

# Women's work?

Ever tried lifting an adult off the ground several times a day? Or lugging groceries around for eight hours solid? Or working the night shift then spending the day unpaid and caring for others? For many women that's a normal working day. *Hazards* editor **Rory O'Neill** says the time to take seriously occupational risks faced by women workers is long overdue.

As far as the authorities are concerned, when women are killed by their jobs, there's just not enough blood and gore to make it count.

A new TUC guide for trade union representatives, 'Gender in occupational health and safety', says that historically the health and safety needs of men in the workplace have been prioritised over women. It observes that risk prevention has focused on visibly dangerous work – largely carried out by men – with an assumption that the kind of work that women do is safer.

The official Health and Safety Executive (HSE) fatality figures would certainly suggest that – 137 male fatalities, compared to 7 female in 2015/16.

## Women don't count

There is no breakdown by gender in HSE's latest 'full year details' of fatalities. And HSE's 2016 statistics annual report says nothing on the gender breakdown of either occupational injuries or diseases. In fact, neither 'gender' nor 'women' are mentioned at all. Ditto HSE's 'statistics A-Z', which does however find space for specific entries on 'cost to Britain', 'job tenure' and 'European comparisons'.

For fatality and injury figures, the gender breakdown is relegated to a background excel file. The out-of-view statistics reveal the occupational risk faced by women is more serious than the fatalities figure alone would suggest.

In 2015/16 there were around 47,300 total reported injuries reported in men compared to nearly 25,500 in women.

But that's not the whole story. Occupational diseases kill at least 100 times more people than workplace 'accidents'. And there's every reason to believe these are equal opportunities killers. Again, though, HSE's main publications, including its annual statistics report and its headline occupational disease figures have no gender breakdown.

Look behind the HSE's chosen message and a more concerning picture of the risks faced by women begins to emerge. For stress, depression and anxiety and musculoskeletal disorders, the two most prevalent work-related conditions making up about 80 per cent of the total, the 2015/16 figures show the occupational rates for women are higher.

And the statistics are full of holes. Occupational cancers, for example, are the biggest single work killer, but studies have largely ignored women. Breast cancers caused by shiftwork and chemical exposures are the top occupational cancers in women, but unlike at least some of the bigger cancer killers of men, are not recognised for government compensation.

If the occupational risks to women go unrecognised, then prevention will be another casualty. An April 2017 report from the TUC reported only 3 in 10 women are given protective clothing specifically designed for women. TUC's study, 'Personal protect equipment and women', found more than half the women (57 per cent) responding to the survey said that their PPE sometimes or significantly hampered their work. Problems were particularly acute during pregnancy, women said, with half forced to cut back on their normal range of duties or to change their role in the run up to maternity leave.

## Making women count

TUC's new guide argues where the differences between men and women are taken into account when assessing risk and deciding suitable risk control solutions, there is a greater chance of ensuring that the health, safety and welfare of all workers is protected.

Launching the 2017 guide, TUC general secretary Frances O'Grady said: "People come in all shapes and sizes and when it comes to health and safety, the 'one size fits all' approach is old-fashioned and dangerous. Nowhere is that clearer than when looking at gender."

A new TUC gender checklist aims to redress the balance. "Pressing for healthy, safe workplaces for everyone is part and parcel of the union rep's role, and the TUC's new gender checklist will help reps to pursue issues around gender in the workplace, and make sure that all workers have the best possible protection from illness or injury," the TUC leader said.

## USE THE TUC GENDER CHECKLIST!

The TUC checklist encourages union representatives to pursue issues around gender in the workplace and to bring together equalities work and health and safety work. TUC says the most important thing to remember is this is not a tick-box exercise. "To be effective, for every point, you also need to agree what you are going to do about it. Often that will mean working as part of a small group with other health and safety representatives, or with other unions."

### 1. CONSULTATION

- Do safety negotiations cover everyone, including part-time, contracted and temporary workers?
- Are issues and priorities of concern to women regularly discussed and dealt with?

### 2. RISK MANAGEMENT

- Are risk assessments carried out and implemented by the employer?
- Do risk assessments take account of sex and gender differences?
- Are all people involved in risk assessment and risk management aware of health and safety issues affecting women?
- Are sex and gender differences taken into account in:
  - COSHH risk assessments, including the greater likelihood that women will be exposed to chemicals at home?
  - manual handling risk assessments and in assessments of postural problems including prolonged standing or sitting?
  - the types of work equipment and work stations used?
  - selection of uniforms, official workwear or personal protective equipment (PPE)?
- Are risk assessments relating to expectant, new and nursing mothers (and the unborn or breastfeeding child) carried out properly and in good time?
- Do employers provide an appropriate private space for breastfeeding mothers to express milk, and a safe and hygienic place for the milk to be stored?
- Are any special reproductive health concerns of women and men such as work-related issues relating to fertility, menstruation (including providing female sanitary hygiene disposal facilities), menopause, breast cancer or hysterectomy adequately and sensitively addressed?
- Are risks of violence assessed, including concerns about working alone, working away, or working late?
- Are harassment (including sexual harassment) and bullying treated as health and safety issues?
- Does the employer allow for flexibility with working time, overtime and shift work to accommodate employees' life demands from outside of work, such as family, medical appointments etc?
- Does the employer recognise stress as a workplace issue and that it may affect different people in different ways?
- Does the employer recognise that domestic violence can become a health and safety issue at the workplace?

### 3. SICKNESS ABSENCE MANAGEMENT

- Does the employer have a sickness absence management policy or workplace agreement that was negotiated with the union?
- Is it applied fairly in practice and does it help recovery with an appropriate return to work?
- Does it ensure that women are not disadvantaged because of issues relating to menstruation, pregnancy, miscarriage, disability, or the menopause?
- Does it ensure that any work-related health problems are properly investigated with a review of risk assessments where necessary?
- Do health and safety representatives get regular reports from management on sickness absence, including a gender breakdown?

### 4. REPORTING AND MONITORING PROCEDURES

- Are workers aware of the importance of reporting work-related injuries, dangerous incidents and ill-health, and can they do this without fear of victimisation?
- Does data on injuries and ill-health include gender and does it differentiate between different jobs and job levels and between different shift patterns?
- Are trends in the ill-health, sickness absence, injuries and near misses analysed?
- Are all injury and ill-health statistics reviewed at joint safety committee meetings?
- Are health concerns given the same priority as safety concerns?

The TUC adds that to get a true picture, reps also have to talk to their members about problems and how to address them. This might involve a survey that can separate out the risks faced by men and women. Unions should make sure there are enough women health and safety reps, and that issues get raised and acted on at general union meetings.

An extended version of this checklist is on the TUC website: [www.tuc.org.uk/women](http://www.tuc.org.uk/women)