



PROTECTING WORKERS'
HEALTH SERIES No. 11

Building Healthy and Equitable Workplaces for Women and Men

A Resource for Employers and
Worker Representatives



World Health
Organization

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INSIDE COVER IMAGE

Pregnant woman working in a factory,
Hong Kong © ILO

IMAGE, p. 6

Teamwork, Egypt © ILO

IMAGE, p. 12

Young woman on her way to the well, Rwanda
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Women in production line, Hong Kong © ILO
Men working in a factory, Russia © ILO

IMAGE, p. 26

Women working, Mali © ILO

IMAGE, p. 30

Business owner woman, India © ILO

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**World Health
Organization**



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Preface

This document is the eleventh in a series of occupational health documents entitled *Protecting Workers' Health* published by the World Health Organization (WHO) within the Programme of Occupational Health. It is the result of the implementation of the Global Strategy on Occupational Health for All as agreed upon at the Fourth Network Meeting of the WHO Collaborating Centres in Occupational Health (Finland, 1999). More recently, it has gained momentum following the endorsement of the Global Plan of Action in Workers' health 2008-2017 by the World Health Assembly (2007).

As part of the Global Plan of Action, the WHO developed a global framework and model for employers, workers, policymakers and practitioners to assist them in the planning, development, implementation and evaluation of healthy workplace initiatives. A healthy workplace is defined as one in which workers and managers collaborate in a continual improvement process to protect and promote the health, safety and well-being of all workers (1). According to the framework, healthy workplaces should be open, accessible and accepting environments for people with differing backgrounds, demographics, skills and abilities.

Around the world women and men experience different realities at work, at home and in their communities, with women often at a disadvantage relative to men. This document provides employers and worker representatives with tools to build healthy and equitable workplaces for women and men while bringing needed attention to issues predominantly affecting women. The document includes 1) ways to address the needs of women and men in the areas of physical and psychosocial health, personal health resources and enterprise-community involvement and; 2) a checklist that helps think about sex (biological) and gender (social) differences between women and men at all stages of workplace policies, programmes and practices.

“Treating everyone the same”, although well-intentioned, can result in missed opportunities to consider the specific needs and experiences of different groups (2). For instance, providing all workers with equipment of the same size ignores differences in average body dimensions between women and men. This can lead to the equipment being difficult to use or even dangerous for one of the sexes.

The tools presented in this document are broad enough to be applicable to a range of industries in both developed and developing countries. Whenever possible, we seek to minimize the tools’ requirements for structures (organizational, legislative, etc.) and resources so that they may be relevant to developing countries, the informal sector – that which is not monitored by a government – small businesses and work done in the employer’s home. One important requirement of the tools’ successful implementation however is management commitment to the improvement of working conditions and the promotion of gender equity.

For men and women workers, their families and communities, healthy workplace initiatives that take into account sex and gender differences can lead to better health and well-being. They can also lead to empowerment through the equitable and meaningful participation of workers in programmes that encourage communication and action and foster support (3,4,5). For employers, such initiatives can result in an improved bottom line in the form of decreased turnover and absenteeism, increased productivity and morale, and lower workers’ compensation costs (6,4,7).

The text was prepared by Stéphanie Premji of the Interdisciplinary Centre for the Study of Biology, Health, Society and the Environment (CINBIOSE) in Montréal, Canada. It was subject to an extensive peer review process by international experts in multiple stages. The options for intervention are based on current research on gender and occupational health as outlined in a recent review of the evidence (8). They are also inspired by the action plan adopted by Canadian researchers and union representatives in the symposium entitled “Improving the Health of Women in the Work Force: A Meeting of Representatives of Women Workers and Researchers” that took place in Montréal in 1998. Although formulated more than a decade ago, the action plan has since been translated in multiple languages and used in countries across Europe and Latin America.

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