Safer and healthier work at any age

OSH in the context of an ageing workforce

Gender aspects

Elke Schneider
Sarah Copsey
Project Managers, EU-OSHA

ETUI Women, work and health

March 2015
EU-OSHA:

- An information Agency of the European Union
  - Scientific, technical, economic, good practice cases, tools
  - Analysis
- Tripartite: Governing Board – employers, workers, Governments
- National Focal Points – e.g. National OSH Institutes
Older workers in Europe

- Will have to work longer
  - more exposure to OSH risks
- Will represent a greater proportion of the workforce
  - less younger workers to do the heaviest work
- Half of those aged 55-64 leave work before obligatory retirement age
  - many for work-related health reasons. Huge cost to society
Project background

- On behalf of European Commission
- Designated by European Parliament*

* Official Journal 29.02.2012 - 04 04 16 - Pilot project — Health and safety at work of older workers
Key question for ageing workforce project

- Pre-requisites for OSH systems:
  - What is needed for all workers knowing that the workforce is ageing?
  - What is needed to ensure work ability and wellbeing promoted throughout working life?
Scope of project 2013-15 - Investigate policy and strategy, exchange good practice, assist policy development

WP1: Reviews on OSH and an ageing workforce
- Overview of issues on OSH and older workers
- Overview of gender issues
- Available resources for workplaces
- Risk assessment checklist (OIRA)

WP2: OSH policies and initiatives on older workers
- Overview at MS/ EU/ international level
- Detailed descriptions (8 MS and EU)
- Qualitative research with OSH intermediaries
- Analysis

WP3: Rehabilitation/ Return-to-work
- State-of-the-art review
- Overview of policies/ programmes at MS/EU level
- Detailed description of examples (case studies)
- Qualitative research with OSH intermediaries
- Analysis

WP4: Workplace practices
- Examples of good practices (case studies)
- Qualitative research in workplaces
- Qualitative research in workplaces (small and micro enterprises)
- Analysis

Evidence-based proposals for policy discussion to Commission for European Parliament
http://osha.europa.eu
WP1: Reviews suggest prerequisites for OSH systems in context of ageing workforce: must ensure:

- **Improved prevention for all, so healthy young workers**
  - Do not exit early from work for disability reasons
  - Become healthy older workers and healthy retired workers
  - = life-cycle approach

- **Specific measures for older workers**
  - If and when necessary – depending on type of work, individual..
  - Avoiding older worker myths and discrimination – diversity-sensitive risk assessment

- **Support for small businesses**

- **Holistic approach:** appropriate prevention services, labour inspection equipped to cover diversity, life-long health surveillance, universal access to occupational health services linked to public health, work-focused rehabilitation, workplace health promotion…

- **Integrated policy and services:**
  - OSH, employment, public health, social security. Workplace-human resources, finance management…

http://osha.europa.eu
WP1: Gender, age, OSH review

- Men and women in elementary jobs more likely to report not being able to do current job until 60
- Flexible working/ work-life balance
  - elder/partner care - more demanding than child care – less gender difference; some workers do both!
  - flexible working aimed at childcare
- MSDs / physical work
  - extent and need for reduction more recognised in male manual work. Incl. prolonged sitting, prolonged standing
- Stress and burnout – emotionally demanding work
- Double discrimination – age gender
- Lack of career progression --> long-term exposures
- Menopause
- Men e.g. need tailored approaches to WHP
Working through the menopause

- Still a taboo in society and workplace
- Simple measures in the workplace include
  - Access to drinking water
  - Layered clothing for uniforms
  - Flexible working e.g. to facilitate doctor’s appointments
- TUC (UK) practical guidance
- IOWH (UK, Univ Nottingham) research
Strategy must start with the young

- Disabled at age 25 is an enormous cost to society – and a tragedy…
- Preventing chronic work-related ill health starts with OSH young male and female workers
- Ensure OSH attention given to jobs of young women workers

Hair dressing apprentice - dermatitis
Life-long approach for sustainable work

Start prevention in schools:

- Start risk education and prevention in schools
- Ensure OSH education addresses risks in ‘women’s jobs
- Ensure OSH covered in vocational training in typical ‘women’s jobs

Neck pain and back pain associated with school furniture and bag weight*

* Buckle et al, Surrey University 2007
The chair – increased exposure, especially lower graded admin workers with less control and variety in work

- Heart problems etc. from sedentary work – chair = the new killer
- Chronic non-life threatening diseases-MSDs
  - Risks of sitting at an ergonomic workstation all day everyday until 70 years old?

- DANGER!  
- DANGER!

- BETTER!
WP2: National Strategy - Labour inspection

- Some Labour Inspections systematically mainstream diversity into their strategy and activities

- Austria Labour Inspection
  - Introduced gender mainstreaming, with inspection checklists and training for inspectors. Covers inspectors’ employment conditions
  - Expanded to all diversity areas
  - Diversity included in advice, campaigns, guides – e.g. MSDs, cleaners
  - Tools for SMEs e.g. workforce age projection
  - Gender and diversity impact assessments

- UK Health and Safety Executive
  - Single equality scheme – must not discriminate in service provision
  - Research, web advice for workplaces, prioritised projects, e.g. OH in agricultural sector
WP3: Rehabilitation needs:

- **Early intervention** – focus on staying in work not reinsertion of unemployed

- **Multidisciplinary/multi-service programmes**
  - Coordinated, tailored support to companies and employees

- **Return-to-work as a clinical outcome** (treatment goal) for general health physicians

- **More public health focus on non-life threatening chronic diseases** – MSDs etc

- **Joined up policy**, interventions, budgets
  - Sweden- joint budgeting across services

- **For early detection and prevention: access to occupational health services**, occupational health surveillance, workplace health promotion
Women and rehabilitation

- Work-relatedness of illness needs recognising to enter some occupational rehabilitation programmes
  - may be less recognised in women workers
  - Issue for occupational health and public health

- Programmes need to be accessible
  - E.g at times suitable for women with childcare responsibilities

- Some good practices
  - e.g. French programme for rehabilitation following breast cancer
WP4: Workplace good practice success factors

- Older workers seen as a resource: competent and capable
- Focus on prevention for all, with adjustments as necessary
- Involvement of male and female workers
- Close cooperation between human resources and OSH: equal opportunities, retirement prevention plans, recruitment and retention, work-life balance and OSH brought together
- Range of measures: working hours; OSH/ergonomic interventions; career planning; skills development; rotation...
WP4: Good practices: gender, age and MSD prevention

French printing company,

• Older women working in ‘finishing’ – high absenteeism from musculoskeletal disorders

⇒ ‘Standard’ ergonomic solutions e.g. alter workstations to avoid poor postures & repetitive tasks

• Women ‘trapped’ in finishing work, men quickly promoted -> longer exposure to poor conditions

⇒ Recommendations concerning career paths and skills recognition
## Sustainable work in a kindergarten, Denmark

### What was done
- 19 employees - many lifts a day, repetitive movements - aim: retain experienced workers
- Acquired hydraulic, height-adjustable changing tables and chairs
- Individual advice on working methods
- Fathers move furniture for meetings
- Working time adjustment
- Exercise and physiotherapy at a low price

### Enabling factors
- Access to municipal authority health promotion programme, incl. training of a WHP ambassador
- Part funding of an occupational therapist
- Prevention for all, individual support and early intervention for MSD problems
- Trade union involvement and services, worker involvement

http://osha.europa.eu
Integrate age and gender into risk assessment

Bring actions together:
- Explicitly include diversity (age, gender,) in risk assessment
- Explicitly include OSH in workplace equality actions - gender, age, disability

Some principles
- Improve prevention for all:
  1. Eliminate risks at source
- Adapt work to workers
- Consult women, older workers

OiRA - EU-OSHA online risk assessment tool development platform
- Developers’ module on ageing workforce includes includes gender
Needs – age and gender

- Bring together OSH, age equality and gender equality in policy and practice
- Support SME´s
- Share good practice
- Improve multidisciplinary rehabilitation services and ensure equal access
- Public health to adapt outcome goal of return-to-work for women and men following illness
- European OSH framework directive should focus on promotion of wellbeing at work
Pre-requisites for OSH systems to ensure sustainable work

- Improved prevention for all
- Wellbeing and sustainable work embedded in legislation, policy and practice
- Specific measures to meet a diverse workforce (age, gender...)
- Holistic approach to OSH
Thank you

See EU-OSHA webpages on Age and work; Gender and work
N:B European OSH campaign 2016-17 Topic: Sustainable work