

Intensified psychosocial risks in feminised frontline occupations

Harassment and violence 2

= Number of countries that have ratified the ILO Convention 190 'Eliminating Violence and Harassment in the World of Work', 2019.

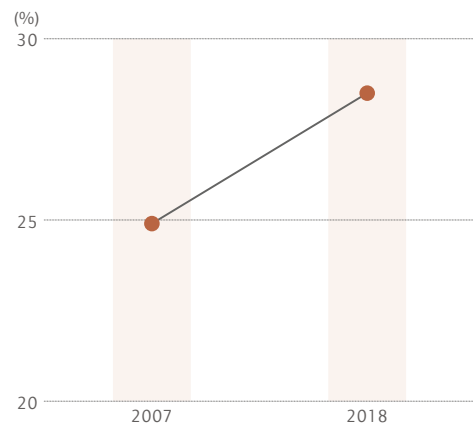
The Covid-19 pandemic has intensified emotional demands on frontline workers and increased psychosocial risks at work. A striking majority of these workers are women.

The pandemic has strengthened the shared societal understanding of what constitutes an essential service – 'essential' in the sense of enabling our communities, cities, and nations to function properly at a time of national emergency. Many of the frontline occupations without which our societies would not have been able to continue functioning during the pandemic are located within the service sector and include professional profiles as varied and diverse as those of cleaners, childcare workers, teachers and supermarket cashiers, as well as, of course, healthcare workers. In the EU28, women make up 78% of the health workforce, 93% of childcare workers and teacher assistants, 86% of personal care workers in health services, and 95% of domestic cleaners and helpers. Some 83% of the workers providing home-based professional care to older people and people with disabilities are women. And women make up 82% of all cashiers in the EU (EIGE 2020).

These are all frontline workers who face a high exposure to the SARS-CoV-2 virus that causes Covid-19, and are consequently to be classified as working in 'unsafe jobs' in a pandemic context (Basso 2020). In addition, these occupations face a high degree of psychosocial risks. According to the European Working Conditions (EWC) survey of 2015, women-dominated occupations have the highest exposure to emotional demands; these demands include handling angry clients, customers, patients, or pupils, as well as hiding one's feelings and being in situations that are emotionally disturbing (Eurofound 2020). Figure 5.5 shows that the percentage of women workers reporting exposure to occupational risk factors that can adversely affect mental health increased from 2007 to 2013. For education, human health, and social work activities, all measured psychosocial risk (PSR) factors increased from 2014 to 2019, according to the EU-OSHA European Survey of Enterprises on New and Emerging Risks (ESENER). Workers reporting:

- 'pressure due to time constraints' went up from 49.72% to 53.84%;
- 'poor communication or cooperation' went up from 20.55% to 24.34%;
- 'difficult customers, patients, pupils' went up from 74.90% to 79.90%;
- 'long or irregular working hours' went up from 23.64% to 26.24%.

Figure 5.5. Women reporting exposure to risk factors at work that can adversely affect mental wellbeing, all sectors (%)



The unequal gender distribution of work-related PSR between women and men is partly a consequence of the horizontal segregation of labour markets, which concentrates women in occupations and economic activities (such as care and services) with higher exposure to these hazards. Moreover, vertical segregation, which places women in the lowest positions of the pay and decision-making scales, reinforces this effect. Research findings suggest that these inequalities put women at a higher risk of physical and mental disorders, sickness absence, disability, and mortality from work-related PSR (Campos-Serna et al. 2013).

While detailed data on the extent of the impact of the pandemic on workers' health is being collected and analysed, it is evident that some of the sectors that have been affected adversely by the Covid-19 crisis are sectors where the female working population tends to be overrepresented. For instance, there has been an increase in long and irregular working hours in the health sector due to increased demand for care services, with staff shortages creating further pinch points and generating additional time constraints. Violence and harassment by third parties against health and service workers have been reported widely (European Medical Organisations 2020; Nursing Times 2020). The health risks posed by SARS-CoV-2 has created stress and anxiety, aggravated by the lack of (or by inadequate) PPE for most frontline workers. A large UK study comparing frontline workers with the rest of the population on prevalence estimates of depression, anxiety, and post-traumatic stress disorder (PTSD) during the first week of 'lockdown' and again one month later found that estimates were significantly higher for frontline workers (Murphy et al. 2020).



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(ESENER Survey 2019)

**Women make
86%
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care workers
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The 1989 Framework Directive (89/391/EEC) obliges employers to address PSR in the health and safety strategies of their respective enterprises or organisations. In addition, the European social partners have recognised the importance of PSR by signing the Framework Agreements on Work-Related Stress (2004) and on Harassment and Violence at Work (2007). However, data and policy monitoring shows that there are large differences between European countries in respect of the importance given to PSR. This results in substantial discrepancies across the EU in terms of worker protection and exposure to psychosocial risks (EU-OSHA 2014).