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*Committee on Women's Rights and Gender Equality*

**2007/2146(INI)**

22.11.2007

## **OPINION**

of the Committee on Women's Rights and Gender Equality

for the Committee on Employment and Social Affairs

on Community strategy 2007-2012 on health and safety at work  
(2007/2146(INI))

Draftswoman: Edit Bauer

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## SUGGESTIONS

The Committee on Women's Rights and Gender Equality calls on the Committee on Employment and Social Affairs, as the committee responsible, to incorporate the following suggestions in its motion for a resolution:

- A. whereas work-related risks to women's health and safety have been underestimated and neglected compared to the risks to men's health and safety, both in terms of prevention and research<sup>1</sup>,
- B. whereas more women than men are employed in the 'black' labour market without insurance, a fact which inevitably has significant consequences as regards the health and safety conditions under which they are employed,
- C. whereas, according to studies and calculations, the greatest risks to health and safety in the workplace are faced by women who are employed in sectors characterised by work intensity and a lack of proper ergonomic rules,
- D. whereas the most significant health problems presented by women and caused by their working conditions are musculo-skeletal disorders and psychological problems,
- E. whereas the framework of Community occupational safety and health (OSH) directives is neutral in its approach to gender, and this does not allow sufficient attention to be paid to the specific OSH risks to women workers,
- F. whereas many workers, male and female, across the EU are exposed to different risks in their workplaces: chemical, biological and physical agents, adverse ergonomic conditions, a complex mix of accident hazards and safety risks, together with various psycho-social risk factors,
- G. whereas women and men do not constitute a homogenous group and therefore strategies and measures to improve OSH must be specifically adapted to particular work places, taking into account the fact that some factors might affect women and men differently,
- H. whereas the risks faced by female employees in the workplace differ significantly from those faced by male employees, on the one hand because in practice women tend to be employed in specific 'female' occupational categories, and on the other hand because the combination of increased responsibilities to be shouldered at work and increased responsibilities elsewhere creates additional burdens and risks to their mental and physical health,
- I. whereas Council Directive 92/85/EEC of 19 October 1992 on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding and Council Directive 86/613/EEC of 11 December 1986 on the application of the principle of equal treatment between men and women engaged in an activity, including agriculture, in a self-employed capacity, and on the protection of self-employed women during pregnancy

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<sup>1</sup> OSHA, Fact sheets 42.

and motherhood should be borne in mind,

- J. whereas reported accidents and diseases statistics could provide the most direct indicator for comparing the risks women and men cope with,
- K. whereas managing the impact of policies can only be improved by taking into account the health differences between women and men,
1. Emphasises the need to mainstream gender when dealing with issues concerning health and safety at work and welcomes the initiative of the Commission calling for the preparation of unique methods of impact assessment in OSH with regard to gender specificity; however, criticises the Commission for failing to take adequate account of gender mainstreaming in its communication, either in its "Objectives of the Community Strategy 2007-2012" or in any its "Impact Assessments"<sup>1</sup>;
  2. Notes with regret that under-reporting of accidents and diseases is a common practice and official reporting requirements frequently do not cover all categories of workers, for example those working in the informal economy, most of whom are women;
  3. Calls on the Commission to assess the availability of gender-disaggregated statistics at Community level on work-related fatal and non-fatal diseases;
  4. Urges the Member States to implement existing OSH directives in a more gender-sensitive way, to implement gender impact assessment of these directives and to ratify the ILO Convention of 2006 concerning the promotional framework for occupational safety and health;
  5. Calls on the Member States to give serious consideration to the different risks relating to occupational safety and health for female and male employees and to make provision for different social and physical infrastructure to counter those risks;
  6. Calls on the Member States, as part of the drive to promote the employment of older workers, to adopt OSH measures adapted to the needs of older workers and specific to women and men;
  7. Calls on the Member States to ensure the operation of an effective inspection body with the aim of improving the application of OSH legislation, paying particular attention to women and maternity;
  8. Stresses that permanent employment is an important contributory factor to health and safety at work;
  9. Stresses the need to investigate the consequences of the use of work equipment and the working environment for pregnant women and women who are breastfeeding;
  10. Urges Member States to ensure proper representation of women in decision-making in relation to OSH at all levels;
  11. Calls on the Commission to ensure that women are present on the Senior Labour

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<sup>1</sup> SEC(2007)0214, 0215, 0216).

Inspectors' Committee (SLIC) so that their distinct and specific OSH rights and needs are better taken into account;

12. Urges the Member States to improve the prevention of work-related ill health and occupational risks as part of a holistic approach to OSH, with particular emphasis on informing and training workers, and to include work-life balance as an OSH issue in order to take into consideration the twofold workload undertaken by women and furthermore to promote this balance; considers that, in this context, it should also be taken into account that more women than men are in insecure forms of employment on the labour market;
13. Notes that guaranteeing full access to healthcare services is the most urgent and necessary form of maternity protection; calls on the Member States to take the necessary measures so that full access to healthcare is guaranteed on equal terms for mothers who are employed in the informal 'black' sector of the economy, in jobs without insurance, and for those who are employed in unpaid work at home;
14. Stresses that the need to analyse the risks that women and men face and take appropriate measures does not mean the reintroduction of protective policies of exclusion, nor does it mean developing different jobs for women and men;
15. Asks the Member States and the Commission to ensure a systematic gender-sensitive approach, when developing national and Community OSH strategies and when collecting statistics, conducting surveys and carrying out OSH research calls on the Member States and the Commission to make use of the funding possibilities provided in this regard by the PROGRESS programme, in particular under the section concerning gender equality;
16. Calls on the Member States and the Commission to pay more attention to new risk factors, such as harassment, violence and bullying by clients at the workplace, in public service sectors that employ mostly women;
17. Calls on the Member States to take specific measures to ensure the successful professional reinstatement of people who have had to cease working temporarily owing to an accident at work or an occupational illness; observes that although women are less at risk overall than men, they are more affected by particular health problems, such as musculoskeletal disorders;
18. Asks for measures to observe the safety and health rights for women in atypical work places such as those who carer for sick people at home;
19. Draws attention on the fact that hygienic conditions for employees in small and medium-sized enterprises might be worse than in larger enterprises, even in the same or similar industrial area; therefore calls on the Member States to introduce adequate measures with a view to encouraging and supporting OSH in SMEs and to ensure a high level of protection for subcontracted workers, many of whom are women;
20. Emphasises the need to consider the introduction of hazard, risk and prevention concepts in school curricula and educational systems in general, as effective means of building a strong and sustained preventative safety and health culture.

## RESULT OF FINAL VOTE IN COMMITTEE

<b>Date adopted</b>	20.11.2007
<b>Result of final vote</b>	+: 23 -: 0 0: 0
<b>Members present for the final vote</b>	Edit Bauer, Hiltrud Breyer, Ilda Figueiredo, Věra Flasarová, Livia Járóka, Piia-Noora Kauppi, Rodi Kratsa-Tsagaropoulou, Esther De Lange, Roselyne Lefrançois, Siiri Oviir, Marie Panayotopoulos-Cassiotou, Zita Pleštinská, Anni Podimata, Christa Prets, Teresa Riera Madurell, Eva-Britt Svensson, Anna Záborská
<b>Substitute(s) present for the final vote</b>	Jill Evans, Iratxe García Pérez, Lidia Joanna Geringer de Oedenberg, Donata Gottardi, Anna Hedh, Filiz Hakaeva Hyusmenova
<b>Substitute(s) under Rule 178(2) present for the final vote</b>	