C189](http://www.ilo.org/dyn/normlex/en/f?p=1000:12100:0::NO::P12100_ILO_CODE:C189)

Domestic workers across the world: Global and regional statistics and the extent of legal protection  
[http://www.ilo.org/travail/Whatsnew/WCMS\\_173363/lang--en/index.htm](http://www.ilo.org/travail/Whatsnew/WCMS_173363/lang--en/index.htm)

### **The Engender Project**

The European Engender Project was launched in October 2011. The Engender Project is creating an Inventory (documentary database) of good practice, promoting gender equity in health. This will contribute to more effective and equitable health policies for women and men. The ENGENDER partnership will review, at European and regional levels, examples of good practice, policies and interventions in the health and other sectors that have successful, positive impacts. The good practices

will include examples of policies and programmes from all relevant policy sectors (not just from the health sector) that promote equal opportunities for both women and men to live a healthy life. Included among the broad range of measures which might be covered are OSH-related topics such as legislation against sexual harassment at work, prevention of work-related injuries and measures to create equal availability of prevention or rehabilitation programmes.

*Further information*

<http://engender.eurohealth.ie/>

### **Building and Engineering Services Association checklist for clients**

Mainstreaming OSH or gender can be as simple as including them in a checklist, as is done in a 10-point checklist which forms part of a leaflet for clients on choosing the right building engineering services specialist.

*Further information*

<http://www.b-es.org/files/4313/4917/2290/Clientchecklist.pdf>

### **A guide for worker representatives in the public sector**

A public sector trade union in the UK has produced various guides for its workplace representatives over the years. Its 2013 guide on gender, safety and health includes a broad range of advice, including guidance on the link between the law on equality impact assessments by employers and the law on health and safety risk assessments, menstruation disorders and also transgender workers. It also includes a comprehensive checklist which covers the working environment and workplace policies as well as the functions of the trade union workplace branch and actions by workplace representatives.

An earlier publication by the trade union suggested that workplace safety representatives can raise awareness of, investigate and put women's health and safety on the agenda by means of the following:

- raising the health and safety problems women face;
- encouraging more women to become safety representatives;
- mounting health and safety campaigns aimed at women;
- encouraging women to attend training courses;
- finding other ways of raising awareness of women's health and safety concerns;
- ensuring that there are safety representatives appointed in areas where mostly women work;
- organising meetings for times when part-time workers and women with child care responsibilities can attend;
- providing information about women's health and safety concerns;
- carrying out a simple survey to find out more information about women's health and safety concerns and talking to women during inspections;
- finding ways to keep in touch with women who work part-time or unsociable hours (such as cleaners).

*Further information*

UNISON, Gender, safety and health: a guide for UNISON safety reps. 2013. Available at: <https://www.unison.org.uk/upload/sharepoint/On%20line%20Catalogue/21361.pdf>

UNISON, Women's health & safety. A guide for UNISON safety representatives, 2001.

### **European Trade Union Institute**

At the European level, the health and safety section of the European Trade Union Institute (ETUI) has consistently raised the issue of gender and OSH in its policy and information work. It has organised seminars on the issue and published several publications. For example, in 1999 it published a report on integrating gender into ergonomic analysis. In 2008 it published a report on reproductive health (male and female), and in 2012 it published a report and organised an event on gender inequalities

and occupational diseases. It also ensures that gender is taken into account in its other activities, such as work on occupational cancers or ageing workers.

*Further information*

<http://www.etui.org/Topics/Health-Safety>

### **Simple measure reduces lifting forces**

Moving the pivot point of a ladder on a truck from one end to the midpoint reduced the lifting force from 40 to 10 pounds, which allowed women to do the job without injury (Sheridan, 1975).

Source: Sheridan (1975), as quoted in Rubin and Elder (1980), p.105  
Official contribution of the National Institute of Standards and Technology; not subject to copyright in the United States.

*Further information*

Rubin, A. I. and Elder, J., *Building for people: behavioral research approaches and directions*, National Bureau of Standards, Center for Building Technology. Environmental Design Research Division, United States, 1980.

### **Material handling practices — male–female differences, Canada**

At the Institut de recherche Robert-Sauvé en santé et en sécurité du travail (IRSST) research priorities in Sustainable Prevention and Work Environment include human and demographic aspects (age, gender, immigrant workers) in order to provide clearer guidance for workplace prevention. Among its goals is the development of OSH management tools and ergonomic intervention practices, and one of the three research orientations it has defined to achieve this goal is the analysis of OSH problems and assessment of risks in relation to social, organisational and demographic aspects and technological changes.

In the area of manual handling this led to research into handling and women from a biomechanical and ergonomic perspective. This topic was selected because many women work as material handlers, yet there has been little interest in this population because most material handlers are men. The research focused on studying the strategies of female handlers. The objective was to understand what differentiates the methods of women handlers from those of men. The aim was to use the results of this research to better adapt training programmes to gender. The research concludes that women have different lifting techniques linked to their different body characteristics, which has implications for prevention. Following the research, a film of a presentation of the results was produced entitled 'Handling practices — male–female differences'.

*Further information*

<http://www.irsst.qc.ca/en/intro-sustainable-prevention-work-environment.html>

<http://www.irsst.qc.ca/en/-project-handling-and-women-from-a-biomechanical-and-ergonomic-perspective-0099-8020.html>

Video presentation: <http://www.irsst.qc.ca/en/-webtv-manutention-differences-hommes-femmes.html>

### **Cyber bullying of teachers**

European teachers' confederation ETUCE has carried out a series of actions related to stress and violence among teachers. The second survey addressed the new issue of cyber harassment of teachers. The survey explored national teachers' unions' actions and strategies. The aim was to gather good practices to revise the ETUCE Action Plan on Violence and Harassment in Schools and include cyber-harassment.

*Further information*

<http://teachersosh.homestead.com/>

[http://etuce.homestead.com/ETUCE\\_en.html](http://etuce.homestead.com/ETUCE_en.html)

### **Gendered analysis of working conditions survey — surprising differences between healthcare and construction worker**

An example of the inclusion of gender in research and monitoring is the secondary analysis of the German workers' survey (BauA, survey published November 2007). It is a good example of how such an analysis can reveal some surprising results. For example, by comparing healthcare work, dominated by women, with construction work, dominated by men, it found that more healthcare workers carry heavy loads than construction workers. They also compared the responses with the average figures:

- Two in three healthcare workers have to carry heavy loads (compared with 1 in 2 for construction workers); 93.8% have to do their work standing; 36% have to work in unfavourable postures (kneeling, bending, squatting, etc.); 57% men and 64% women have back pain; 66% women and 54% men have pain in their neck and shoulders; and 37% of women have pain in the legs.
- Regarding work organisation, 71% of healthcare workers have to do more than one task at a time; more than three-quarters (76%) work shifts; more than half work nights (51%); over 90% work Saturdays, Sundays and holidays; over 40% suffer from high emotional load (compared with 11% on average); more than one in four feel that they hardly cope (27% compared with 16.6% on average).

*Further information*

<http://www.baua.de/>

### **Violence linked to resignation of nurses**

The European NEXT programme explored violence and premature departure from their profession for nurses in 10 Member States.

### **Gender analysis of a survey of OSH professionals**

The French SUMER survey is a worker survey carried out by occupational physicians in the frame of regular health surveillance of workers. The gender analysis of the survey covers the gender dimension of workplace exposures and complaints, synthesised view of workplace exposures, based on national monitoring sources.

### **Risk prevention guise with a gender focus**

The region of Castilla-León in Spain produced a guide for the prevention of OSH risks with a gender focus. It covers a description of the situation of women at work; an overview of relevant OSH and equalities legislation and programmes of relevant institutions; and recommendations to protect women's health at work, including work-life balance, gender mainstreaming into OSH and protection of pregnant and breastfeeding women.

### **Gender-sensitive guide to evaluation of physical loads**

Spain's national OSH institute developed a guide addressing MSDs and risk factors from a gender-differentiating perspective. It provides monitoring methods, checklists and questionnaires regarding fatigue, physical workload (ergonomic assessment) and background guidance, including practical examples.

### **Training for women coordinators in construction**

Dulcinea is a Spanish EQUAL Project. It involves training women for coordinating posts in construction.

### **Gender and military work**

The work of Spain's Gender Equality Observatory (Observatorio de la Mujer) has included the preparation of studies on gender impact in the military work ambit.

### **Taskforce DeeltijdPlus (Part-time Plus)**

Taskforce DeeltijdPlus is a project involving the Dutch social partners and government (Ministry of Social Affairs and Employment) and local authorities. It has involved 27 pilots to investigate barriers

and opportunities to make the labour market more flexible for women. The objective of the taskforce is to stimulate women in the Netherlands who have part-time jobs of fewer than 24 hours a week to work more hours.



## 8 Discussion and conclusions

Women and men are not the same, and the jobs they do, their working conditions and circumstances and how society treats them are not the same. All these factors can affect the risks they face at work and the approach that needs to be taken to prevent these risks. Consequently, an understanding of gender, sex and other sources of diversity, which is then systematically incorporated and applied to strategies, policies and actions, will improve the success of interventions that help to ensure better health for all workers. This is what gender mainstreaming and a gender-sensitive approach involve. But how can this be done in practice? Previous EU-OSHA reports (EU-OSHA 2003a, 2005) concluded that existing experiences, resources and good practices in mainstreaming and taking a gender-sensitive approach should be shared and exchanged. EU-OSHA publications on gender and OSH have also drawn conclusions and recommendations about filling gaps in practice and about the types of actions and tools needed (EU-OSHA 2003a, 2005, 2013, 2014; see also Appendix 5).

In this section the cases presented in this report are discussed in terms of these conclusions and recommendations. They are also analysed to identify the focus of actions that are taking place and the types of approaches used; check on challenges and the gaps in practice that still remain; and highlight any prerequisites for success and recommendations that could be made for the future.

### A broad range of examples

Gender mainstreaming should cover the broad spectrum of OSH; for example, strategy and policy, research, interventions, tools, campaigns, and labour inspection. It should also cover the mainstreaming of OSH into equality activities as well as into women's health. It is therefore an issue which concerns researchers, policy makers, OSH practitioners, trade unions and worker representatives, and employers. For these reasons, this report presents a very broad range of very varied cases involving different types of actors. The case studies draw attention to the gender-mainstreaming process that has benefited all workers, not only women. The cases are divided into two areas — the governmental, policy-related aspect and those directly implemented in the workplace — so they explore both policy and practice.

#### Overview of cases

The cases included the following issues:

- integrating gender mainstreaming into organisations' planning, administration and daily working practices;
- developing methods and tools to promote gender mainstreaming;
- facilitating working conditions that are suitable for both women and men, including health and human resources management;
- facilitating the reconciliation of work and family life and thereby promoting better work–life balance;
- ensuring that equal opportunities exist, with women encouraged to enter and be supported in working in male-dominated professions;
- designing and promoting adequate personal protective equipment (PPE) for women, and thereby reducing their having to make do with the ill-fitting and poorly structured equipment that is usually available for women;
- conducting awareness-raising campaigns that focused on health.

### Actions by labour inspectorates/OSH authorities and institutes

*The EU-OSHA review of gender issues in OSH (2003a, p. 17, see also pp. 109-115) concluded that OSH authorities need to achieve the following:*

- ensure that OSH policies and programmes contain a well-defined and transparent gender dimension;
- develop guidelines and inspection tools, for example for applying regulations in a gender-sensitive way, and training resources;
- provide training and awareness-raising for labour inspectors and for workplaces;

- ensure that resources and intervention activities are directed towards jobs of both women and men;
- promote research into risks or jobs of particular relevance to women, where these have been neglected.

*In addition, recommendations on information gathering for research and statistical monitoring to take better account of gender included investigating practical means of improving safety and health statistics by gender. The EU-OSHA summary review of women at work (2014, p. 39) reinforced the need to include the gender dimension in OSH policy and adapt labour inspection practice.*

A gendered approach to OSH is becoming more prevalent in OSH institutions, in their policy and strategies as well as workplace interventions which incorporate equalities actions. The review from 2003 (EU-OSHA, 2003a) already contained examples of Member State activities to incorporate gender into their OSH activities, such as campaigns in Portugal targeting the female-dominated ceramics and textile sectors, and the research programme on gender and website of the Italian national research institute ISPESL and its awareness-raising activities regarding occupational risks to women in certain sectors, financed by the Ministry of Health (pp. 112, 114). Since then, there has been not only an increasing number of such activities in the Member States, but more global actions, embedded in national strategy.

The European Institute for Gender Equality has made general recommendations on promoting gender equality and gender mainstreaming in institutions (see Annex 2 and EIGE, 2014). These recommendations, which cover institutional structures, gender mainstreaming and sex-disaggregated data, apply equally to OSH institutions.

Two national strategies and subsequent actions by national OSH authorities or labour inspectorates are described in this report. The first, from Austria (Case 4.1), outlines the process of systematically incorporating firstly gender issues and then diversity into the organisation and everyday work of the Labour Inspectorate and the inspectors' own working lives. One of the outcomes of this project was the increase in the competence of the inspectorate and the reinforcement of the quality of its work. The second, from the UK (Case 4.9), explored the diversity strategy of the HSE that culminated in the development of its Single Equality Scheme in April 2010. It was a consultative process with a special emphasis on providing support for SMEs.

Austria has systematically integrated gender into the everyday work of its labour inspectorate.

Some Member States, as part of their political governance, are organised into autonomous regions. In these countries important individual regional initiatives are sometimes seen. Spain is one such Member State. Its OSH institute in the autonomous region of Navarra (Case 4.8) implemented various actions on gender and OSH. These include designing and setting up an internet portal dedicated to women and occupational health, and thereby allowing the evaluating of risk and preventive measures specific to women. In addition, the Gender Equality in Companies tool (Igualdad de Género en las empresas (IGE)) provides guidelines for diagnosing gender equality in a company. The tool incorporates OSH elements into the diagnosis. Further, Navarra's Occupational Health Plan, which covers 2007-2012, implemented improvements in the working conditions for women with an emphasis on reducing the double workload of working women, and encouraging equal opportunities as well as ensuring the protection of women during pregnancy and when nursing babies, by strictly enforcing laws specifically related to preventing occupational risk during these periods.

Other initiatives in Spain include the awareness-raising project about the importance of gender in safety and health at work within the Cantabria region (Snapshot 6.2.11) and the development of guidelines to prevent risks in sectors employing a high proportion of women in the Galicia region (Snapshot 6.2.12). Meanwhile, the Catalan region produced information sheets on the different exposures and health problems to which men and women are exposed (Snapshot 6.2.13), and in the Andalusia region (Snapshot 6.2.14) a manual of best practices promotes prevention from a gender perspective.

A major precondition for effective gender equality policies and legislation is the availability of high-quality statistics disaggregated by sex (EIGE, 2014). In the UK (Case 4.9), the Health and Safety Executive was able to add support to its internal consultation through the analysis of its workforce data by gender, age, race, disability, location, length of service, time in current post, salary, hours of work, and temporary or permanent employment status. Germany is organised into Länder. One of these,

North Rhine-Westphalia (Snapshot 6.2.5), decided to embark upon a project to improve the quality of its OSH statistics by looking for gender-specific differences. It changed its analyses of its databases, which are now conducted on gender-disaggregated data, which assists in gaining evidence about the gender gap in health at work. This information can then be used to facilitate changes in approaches to health by setting new policy targets and identifying appropriate measures to put in place. The Cantabria region in Spain has also disaggregated its data by gender (Snapshot 6.2.11).

Having the right tools for project development and monitoring are important. The Austrian case (Case 4.1) also highlighted that the development of qualitative (in addition to quantitative) criteria of effectiveness and 'soft factors' would be useful for the effective analysis of how funds are allocated from the budget that focus on gender issues and the implementation of gender/diversity in administrations that are controlled mostly by deployment and not by support budget or other quantifiable measures. The Danish interministerial project (Case 4.2) noted that it was useful to develop methodologies that focus specifically on gender mainstreaming, as these will be more suitable for achieving results.

The European Institute for Gender Equality also points out that gender training is an enabling tool for gender mainstreaming since it builds capacities and aim and provides people with awareness, knowledge and practical skills. At the same time, gender training motivates participants to implement gender mainstreaming and to work towards gender equality. Again, the Austrian Labour Inspectorate case (Case 4.1) and the UK OSH authority case (Case 4.9) are among the examples which apply this practice. Similarly, new labour inspectors in Luxembourg receive gender training (Case 6.1.5).

As part of initiatives to promote equality in society some EU Member States require their public services to provide services in a non-discriminatory way as well as to ensure that they do not discriminate as employers. This, in particular, has been a driver for some Member States to review how their labour inspectorates and national OSH authorities operate regarding diversity and gender and develop explicit strategy and actions in this area. This was shown in the Health and Safety Executive's equality plan (Case 4.9, UK), in Austria's Labour Inspectorate (Case 4.1) in its drive to incorporate gender mainstreaming into daily work practices and in the incorporation of elements to encourage equal opportunities in Navarra's Occupational Health Plan, which covers 2007-2012 (Case 4.8). A more general requirement to address gender is behind the initiative in the Czech Republic and the training for labour inspectors in Luxembourg (Cases 6.1.5 and 6.1.11). WHO's general policy on gender mainstreaming was the driver behind its plan to incorporate gender into its healthy workplaces model (Case 4.13).

### **Gender impact assessments of OSH activities**

*The 2003 report concluded that taking a gender-neutral approach in policy and legislation contributed to less attention and fewer resources being directed towards work-related risks to women and their prevention. Gender impact assessments should be carried out on existing and future OSH directives, standard setting and compensation arrangements (EU-OSHA, 2003a).*

Gender impact assessment is a tool advocated by the European Union in policy development. It is used to assess the impact of proposed policies and actions. Other tools are gender/equality/diversity assessment tools which measure current performance. According to the European Institute for Gender Equality (EIGE, 2014) the use of gender-mainstreaming methods and tools such as gender impact assessments are still rare and not properly institutionalised. Nevertheless, several cases included the use of gender-impact assessments/equality assessments, for example the Austrian Labour Inspectorate case (Case 4.1). Snapshot 6.1.17 from the Netherlands presents a simple tool for 'diversity scans'. Other cases cover the use of general impact assessment tools and gender performance tools which incorporate an OSH aspect (for example, Cases 4.2, 4.4 and 4.8). However, in order to increase the use of gender of impact assessments across countries and within organisations it may be useful to develop more specific tools related to gender impact and OSH and see how they are used in practice.

### **Interventions focused on risks/issues that particularly affect women**

*The 2003a review concluded that in general less attention had been given to work-related risks to women's health and safety (EU-OSHA, 2003a). The 2014 report (pp. 36 and 40) noted that improving the identification of risks and exposure will be important to make the invisible visible.*

This current report provides examples which show how this imbalance can be addressed. For example, the Austrian Labour Inspectorate (Case 4.1), as part of its gender-mainstreaming strategy, addressed skin care from a gender perspective and also noise and female musicians.

The cases also feature several interventions that address some of the risks or issues that particularly affect women. These include MSDs, stress and violence, which are looked at below. Another area is work–life balance, which is covered in the section on the inclusion of broad work organisation issues.

### MSDs

EU-OSHA reports from 2013 and 2014 highlighted that MSDs remains a particular problem for women (EU-OSHA, 2013, 2014). On the other hand, more attention is being given to the occurrence of MSDs in the jobs women do. In France (Case 5.1), an investigation into the rising rate of MSDs and absenteeism in a workplace showed inequities between female and male employees. The women employees were more likely to develop these conditions, and this was due to the postures they needed to adopt when working and the strain they experienced from lifting heavy loads. To combat these issues, the work environment was adjusted and women were able to vocalise the issues they encountered. Importantly, the investigation did not limit itself to the design of the women’s workstations. It also looked for organisational factors which could increase the women’s exposure to MSD risks and found that gender division in jobs and gender differences in career paths meant that women remained working in very repetitive jobs while men quickly moved on to other work: either gender working under those conditions would have experienced MSDs leading to higher rates of absenteeism.

In the past equipment and workstations were often built using the ‘average male worker’ as the norm, even if the workforce was mainly female, which could contribute to ill health and increased risks to those who do not fit within this norm. The ergonomics intervention in a UK retail bakery chain (Case 5.6) took account of women’s statures in selecting suitable work equipment. The bakery found that simple modifications of the work benches led not only to a safer and healthier process, but one that was more efficient and thereby improved its performance levels.

Another case which addressed the ergonomic concerns of female employees was an example about the design of truck cabs in the USA (Snapshot 6.1.24).

A different example of adaptation to cover female and male workers comes from the Liberty Mutual Research Institute for Safety, USA (Snapshot 6.1.21), which updated its manual materials handling tables to take account of gender differences when handling manual materials.

The ergonomic intervention in a Slovenian car factory (Snapshot 6.2.8) was found to be especially beneficial to older female staff.

Again, in Case 4.1, an MSD campaign by the Austrian Labour Inspectorate included attention to male and female issues in different sectors and how to consider gender aspects when doing a risk assessment.

An MSD intervention looked at career paths as well the ergonomics of workstations.

### Stress

*The EU-OSHA report from 2014 highlighted that work-related stress also remains a particular problem for women (EU-OSHA, 2014).*

More attention is also being given to preventing stress at work. In addition, there is now more recognition of women’s greater domestic and care responsibilities out of work and the need to take account of work–life balance as well as other gender-related issues in stress surveys and prevention measures. Various cases addressed issues such as working hours, flexible working and work–life balance as one of a range of issues, as discussed later in the section on broader work organisation issues.

Case 5.3 from Germany concerned developing a specific approach to enable gender to be mainstreamed in the risk assessment of stress. The project aimed at recognising assumptions regarding how men and women experience their work and looking at how they really experienced it. For example, the process included interviews with employees about gender roles and psychological

stress in the workplace. Snapshot 6.2.9 from South Africa recognises the particular stresses that women managers can experience and provides some measures tailored to them.

Experience gained from interventions at several workplaces was used to develop guidance on carrying out risk assessments for stress from a gender perspective.

### *Violence*

Women frequently work in jobs where they are in contact with members of the public. The risk of violence women may face in such jobs was highlighted in EU-OSHA's 2013 report (EU-OSHA, 2013). It can also be a barrier to them entering certain work areas. Violence was one of the issues addressed in the example of female Spanish bus drivers (Snapshot 6.2.10) and also by the Italian State Railway (Case 4.6). In the Italian State Railway Group women were given special training to deal with the more risky situations that they may encounter at the workplace as part of a range of equalities measures. An example of women bus drivers in London from EU-OSHA's report on managing risks in road transport mentioned in the section on women in non-traditional employment also included measures to reduce violence in order to make the work more attractive to women (EU-OSHA, 2011a). In this example it was noted that the measures benefited male workers as well.

### **Inclusion of broad work organisation issues**

*EU-OSHA reports concluded that broader issues pertaining to work–life balance and work organisation and employment need to be taken into account and that actions must take account of both women's and men's work schedules and be attractive to both, advocating a more holistic approach (EU-OSHA 2003a, pp. 18, 140; EU-OSHA 2014, p. 38).*

Taking a holistic approach to OSH would improve occupational risk prevention for the benefit of both women and men. Factors to take into consideration include work–life interface, broader work organisation and employment issues and all issues related to the changing world of work.

Work–life balance has a strong relationship with employees' overall satisfaction with their working conditions (Parent-Thirion et al., 2007) and attention to work–life balance has gained prominence in the last few years. It has already been noted that stress interventions are now more likely to include work–life balance issues. In Spain, women bus drivers (Snapshot 6.2.10) were interviewed to determine those psychosocial risks that impacted on their work environment. Some of the issues identified under the category of social relationships were working hours, the balance between work and family life, and stress.

In one case (Case 5.2, that of ConSol\* in Germany), the aspect of work–life balance cuts across all aspects of organisational processes and includes opportunities to deal with elder care and child care, and to adapt the work processes to workers' needs. Work–life balance is promoted through flexible working and alternative work patterns. In the Italian railways case (Case 4.6) problems concerning the reconciliation of work and family life were addressed through measures such as the 'crèche' project.

On the other hand, the equal sharing of domestic chores promotes equal opportunities between men and women and should also be addressed. The campaign in the Community of Madrid, outlined in Case 4.7, is an attempt to change certain habits men have developed concerning family obligations that especially impact women, who end up doing most of the household chores. The Community of Madrid's message is based on the premise that men and women resemble each other more than one might think, and this is a good reason to eliminate stereotypes.

The inclusion of broader employment issues in assessments and prevention measures is seen, for example, where the occurrence of MSDs was linked to lack of career development in Case 5.1.

### **Interventions in women-dominated employment areas**

*The 2003 review report found strong segregation of women and men into different jobs and tasks at work and that women's work had received less attention in risk assessment and prevention activities (EU-OSHA, 2003a). The EU-OSHA gender mainstreaming seminar report (2005, p. 7) noted that 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. These findings were repeated in EU-OSHA's 2013/2014 reviews (EU-OSHA, 2013, 2014).*

This current report shows some examples where activities are carried out to redress this imbalance. For example, the Austrian Labour Inspectorate (Case 4.1), as part of its gender-mainstreaming strategy, targeted the industrial cleaning sector, the hotel and restaurant sector and care homes for activities.

Some of the cases show interventions conducted in female-dominated work areas. At one time the incidence of MSDs from repetitive work in female-dominated work areas was not always taken seriously or recognised as being work-related. The case of Greggs plc bakeries (Case 5.6), described above in the MSD section, is one example of how this has changed. Introducing work equipment suitable for the statures of its female workers was seen as important by the company for its workers as well as being seen as a good investment.

In the public administration in Berlin (Case 4.5), policies were implemented to ensure that the employment structures, such as leadership positions, working hours and work–life balance, were equitable with respect to gender. Further, WIEGO (Snapshot 6.1.26) is taking steps to improve the status and working conditions of women in the informal economy through local projects involving informal worker organisations. Women dominate employment in the informal economy (EU-OSHA, 2013, 2014), where their OSH needs are often overlooked.

A bakery tackled 'male-sized' equipment, resulting in health and productivity benefits.

### **Jobs where women are under-represented**

*EU-OSHA's 2003 report concluded that more attention should be paid to the working situation and OSH needs of women in non-traditional jobs (EU-OSHA, 2003a, p. 140).*

Women's contribution to the labour market continues to rise. This includes their entry into sectors in which they have had little to no contribution previously, such as in transport as drivers and construction (EU-OSHA, 2011b, 2013, 2014). An EU-OSHA report on transport makes the recommendation to adapt prevention policies to the increasing number of women in the transport sector (EU-OSHA, 2011b). In this report, a few of the cases examined the OSH aspects of women in non-traditional jobs. To promote women's move into non-traditional areas, it is important that their OSH concerns are met.

The Olympic Development Authority (ODA) in the UK (Case 5.7) ran programmes to encourage more women to work in the construction sector, with training in OSH, mentoring, care facilities and outreach programmes. In Italy, the State Railway Group (Case 4.6) supported its female employees in achieving equal opportunities at work. In the UK, the Grampian Joint Fire and Rescue Board reviewed its sleeping accommodation as part of its measures under its gender equality scheme (Snapshot 6.2.16). In the USA, truck cabs were redesigned to suit the body dimensions of the truck driving population, who could spend up to 41.5 hours per week behind the wheel (Snapshot 6.1.24).

One issue that is gaining prominence in gender mainstreaming is clothing, and more specifically the designing of PPE specifically for women. This report features several cases that address PPE (Cases 4.10, UK; Case 5.5, Romania; and Snapshot 6.1.4, Canada).

The 'Purple Boots' example from the UK (Case 4.10) raises awareness of ill-fitting PPE for women, which could be a hazard in some industries, such as construction and engineering, and included working with a manufacturer to provide safety boots for women. Meanwhile, an example from Romania (Case 5.5) outlined that clothing needs to be adjusted to women's physical differences, and to suit their changing body shape, for example due to pregnancy, and should result in a more comfortable fit when women are accomplishing their work tasks, thus ensuring greater protection against workplace-related risks. In Spain (Snapshot 6.2.10) suitable work clothing was designed for urban bus drivers (including for pregnant women), and the Croatian Railways (Snapshot 6.2.2) also addressed unsuitable clothing.

Another issue is access to suitable toilet facilities. The Croatian Railways (Snapshot 6.2.2) case also addressed inappropriate sanitary conditions as well as such issues as unsuitable desks and chairs. London Underground (Snapshot 6.2.17), in order to improve on its gender equality planning, improved the toilet facilities that were available and communicated to its workforce the location of the facilities and the time required to reach them. In the same sector, see also the EU-OSHA (2011a) publication on managing risks in road transport which highlights an example from Transport for London that

introduced a project to improve the working conditions of women bus drivers to improve recruitment and retention.

Another sector that is trying to encourage more female employees is that of information technology (IT). This report outlines one company in Germany, ConSol\* (Case 5.2), with a family-friendly work environment and the active support of its women employees. It has a strong focus on work–life balance as well as on ensuring women’s involvement in its strategy.

One issue that is gaining prominence is designing of PPE specifically for women. A professional association for women in engineering worked with a manufacturer to develop safety boots for women.

Several cases addressed improved access to suitable toilet facilities.

## Diversity

*The EU-OSHA 2003 review concluded: ‘Women are not a homogeneous group, they fall into different age groups, have different ethnic origins and such like and not all women work in traditionally “female” jobs. The same applies to men. A holistic approach will need to take account of diversity’ (EU-OSHA 2003a, p. 18).*

Other diversity components, such as age and migrant workers, were included in the cases. Some of the cases dealt with gender within a wider approach on diversity. For example, the Health and Safety Executive case from the UK (Case 4.9) focused on establishing a single equality scheme to ensure that workers, regardless of gender, ethnicity, age or race were treated fairly. The Austrian Labour Inspectorate started by mainstreaming gender into its work and then extended this to cover other areas of diversity (Case 4.1). Snapshot 6.1.17 from the Netherlands highlights the development of a tool, a ‘diversity quick scan’ that helps organisations develop policy. In Germany, Sozialforschungsstelle Dortmund (Case 6.1.8) developed a Diversity Self-Assessment Tool that allows organisations to assess how well they are dealing with a diverse workforce. The tool incorporates information on age, gender, migrant background and capacity for work, and suggests areas on which action should be taken, such as corporate strategy, pay and performance and corporate culture.

Schemes that cover diversity in the workforce as a whole are probably more likely to acknowledge and target diversity in gender.

Gender mainstreaming can be incorporated into broader actions on diversity.

## Older women

*EU-OSHA’s 2013 and 2014 reports noted that older women are more likely to enter the workforce and are a much needed group due to the overall ageing population across Europe, and consequently there is a need to explore how their working conditions could be improved (EU-OSHA, 2013 and 2014, p. 41).*

There were several examples that specifically addressed issues related to older women. This reflects the increasing need to look at this subgroup, given that women are required to work longer than before, and moreover are required to retire at the same age as men (Eironline, 2010). While OSH on women and menopause has received little attention, and the full impact is still to be established (Griffiths et al., 2010), one trade union organisation in the UK (Snapshot 6.1.19) carried out a project to investigate the issues and developed guidelines to address common issues that women may experience when they are going through the menopause.

The Danish example (Snapshot 6.2.3) concerns the retention of older women care workers through a health prevention programme combined with flexible working hours. In Finland (Snapshot 6.2.7), a Finnish food service organisation, conscious of its ageing female workforce, half of whom were over 45 years of age, invested in measures to promote its work capacity. The initiative included a range of measures; one interesting feature was the establishment of a group to discuss the health issues of women aged over 45 years, known as the Senioriitta group. The opportunity to discuss issues with women of the same age was rated as very important. The Slovenian example (Snapshot 6.2.8) dealt with ergonomics and employability in a car manufacturing company with the result that the employability of workers aged over 45, especially women, improved.

The UK's Trades Union Congress (TUC) established a specific working group on gender and OSH (Snapshot 6.1.20). The issues highlighted by the group included older women. In addition to the initiative on the menopause (Snapshot 6.1.19), the TUC (together with the Pennell Initiative for Women's Health) published a study of older women's health and safety that showed that, in comparison with women's health and safety in general, older women received very little attention, and were even more invisible to traditional health and safety practices. The study also included recommendations, and the topic is an ongoing area of work for the TUC.

While not directly focused on older workers, the approach of the French case concerning MSD prevention in a print shop (Case 5.1) has implications for older women workers: it took account of career development patterns, highlighting that one of the reasons women developed more MSDs was that, because of poor career development opportunities, they remained for years in the same job, which required specific postures and movements. This is a good example of a case that took a holistic approach, incorporating into the evaluation gender differences in employment conditions within a company.

Interventions relevant to older women included the topics of MSDs, including one where lack of career progression was a factor, health discussion forums and the menopause.

#### *Younger women*

*The EU-OSHA reports from 2013 and 2014 highlight young female workers as a vulnerable group (EU-OSHA, 2013, 2014, p. 41).*

One snapshot from the Netherlands (Snapshot 6.1.16) focused on young, educated female workers. The Foundation group in the case aimed to reduce the number of young women entering disability schemes; facilitate the return to work of women; and increase awareness among employers, supervisors and occupational physicians of the importance of paying attention to the health of young, educated women. It is also of interest because the 2013 and 2014 reports highlighted that reintegration schemes need to address the specific problems of women workers (p. 39) and the problems with young workers gaining access to rehabilitation schemes (p. 32).

#### *Migrant workers*

A few of the cases and snapshots acknowledge the discrimination that migrant workers may face (Austria, Case 4.1; UK, Case 4.9) and propose that occupational health strategies should include migrant workers (WHO, Case 4.13; Germany; Snapshot 6.1.8).

### **Disability and reintegration**

*EU-OSHA reports highlighted problems related to women's access to and participation in rehabilitation programmes and the need to adapt them to be appropriate to women (EU-OSHA, 2003a, p. 108; EU-OSHA, 2013, 2014, p. 41).*

Several of the snapshots address the issue of disability and reintegration. This included the cases that addressed diversity in general, mentioned above. Some cases were more specifically focused on disability and rehabilitation. One Dutch example (Snapshot 6.1.14) concerns coaching women to return to work, while another Dutch example (Snapshot 6.1.15) outlines the provision of examples of good practice of workplace disability policies that take account of women or have been successful with women. Also, as mentioned, from the Netherlands, Snapshot 6.1.16 outlines a specific focus on reducing the number of young, educated women on work disability pensions. Other countries are exploring how to reduce the disparity between men and women with respect to rehabilitation programmes. In Finland (Case 4.4), one strategy aims to provide benefits to women and men who may experience temporary disability. In Germany (Case 4.5), the Senate of the Interior in Berlin uses gender-differentiated disability health insurance data to help make a differentiated assessment of the effectiveness of occupational health management.

### **Reproductive life-cycle and health of men and women**

*EU-OSHA's previous gender reports concluded that a broader view on reproductive health is needed, which covers both men and women (EU-OSHA, 2003a, 2013 and 2014).*



### *Mainstreaming men into actions on reproductive risks*

While there has been considerable focus on pregnant women in OSH, and more specifically on possible harm to the fetus, less attention has been given to the full range of reproductive hazards faced by both men and women. Snapshots 6.1.12 and 6.1.13 from the Netherlands and 6.2.11 from Spain are examples of taking a broader approach. Case 6.1.12 concerned a brochure providing information about reproductive toxins. It covered not just pregnancy and breastfeeding, but also fertility, reproduction and children, and explored the effects of toxins on both men and women. The 'babyproof' box information campaign (Case 6.1.13) developed by Dutch trade unions also covered the reproductive cycle of men and women in its entirety. The Spanish example also involves an information and training activity regarding reproductive risks from chemical agents.

### *Pregnant workers and new mothers*

Several cases dealt with issues of pregnancy and occupational risks.

The Autonomous Community of Madrid project on OSH from a gender perspective included a survey to see how companies included gender and safe motherhood in risk assessments and based a set of actions on the results (Case 4.7). The survey findings included the observation that women may hide their pregnancies for some time or accept jobs without objecting in order to avoid problems within company management. It found a growing awareness among safety professionals of the issues, although there was still no widespread consensus among prevention professionals regarding the specific risks to non-pregnant women. However, it also found various obstacles to effective risk prevention at the workplace. The survey also looked at issues related to women with small children. The survey results were used to develop subsequent actions, including the guidance on pregnancy and motherhood in a manual on the prevention of occupational risks to women.

Snapshot 6.2.4 describes a project to improve the working conditions of pregnant women carried out by the magistrate of Bremerhaven, Germany. There was a concern that pregnant women were viewed as a problem, and the aim was to integrate the normality of pregnancy into everyday work operations. It is a good example of cooperation between those with OSH functions and those with equalities functions, including experts and worker representatives.

As mentioned in the section on women in non-traditional jobs, several examples looked at PPE and work clothes for pregnant women. A partnership project involving Romanian PPE manufacturers included the adaptation of PPE for pregnant women (Case 5.5). Similarly, the suitability of uniforms for pregnant bus drivers was addressed in a Spanish project concerning women bus drivers (Snapshot 6.2.10).

Several cases addressed the suitability of uniforms for pregnant women.

### *Menopause*

The experience of menopause while at work may be more significant in the next few years, due to the ageing of the workforce, including among women who re-enter employment when their children are older. As mentioned in the section on older workers, one trade union organisation explored the issue with its safety representatives and produced some advice about simple steps employers can take to offer practical support in the workplace to reduce the effects of menopause symptoms, such as access to drinking water and uniforms which consist of layers of clothes. However, more research is required in order to inform good practice.

A trade union organisation produced guidelines on simple workplace measures that can help alleviate menopause symptoms.

### **Recruitment and retention of women**

In several of the cases the aim of taking a gender perspective was to facilitate the employment of women as well as men. This was seen in particular in some of the cases from various parts of the public transport sector. Many of the improvements introduced in these cases improved working conditions for both women and men; for example, more flexible working, improved welfare facilities or measures to prevent violence (see Case 5.4, Snapshot 6.2.2 and Snapshot 6.2.10).

Measures to improve working conditions for women, taken to help recruit more women, improved them for male workers too.

### **Men's health concerns — a gender-sensitive approach**

*Both men and women can face significant risks at work, and the 2003 report (EU-OSHA, 2003a) concluded that continuous efforts are needed to improve the working conditions of both women and men and that making jobs easier for women will make them easier for men too.*

Taking a gender-sensitive approach does not mean looking only at women and OSH. However, in the past, generic and gender-neutral approaches to OSH have focused overly on risks in traditional male jobs, such as construction, and prevention of risks faced more by men. In addition, traditionally, standards and the design of work equipment and protective clothing have more often been based on male norms. Therefore, the focus on women in gender-sensitive approaches is to redress the norm and give more attention to some of the less visible and less dramatic hazards found in women's work.

Nevertheless, taking a gender-sensitive approach can be used to show where prevention can be improved for men as well. For example, according to trade union UNISON (2013) a staff survey in the UK by the National Health Service (NHS) from 2011 showed that male employees were less aware that they had access to occupational health services than female employees (9% of men did not know compared with 5% of women), and less aware that they had access to counselling services (29% of men did not know compared with 36% of women). This suggests that more effort is needed to promote occupational health schemes to men, and encourage men to make use of the services available to them.

One area where men can benefit from a gender-sensitive approach is workplace health promotion activities. Men are less likely than women to acknowledge their ill health and less likely to seek medical attention about their conditions than women. But it is also known that they do not respond to health promotion messages in the same way as women. So these must target their specific needs and be delivered in a way that will engage a male audience.

The general health promotion example from Royal Mail in the UK (Case 5.8) was carefully planned, used materials that were likely to be attractive to an audience of male manual workers, and used other methods, such as measures aimed at the men's wives and partners. It used booklets in the format of a well-known car maintenance manual. It was accepted that this format would have more appeal to men, as it was well known to them and seen as practical and functional. Reaching men with a health and safety message through women has also been used in other areas, such as the fishing sector.

The workplace can be used to raise awareness of specific male health issues such as prostate cancer (Case 4.11 from the UK). Trade union Unite in the UK produced awareness-raising information and encouraged workplaces to adopt policies. It ran seminars in workplaces on prostate cancer awareness, invited a speaker to talk about men's health to a workplace trade union meeting and promoted the issue at its annual conferences.

Another example of a targeted approach to raising awareness of men's health is the Wear BLUE project in the USA (Snapshot 6.1.23).

In the past, where attention has been paid to women workers, it has often been in terms of the women as an expectant and new mother, but with insufficient attention being given to the wider spectrum of risks to men's as well as women's reproductive health. As mentioned in the section covering reproductive health, Snapshots 6.1.12 and 6.1.13 from the Netherlands and 6.2.11 from Spain are examples of taking a broader approach to the reproductive risks from dangerous substances. These examples provided information about reproductive toxins, with the 'babyproof' box information campaign (Snapshot 6.1.13) covering the reproductive cycle of men and women in its entirety, and the Spanish example outlining an information and training activity regarding the reproductive risks from chemical agents.

The interventions in the public transport sectors have been mentioned as examples of where efforts to improve working conditions for women improved them for men as well, for example measures to prevent violence from the public. For example, Case 5.4, from the transport sector in Italy, showed that the measures taken to improve working conditions for women in turn allowed the issues experienced by the male employees to be addressed. Similarly, in the Italian Railways case (Case 4.6) the equalities

committee adopted a targeted campaign on health promotion for both men and women, especially in terms of cancer prevention and care.

Another area where a gender perspective could benefit men is accidents. It should not just be taken as a given that men will have more work accidents than women, in the same way that it is wrong to assume that women are more prone to MSDs. The mechanisms working behind the accident figures should be investigated using gender analysis to find out why this is happening in order to improve prevention (Messing, 2012; Habib and Messing, 2012).

A workplace health promotion activity aimed at men used booklets in the format of a car maintenance manual to appeal to a male audience.

Interventions aimed at women in the transport sector benefited men as well.

Workplace reproductive safety has traditionally focused only on the pregnant women. The 'babyproof' box information campaign covered the reproductive cycle of men and women in its entirety.

## Participation

### *Women's participation in OSH solutions*

*The EU-OSHA 2003 report concluded that for success gender-sensitive interventions should take a participatory approach, involving the workers concerned, and be based on an analysis of real work situations, and presented some examples of participatory and action-orientated methods (EU-OSHA, 2003a, p. 18, pp. 116-121).*

The 2003 report outlined an action-oriented research approach (Messing, 1999) to develop workplace interventions that would be used to address ergonomic problems in predominantly female work groups. The principles behind the approach are empowerment; using workers' knowledge; questioning established assumptions about risks at work; and the recognition of gender-based issues in the division of labour and power relations. The aim of this type of approach is to integrate the knowledge from both men and women workers into all stages of the interventions.

The involvement of women in the decision-making processes was done through finding out about the actual issues through surveys and interviews (e.g. Cases 5.1, 5.3 and 5.4) or by the inclusion of women in working groups, such as steering committees (e.g. Cases 5.2, 5.3 and 5.4).

Some of the cases that deal with ergonomics within the workplace use participatory intervention methods (for instance, Greggs plc in the UK, Case 5.6; the printing company in France, Case 5.1). Snapshot 6.2.7 outlines how a Finnish food service organisation included a group to discuss the health issues of women aged over 45 years, known as the Senioriitta group. The opportunity to discuss issues with women of the same age was rated as very important.

Surveys allow women workers to provide feedback on issues that affect them. This was shown, for example, in Case 4.1 (Austrian Labour Inspectorate), Case 4.10 (the Purple Boots campaign in the UK) and Case 5.4 (Met.Ro. SpA in Italy).

Case 5.3 — on stress risk assessment from a gender perspective — used questionnaires and workshops, and stressed the need to take into account that women may be more reluctant to put forward their views.

Case 5.4 (Met.Ro. SpA in Italy) used training activities on dealing with conflicts with members of the public as a means of obtaining suggestions and concrete proposals from participants.

Female employees at ConSol\* were actively involved in the intervention by providing input into the company's strategic objectives (Case 5.2).

However, it can be important in an intervention targeting women to involve men as well. In two cases both male and female workers were involved in interventions to address the issues of the female employees, enabling improvements for both. In the Italian railways sector (Case 5.4) the method used to assess issues concerning female employees also permitted the highlighting of the problems encountered by men in the company. In Germany, the development of a risk assessment approach for stress allowed a more equal division of workloads and resources, rather than one based on gender stereotypes (Case 5.3).

See Appendix 4 for further advice on how to improve women's participation in OSH at the workplace.

One case acknowledged that women were more reluctant to put forward views. Group discussions, surveys and training initiatives were among the methods used to facilitate women's participation.

#### *Women's involvement in decision-making*

*The 2003a report concluded that women are under-represented in decision-making concerning OSH. It also concluded that they need to be more directly involved and women's views, experiences, knowledge and skills should be reflected in formulating and implementing health-promotion strategies within OSH (EU-OSHA, 2003a). The 2013 and 2014 reports also highlighted the need to ensure women's participation in policy discussions (EU-OSHA, 2013 and 2014, p. 38).*

As well as being involved in identifying OSH problems and developing solutions, women also need to be involved more strategically in OSH decision-making at all levels, including as trade union safety representatives.

Some of the steps that the Health and Safety Executive in the UK (Case 4.9) put in place as part of its equalities scheme were to encourage more women to become involved in health and safety decision-making and to improve the diversity of its advisory bodies.

Trade unions also need to involve women in their OSH decision-making. The gender and OSH (GOSH) group of the UK national trade union confederation, the TUC (Snapshot 6.1.20) is actively pursuing a gender-sensitive approach in its awareness-raising, such as through its survey of women safety representatives. The group makes proposals about what should be done and is consulted over resources that the TUC produces. It was instrumental in shaping the work on diversity of the UK's national OSH authority's strategy on diversity, described in Case 4.9. The TUC promotes the election of more women to the position of workplace safety representative. (See the section on the role of trade unions for more examples of trade union activities.)

Technical or scientific committees on women were introduced into the formal structures of two international associations, the International Ergonomics Association (IEA) (Snapshot 6.1.25) and the International Commission on Occupational Health (ICOH) (Case 4.12), whose remit includes advising and influencing the actions of their respective organisations.

An OSH authority, as part of its equalities scheme, encouraged more women to become involved in health and safety decision-making and put in place measures to improve the diversity of its advisory bodies.

#### *Participation to introduce change*

In both the Austrian Labour Inspectorate and the UK Health and Safety Executive (Cases 4.1 and 4.9) various participation methods were used to develop the approaches and help the process of developing and introducing changes to implement gender mainstreaming. Measures included working groups, workshops and training. In both examples the strategies were developed slowly over time. The Austrian example included the use of networks.

It is essential that everyone affected own the process (see Case 4.2 from Denmark) through a bottom-up approach, as this is much more effective than using only a top-down approach. However, the commitment of leaders within the organisation is very important and the combination of both (top-down and bottom-up) allows a success factor that will endure better than when the process is only one or the other, as shown in the Austria Labour Inspection in Case 4.1.

#### **Promoting and facilitating a gender-sensitive approach**

*The need to promote and facilitate a gender-sensitive approach was a key finding of EU-OSHA's 2003 report (EU-OSHA, 2003a, p. 139). It recommended awareness-raising and promoting good practices and methods for including gender in risk assessment and involving women workers. Active promotion of a gender-sensitive approach to risk assessment in the workplace is needed. This would include awareness-raising and training, backed by appropriate information for the workplace (EU-OSHA, 2003a, p.142).*

To assess how promotion of a gender-sensitive approach in OSH has been pursued, this section will cover campaigns, awareness-raising resources and tools.

#### *Campaigns and awareness-raising*

A few of the cases and snapshots include campaigns on gender mainstreaming. In Austria (Case 4.1), Labour Inspection gender-mainstreaming action included awareness-raising activities aimed at the public. It included gender aspects in a campaign on MSDs, as mentioned. It also carried out awareness-raising activities internally to help ensure that gender mainstreaming was incorporated into the daily OSH work of the Labour Inspection. A partnership between Serviço Social Da Indústria (SESI) in Brazil and the Canadian Occupational Health and Safety Consortium (COHSC) centred on incorporating OSH into the organisational culture of Brazilian SMEs, with gender mainstreaming seen as a major element of the project. While these campaigns were more generic, some of the campaigns were focused on one specific issue, such as was done with pregnancy and reproductive toxins in the Netherlands (Snapshot 6.1.13).

Another campaign specific to 'women's issues' was the Purple Boots campaign from the UK (Case 4.10). As mentioned, this campaign highlighted the ill-fitting PPE that is generally available to women, especially those who work in the construction sector. The campaign also organised the manufacturing of PPE to suit the sizes and shapes of women. The focus on better fitting PPE would also be appropriate for men who do not fall within the norm of the average-sized male.

In disseminating information on those risks to which women are particularly vulnerable in Madrid (Case 4.7), the Community of Madrid used the full spectrum of communications media: the press, radio, television, magazines and the internet. Other ways in which the internet has been used as an outlet for awareness-raising is a contest in Italy based on mobile phone messages (Snapshot 6.1.10), and the TUC's web pages, which gave information on its campaigns, provided access to tools and outlined new developments around gender and OSH, through reports, new research and the activities of the national OSH authority (Snapshot 6.1.20).

The Purple Boots campaign targeted the provision of better fitting PPE for women.

#### *Tools*

The cases and snapshots in this report highlight the development and use of a variety of tools in gender mainstreaming within organisations. They included the following:

- *gender-related web features* (Case 4.1, Austria; Case 4.2, Denmark; Case 4.3, Finland; Case 4.9, UK; Case 4.12, ICOH; Snapshot 6.1.2, Brazil; Snapshot 6.1.18, UK);
- *checklists* (Case 4.1, Austria; Cases 4.9 and 4.11, UK; Snapshot 6.1.2, Brazil; Snapshot 6.1.13, Netherlands; Snapshot 6.2.4, Germany);
- *indicators* (Case 4.1, Austria; Case 4.3, Finland; Case 4.5 and Snapshot 6.2.5, Germany);
- *guidelines* (Case 4.1, Austria; Case 4.5, Germany; Case 4.8, Spain; Case 4.12, ICOH; Case 4.13, WHO); *handbook* (Snapshot 6.1.11, Luxembourg);
- *booklets* (Case 4.13, WHO; Case 5.8, UK; Snapshot 6.1.11, Luxembourg; Snapshot 6.1.13, Netherlands); *brochures* (Case 4.7, Madrid; Snapshot 6.1.13, Netherlands); *information sheets* (Case 4.13, WHO); *leaflets* (Case 4.5 and Snapshot 6.2.4, Germany);
- *sample letter* (Snapshot 6.1.13, Netherlands);
- *best practice examples* (Snapshot 6.1.13, Netherlands);
- *comprehensive toolkit* (Case 4.2, Denmark);
- *survey* (Case 4.5, Germany; Case 4.10, UK);
- *training courses* (Case 4.6, Italy; Case 5.7, UK; Snapshot 6.1.11, Luxembourg).

Most of these tools are for use by individual workplaces. It is worth highlighting that to assist workplace interventions by labour inspectors rather than employers, in Case 4.1 Austrian labour inspectors were provided with checklists to use during visits to help ensure that they take a gender-sensitive approach.

Austrian labour inspectors use 'gender' checklists during workplace visits.

### Gender-sensitive workplace interventions

*EU-OSHA's 2003 report (EU-OSHA, 2003a) and the conclusions from a factsheet published in the same year (EU-OSHA, 2003c) provide practical proposals for making workplace interventions more gender-sensitive (see Annex 2).*

In addition, Messing (2012) advocates during practice to:

- include women explicitly;
- include men's gender explicitly (why do men have more work accidents?);
- adapt training for different body sizes;
- question gender stereotypes about job assignments and job content;
- adjust standards so they reflect average sex differences;
- think about work–family balance.

This report covered a few workplace interventions that addressed different aspects of the work environment. These included MSDs (Cases 5.1, France; Case 5.6, UK), workload (Case 5.3, Germany); work conflict (Case 5.4, Italy); skill improvement (Case 5.2, Germany; Case 5.4, Italy; Case 5.7, UK); and well-being (Case 5.3, Germany; Case 5.4, Italy; Case 5.8, UK).

Messing (2012) also noted that gender stereotypes should be questioned in respect of job assignments and content. In Case 5.3 in Germany, which focused on stress, an assessment of the gender roles in jobs showed that these were considered around stereotypical perceptions. Owing to these perceptions, there was a direct effect on the workloads attributed to and the resources that were available for women and men. In order to reduce the mismatch between the perception of gender and its reality, it was recommended to use risk assessment when assessing conditions within the workplace.

Messing's recommendations are seen in various cases that included women explicitly in their assessments of work conditions, such as in Case 5.1 (MSDs, France); Case 5.2 (working conditions and integrating women, Germany); Case 5.3 (working conditions, Germany); Case 5.4 (skill improvement, Italy); Case 5.5 (PPE, Romania); Case 5.6 (MSDs, UK); Case 5.7 (working conditions, UK). Others (Cases 5.2 and 5.7) showed a strong focus on the work–family interface, to improve on, for example, the child care needs of women. In addition, in Case 5.1 (MSDs, UK), Case 5.3 (workloads, Germany), Case 5.4 (skill improvement, Italy), Case 5.5 (PPE, Romania) and Case 5.6 (MSDs, UK) standards were adjusted to reflect sex differences.

There are common features among the cases. This is inclusive of actively involving the workers in the intervention and the decision-making process (Cases 5.1, 5.2, 5.3 and 5.4), incorporation of work–life balance and working patterns where appropriate (Cases 5.2 and 4.6) and the inclusion of broader employment issues in risk assessment (for example, in Case 5.1).

The issue of adapting training to different body sizes was not seen in the cases, but one example comes from Canada where OSH institute IRSST carried out research that found that men and women who were experienced in manual handling used different techniques due to their different body characteristics, which has implications for prevention and training (see the section of additional examples).

An intervention looking at work-related stress found that stereotypical views of men's and women's work had a direct effect on the workloads attributed to and the resources that were available for women and men.

### Research

*The EU-OSHA 2003 report made several observations and conclusions regarding research (EU-OSHA, 2003a, pp. 17-18, 109-113, 121) including:*

- *There are gaps in statistical knowledge and research knowledge. Gender questions and analyses need to be routinely and systematically built into OSH monitoring and research.*
- *There is strong segregation of women and men into different jobs and tasks at work, and women carry out a greater proportion of unpaid duties in the home. Women are also more likely to work part-time. This gender segregation at work and home, and gender differences in employment conditions, has a major impact on gender differences in work-related health outcomes. The*

*closer the breakdown according to the real tasks people carry out, the better. Data should be adjusted for the number of hours worked.*

- *Practical means of improving the quality of OSH statistics by gender should be investigated.*
- *The gender imbalance in research should be addressed.*
- *More interdisciplinary approaches to gender research are needed.*
- *More research is needed in the area of workplace interventions and prevention.*

*Recommendations of the 2013 and 2014 reports included a wider range of indicators and more differentiated monitoring instruments to cover risks in women's work; critically assessing monitoring tools; designing more holistic research approaches; addressing the gaps (EU-OSHA, 2013, 2014).*

Researchers need to generate hypotheses regarding how gender intervenes in the pathways linking exposures and outcomes. Further, researchers needed to look carefully at the tasks women and men really perform, in what circumstances, for how long and so on. Researchers should examine the different workplace processes involving women and men, from the point of hiring, selection, task assignments, turnover and appropriateness of training, and how they experience, report and claim for compensation. This will lead to an enhanced understanding of the data and, hence, better analyses (Messing, 2012). See also Kines et al. (2007) on why it is necessary to carry out gender-sensitive analysis. For example, research has shown that gender impacts on organisational change with different factors are more likely to influence how women and men adapt and cope with changes within organisations (see Kohler, 2006). WHO (Case 4.13) also advocates, as one of its steps for implementing a healthy workplace programme, the collection of gender-segregated qualitative and quantitative data, which should assist in reducing any assumptions about the hazards that individuals face at the workplace.

The 2003 report provided examples of gender being incorporated into research activities in Italy and by NIOSH in the USA and CINBIOSE in Canada (EU-OSHA, 2003a). Since the publication of the 2003 report, OSH research data and statistics are more likely to be routinely broken down by gender. There is more awareness that gender should not be treated as a confounding variable that has to be adjusted for, and that, for example, accident rates should take account of hours worked. The operation of gender mechanisms are more likely to be examined in research. This current report also includes some examples related to research activities.

#### *OSH data gathering and analysis*

The background to the project to provide research on gender and OSH in Navarra, Spain, in Case 4.8 was to gather and analyse data on working conditions in the region from a gender perspective. The organisation expanded the previous working conditions survey to include aspects of health and double workload (at work and home) and to include a specific study on women engaged in those activities where they were most prevalent in Navarra. Further, the case outlines that the presence or absence of means to prevent objective risk situations helps to determine whether or not a company has a deficit in terms of occupational risk and gender equality, as does the extent to which it includes adaptations to men's and women's different physical shapes (ergonomic considerations, adapting for pregnancies and other psychosocial risk factors).

As mentioned, a major precondition for effective gender equality policies and legislation is the availability of high-quality statistics disaggregated by sex (EIGE 2014), and the North Rhine-Westphalia region in Germany (Snapshot 6.2.5) and the Cantabria region in Spain (Snapshot 6.2.11) are two examples of organisations that disaggregate their accident and ill-health data by gender. North Rhine-Westphalia applied an informational approach advocated by WHO for addressing gender inequalities. The data routinely collected from a variety of sources are supplemented with additional surveys. The findings are then used for planning and policy development.

#### *Research programmes*

Several cases include gender and women's OSH issues or female-dominated sectors in the organisation's research programmes as part of a gender-sensitive or diversity approach, including the Austrian Labour Inspectorate (Case 4.1) and the Health and Safety Executive in the UK (Case 4.9). Case 6.1.20 shows how a national trade union organisation included gender in its surveys and investigations.

*Professional bodies*

As mentioned, the report also contains examples of how two international professional associations, the International Commission on Occupational Health (ICOH) (Case 4.12) and the International Ergonomics Association (IEA) (Snapshot 6.1.25), are practising and promoting the inclusion of gender in their activities by setting up dedicated scientific committees. The IEA, with a remit of an international professional body for researchers and practitioners with a focus on ergonomic topics, created a Gender and Work Technical Committee (GWTC) to promote a gender perspective in ergonomic research and analysis.

WHO advocates, as one of its steps for implementing a healthy workplace programme, the collection of gender-segregated qualitative and quantitative data.

**OSH in equality policy and actions**

*The 2003 report concluded that improving women's OSH and quality of working life cannot be viewed separately from wider discrimination issues at work and in society. It is essential that OSH be integrated into employment equality actions; moreover, activities to mainstream OSH into other policy areas, such as public health or corporate social responsibility initiatives, should include a gender element (EU-OSHA, 2003a).*

OSH strategies or interventions which incorporate equalities actions are becoming more common. This was shown, for example, in the Health and Safety Executive's equality scheme (Case 4.9, UK) and in Austria (Case 4.1) in its drive to incorporate gender mainstreaming into daily work practices of the Labour Inspection, in the incorporation of elements to encourage equal opportunities in Navarra's Occupational Health Plan 2007-2012 (Case 4.8) and with WHO's plan to incorporate gender in its healthy workplaces model (Case 4.13). Several cases include zero tolerance of harassment as part of their OSH measures. However, OSH elements also need be incorporated into work-related equalities actions. Some of the cases showed what this means.

A number of the cases showed how OSH had been included in measures related to workplace equality plans. Navarra region in Spain (Case 4.8) has an OSH impact element included in its equality planning for workplaces. The Navarra Occupational Health Institute worked with the Navarra Equal Rights Institute and developed the OSH section in a Gender Equality in Companies tool (IGE). The OSH section explores the following: repetitive tasks; workload; the availability of adequate PPE for women; the existence of specific health checks for women such as iron deficiency; an emphasis (if any) on the risks associated with male jobs; the composition by sex of the prevention team; and the equality of training by gender. OSH is recognised as part of the working conditions covered in Finland's Gender Equalities Act (Case 4.3) and Finnish Case 4.4 presents how OSH is included in requirements, such as making a workplace equalities plan. A German diversity project (Snapshot 6.1.8) included the development of a diversity impact tool, which includes areas such as work organisation, work design and health.

The presentation of Denmark's interministerial gender-mainstreaming project (Case 4.2), which encouraged the introduction of gender-mainstreaming initiatives and innovations into all ministries, includes how it applied gender differences to workplace layouts to acquire better advice on their choice of workstation layout.

In the Italian railways (Case 4.6), improvements to working conditions were implemented as part of a project to promote equality in the organisation, and these were combined with measures such as implementing training and setting up an equal opportunities network to improve the female employees' skills and knowledge for their particular jobs. The Senate of Berlin (Case 4.5) launched a programme for the implementation of gender mainstreaming in the Berlin administration. This was an opportunity to launch a project for a gender-sensitive design of occupational health management in Berlin's public administration. In the Olympic Development Authority case in the UK (Case 4.9) OSH training was part of the training measures to give young women the skills to enter construction work.

The clear links between OSH and equality are demonstrated in a number of cases. In France (Case 5.1), a study of the ergonomics in a print shop showed that because female employees were less likely to be promoted they remained for years in jobs that required specific postures and movements that contributed to MSDs and sickness absence.



The Navarra Occupational Health Institute worked with the Navarra Equal Rights Institute and developed the OSH section in a Gender Equality in Companies tool (IGE).

### **Use of partnerships, development of cooperation and collaboration**

*The 2003a report (EU-OSHA, 2003a, p. 140) recommended that the multi-factorial nature of gender differences in OSH require active cooperation among different areas of policies, research, education and information. Ways of promoting this cooperation need to be investigated and good practices shared.*

In any mainstreaming activity, when taking your topic out of its niche (2004 seminar) and integrating it into other areas, partnership is essential. EU-OSHA reports on good practice consistently cite the value of partnership in achieving successful outcomes. In this report, for specific projects, several of the examples are collaborative. One example is the research partnership of more than 20 years' duration between CINBIOSE with Quebec's three largest trade union confederations on the theme of women's occupational health (Snapshot 6.2.1).

In the UK the Health and Safety Executive (Case 4.9) worked with the Department for Work and Pensions, trade unions and stakeholders in devising its equality scheme. In Romania (Case 5.5), several stakeholders, organisations and institutes worked together as part of a partnership agreement to address the issue of suitable PPE for women and the hazards associated with cleaning products. In Spain (Case 4.8), the Navarra Occupational Health Institute and the Navarra Equal Rights Institute displayed good cooperation between an OSH institute and an equal opportunity organisation.

Other examples of collaborations include the Olympic Delivery Authority in the UK (Case 5.7), which actively worked with the London Development Agency and Construction Skills to deliver its Women in Construction project, such as its mentoring programme, and with the Health and Safety Executive on health and safety aspects. In Spain (Snapshot 6.2.10), trade unions and organisations collaborated to improve the work environment for female bus drivers. WHO, in its plan to incorporate gender in its healthy workplaces model, worked with its collaborating centres to move the plan forward within countries (Case 4.13). The Women in Informal Employment: Globalizing and Organizing (WIEGO) project involves innovative ways of working with informal worker organisations (Snapshot 6.1.26).

Successful partnerships were seen in a number of other cases and snapshots: Brazil/Canada (Snapshot 6.1.2); Canada (Snapshot 6.1.4); Croatia (Snapshot 6.2.2); Denmark (Case 4.2); Finland (Cases 4.3 and 4.4); and the Netherlands (Snapshot 6.1.15).

The partners were drawn from governmental departments or agencies, trade unions and private companies. Internal to organisations, cooperation between OSH and equalities/human resources is important, as is the effective engagement of staff at all levels.

Several stakeholders, organisations and institutes worked together in a partnership agreement to address the design of women's PPE.

### **The role of trade unions**

*The 2003 EU-OSHA review of gender issues in OSH concluded that the social partners need to take account of gender in all their activities, raise awareness, use social dialogue committees to promote gender issues in OSH, develop their own resources and promote women's participation in workplace OSH and to encourage more women to be involved as worker representatives or on safety committees. In addition, where worker representatives are men they need to understand the issues and what steps they need to take to ensure that women's health and safety issues are covered and that they are able to participate and that their voices are heard (EU-OSHA, 2003a, pp. 17, 116-121).*

Many trade union organisations have been promoting gender issues in OSH. The interest and influence of some trade unions is shown by the fact that they are partners in several of the examples in this report (such as Case 4.3 from Finland, Case 4.6 from Italy, Case 4.9 from the UK and Snapshot 6.2.10 from Spain).

However, trade unions have also taken their own actions to mainstream gender into their health and safety activities. Several cases from the UK illustrate how this is taking place. Snapshot 6.1.20 describes how gender was systematically mainstreamed into the OSH activities of the national trade union confederation. A cross-union steering group was key to the activity. Snapshot 6.1.18 shows how

gender issues were integrated into a national trade union's guide for its workplace safety representatives. Case 4.11 outlines a workplace approach to the male health issues of testicular and prostate cancer and Snapshot 6.1.19 illustrates how guidelines were developed on the menopause. In the Netherlands (Snapshot 6.1.13), two trade unions, FNV Bondgenoten and FNV Bouw, led a campaign to provide employers with information about reproductive toxins and the effects on workers who may be exposed to them.

In the section of additional cases two examples illustrate how the International Transport Federation has taken steps to take better account of women in its own organisation and priorities and in raising workplace issues such as better toilet facilities. The partnership between CINBIOSE and Quebec's three largest trade union confederations on the theme of participative research in women's occupational health (Snapshot 6.2.1) has been mentioned.

Gender was systematically mainstreamed into the OSH activities of a national trade union confederation. A cross-union steering group was key to the activity.

## Success factors

### *General success factors*

There were various general factors that positively impacted on integrating gender mainstreaming in OSH, and these are detailed below.

*Prior investigation* In accordance with prerequisites for all successful health and safety interventions, successful actions were based on prior investigation, risk assessment and the full participation of all involved throughout the process.

*Partnership* Quite a few of the cases described worked within a partnership, which was crucial to successfully achieving their objectives. The partners were drawn from governmental departments or agencies, trade unions and private companies. Internal to organisations, cooperation between OSH and equalities/human resources is important, as is the effective engagement of staff at all levels.

*Steering committee* The establishment of a project steering committee or group will help in moving the project or policy forward. The use of steering committees was noted in Denmark (Case 4.2), France (Case 5.2), Germany (Case 5.3), Italy (Case 5.4) and the UK (Case 4.9). These steering committees, with representation from the various units or departments across the organisation, should be able to include the views of all staff and to address any issues that may arise.

*Top-down, bottom-up approach* At the organisational level, the combination of a top-down, bottom-up approach assists in achieving the established aims. The Austrian case (Case 4.1) used such an approach: with a clear mandate from the top management and the active involvement of staff it was able to achieve its objectives.

*Creation and use of tools* Tools, methods and guidelines were developed to move the process forward. Tools include gender-related web feature, different forms of guidance and awareness-raising information; in a number of cases, checklists were created.

*Addressing concerns of men and women* Methods and tools developed to address the concerns and issues of the female employees in the organisation were found to be relevant for the problems encountered by the male employees as well.

*External requirements to address gender and diversity* The inclusion of gender in the European Community OSH strategies since 2002 has helped to drive actions, as have more general equality requirements. The Austrian Labour Inspectorate came under a general Ministry requirement to carry out gender mainstreaming (Case 4.1) and the UK Health and Safety Executive needed to fulfil a legal requirement not to discriminate in their service provision (Case 4.9).

### *Success factors regarding specific areas*

Success factors were also identified in relation to certain types or areas of intervention.

*Success factors at workplace level*

- Often very simple steps can be taken to improve the OSH of women workers where it had been previously overlooked.
- Looking at the real jobs people do and broader work organisation when carrying out risk assessments and deciding solutions.
- Use of surveys, discussion and other worker participation methods to determine real needs and practical solutions.
- Including men and women, for example in surveys, even if the intention is to target the measures at women.
- Promoting the message that the intention of a gender-sensitive approach is to improve working conditions for men and women — measures that improve OSH for women generally improve OSH for men as well.
- Small and microenterprises may not have the structures or capacity to take a comprehensive approach. However, they may focus on a specific job or risk that is a particular issue for women rather than an integrated policy approach. The key is to be sensitive to different problems and needs. A simple 'gender check' can be made and simple questions asked. Has the OSH of both men and women been considered? Have any differing needs been taken into account?
- Bringing OSH and equalities actions together.

*Success factors regarding women in non-typical sectors*

- Surveys and discussion to find the real OSH issues of importance to women.
- Training women in OSH as part of their vocational skills development aids their integration (for example, in the construction sector).
- Combining human resources measures and OSH measures.
- Key issues include PPE, ergonomics, violence and harassment, welfare, uniforms, flexible working and child care.
- Partnership with manufacturers and suppliers, for example to improve the suitability of PPE or equipment.
- The use of mentors.

*Success factors for gendered workplace health promotion*

Men

- Using advice from men's health forums and messages and materials tailored to the particular male audience.
- Combining work aspects and general health aspects of an issue.
- Consultation with men and joint development with trade unions.
- Covering men in actions related to reproductive risks and health.
- Involvement of wives and partners.

Women

- Consultation and discussion with the group concerned to determine their real needs, for example older and younger women will have different concerns.
- Combining work aspects and general health elements.
- Covering the whole reproductive life cycle.

*Success factors for mainstreaming gender into national labour inspection and OSH services*

- Having gender and OSH included in the national OSH strategy and work programme.
- A stepwise approach can be taken, starting with gender mainstreaming and then expanding it to cover all areas of diversity.
- Key drivers are legal obligation or general ministerial policy; and commitment from the top level in the OSH authority.

- Having access to general mainstreaming tools and collaboration with equalities experts.
- Developing and implementing the process and activities over time, including through the use of working groups and forums, communication and feedback mechanisms.
- Recognising that some staff may have misconceptions or be reluctant to embrace the issue and supporting them.
- Awareness-raising, training and practical tools for inspectors to use in their daily work. Embedding gender issues in training for new inspectors.
- Setting objectives and evaluation.
- Mainstreaming gender externally into the delivery of services and internally into the working conditions of staff. Integrating it across all activities: inspection, research, campaigns.

#### *Success factors for mainstreaming gender into professional OSH-related organisations*

- Networking.
- Using the structures and the working procedures of the organisation, for example setting up a working group to define the need and develop a proposal; proposing a dedicated scientific/technical committee with objectives and a remit compatible with the structure and remit of the organisation.
- Including activities to support the integration of gender throughout the work of the organisation and its other technical committees, etc.

#### **Challenges**

Two key challenges are highlighted in this report; these point to areas that should be addressed in moving forward regarding a gender-sensitive approach to OSH and its integration into practice.

- *It takes time to introduce initiatives.* There can be significant barriers to overcome, such as misunderstandings about what gender mainstreaming means or perceptions of some individuals that may be difficult to change. This was the experience of the Austrian Labour Inspectorate (Case 4.1). In Italy (Case 4.6), there were strong historical, cultural and educational perceptions of women's ability to work in the transport sector.
- *The need for context-specific materials on gender mainstreaming.* Some organisations could not find comparative materials on gender mainstreaming to reference in moving forward with their own projects. This was evident in the Senate of Berlin's programme for implementing gender mainstreaming in the Berlin administration (Case 4.5).

#### **Transferability**

The majority of the cases could potentially be transferred across countries. There are several initiatives and aspects of larger initiatives that could be carried out by small enterprises. Once a small organisation understands that there are gender differences in OSH and that men and women may have different needs and priorities, the next basic step is to consult male and female employees and listen to what they have to say concerning the issues that affect them.

#### **Overall conclusions**

All workers — men and women — benefit when gender differences are recognised and are addressed. The case studies presented in this report show the range of projects that are working to address gender mainstreaming in OSH within countries and within organisations. The report shows that this is being done in a variety of different ways, through policy and strategy, research and at the workplace. Those taking action include scientific associations, OSH organisations, equalities organisations, health organisations, employers and trade unions.

The cases show a range of initiatives, from comprehensive gender-mainstreaming projects to simple steps that organisations can take to ensure that the OSH of both women workers and male workers are covered.

The approaches in the cases support the recommendations of how to take a gender-sensitive approach given in the EU-OHSA reports of 2013, 2014 and 2003a. The key issues for practice include:

- include gender systematically: in research, in interventions and in policy development, in standard setting and so on;
- include women's OSH explicitly;
- include men's gender explicitly; for example, question why men have more work accidents;
- take account of the real jobs that men and women do and the differences in exposure and working conditions. Go beyond the task and look at all gender differences in work circumstances, such as the effect of differences in career progression on exposure to risk. Question gender stereotypes about job assignment and job content;
- include work–life balance and work–family issues;
- bring employment equality actions, OSH actions and health equality actions together;
- base actions on evidence, such as surveys of awareness and current practice, and risk assessment in workplaces;
- listen to women and involve them in risk assessment and the development of prevention measures through participatory approaches;
- involve women in decision-making regarding OSH policy and strategy;
- provide relevant training on incorporating gender issues to those involved in risk prevention in the workplace, to those involved in developing OSH policy and strategy, and to those involved in implementing it, such as labour inspectors (EU-OSHA, 2003a, 2013, 2014).

Reasons or drivers for activities include: to comply with equalities requirements; to recruit and retain more women, especially in jobs where women are under-represented; to reduce sickness absence and improve OSH in general; to meet demands from women workers; in response to an increased awareness about covering both men and women in prevention activities; and to improve the OSH vocational skills and professional training of women in order to improve their job opportunities.

This is a developing area. In order to make further progress more attention is needed to develop effective ways of working between equal opportunities actors, OSH actors and human resources.

In addition, gender mainstreaming is an ongoing exercise, not a one-off activity. Therefore, sharing and exchange of experience and practice needs to continue. In this respect it would also be useful to follow up relevant examples, particularly to look at sustainability and further developments.



## 9 Overview tables of the cases

### 9.1 Cases by main achievements

Number	Country	Title	Lead organisation	Main achievement	Type*
4.1	Austria	The Austrian Labour Inspection's approach to gender mainstreaming into OSH	Austrian Labour Inspectorate	<p>The new risks of the work environment are acknowledged as needing interdisciplinary attention, which was done through the gender mainstreaming/diversity approach.</p> <p>The project has increased the competence of the Austrian Labour Inspectorate and reinforced the quality of work</p>	A1
4.2	Denmark	The Danish interministerial gender-mainstreaming project — Action Plan 2002-2011	<p>Department of Gender Equality</p> <p>Prime Minister's Office</p> <p>All 19 ministries within Denmark</p>	<p>More than 70 concrete descriptions of successful cases of gender mainstreaming in the public sector were completed.</p> <p>The collaboration of the network members in developing tools.</p> <p>Most of the ministries involved have prepared plans for developing the competence of the staff to work with gender equality appraisals</p>	A1
4.3	Finland	Finnish Gender Equality Act	<p>The Equality Ombudsman</p> <p>The Gender Equality Unit</p> <p>The Council for Gender Equality</p>	<p>The unofficial women MPs' network in Parliament to which all female MPs belong.</p> <p>Trade unions, employer confederations and the Finnish government worked in tripartite cooperation to promote gender equality and equal pay at workplaces.</p>	A1

Number	Country	Title	Lead organisation	Main achievement	Type*
				Systematic approach including equality plans in the workplace	
4.4	Finland	Gender aspect — OSH in Finland — Strategy and practices	The Equality Ombudsman The Gender Equality Unit The Council for Gender Equality	Sixty-two per cent of Finnish workplaces have fulfilled legal duty of gender equality planning	A1
5.1	France	A gender-sensitive approach to MSD prevention in a printing company, France	Agence Régionale pour l'Amélioration des Conditions de Travail (ARACT) Basse Normandie	Adapting the work environment to the occupational needs of the women employees, and addressing issues at their source	A2
5.3	Germany	Gender mainstreaming in the risk assessment of psychological stress	Sujet GbR Organisationsberatung (organisational consulting); Hans Böckler Foundation; ver.di (multi-service trade union)	Sensitivity to the importance of gender in terms of stress and resources	A2
4.5	Germany	Gender-sensitive design of occupational health management in the public administration of Berlin	Senate of the Interior in Berlin	The development and implementation of various tools to assist with gender-sensitive workplace health promotion  Sensitivity to the importance of gender in terms of stress and resources	A1
5.2	Germany	Supporting women employees and a family-friendly company culture	ConSol* Software GmbH	Demonstrates that a 'woman'-friendly working environment can function within and meet operational interests	A2
4.6	Italy	A woman-sensitive approach focused on equal opportunities in	The Italian State Railway Group (Ferrovie dello Stato S.p.A., FS Group) (railway enterprise)	The establishment of the first Bilateral Equivalency Committee ('Equal Opportunities' Committee, CPO) within the FS Group aimed at 'defending	A1



Number	Country	Title	Lead organisation	Main achievement	Type*
		the Italian railway sector		and enhancing female employment and promoting positive actions for women'	
5.4	Italy	A Positive Initiative for Female Workers' Safety in the Transport Sector at Met.Ro. SpA Group	Met.Ro. SpA (Metropolitana di Roma) Group	The participants in the project provided fairly positive feedback, especially with respect to the training content.  The training proved to be beneficial for both female workers and male employees confronted with similar job-related risks, that is, potential conflicts arising from their dealings with the public	A2
5.5	Romania	PPE responding to women's needs at work within various economic sectors — a cooperative approach	FORNAX Group S.C. MENTOR SRL 'Aeroporturi Bucuresti' National Company S.A.  Romanian Air Traffic Services Administration (ROMATSA)  'Henry Coanda' International Airport of Bucharest, Otopeni  S.C. MarMih SRL	The partnership approach of the manufacturers and beneficiaries that crossed a wide range of sectors	A2
4.7	Spain	The autonomous community of Madrid and occupational risk prevention from a gender perspective	Instituto Regional de Seguridad y Salud en el Trabajo (IRSST)	Strong conviction and policy will to promote gender equality and mainstream it in prevention policy	A1
4.8	Spain	Integrating gender mainstreaming in occupational risk prevention for Navarra	Navarra Occupational Health Institute (Insituto Navarro de Salud Laboral)  Navarra Equal Rights Institute (Insituto Navarro para la Igualdad)	Focus on gender awareness and its implementation done in collaboration with different organisations within Navarra, which resulted in improved communication and common programmes	A1

Number	Country	Title	Lead organisation	Main achievement	Type*
4.9	United Kingdom	Development and implementation of a diversity programme by a national OSH authority	Health and Safety Executive (HSE) Department for Work and Pensions Trades Union Congress (TUC) Internal and external stakeholders	The development of a Single Equality Scheme, which facilitates good practice across the public sector	A1
4.11	United Kingdom	Promoting a workplace approach to testicular and prostate cancer	Unite	Improved awareness of men's health issues in the workplace, with a specific focus on cancers that affect men, such as testicular and prostate cancer	A1
4.10	United Kingdom	Purple Boots Campaign	Women's Engineering Society (WES)	Understanding the issues around male attitudes to health, and planning activities to adjust to these attitudes  Raising awareness in the workplace on male health issues, especially on cancers specific to men	A1
5.6	United Kingdom	Bringing gender equality into the ergonomic design of food preparation areas	Greggs plc	Improving the work process for female, and thereby all, employees, leading to reduced ill health and improved efficiencies in the organisation	A2
5.7	United Kingdom	Women into Construction project	Olympic Delivery Authority (ODA)	Women employed in the Olympic park improved their skills and were able to further their careers	A2
5.8	United Kingdom	'Male-friendly' staff wellness programme reduces absence at Royal Mail	Royal Mail	Men's health can be improved by simple measures tailored to the issues; communication focused on format that men could understand and use	A2

Number	Country	Title	Lead organisation	Main achievement	Type*
4.12.	International	Mainstreaming gender into the activities of an international occupational health professional society	International Commission on Occupational Health (ICOH)	Making women's work-related health more visible by producing newsletters and making women and health a topic at its congress	A1
4.13	International	Incorporating gender into WHO's healthy workplaces model	WHO	The development and promotion of a healthy workplace framework	A1

\*A1: cases from the EU, national and intermediary organisations; A2: Cases from the workplace or initiatives launched by external organisations aimed at the workplace.

## 9.2 Categorisation by risks and issues

Number	Country	Title	Lead organisation	Risk, issues	Type*
4.1	Austria	The Austrian Labour Inspectorate's approach to gender mainstreaming into OSH	Austrian Labour Inspectorate	<p>Protective and preventive measures are not equally effective for all workers or omitted, because a workplace risk is not recognised as risks.</p> <p>It is important to include the gender perspective in all diversities because women may be subject to multiple discrimination in the workplace, as migrants, people with disabilities or older workers.</p> <p>The implementation of gender mainstreaming is still seen as an additional task and is not perceived by all employers as their responsibility</p>	A1
4.2	Denmark	The Danish interministerial gender-mainstreaming project: Action Plan 2002-2011	Department of Gender Equality Prime Minister's Office All 19 ministries within Denmark	The differences among the ministries in their core activity areas influenced the type of work that was done in respect of gender mainstreaming in their respective ministries	A1
4.3	Finland	Finnish Gender Equality Act	The Equality Ombudsman The Gender Equality Unit The Council for Gender Equality	The lack of a shared understanding or legal instruments to define which jobs are of equal worth	A1
4.4	Finland	Gender aspect — OSH in Finland — Strategy and practices	The Equality Ombudsman The Gender Equality Unit	Part-time parental leave scheme in place but few families take advantage of	A1

Number	Country	Title	Lead organisation	Risk, issues	Type*
			The Council for Gender Equality	<p>scheme, and the need to understand why this occurs</p> <p>Finland's Act on Special Maternity Leave solves some, but not all, of the problems associated with women at work.</p> <p>The different levels of benefits given to women may make them less desirable to the employer as employers may perceive additional cost, which may result in discrimination</p>	
5.1	France	A gender-sensitive approach to MSD prevention in a printing company, France	Agence Régionale pour l'Amélioration des Conditions de Travail (ARACT) Basse Normandie	Women employees staying in one post and not developed or encouraged to develop as workers	A2
5.3	Germany	Gender mainstreaming in the risk assessment of psychological stress	Sujet GbR Organisationsberatung (organisational consulting), Hans Böckler Foundation, ver.di (multi-service trade union)	<p>Little time and few personnel resources for the process, as other issues are considered more important.</p> <p>The issue of existing workloads are difficult to raise with the organisation and, without the focus on gender, this would not have been recognised nor addressed</p>	A2
4.5	Germany	Gender-sensitive design of occupational health management in the public	Senate of the Interior in Berlin	Few documents on which to draw in moving forward with gender mainstreaming	A1

Number	Country	Title	Lead organisation	Risk, issues	Type*
		administration of Berlin			
5.2	Germany	Supporting women employees and a family-friendly company culture	ConSol* Software GmbH	The practices should be assessed over the long term to ensure that they are sustainable	A2
4.6	Italy	A woman-sensitive approach focused on equal opportunities in the Italian railway sector	Italian State Railway Group (Ferrovie dello Stato S.p.A., FS Group)	Women's exclusion and discrimination are still encountered, particularly in terms of women's access to the labour market (lower employment rate) and career prospects (lack of equal opportunities as compared with men)	A1
5.4	Italy	A positive initiative for female workers' safety in the transport sector	Metropolitana di Roma (Met.Ro. SpA) Group	<p>The absence of institutional mechanisms to support the negotiation of social agreements among the social partners.</p> <p>The absence of previous examples specific to transport sector of women's integration into the workforce.</p> <p>To enable the female metro station operators to appropriately manage conflicts that may occur with members of the public.</p> <p>The women employed in the transport sector experienced poorer working conditions in comparison with male workers in similar workplaces</p>	A2

Number	Country	Title	Lead organisation	Risk, issues	Type*
5.5	Romania	PPE responding to women's needs at work within various economic sectors — a cooperative approach	FORNAX GROUP S.C. MENTOR SRL 'Aeroporturi Bucuresti' National Company S.A. Romanian Air Traffic Services Administration (ROMATSA) 'Henry Coanda' International Airport of Bucharest, Otopeni S.C. MarMih SRL	The less suitable PPE available for women in sectors in which women are increasingly employed, such as gas distribution networks	A2
4.7	Spain	The autonomous community of Madrid and occupational risk prevention from a gender perspective	Instituto Regional de Seguridad y Salud en el Trabajo (IRSST)	Disseminating information in a format that workers would neither read nor act on  Not addressing the risks to which women are exposed at the workplace when pregnant	A1
4.8	Spain	Integrating gender mainstreaming in occupational risk prevention for Navarra	Navarra Occupational Health Institute (Insituto Navarro de Salud Laboral)  Navarra Equal Rights Institute (Insituto Navarro para la Igualdad)	Psychosocial risks that exist within organisations	A1
4.10	United Kingdom	Purple Boots Campaign	Women's Engineering Society (WES)	The campaign was run by volunteers, with the challenge of accessing expertise and following up leads	A1
4.11	United Kingdom	Promoting a workplace approach to testicular and prostate cancer	Unite	Poor acknowledgement of men's health issues in the workplace, with a specific focus on cancers that affect men, such as testicular and prostate cancer	A1

Number	Country	Title	Lead organisation	Risk, issues	Type*
5.6	United Kingdom	Bringing gender equality into the ergonomic design of food preparation areas	Greggs plc	Increased repetitive strain injury (RSI) from using equipment not suited to employees', mainly women's, statures.  The inadequate design of workstations for women employees	A2
5.7	United Kingdom	Women into Construction project	Olympic Delivery Authority (ODA)	To address the unequal gender work patterns that exist within the construction sector, and thereby encourage women to work in the sector	A2
5.8	United Kingdom	'Male-friendly' staff wellness programme reduces absence at Royal Mail	Royal Mail	To reduce sickness absence by tailoring a health promotion programme to engage both male and female employees	A2
4.12.	International	Mainstreaming gender into the activities of an international occupational health professional society	The International Commission on Occupational Health (ICOH)	To promote the development of a gender-sensitive approach to research in health and safety, by taking into consideration both the need for equality and the need to protect workers when they are vulnerable	A1
4.13	International	Incorporating gender into WHO's healthy workplaces model	WHO	Workplace health promotion programmes are difficult to evaluate.  Resistance by workers to the implementation of workplace interventions	A1

\*A1: cases from the EU, national and intermediary organisations; A2: cases from the workplace or cases by external organisations aimed at the workplace.



### 9.3 Classification of cases

#### 9.3.1 Full case studies

Case number	Type	Sector	Communication	Discrimination	Diversity	Employee engagement	Equality	Gender-specific data analysis	Guides	Harassment	Job/work design	MSDs	Partnership	PPE	Stress	Training	Violence	Well-being	Working hours
4.1	A1	1	✓		✓		✓	✓	✓		✓	✓				✓		✓	
4.2	A1	1					✓		✓	✓			✓			✓			
4.3	A1	1		✓		✓	✓			✓			✓			✓			✓
4.4	A1	1		✓		✓	✓			✓	✓	✓	✓				✓	✓	
4.5	A1	1	✓				✓	✓	✓		✓		✓		✓	✓		✓	
4.6	A1	1		✓		✓	✓		✓	✓						✓	✓	✓	✓
4.7	A1	1		✓			✓	✓	✓	✓						✓	✓	✓	
4.8	A1	1	✓	✓		✓	✓	✓	✓	✓			✓	✓		✓	✓	✓	✓
4.9	A1	1	✓	✓	✓		✓	✓	✓	✓			✓			✓		✓	
4.10	A1	3	✓	✓	✓	✓	✓	✓					✓	✓					
4.11	A1	3	✓				✓		✓							✓		✓	
4.12	A1	3	✓				✓											✓	

Mainstreaming gender into occupational safety and health practice

Case number	Type	Sector	Communication	Discrimination	Diversity	Employee engagement	Equality	Gender-specific data analysis	Guides	Harassment	Job/work design	MSDs	Partnership	PPE	Stress	Training	Violence	Well-being	Working hours
4.13	A1	3	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓		✓	✓	✓	
5.1	A2	2	✓	✓	✓	✓	✓	✓				✓			✓	✓		✓	
5.2	A2	2	✓			✓	✓	✓	✓		✓					✓		✓	✓
5.3	A2	3				✓	✓	✓	✓				✓		✓			✓	
5.4	A2	2				✓	✓		✓				✓			✓	✓	✓	✓
5.5	A2	2			✓	✓	✓						✓	✓				✓	
5.6	A2	2				✓					✓	✓		✓				✓	
5.7	A2	3	✓	✓	✓	✓	✓	✓		✓						✓		✓	
5.8	A2	2	✓			✓	✓		✓									✓	

\*A1: cases from the EU, national and intermediary organisations; A2: cases from the workplace or cases by external organisations aimed at the workplace.

Sector: 1: public; 2: private; 3: non-governmental, stakeholder, voluntary.

### 9.3.2 Snapshots

Snapshot number	Type	Sector	Communication	Discrimination	Diversity	Employee engagement	Equality	Gender-specific data analysis	Guides	Harassment	Job/work design	MSDs	Partnership	PPE	Stress	Training	Violence	Well-being	Working hours
6.1.1	A1	3	✓			✓	✓											✓	
6.1.2	A1	3			✓		✓		✓				✓						
6.1.3	A1	3	✓						✓									✓	
6.1.4	A1	3				✓			✓				✓	✓					
6.1.5	A1	1									✓			✓					
6.1.6	A1	2				✓	✓									✓			
6.1.7	A1	2					✓		✓		✓							✓	
6.1.8	A1	3			✓				✓		✓					✓			
6.1.9	A1	1									✓							✓	
6.1.10	A1	1	✓			✓												✓	
6.1.11	A1	1	✓		✓				✓							✓			
6.1.12	A1	1	✓						✓										
6.1.13	A1	3	✓						✓									✓	
6.1.14	A1	2													✓	✓		✓	

Mainstreaming gender into occupational safety and health practice

Snapshot number	Type	Sector	Communication	Discrimination	Diversity	Employee engagement	Equality	Gender-specific data analysis	Guides	Harassment	Job/work design	MSDs	Partnership	PPE	Stress	Training	Violence	Well-being	Working hours
6.1.15	A1	1			✓				✓										
6.1.16	A1	2	✓		✓													✓	
6.1.17	A1	2	✓		✓													✓	
6.1.18	A1	3	✓						✓	✓	✓	✓					✓		
6.1.19	A1	3		✓	✓	✓								✓	✓	✓		✓	
6.1.20	A1	3			✓	✓	✓											✓	
6.1.21	A1	2					✓		✓		✓								
6.1.22	A1	1	✓		✓									✓					
6.1.23	A1	3	✓						✓									✓	
6.1.24	A1	3			✓		✓	✓			✓								
6.1.25	A1	3						✓			✓							✓	
6.1.26	A1	3	✓			✓										✓		✓	
6.2.1	A2	1	✓	✓		✓	✓	✓			✓	✓	✓	✓		✓		✓	✓
6.2.2	A2	1									✓		✓	✓				✓	✓
6.2.3	A2	1	✓												✓			✓	✓

Mainstreaming gender into occupational safety and health practice

Snapshot number	Type	Sector	Communication	Discrimination	Diversity	Employee engagement	Equality	Gender-specific data analysis	Guides	Harassment	Job/work design	MSDs	Partnership	PPE	Stress	Training	Violence	Well-being	Working hours
6.2.4	A2	1	✓	✓			✓		✓									✓	
6.2.5	A2	1	✓				✓	✓										✓	
6.2.6	A2	1	✓			✓			✓		✓					✓		✓	
6.2.7	A2	2	✓	✓	✓	✓	✓				✓							✓	
6.2.8	A2	1					✓				✓							✓	
6.2.9	A2	3				✓									✓			✓	
6.2.10	A2	3					✓			✓	✓		✓	✓	✓	✓	✓	✓	✓
6.2.11	A2	1	✓				✓	✓											
6.2.12	A2	1					✓		✓			✓		✓					
6.2.13	A2	1					✓	✓	✓							✓		✓	
6.2.14	A2	1				✓	✓	✓	✓										
6.2.15	A2	3				✓								✓					
6.2.16	A2	1			✓		✓				✓								
6.2.17	A2	1					✓				✓								

\*A1: cases from the EU, national and intermediary organisations; A2: cases from the workplace or cases by external organisations aimed at the workplace.

Sector: 1: public; 2: private; 3: non-governmental, stakeholder, voluntary.



## 10 References and further information

- Alli, B. O., *Fundamental principles of occupational health and safety*, International Labour Office, Geneva, 2001. Available at: <http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wcms093550.pdf>
- Barker, R. T., Knisely, J. S., Barker, S. B., Cobb, R. K. and Schubert, C. M., 'Preliminary investigation of employee's dog presence on stress and organizational perceptions', *International Journal of Workplace Health Management*, 2012, Vol. 5, Issue 1, pp. 15-30.
- Burchell, B., Fagan, C., O'Brien, C. and Smith, M., *Working conditions in the European Union: The gender perspective*, European Foundation for the Improvement of Living and Working Conditions, Office for Official Publications of the European Communities, Luxembourg, 2007. Available at: <http://www.eurofound.europa.eu/pubdocs/2007/108/en/1/ef07108en.pdf>
- Chamberland, A., Carrier, R., Forest, F. and Hachez, G., *Anthropometric survey of the Land Forces (LF97)*. Defense and Civil Institute of Environmental Medicine, Toronto, ON, 1998 (Contractor Report 98-CR-15).
- Chen, M., Vanek, J., Lund, F., Heintz, J., Jhabvala, R. and Bonner, C., *Progress of the world's women 2005: Women, work and poverty*, United Nations Development Fund for Women, New York, 2005. Available at: <http://www.un-ngls.org/orf/women-2005.pdf>
- Cornish, M., *Realizing the right of women to safe work — building gender equality into occupational safety and health governance*. Commissioned as an ILO Concept Note for presentation at the XVIII World Congress on Occupational Safety and Health, 29 June to 2 July 2008, Seoul, Korea, Available at: [http://www.cavalluzzo.com/publications/newsletters/Realizingtherightofwomentosafework\\_ILO\\_sept12\\_08.pdf](http://www.cavalluzzo.com/publications/newsletters/Realizingtherightofwomentosafework_ILO_sept12_08.pdf)
- Council of Europe, *Gender mainstreaming: Conceptual framework, methodology and presentation of good practices: Final report of activities of the group of specialists on mainstreaming [EG-S-MS (98) 2]*, Strasbourg, 1998. Available at: [http://www.coe.int/t/dghl/standardsetting/equality/03themes/gender-mainstreaming/EG\\_S\\_MS\\_98\\_2\\_rev\\_en.pdf](http://www.coe.int/t/dghl/standardsetting/equality/03themes/gender-mainstreaming/EG_S_MS_98_2_rev_en.pdf)
- Council of Europe, *Gender mainstreaming*. Retrieved 24 March 2012, from: [http://www.coe.int/t/dghl/standardsetting/equality/03themes/gender-mainstreaming/index\\_en.asp](http://www.coe.int/t/dghl/standardsetting/equality/03themes/gender-mainstreaming/index_en.asp)
- Daly, M., 'Gender mainstreaming in theory and practice', *Social Politics*, Vol. 12, No 3, 2005, pp. 433-450.
- EIGE — European Institute for Gender Equality, *Good practices in gender mainstreaming: Towards effective gender training. Mainstreaming gender into the policies and the programmes of the institutions of European Union and EU Member States*, 2011. Available at: [http://www.eige.europa.eu/sites/default/files/Good-Practices-in-Gender-Mainstreaming-towards-effective-gender-training\\_0.pdf](http://www.eige.europa.eu/sites/default/files/Good-Practices-in-Gender-Mainstreaming-towards-effective-gender-training_0.pdf)
- EIGE — European Institute for Gender Equality, *Gender training resources*. (A database of tools and resources). Available at: <http://eige.europa.eu/resources/gender-training>
- EIGE — European Institute for Gender Equality, *Gender Trainers database: profiles of gender trainers and organisations offering gender training across the EU and Croatia*. Available at: <http://eige.europa.eu/content/gender-trainers-database>
- EIGE — European Institute for Gender Equality. *Factsheet: Gender equality and institutional mechanisms*, 2014. Available at: <http://eige.europa.eu/content/document/fact-sheet-gender-equality-and-institutional-mechanisms>
- Eiroline — European Industrial Relations Observatory Online. Same retirement age set for male and female civil servants, 2010. Retrieved 24 March 2012, from: <http://www.eurofound.europa.eu/eiro/2010/07/articles/IT1007039I.htm>
- EU-OSHA — European Agency for Safety and Health at Work, *Forum 8 — Learning about occupational safety and health*, 2002. Available at: <http://osha.europa.eu/en/publications/forum/8>

- EU-OSHA — European Agency for Safety and Health at Work, *Gender issues in safety and health at work. A review*, 2003a, Available at: <http://osha.europa.eu/en/publications/reports/209>
- EU-OSHA — European Agency for Safety and Health at Work, *Factsheet 42 — Gender issues in safety and health at work*, European Agency for Safety and Health at Work, 2003b. Available at: <http://osha.europa.eu/en/publications/factsheets/42/view>
- EU-OSHA — European Agency for Safety and Health at Work, *Factsheet 43 — Including gender issues in risk assessment*, European Agency for Safety and Health at Work, 2003c. Available at: <http://osha.europa.eu/en/publications/factsheets/43/view>
- EU-OSHA — European Agency for Safety and Health at Work, *Mainstreaming gender into occupational safety and health*. Proceedings of a seminar organised in Brussels on 15 June 2004 by the European Agency for Safety and Health at Work, 2005. Available at: <http://osha.europa.eu/en/publications/reports/6805688>
- EU-OSHA — European Agency for Safety and Health at Work, *OSH in figures: Young workers — Facts and figures*, European Agency for Safety and Health at Work, 2007. Available at: <http://osha.europa.eu/en/publications/reports/7606507>
- EU-OSHA — European Agency for Safety and Health at Work, *Workplace Violence and Harassment: a European Picture*, 2010. Available at: <http://osha.europa.eu/en/publications/reports/violence-harassment-TERO09010ENC>
- EU-OSHA — European Agency for Safety and Health at Work, *Managing risks to drivers in road transport*, European Agency for Safety and Health at Work, 2011a. Available at: [http://osha.europa.eu/en/publications/reports/managing-risks-drivers\\_TEW11002ENN](http://osha.europa.eu/en/publications/reports/managing-risks-drivers_TEW11002ENN)
- EU-OSHA — European Agency for Safety and Health at Work, *OSH in figures. Occupational safety and health in the transport sector — an overview*, 2011b. Available at [http://osha.europa.eu/en/publications/reports/transport-sector\\_TERO10001ENC/view](http://osha.europa.eu/en/publications/reports/transport-sector_TERO10001ENC/view)
- EU-OSHA — European Agency for Safety and Health at Work, *E-fact 57 — Family issues and work–life balance*, European Agency for Safety and Health at Work, 2012. Available at: <http://osha.europa.eu/en/publications/e-facts/e-fact-57-family-issues-work-life-balance>
- EU-OSHA — European Agency for Safety and Health at Work, *New risks and trends in the safety and health of women at work. European Risk Observatory*, 2013. Available at: <http://osha.europa.eu/en/publications/reports/new-risks-trends-osh-women>
- EU-OSHA — European Agency for Safety and Health at Work, *New risks and trends in the safety and health of women at work. European Risk Observatory. A summary of an Agency report*, European Agency for Safety and Health at Work, 2014. Available at: <https://osha.europa.eu/en/publications/reports/summary-new-risks-trends-osh-women/view>
- Eurofound, *Quality of women’s work and employment — Tools for change*, Foundation Paper No 3, December 2002, Office for Official Publications of the European Communities, Luxembourg.
- Europa, Official Journal of the European Union C 306, 17.12.2007. Treaty of Lisbon, Vol. 50, 17 December 2007. Available at: [http://bookshop.europa.eu/is-bin/INTERSHOP.enfinity/WFS/EU-Bookshop-Site/en\\_GB/-/EUR/ViewPublication-Start?PublicationKey=FXAC07306](http://bookshop.europa.eu/is-bin/INTERSHOP.enfinity/WFS/EU-Bookshop-Site/en_GB/-/EUR/ViewPublication-Start?PublicationKey=FXAC07306)
- European Commission, *Community framework strategy on gender equality (2001-2005)*, 2003. Retrieved 27 January 2012, from: [http://europa.eu/legislation\\_summaries/other/c10932\\_en.htm](http://europa.eu/legislation_summaries/other/c10932_en.htm)
- European Commission, *A guide to gender impact assessment*, no date. Available at: <http://ec.europa.eu/social/BlobServlet?docId=4376&langId=en>
- European Commission, *EQUAL guide on gender mainstreaming*, European Commission Directorate-General for Employment, Social Affairs and Equal Opportunities Unit B4, 2004. Available at: [http://ec.europa.eu/employment\\_social/equal/data/document/gendermain\\_en.pdf](http://ec.europa.eu/employment_social/equal/data/document/gendermain_en.pdf)
- European Commission, *Community strategy on health and safety at work (2002-2006)*, 2004a. Retrieved 27 January 2012, from: [http://europa.eu/legislation\\_summaries/employment\\_and\\_social\\_policy/health\\_hygiene\\_safety\\_at\\_work/c11147\\_en.htm](http://europa.eu/legislation_summaries/employment_and_social_policy/health_hygiene_safety_at_work/c11147_en.htm)



- European Commission, *Improving quality and productivity at work: Community strategy 2007-2012 on health and safety at work*, COM/2007/0062 final, European Commission, 2007. Available at: [http://eur-lex.europa.eu/legal-content/EN/ALL/;ELX\\_SESSIONID=QJ2dTGQNY385tn21Fn2IQglKBcgh6ZPFnTMDsvmG7bphp7y51Zt7!-839186504?uri=CELEX:52007DC0062](http://eur-lex.europa.eu/legal-content/EN/ALL/;ELX_SESSIONID=QJ2dTGQNY385tn21Fn2IQglKBcgh6ZPFnTMDsvmG7bphp7y51Zt7!-839186504?uri=CELEX:52007DC0062)
- European Commission, *EU strategic framework on health and safety at work 2014-2020*, COM/2014/0332 final, 2014. Available at: <http://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1405358974296&uri=CELEX:52014DC0332>
- Eurostat, *Employment rate by gender, age group 15-64*, 2012. Retrieved 27 January 2012, from: [http://epp.eurostat.ec.europa.eu/tgm/table.do?tab=table&init=1&plugin=1&language=en&pcode=t2020\\_10](http://epp.eurostat.ec.europa.eu/tgm/table.do?tab=table&init=1&plugin=1&language=en&pcode=t2020_10)
- EWHNET — European Women's Health Network Working Group on Occupational Health, 'Gender mainstreaming in occupational health', presented at 'A seminar on the gender dimension in health and safety', 16 November, Belgium EU Presidency/Federal Ministry of Labour and Employment Equal Opportunities Unit with the TUTB, Brussels, 2001. In EU-OSHA — European Agency for Safety and Health at Work, *Gender issues in safety and health at work. A review*, 2003a, Available at: <http://osha.europa.eu/en/publications/reports/209>
- Griffiths, A., MacLennan, S. and Wong, Y. Y. V., *Women's experience of working through the menopause, A report for the British Occupational Health Research Foundation*, 2010. Available at: [http://www.bohrf.org.uk/downloads/Womens\\_Experience\\_of\\_Working\\_through\\_the\\_Menopause-Dec\\_2010.pdf](http://www.bohrf.org.uk/downloads/Womens_Experience_of_Working_through_the_Menopause-Dec_2010.pdf)
- Habib, R. R. and Messing, K., 'Gender, women's work and ergonomics', *Ergonomics*, Vol. 55, No 2, 2012, pp. 129-132. Available at: <http://www.tandfonline.com/toc/terg20/55/2>
- ILO — International Labour Organization, *Definition of gender mainstreaming*, 2011. Retrieved 28 October 2011, from: <http://www.ilo.org/public/english/bureau/gender/newsite2002/about/defin.htm>
- Isaac, S. and Michael, W. B., *Handbook in research and evaluation for education and the behavioral sciences*, 2nd edition, Edits Publishers, San Diego, 1981.
- Kammerhofer, C., *Employment policy*, 2008. Available at: [http://www.europarl.europa.eu/ftu/pdf/en/FTU\\_4.9.3.pdf](http://www.europarl.europa.eu/ftu/pdf/en/FTU_4.9.3.pdf)
- Kauppinen, K., *OECD Panel Group on Women, Work, and Health: National Report, Finland*, Ministry of Social Affairs and Health, Finland, 1993.
- Kines, P., Hannerz, H., Mikkelsen, K. L. and Tüchsen, F. 'Industrial sectors with high risk of women's hospital-treated injuries', *American Journal of Industrial Medicine*, Vol. 50, No 1, 2007, pp. 13–21.
- Kohler, J. M., Munz, D. C. and Grawitch, M. J., 'Test of a dynamic stress model for organisational change: Do males and females require different models?' *Applied Psychology*, 2006, Vol. 55, No 2, pp. 168-191.
- Lopez-Claros, A. and Zahidi, S., *Women's empowerment: measuring the global gender gap*, World Economic Forum, Geneva, 2005. Available at: [http://www.weforum.org/pdf/Global\\_Competitiveness\\_Reports/Reports/gender\\_gap.pdf](http://www.weforum.org/pdf/Global_Competitiveness_Reports/Reports/gender_gap.pdf)
- McKinsey & Company, *Women matter. Gender diversity, a corporate performance driver*, McKinsey & Company, Inc., 2007. Available at: [http://www.mckinsey.de/downloads/publikation/women\\_matter/Women\\_Matter\\_1\\_brochure.pdf](http://www.mckinsey.de/downloads/publikation/women_matter/Women_Matter_1_brochure.pdf)
- Martin P., *Climate change, agricultural development, and migration*, Washington, German Marshall Fund of the United States, 2010. Retrieved 30 January 2012, from: [http://www.gmfus.org/galleries/default-file/PMartin\\_V2.pdf](http://www.gmfus.org/galleries/default-file/PMartin_V2.pdf)
- Messing, K., *Ergonomics studies and treatment of gender in epidemiological investigations*, 30th International Congress on Occupational Health (ICOH), Occupational Health for all: From research to practice, 18-23 March 2012. Retrieved 30 March 2012, from: <http://icoh.confex.com/icoh/2012/webprogram/Session2746.html>

- Messing, K. (ed.), *Integrating gender in ergonomic analysis: strategies for transforming women's work*, Trade Union Technical Bureau for Health and Safety, Brussels, 1999. In EU-OSHA — European Agency for Safety and Health at Work, *Gender issues in safety and health at work. A review*, 2003a, Available at: <http://osha.europa.eu/en/publications/reports/209>
- Parent-Thirion, A., Fernández, Macias, E., Hurley, J. and Vermeylen, G., *Fourth European working conditions survey*, European Foundation for the Improvement of Living and Working Conditions, Office for Official Publications of the European Communities, Luxembourg, 2007. Available at: <http://www.eurofound.europa.eu/pubdocs/2006/98/en/2/ef0698en.pdf>
- Ransom, P., *Women, pesticides and sustainable agriculture*, Commission on Sustainable Development Women's Caucus, New York, NY, 2010. Retrieved 30 January 2012, from: <http://www.earthsummit2002.org/wcaucus/Caucus%20Position%20Papers/agriculture/pesticides1.html>
- Rubery, J., 'Gender mainstreaming and gender equality in the EU: the impact of the EU employment strategy,' *Industrial Relations Journal*, Vol. 35, No 5, 2002. Available at: <http://eucenter.wisc.edu/omc/papers/ees/rubery.pdf>
- Rubin, A. I. and Elder, J., *Building for people: behavioral research approaches and directions*, National Bureau of Standards, Center for Building Technology. Environmental Design Research Division, United States, 1980.
- Sheridan, J. A., *Designing the work environment*. Paper presented at the annual meeting of the American Psychological Association, Chicago, 1975. As cited in Goldstein, I. L. *Training in organizations: Needs assessment, development, and evaluation* (3rd edn.). Cypress series in work and science, Belmont, CA, 1993.
- Sonnentag, S., 'Psychological detachment from work during leisure time: The benefits of mentally disengaging from work,' *Current Directions in Psychological Science*, Vol. 21, 2012, pp. 114-118.
- The American Heritage College Dictionary, 3rd edition. Boston: Houghton Mifflin Company, 1993.
- UNDP — United Nations Development Programme, *Women's empowerment*, 2010. Retrieved 28 October 2011, from: <http://www.undp.org/women/mainstream/>
- UNDP — United Nations Development Programme, *Introductory Gender Analysis & Gender Planning Training Module for UNDP Staff*, no date. Available at: <http://arabstates.undp.org/contents/file/GenderMainstreamingTraining.pdf>
- UNISON, *Gender, safety and health: a guide for safety reps*, London, 2013.
- United Nations, *The world's women 2000: trends and statistics*. New York, United Nations Statistical Division, 2000.
- Verdonk, P., Hooftman, W. E., van Veldhoven, M. J. P. M., Boelens, L. R. M. and Koppes, L. L. J., 'Work-related fatigue: the specific case of highly educated women in the Netherlands', *International Archives of Occupational Environmental Health*, Vol. 83, No 3, 2010, pp. 309-321.
- Verloo, M., 'Mainstreaming gender equality in Europe. A critical frame analysis approach,' *The Greek Review of Social Research*, Vol. 117, 2005, pp. 11-34.
- WHO — World Health Organization, *Gender and health technical paper*, 1998. Retrieved 27 January 2012, from: <http://www.who.int/docstore/gender-and-health/pages/WHO%20-%20Gender%20and%20Health%20Technical%20Paper.htm>
- WHO — World Health Organization, *Strategy for integrating gender analysis and actions into the work of WHO*, Department of Gender, Women and Health (GWH), Family and Community Health (FCH), Switzerland, 2009. Available at: [http://www.searo.who.int/LinkFiles/Gender\\_Women\\_and\\_Health\\_Strategy\\_GWH.pdf](http://www.searo.who.int/LinkFiles/Gender_Women_and_Health_Strategy_GWH.pdf)
- WHO — World Health Organization, *What do we mean by 'sex' and 'gender'?* 2010. Retrieved 7 March 2010, from: <http://www.who.int/gender/whatisgender/en/index.html>
- WHO — World Health Organization, *Gender mainstreaming for health managers: a practical approach. Facilitators' guide. Participant's notes*, 2011 Available at: [http://www.who.int/gender/documents/health\\_managers\\_guide/en/index.html](http://www.who.int/gender/documents/health_managers_guide/en/index.html)

- WHO — World Health Organization, *Building healthy and equitable workplaces for women and men: a resource for employers and worker representatives*, 2011a. Available at: [http://www.who.int/occupational\\_health/publications/Protecting\\_Workers\\_Health\\_Series\\_No\\_11/en/index.html](http://www.who.int/occupational_health/publications/Protecting_Workers_Health_Series_No_11/en/index.html)
- WHO — World Health Organization, *Gender, work and health*. Available at: [http://whqlibdoc.who.int/publications/2011/9789241501729\\_eng.pdf](http://whqlibdoc.who.int/publications/2011/9789241501729_eng.pdf)
- WHO — World Health Organization, *What is 'gender mainstreaming'?*. Available at: [http://www.who.int/gender/gender\\_mainstreaming/en/index.html](http://www.who.int/gender/gender_mainstreaming/en/index.html)
- WHO — World Health Organization, *WHO gender mainstreaming strategy*. Available at: <http://www.who.int/gender/mainstreaming/strategy/en/index.html>
- Woodward, A. E., 'Too late for gender mainstreaming? Taking stock in Brussels', *Journal of European Social Policy*, Vol. 18, No 3, 2008, pp. 289-302.
- World Bank, *World development report 2012: Gender equality and development, Chapter 5, Gender differences in employment and why they matter*, 2011. Available at: <http://siteresources.worldbank.org/INTWDR2012/Resources/7778105-1299699968583/7786210-1315936222006/chapter-5.pdf>



## Annexes

### Annex 1: Glossary

Term	Definition	Example
Equality plans	Plans designed by management to incorporate an equality perspective and programme into all company policies (Eurofound, 2002)	
Equity	<p>Refers to something that is just, impartial and fair. Gender equity refers to equal access, opportunity, control and benefits for women and men (American Heritage College Dictionary, 1993).</p> <p>Gender equity refers to fairness and justice in the distribution of benefits and responsibilities between women and men. The concept recognises that women and men have different needs and powers and that these differences should be identified and addressed to rectify the imbalance between the sexes (WHO web pages on gender/mainstreaming)</p>	
Gender	<p>The socially constructed norms, roles, behaviours, activities and attributes that a given society considers appropriate for women and men. Gender roles can vary from culture to culture and change over time (WHO, 2010)</p> <p>See also <i>sex</i>, and <i>sex and gender</i></p>	In most societies, women are expected to be responsible for home cooking, cleaning and caring tasks while men are expected to be the breadwinners (WHO, 2011)
Gender analysis	<p>1. Gender analysis identifies, analyses and informs action to address health inequalities that arise from the different roles of women and men, or the unequal power relationships between them, and the consequences of these inequalities on their health (WHO web pages on gender/mainstreaming)</p> <p>2. An examination of the differences and disparities in the roles that women and men play, the power imbalances in their relations, their needs, constraints and opportunities and the impact of these differences on their lives. In health, a gender analysis examines how these differences determine differential exposure to risk, access to the benefits of technology, information, resources and healthcare and the realisation of rights.</p> <p>A gender analysis must be done at all stages of an intervention, from priority setting and data collection to the design, implementation and evaluation of policies or programmes (WHO, 1998)</p>	

Term	Definition	Example
Gender awareness	Gender awareness is an understanding that there are socially determined differences between women and men based on learned behaviour, which affect their ability to access and control resources. This awareness needs to be applied through gender analysis into projects, programmes and policies (UNDP, no date)	
Gender blindness or gender neutrality	Failure to recognise that gender is an essential determinant of social outcomes (WHO, 1998). Although equality is supported, hidden discrimination can take place, for example where laws and standards are based on male norms (Kauppinen, 1993)	
Gender budgeting		
Gender equality: equality between women and men	<p>1. Gender equality means that all human beings are free to develop their personal abilities and make choices without the limitations set by strict gender roles; that the different behaviour, aspirations and needs of women and men are equally valued and favoured.</p> <p>Formal (de jure) equality is only a first step towards material (de facto) equality. Unequal treatment and incentive measures (positive action) may be necessary to compensate for past and present discrimination. Gender differences may be influenced by other structural differences, such as race/ethnicity and class. These dimensions (and others, such as age, disability, marital status and sexual orientation) may also be relevant (European Commission, no date).</p> <p>2. Absence of discrimination — on the basis of a person's sex — in providing opportunities, in allocating resources and benefits or in access to services (WHO, 1998; WHO web pages on gender/mainstreaming)</p>	
Gender impact assessment	To compare and assess, according to gender-relevant criteria, the current situation and trend with the expected development resulting from the introduction of the proposed policy (European Commission, no date)	
Gender insensitivity	In laws and norms that are insensitive to gender, gender difference is not accepted and equality is not promoted. The individual is the focus, for example, where inequalities are explained not by gender but by lack of access to power while the unequal distributions of power between men and women is ignored (Kauppinen, 1993)	

Term	Definition	Example
Gender planning	Gender planning refers to the process of planning developmental programmes and projects that are gender sensitive and which take into account the impact of differing gender roles and gender needs of women and men in the target community or sector. It involves the selection of appropriate approaches to address not only women and men's practical needs, but which also identifies entry points for challenging unequal relations (that is, strategic needs) and to enhance the gender-responsiveness of policy dialogue (UNDP, no date)	
Gender sensitivity	Ability to perceive existing gender differences, issues and inequalities and incorporate these into strategies and actions (WHO, 1998).  This goes beyond gender awareness, which is an understanding that there are socially determined differences between women and men based on learned behaviour	
Gender stereotype	For example, in a gender-stereotyped actions gender differences are accepted or even exaggerated, such as a prohibition on women doing night work, with the assumption that they are the 'weaker sex' (Kauppinen, 1993).	
Informal employment	Employment that is not monitored by a government. It includes all unpaid work, part of paid work and most of child labour (WHO, 2011)	It encompasses the majority of activities in the agricultural sector, a sector that employs 40% of the world's workers (Martin, 2010), a little less than half of whom are women (Ransom, 2010).  In most countries women are more likely than men to work in informal employment. In some developing countries in Asia and Africa informal jobs represent the near totality of female non-agricultural labour.  In the informal sector outside of agriculture, men tend to work in the construction and transport industries while women tend to participate in home-based work or street vending (Ransom, 2010; Chen et al., 2005; WHO, 2011, p. 7)

Term	Definition	Example
Mainstreaming: gender equality mainstreaming	<p>1. Gender Mainstreaming within the European Union (EU) was firstly defined by the European Commission (COM) in 1996 (COM (96) 67 final) as: (...) mobilising all general policies and measures specifically for the purpose of achieving equality by actively and openly taking into account at the planning stage their possible effects on the respective situations of men and women (gender perspective). It was underlined that: The systematic consideration of the differences between the conditions, situations and needs of women and men in all Community policies and actions, this is the basic feature of the principle of “mainstreaming” which the Commission has adopted. This does not mean simply making Community programmes or resources more accessible to women, but rather the simultaneous mobilisation of legal instruments, financial resources and the Community’s analytical and organisational capacities in order to introduce in all areas the desire to build balanced relationships between women and men. The gender and equality dimension should be taken into account in all policies and activities, in the planning, implementation, monitoring and evaluation phases (European Commission, no date).</p> <p>2. Gender mainstreaming is the (re)organisation, improvement, development and evaluation of policy processes, so that a gender equality perspective is incorporated in all policies at all levels and at all stages, by the actors normally involved in policy-making (Council of Europe, 1998).</p> <p>3. The Employment, Social Policy, Health and Consumer Affairs Council (EPSCO), advocate a systematic approach to the gender-mainstreaming strategy — including in particular:</p> <ul style="list-style-type: none"> <li>▪ effective application of a gender impact assessment of policies;</li> <li>▪ development of statistics broken down by sex;</li> <li>▪ use of indicators to measure progress;</li> <li>▪ training programmes to develop gender expertise.</li> </ul> <p>4. Gender mainstreaming is not a goal in itself but a strategy to achieve equality between women and men. It is also a process of change/transformation which implies that all actors involved in policymaking integrate <b>gender equality concerns</b> — meaning the systematic consideration of the differences between the conditions, situations and needs of women and men, of the relations existing between them, and of the impact of policies on the concrete situation of women or men — <b>in the</b></p>	



Term	Definition	Example
	<p><b>planning, implementation, monitoring and evaluation of</b> all policies, programmes and activities so that both sexes can influence, participate in, and benefit equitably from all interventions. The main goal of gender mainstreaming is that both sexes may enjoy equal visibility, empowerment and participation in all spheres of public and private life (EIGE 2011).</p> <p>5. The integration of gender concerns into the analyses, formation and monitoring of policies, programmes and projects, with the objective of ensuring that these reduce inequalities between women and men (WHO 1998).</p> <p>6. Gender mainstreaming in public health: If healthcare systems are to respond adequately to problems caused by gender inequality, it is not enough to simply 'add in' a gender component late in a given project's development. Research, interventions, health system reforms, health education, health outreach, and health policies and programmes must consider gender from the beginning. Gender is thus not something that can be consigned to 'watchdogs' in a single office, since no one office can possibly involve itself in all phases of an organisation's activities. All health professionals must have knowledge and awareness of the ways in which gender affects health, so that they may address gender issues wherever appropriate thus rendering their work more effective. The process of creating this knowledge and awareness of — and responsibility for — gender among all health professionals is called "gender mainstreaming". (WHO web pages on gender/mainstreaming)</p>	
<p>Mainstreaming: occupational safety and health mainstreaming</p>	<p>Mainstreaming aims to make risk management principles and 'occupational safety and health thinking' an intrinsic part of the way decisions are made and actions are taken in the workplace, so that health and safety is not just an 'add-on' (EU-OSHA, 2002)</p>	
<p>Sex</p>	<p>The biological and physiological characteristics that define women and men (these may be determined by both genes and the environment) (WHO, 2010)</p> <p>See <i>gender</i>, and <i>sex and gender</i>.</p>	<p>Men on average are taller, heavier and stronger than women (Chamberland, 1998).</p> <p>Men and women have different reproductive systems: men can impregnate while women can give birth (WHO, 2011).</p>

Term	Definition	Example
		Women and men have different hormonal systems (WHO, 2011)
Sex and gender	<p>The existing differences between men and women are of a biological and social nature.</p> <ul style="list-style-type: none"> <li>• <i>Sex</i> refers to the biologically determined differences between men and women, which are universal.</li> <li>• <i>Gender</i> refers to the social differences between women and men that are learned, changeable over time and have wide variations both within and between cultures.</li> </ul> <p>European Commission (no date)</p>	<p>While only women can give birth (biologically determined), biology does not determine who will raise the children (gendered behaviour).</p> <p>People are born female or male but learn to be girls and boys who grow into women and men. This learned behaviour makes up gender identity and determines gender roles</p>
Sex-disaggregated data	For a gender analysis, all data should be separated by sex in order to allow differential impacts on men and women to be measured (UNDP, no date)	

## Annex 2: Gender mainstreaming

### What is gender mainstreaming?

Gender mainstreaming functions to promote gender equality and, in this report, the focus is on the workplace. In July 1997, the United Nations Economic and Social Council (ECOSOC) defined the concept of gender mainstreaming as follows:

*Mainstreaming a gender perspective is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making the concerns and experiences of women as well as of men an integral part of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres, so that women and men benefit equally, and inequality is not perpetuated. The ultimate goal of mainstreaming is to achieve gender equality (ILO, 2011).*

#### *Comparing the two approaches to mainstreaming*

##### *A woman-focused approach views women's lack of participation as the problem*

The focus:	Women
The problem:	The exclusion of women
The goal:	More efficient, effective development
The solution:	Integrate women into existing structures
The strategies:	Women-only projects; women's components; integrated projects; increase women's productivity, income and ability to manage the household

##### *A gender-focused approach is people centred*

The focus:	Relations between women and men
The problem:	Unequal relations that prevent equitable development and the full participation of women and men
The goal:	Equitable development with women and men sharing decision-making and power, opportunities and resources
The solution:	Transform unequal relations and structures; empower the disadvantaged and women
The strategies:	Identify and address practical and strategic needs determined by women and men to improve their condition. Address strategic gender needs of women and men. Address strategic needs of the poor through people-centred development.

Source: UNDP, no date

### Basic principles of mainstreaming

Responsibility for implementing the mainstreaming strategy is system wide, and rests at the highest levels within agencies, according to Carolyn Hannan, Director of the UN Division for the Advancement of Women. Other principles include the following:

- adequate accountability mechanisms for monitoring progress need to be established;
- the initial identification of issues and problems across all areas of activity should be such that gender differences and disparities can be diagnosed;
- assumptions that issues or problems are neutral from a gender-equality perspective should never be made;
- gender analysis should always be carried out;

- clear political will and allocation of adequate resources for mainstreaming, including additional financial and human resources if necessary, are important for translation of the concept into practice;
- gender mainstreaming requires that efforts be made to broaden women's equitable participation at all levels of decision-making;
- mainstreaming does not replace the need for targeted, women-specific policies and programmes, and positive legislation; nor does it do away with the need for gender units or focal points.

Source: ILO (2011)

### **Gender mainstreaming: policy and use in the European Union**

The European Institute for Gender Equality (EIGE) underlines that gender mainstreaming is not a goal in itself but a strategy to achieve equality between women and men. It is used to integrate gender concerns into all policies, and programmes of the European Union institutions and Member States.

Gender mainstreaming within the European Union (EU) was firstly defined by the European Commission (COM) in 1996 (COM (96) 67 final) as: (...) mobilising all general policies and measures specifically for the purpose of achieving equality by actively and openly taking into account at the planning stage their possible effects on the respective situations of men and women (gender perspective).

It was underlined that: The systematic consideration of the differences between the conditions, situations and needs of women and men in all Community policies and actions, this is the basic feature of the principle of 'mainstreaming' which the Commission has adopted. This does not mean simply making Community programmes or resources more accessible to women, but rather the simultaneous mobilisation of legal instruments, financial resources and the Community's analytical and organisational capacities in order to introduce in all areas the desire to build balanced relationships between women and men.

Another well-known definition of gender mainstreaming comes from the Council of Europe (1998): 'Gender mainstreaming is the (re)organisation, improvement, development and evaluation of policy processes, so that a gender equality perspective is incorporated in all policies, at all levels and at all stages, by the actors normally involved in policymaking.'

The Employment, Social Policy, Health and Consumer Affairs Council (EPSCO) advocates a systematic approach to the gender-mainstreaming strategy — including in particular:

- effective application of a gender impact assessment of policies;
- development of statistics broken down by sex;
- use of indicators to measure progress;
- training programmes to develop gender expertise.

Based on the above, the EIGE clarifies further what is meant by *to integrate gender concerns into all policies, and programmes of the European Union institutions and Member States*:

- To integrate *gender equality concerns* — means the systematic consideration of the differences between the conditions, situations and needs of women and men, of the relations existing between them, and of the impact of policies on the concrete situation of women or men.
- Integration *into all policies and programmes* — means in the planning, implementation, monitoring and evaluation of all policies, programmes and activities.

(The objective is) so that both sexes can influence, participate in, and benefit equitably from all interventions. The main goal of gender mainstreaming is that both sexes may enjoy equal visibility, empowerment and participation in all spheres of public and private life.

Gender mainstreaming does not replace positive actions for women. In the face of persisting gender gaps the European Union follows the so-called the dual track: Gender mainstreaming plus specific actions to advance women; the latter is one way to remedy past discrimination and to compensate for existing inequalities.

Sources:

EIGE — European Institute for Gender Equality, *Good practices in gender mainstreaming: towards effective gender training. Mainstreaming gender into the policies and the programmes of the institutions of European Union and EU Member States*, 2011. Available at: [http://www.eige.europa.eu/sites/default/files/Good-Practices-in-Gender-Mainstreaming-towards-effective-gender-training\\_0.pdf](http://www.eige.europa.eu/sites/default/files/Good-Practices-in-Gender-Mainstreaming-towards-effective-gender-training_0.pdf)

EIGE web pages: <http://eige.europa.eu/content/activities/gender-mainstreaming-methods-and-tools>

### **European Institute for Gender Equality recommendations on gender equality and institutional Mechanisms (EIGE, 2014)**

#### *Institutional structures*

Strengthen the institutional structures by:

- ensuring that there is a governmental body responsible for gender equality, located at the highest possible level in the government, falling under the responsibility of a cabinet minister, with adequate responsibility and means for action;
- ensuring that gender equality remains a policy priority, is mainstreamed in other policy areas and complements the work of addressing cases of discrimination based on sex;
- setting clear and measurable strategic objectives for gender equality with specific targets and timeframes, ensuring that the governmental body's mandate and capacity allow it to influence the development of all government policies, to formulate and review legislation and to coordinate and monitor the implementation of government decisions;
- establishing or strengthening an advisory board on gender equality or another permanent entity involving relevant branches of government, women's NGOs and other civil society organisations, researchers and social partners on a regular basis.

#### *Gender mainstreaming*

Promote the effective implementation of gender mainstreaming via:

- an interministerial structure and focal points in every ministry;
- legal obligations for the use of gender-mainstreaming tools and methods, including training for gender mainstreaming, gender impact assessment, gender budgeting, monitoring and evaluation;
- appropriate budgets to have these carried out;
- raising awareness on the benefits of gender mainstreaming;
- strengthening the legal and institutional commitment to improving the gender competences of civil servants across the different sectors.

#### *Sex-disaggregated data*

Promote the collection and dissemination of gender statistics by:

- having legal obligations or binding structural agreements with statistics institutions and/or other organisations on the collection and publishing of statistics disaggregated by sex;
- producing statistics and establishing new indicators where they are lacking in areas such as gender-based violence, attitudes on gender roles and intersecting inequalities (data disaggregated by sex and also by other grounds for discrimination, such as ethnicity, age, etc.);
- ensuring that gender statistics represent relevant gender issues, by consulting different stakeholder groups when developing indicators;
- ensuring that gender statistics are freely available to policymakers, researchers, NGOs, social partners and all citizens;
- considering the establishment of targets and indicators in the action plans for gender equality to measure progress and evaluate developments.



## Annex 3: A model for making risk assessment more gender-sensitive

Risk assessment should take account of gender issues, differences and inequalities. Work, its organisation and the equipment used should be designed to match people, not the other way round. This principle is enshrined in EU legislation. The legislation requires employers to carry out risk management based on risk assessment, and this can be divided into five stages:

1. Hazard identification
2. Risk assessment
3. Implementation of solutions
4. Monitoring
5. Review

Below are some suggestions for making this process more gender sensitive. As there are gender differences in a variety of broader issues relating to work circumstances, such as sexual harassment, discrimination, involvement in decision-making in the workplace, and conflicts between work and home life, a holistic approach to risk prevention is needed. Another aim is to identify less obvious hazards and health problems that are more common for female workers.

### *Key issues for gender-sensitive risk assessment*

- Having a positive commitment and taking gender issues seriously
- Looking at the real working situation
- Involving all workers, women and men, at all stages
- Avoiding making prior assumptions about what the hazards are and who is at risk

*Step 1: Hazard identification.* For example, include gender by:

- considering hazards prevalent in both male- and female-dominated jobs;
- looking for health hazards as well as safety hazards;
- asking both female and male workers what problems they have in their work, in a structured way;
- avoiding making initial assumptions about what may be 'trivial';
- considering the entire workforce, e.g. cleaners, receptionists;

- not forgetting part-time, temporary or agency workers, and those on sick leave at the time of the assessment;
- encouraging women to report issues that they think may affect their safety and health at work, as well as health problems that may be related to work;
- looking at and asking about wider work and health issues.

*Step 2: Risk assessment.* For example, include gender by:

- looking at the real jobs being done and the real work context;
- not making assumptions about exposure based purely on job description or title;
- being careful about gender bias in prioritising risks according to high, medium and low;
- involving female workers in risk assessment. Consider using health circles and risk mapping methods. Participative ergonomics and stress interventions can offer some methods;
- making sure those doing the assessments have sufficient information and training about gender issues in occupational safety and health (OSH);
- making sure instruments and tools used for assessment include issues relevant to both male and female workers. If they do not, adapt them;
- informing any external assessors that they should take a gender sensitive approach, and checking that they are able to do this;
- paying attention to gender issues when the OSH implications of any changes planned in the workplace are looked at.

For example, for stress include:

- home–work interface, and both men's and women's work schedules;
- career development;
- harassment;
- emotional 'stressors';
- unplanned interruptions and doing several tasks at once.

For example, for reproductive health:

- include both male and female reproductive risks;
- look at all areas of reproductive health, not just pregnancy.

For example, for musculoskeletal disorders:

- look critically at 'light work'. How much static muscle effort is involved? Does the job involve significant standing? What loads are really handled in practice, and how often?

*Step 3: Implementation of solutions.* For example, include gender by:

- aiming to eliminate risks at source, to provide a safe and healthy workplace for all workers. This includes risks to reproductive health;
- paying attention to diverse populations and adapting work and preventive measures to workers. For example, selection of protective equipment according to individual needs, suitable for women and 'non-average' men;
- involving female workers in the decision-making and implementation of solutions;
- making sure female workers as well as men are provided with OSH information and training relevant to the jobs they do and their working conditions and health effects. Ensure part-time, temporary and agency workers are included.

*Steps 4 and 5: Monitoring and review.* For example, include gender by:

- making sure female workers participate in monitoring and review processes;
- being aware of new information about gender-related occupational health issues.

Health surveillance can be part of both risk assessment and monitoring:

- include surveillance relevant to jobs of both male and female workers;
- take care about making assumptions, for example based on job title, about whom to include in monitoring activities.

Accident records are an important part of both risk assessment and monitoring:

- encourage the recording of occupational health issues as well as accidents.

*General measures to promote gender-sensitivity in OSH management*

- Reviewing safety policies, specifically including a commitment to gender mainstreaming, and relevant objectives and procedures
- Seeking to ensure that both internal and external occupational health services used will take a gender-sensitive approach
- Providing relevant training and information on gender issues regarding safety and health risks to risk assessors, managers and supervisors, trade union representatives, safety committees, etc.
- Linking OSH into any workplace equality actions, including equality plans
- Looking at ways to encourage more women to be involved in safety committees. For example, are meetings held at times when women can attend?

Source: EU-OSHA, 2003a and 2003c



## Annex 4: Worker participation methods to increase the involvement of women

### 1. Action-oriented research interventions

Worker participation is a key factor in the success of health and safety interventions. However, because of their concentration in lower status jobs and because of their lower representation within trade unions, women have less access to and involvement in decision-making processes. Therefore, for interventions aimed at female-dominated work groups, effective participation of women workers themselves is particularly important. With this in mind, the CINBIOSE centre at the University of Quebec developed an action-oriented research approach to workplace interventions that it has used to look at ergonomic problems in predominantly female work groups. The principles behind the approach are:

- empowerment;
- using workers' knowledge;
- questioning established assumptions about risks at work;
- recognition of gender-based issues in the division of labour and power relations.

The aim is to incorporate knowledge of men and women workers into all stages of the interventions.

On-the-spot observation of those doing the work and questioning of this group, as well as their supervisors and trade union representatives, are used to suggest changes based on real work and set priorities.

Methods used include:

- preliminary study using group interviews and collecting background information such as accident records to help target jobs for study and set priorities;
- preliminary observation of the selected jobs to target further particular activities to be studied;
- systematic observation and analyses of the real work activities, including the collection of quantitative and qualitative measurements, observation of workers and using questionnaires and interviews with the workers concerned;
- feedback and validation, by presenting and discussing the results with workers, supervisors, union representatives, safety committees, etc.;
- dissemination of results.

An example of the application of this methodology is a study of the clerical work of receptionists dealing with admissions in a hospital. The work is typically considered as low risk and physically undemanding: comfortable surroundings; little decision-making. Problems uncovered in the study included:

- communication and information management — working over the telephone in a noisy and busy environment, and locating, establishing and clarifying required information with patients, within their records or using the knowledge of other receptionists;
- frequent interruptions of tasks, adding to the mental load of the task;
- lower back pain and circulatory problems from constant sitting;
- pain in neck and shoulder area, where causes included simultaneous telephone use and record retrieval activities;
- workstation layout problems, for example: work surface of insufficient depth and too high; computer screens too high;
- walking distances between work equipment and workstation and to call patients.

The report resulted in a number of recommendations, such as the use of cordless phones, better information signs for patients so they do not need to ask receptionists, improved work layout and a patient call system and proposals to redesign the plan of the offices, acquire earphones and update the computing system.

## 2. Health circles and small discussion groups

Getting women workers together at the workplace to discuss their work-related health problems is one part of promoting women's participation. In addition to the example in this report, one example of how to do this is the Spagat project, from Austria. This is a method for involving working women, using their experience and knowledge, in making a systematic analysis of their health problems, and developing practicable solutions. It involves the cooperation of the company management, trade union committee and workers, and uses 'health circles'. The health circles are working groups set up within an enterprise, where small groups of employees use a series of meetings to analyse unhealthy situations at work, and develop ideas for workable solutions. The project was developed by a research and training organisation, in cooperation with a trade union federation and with support from the Austrian Health Fund FGÖ. General advice on running small discussion groups in the workplace on safety and health is given in the ILO's 'Barefoot research' manual on worker involvement in health and safety issues.

## 3. Hazard 'mapping' research methods

Mapping is a participatory method for surveying workers for work-related health problems. Using simple outline drawings of the body or plans of the workplace, workers can record, in a visual form, their health problems, work hazards and overall work environment. It can work well, for example, to investigate symptoms of more complex health issues such as musculoskeletal disorders. It works best among a group of workers carrying out the same task. A group of workers, with the help of a facilitator, each mark their aches and pains on the body map. Clusters of symptoms that appear on the same part of the body are likely to be work-related. Isolated symptoms are less likely to be work-related. In this way, it is used to identify common patterns of health problems amongst workers in a particular workplace or doing the same job. As it is done in groups, it is participatory and develops a collective approach. It can be more easily understood and more inviting than filling in, on an individual basis, a workplace survey form. It has been used by trade unions with workers to investigate allergies, musculoskeletal disorders, reproductive hazards and stress. General advice on hazard mapping is given the ILO's 'Barefoot research' manual on worker involvement in health and safety issues.

## 4. Actions of worker safety representatives

Workplace safety representatives can raise awareness of, investigate and put women's health and safety on the agenda by:

- raising the health and safety problems women face;
- encouraging more women to become safety representatives;
- mounting health and safety campaigns aimed at women;
- encouraging women to attend training courses;
- finding other ways of raising awareness of women's health and safety concerns;
- ensuring there are safety representatives appointed in areas where mostly women work;
- organising meetings when part-timers and women with child care responsibilities can attend;
- providing information about women's health and safety concerns;
- carrying out a simple survey to find out more information about women's health and safety concerns and talking to women during inspections;
- finding ways to keep in touch with women who work part-time or unsociable hours (such as cleaners).

### Sources

Messing, K. (ed.) (1999), *Integrating gender in ergonomic analysis: strategies for transforming women's work*, Trade Union Technical Bureau for Health and Safety, Brussels.

EU-OSHA, *Gender issues in safety and health at work — A review*. Available at: <https://osha.europa.eu/en/publications/reports/209>

ILO, *'Barefoot research' manual on worker involvement in health and safety issues*. Available at: <http://www.ilo.org/public/english/protection/ses/info/publ/barefoot.htm>

Unison, *Gender, safety and health. A guide for UNISON safety reps*, 2001. Available at: <https://www.unison.org.uk/upload/sharepoint/On%20line%20Catalogue/21361.pdf>

## Annex 5: Selected findings, conclusions and recommendations on gender issues in safety and health at work from previous EU-OSHA reports

### Selected recommendations from the EU-OSHA report, 2003:

- 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 workload and promote work–life balance policies
- Implement gender-neutral OSH regulations in a gender-sensitive way
- For risk assessment, avoid assumptions, look at jobs women really do, involve women workers
- Investigate and share good practices

### Selected findings and recommendations from the EU-OSHA reports, 2013 and 2014

#### *Some recent trends*

- Women still work mainly in services, segregation continues
- Increases in part-time work and mini-jobs, multiple employment
- Increases in employment activity highest for women aged 55-64
- Older women work more in education, health and social work and public administration, younger women more in HORECA and retail
- Female workforce is ageing in some sectors — manufacturing, agriculture
- Increase in informal work, home/domestic services, difficult access for inspection authorities
- Exposure to violence increasing
- Musculoskeletal disorders and mental health problems increasing
- Women's access to rehabilitation and back-to-work limited
- Less access for women to consultation, worker representatives
- Younger and older, migrant women and those in personal services are particularly vulnerable
- Monitoring (accidents and health problems) still does not consider women enough, e.g. accidents in education/healthcare often not included in statistics
- Huge differences between Member States
- Little gender-specific information on impact of trends (e.g. technology)

#### *Some gender issues*

- Women's exposures to hazards frequently underestimated and awareness often low
- Men and women work in different sectors, and within one sector, in different jobs
- Risk assessment of exposure to dangerous substances needs to be targeted to women
- Recognition of occupational diseases reflects male industry jobs
- Personal protective equipment needs to be designed for women
- Exposures to combined hazards, typical for female jobs, need to be identified
- Accident data are often not available for major sectors; including, for example, needlestick injuries in healthcare work, which can lead to serious diseases
- How can the OSH of female workers in the informal sector who have several jobs (e.g. cleaning, home care) be ensured?

*Combined risks are an issue for women workers*

Combined risks: risk factors conditions	Outcomes
<ul style="list-style-type: none"> <li>▪ Exposure to biological and chemical agents</li> <li>▪ Working in service sectors</li> <li>▪ Working at client’s premises</li> <li>▪ Jobs not covered by OSH legislation</li> <li>▪ Multiple roles</li> <li>▪ Lack of information and training</li> <li>▪ Low control, autonomy and support</li> <li>▪ Prolonged standing and sitting</li> <li>▪ Static postures</li> <li>▪ Monotonous and repetitive work</li> <li>▪ Moving loads repetitively and moving people</li> <li>▪ Client and patient contact</li> </ul>	<ul style="list-style-type: none"> <li>▪ Infectious diseases</li> <li>▪ Skin disorders, asthma</li> <li>▪ Stress and mental health problems</li> <li>▪ Different accidents: slips, trips and falls, violence-related, needlestick injuries, cuts and sprains</li> <li>▪ Fatigue and cognitive disorders</li> <li>▪ Musculoskeletal disorders</li> </ul>

*Implications of employment trends*

Employment trends	OSH implications
<ul style="list-style-type: none"> <li>▪ Women more and more concentrated in part-time and casual jobs, particularly in the retail trade and consumer services sector; impacts on their salaries and their career perspectives</li> <li>▪ Informal work and jobs in home care and as cleaners on the increase, especially for migrant women</li> <li>▪ Move towards mini-jobs, not covered by labour law</li> <li>▪ Women continue to trail men in terms of career advancement and in levels of compensation and gaining higher status</li> </ul>	<ul style="list-style-type: none"> <li>▪ Stress and related health problems, fatigue and cognitive health problems</li> <li>▪ Repetitive strain injuries caused by repetitive and monotonous work</li> <li>▪ Low job control and autonomy, feelings of low self-esteem, low motivation, and job dissatisfaction for women</li> <li>▪ OSH difficult to organise for women who work at their client’s premises, how to enforce, how to assess risks, how to ensure labour protection</li> <li>▪ Less access to (OSH) training, consultation, less representation in decision-making that may influence their working conditions</li> </ul>

*OSH implications of living conditions*

Living condition	OSH implications
<ul style="list-style-type: none"> <li>▪ Women spend more time in unpaid activities: child care and care for dependent relatives, housework</li> <li>▪ Women often juggle multiple roles — they can be mothers, partners and carers as well as do paid work and run a household</li> <li>▪ Disparity in pay between women and men still exists. Women over-represented in low-income, low-status jobs (often part-time), and more likely to live in poverty</li> <li>▪ Poverty, working mainly in the home on housework and concerns about personal safety can make women particularly isolated</li> </ul>	<ul style="list-style-type: none"> <li>▪ Women spend more time in unpaid activities: child care and care for dependent relatives, housework</li> <li>▪ Women often juggle multiple roles — they can be mothers, partners and carers as well as do paid work and run a household</li> <li>▪ Disparity in pay between women and men still exists. Women over-represented in low-income, low-status jobs (often part-time), and more likely to live in poverty</li> <li>▪ Poverty, working mainly in the home on housework and concerns about personal safety can make women particularly isolated</li> </ul>

*Female employment by sector*

60% of all employed women work in 6 out of 62 sectors:

- healthcare and social services
- retail
- education
- public administration
- business activities
- hotels and restaurants.

Employment trend	OSH implications
<ul style="list-style-type: none"> <li>▪ Women still work mainly in services, while men work mainly in construction, utilities, transport and manufacturing</li> <li>▪ Increases in activity highest for women aged 55-64</li> <li>▪ Older women work more in education, health and social work and public administration</li> <li>▪ Employment in manufacturing decreasing</li> <li>▪ Female workforce is ageing in some sectors — manufacturing, agriculture</li> <li>▪ Women highly represented in informal work, home and domestic services</li> </ul>	<ul style="list-style-type: none"> <li>▪ Different risks for men and women — prolonged sitting and standing, static work significant for women</li> <li>▪ More client contact — more harassment and violence</li> <li>▪ Different risks for different age groups — prevention should be tailored</li> <li>▪ Occupational accident rates stagnating in some sectors, not recorded for education, healthcare and sectors with high rates of informal work, e.g. agriculture</li> <li>▪ Older women exposed to heavy work</li> <li>▪ Less access to training for older women, less access to consultation, representation and preventive services in the informal sector</li> </ul>

*Gender differences in occupational accidents*

- Causes and circumstances are different due to employment in different sectors and occupations
  - slips, trips and falls
  - accidents due to violence.
- There are indications that some types of accidents are more frequent in women working rotating shifts, e.g. healthcare — influence of living conditions?
- Accidents in some female-dominated sectors are on the rise in some countries (e.g. hotels and restaurants).
- Some female-dominated sectors (education, healthcare, public service) are not or insufficiently addressed regarding accidents.
- Accidents in informal work and mini-jobs usually not assessed/recorded.

*Women’s exposure to dangerous substances remains largely unexplored.*

*Health problems and diseases: combined risks are a major factor for women at work*

Risk factor	Outcomes
<ul style="list-style-type: none"> <li>▪ Working in services sector</li> <li>▪ Jobs not covered by OSH legislation</li> <li>▪ Prolonged standing and sitting</li> <li>▪ Static postures</li> <li>▪ Monotonous and repetitive work</li> <li>▪ Moving loads repetitively and moving people</li> <li>▪ Exposure to biological and chemical agents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Stress and mental health problems</li> <li>▪ Different accidents: slips, trips and falls, violence-related, needlestick injuries, cuts and sprains</li> <li>▪ Fatigue and cognitive disorders</li> <li>▪ Musculoskeletal disorders</li> <li>▪ Infectious diseases</li> </ul>

Risk factor	Outcomes
<ul style="list-style-type: none"> <li>▪ Client and patient contact</li> <li>▪ Working at client's premises</li> <li>▪ Multiple roles</li> <li>▪ Lack of information and training</li> <li>▪ Low control, autonomy and support</li> </ul>	<ul style="list-style-type: none"> <li>▪ Specific accidents, slips, trips and falls, violence-related, needlestick injuries, cuts and sprains</li> <li>▪ Skin disorders, asthma</li> </ul>

*There are some specific implications for younger women*

Employment trend	OSH implications
<ul style="list-style-type: none"> <li>▪ Unemployment gap between young men and women has clearly diminished, in some countries unemployment of young men has even become slightly higher</li> <li>▪ Younger women work more in retail and HORECA</li> <li>▪ Younger women work more in low-qualified jobs and on temporary contracts</li> <li>▪ Gender pay gap already at the start of career</li> <li>▪ Employment gap particularly high for mothers aged 15-24 with very young children or with children of school age</li> </ul>	<ul style="list-style-type: none"> <li>▪ Different risks and trends for different age groups — prevention should be tailored</li> <li>▪ Lack of experience and training of young women</li> <li>▪ Younger women exposed to sexual harassment</li> <li>▪ High exposure to violence, due to client contact</li> <li>▪ Occupational accidents even increasing in some countries in female-dominated sectors, such as HORECA</li> <li>▪ Less access to consultation, preventive services, representation at enterprise level</li> <li>▪ Young mothers a particularly vulnerable group</li> </ul>

*Gaps in practice: Rehabilitation and disability*

*Findings and recommendations*

- Women with disabilities are at risk of double or triple discrimination.
- Accommodations at work to assist employment for women are basic or non-existent.
- Rehabilitation schemes usually do not account for women's needs, e.g. child care needs during rehabilitation.
- Employers need to be encouraged to have flexible and effective rehabilitation/back-to-work policies, addressing female workers, temporary workers and part-timers, often women, young or migrant workers.
- Pension systems and compensation need to be adapted to women's needs and circumstances.
- An example from a Member State
  - In Sweden, disability pensions are more favourable to men. Women's ability to do housework equates to a higher level of well-being, although men are not assessed on this criterion.
- More research is needed for women on vocational retraining, rehabilitation and re-insertion into work needed.
- Rehabilitation and back-to-work policies need to address women's distribution of MSDs and the higher prevalence of mental health disorders among women. Women's work-related health problems are leading to longer workplace absences and avoidance of this is critical for reintegration.

*Recommendations from OSH research*

- Assess trends in the world of work (the move from industry to services, increasing mobility, use of new technologies, intensification and increasing precariousness of work) for their specific effect on women and their OSH. Research, prevention and monitoring tools should be adapted accordingly.

- Develop policies for non-standard working conditions, for example if an inspector or a safety professional needs to inspect the workplaces of weekend, night or part-time workers.
- A holistic approach is needed, taking into account possibilities to influence the conditions, autonomy at work and double-load family/work.
- Ensure access to preventive services/occupational health services for all women workers. Adapt occupational health provision.
- Ensure women's access to consultation and worker representation.
- Organisations should explore ways to give female workers more control over their work processes.
- Accidents and work-related health problems: more focus should be given to female jobs (agriculture, healthcare, education, public service, personal services)
- Assess multiple exposures and combined risks for female jobs, for example multiple chemical exposures for cleaners or ergonomic exposures.

#### *Recommendations for more research*

- Explore the differences between Member States' policies. Identify the success factors for an effective integration of women in the labour market, taking account of their OSH situation.
- Build on the good practice examples from the Member States.
- Build on the results of research for women (e.g. working conditions as a cause of cancer), and on the accident preventive attitude of women.
- Women are a diverse labour force. Needs of different age groups may be different. A more targeted approach to research and prevention is needed.
- Address the needs of young female workers and young mothers.
- Explore how to ensure the OSH of women who work in personal services, at the premises/homes of their employers.
- Explore how to ensure the OSH of women who work for several employers.
- Explore how to ensure that part-time workers and workers on temporary contracts are covered by risk assessment, prevention measures and OSH training. Consult them on their working conditions, risks they feel exposed to and the prevention measures.
- Explore how to adapt workplaces for an ageing working population in some sectors, e.g. in healthcare, manufacturing and agriculture sectors.

#### *Progress in gender and OSH since 2003*

- There is more knowledge on occupational cancer in women, e.g. link between breast cancer and shift work.
- Monitoring and research includes more gender-specific data, e.g. occupational accidents and their causes and circumstances.
- Gender is more likely to be mainstreamed into data collection on diseases and health problems.
- There is more knowledge on informal work.
- There is more awareness that a focus on women benefits other workers too, for example where it leads to other risks (ergonomic, biological, etc.) and other health problems (stress, musculoskeletal) and issues such as shift work and non-standard working time schedules being addressed.
- Personal protective equipment begins to be designed better for women.
- The push from equalities legislation is leading to good practice examples, including policies aimed at gender and OSH equality.
- Progress has been seen in how gender is included in practice and policy, through:
  - looking at real jobs and involving workers;
  - specifically including women's jobs and sectors where women work;
  - interventions incorporating gender leading to improved workplace practices;
  - participative ergonomic research methods;

## Mainstreaming gender into occupational safety and health practice

- gender incorporated into research programmes;
- guides and campaigns tackling risks in women's jobs or risks;
- gender-mainstreaming activities by national authorities and the incorporation of gender objectives into national OSH strategies.



**The European Agency for Safety and Health at Work (EU-OSHA)** contributes to making Europe a safer, healthier and more productive place to work. The Agency researches, develops, and distributes reliable, balanced, and impartial safety and health information and organises pan-European awareness raising campaigns. Set up by the European Union in 1996 and based in Bilbao, Spain, the Agency brings together representatives from the European Commission, Member State governments, employers' and workers' organisations, as well as leading experts in each of the Member States and beyond.

**European Agency for Safety and Health at Work**

Santiago de Compostela 12, 5th floor - 48003  
Bilbao · Spain  
Tel. +34 944 358 400 · Fax +34 944 358 401  
E-mail: [information@osha.europa.eu](mailto:information@osha.europa.eu)

<http://osha.europa.eu>