



Ethical
Trading
Initiative

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Gender-responsive occupational safety and health in supply chains

Guidance

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This guidance has been developed as part of a workstream on gender and occupational safety and health with member companies of the ETI general merchandise sector. This includes sectors such as stone, wood, cosmetics, kitchenware and metalware. However, the insights and guidance offered can be applied to any manufacturing setting.

Executive summary

A safe and healthy work environment is a fundamental right. However, occupational safety & health (OSH) practices often neglect gender-specific risks, leaving women workers disproportionately exposed to harm in supply chains. This guidance, developed by ETI's General Merchandise group, supports companies in applying a gender lens to OSH within human rights due diligence (HRDD) frameworks.

Key objectives

- ▶ **Raise awareness** of the intersection between gender and OSH risks.
- ▶ **Provide step-by-step guidance** for integrating gender into OSH policy through risk assessments, mitigation, monitoring, communication, and remediation.

Why a gender-responsive OSH approach matters

- ▶ Women and men face different risks due to biological, social, and occupational factors.
- ▶ Ill-fitting Personal protective equipment (PPE), non-inclusive tools, exposure to harmful chemicals, job segregation, and gender-based violence and harassment (GBVH) all contribute to unsafe conditions for women workers.
- ▶ Climate change further exacerbates risks, especially for vulnerable groups such as pregnant workers.

Benefits to business

- ▶ **For buyers:** Improved risk management, compliance, brand reputation, and consumer trust.
- ▶ **For suppliers:** Reduced accidents, better worker retention, enhanced productivity, and stronger worker engagement.

Recommended actions for business

- ▶ **Policy development:** Embed gender considerations in OSH policies and supplier codes of conduct.
- ▶ **Risk assessment:** Conduct gender-specific site-level assessments using disaggregated data and confidential worker feedback.
- ▶ **Prevention & mitigation:** Adapt PPE, work tasks, and facilities to meet women workers' needs; ensure access to healthcare, flexible work, and GBVH protections.
- ▶ **Monitoring & communication:** Use gender-sensitive audits and communicate progress to workers and stakeholders.
- ▶ **Grievance & remedy:** Strengthen freedom of association, ensure functional OSH and GBVH committees, and apply survivor-centred remedies.

Introduction

A safe and healthy work environment is a fundamental principle and right at work recognised by the International Labour Organisation (ILO) in 2022. This essentially means that regardless of whether a member state has ratified the ILO conventions ([Occupational Safety and Health Convention, 1981](#) (No. 155) and the Promotional Framework for [Occupational Safety and Health Convention, 2006](#) (No. 187)), these rights must be respected and promoted.

At the same time, gender-based inequality, discrimination and injustice is pervasive across different sectors and tiers of the supply chain. Women workers are often disadvantaged by discriminatory sociocultural practices and attitudes that deem women's work to be of lower status. Promoting gender equality is key to achieving of decent work for all.

The need for this guidance arises from a frequent disconnect between gender-inclusive and occupational health and safety (OSH) business practices. Unfortunately, engagement on OSH to date typically focuses on physical safety, for example fire or building safety and machine maintenance. These are undoubtedly important issues to ensure workers are operating in safe environments, but this narrow approach fails to consider the actual needs of workers. While the reproductive health of women workers is receiving more attention, it is important to consider how various physical and psychological risks affect men and women differently in the workplace.

This guidance aims to support businesses to bridge the gap between the two, ensuring that women can benefit from effective OSH measures in their workplaces as a fundamental pathway to gender equality. Failing to differentiate between men's and women's needs and characteristics leads to assumptions that reinforce existing gender biases by not considering the significant differences in their working lives.

Workers may have specific safety needs that arise from different aspects of their identities, including but not limited to gender identity and sex. In many operating contexts, women's needs may have been overlooked and therefore much of the guidance on gender seeks to address this. However, gender should not be conflated with women, and a gender lens should be used inclusively and should be based on the diversity of the workforce and how workers identify themselves and their needs. It is important to note that a gender-responsive approach is based on involving workers meaningfully in the design and implementation of policies and procedures in the workplace. Taking an inclusive approach means that the different and intersecting workers' OHS needs can be considered at the same time.

The purpose of the guidance is twofold

1. **Raising awareness** about the link between gender and OSH
2. **Offering businesses step-by-step guidance** to adopt a gender-responsive human rights due diligence approach to OSH by:
 - ▶ Developing OSH policies with a gender lens
 - ▶ Identifying and assessing OSH risks with a gender lens
 - ▶ Developing prevention and mitigation measures that address gender-related OSH risks
 - ▶ Tracking and monitoring progress on gender-responsive OSH measures
 - ▶ Communicating progress on addressing gender-related OSH impacts
 - ▶ Remedying gender-related OSH impacts

How gender impacts occupational safety and health risks

Women and men face different occupational safety and health risks due to a variety of factors including biological differences, job segregation, and gender roles.

Biological differences

Women often wear personal protective equipment (PPE) that does not fit properly, as it was designed to fit the body of a man, thereby increasing their risk of injury. PPE typically includes all equipment worn or held by a person at work and which protects them against one or more risks to their health and safety. This includes protective clothing such as overalls, gloves, safety footwear, safety helmets or high visibility clothing; protective equipment like safety goggles and visors, life jackets, underwater breathing apparatus and safety harnesses.

Gender-responsive PPE considers workers' gender, race, age, shape, and size. However, 'PPE designed for the dimensions of an average male worker means that female workers may be forced to rely on gear that is too large or disproportioned. From headwear to footwear, ill-fitting PPE can cause safety hazards, reduced dexterity from oversized gloves, hard hats that fall off, baggy coveralls catching on equipment, and trips and falls because footwear or shoe covers are too large.'¹ For instance, the use of a 'standard' American man's face shape in the manufacturing of respiratory protective equipment (RPE) means that it does not fit most women.

Tools designed for men's hands can also cause strain and increase the risk of musculoskeletal disorders in women. The use of work equipment, machinery, worktops and tools designed for men contributes to women's work accident rates. Work equipment that is set up in the wrong way or that is not the correct design can lead to poor working posture. This all leads to an increased risk of musculoskeletal disorders such as sprains and strains, carpal tunnel syndrome, tendonitis, and others.²

Furthermore, due to different body sizes and hormonal variations, women may have lower threshold for the level of toxins they can be safely exposed to compared to men.

“Women tend to be smaller than men and have thinner skin, both of which can lower the level of toxins they can be safely exposed to. [...] Hormonal influences (menstruation, menopause, lactation) can also modify the reaction to chemical exposure.”³

Job segregation

Sectors where women workers are prevalent may have unique risks that are not adequately addressed by general OSH policies, leading to insufficient protection and higher risk of injuries or illnesses. For example, industries such as textiles, plastics and electronics production have a higher proportion of women workers who are often exposed to a variety of harmful chemicals. About 75 million people work in the textile industry worldwide, 80 percent of whom are women between the ages of 18 and 35, working in lower-skilled roles such as machine operators and helpers. Women in textile factories are regularly exposed to synthetic fibres such as acrylic, nylon and other petroleum products.⁴ They are also exposed to dust particles of cotton and other raw materials, fumes, and chemicals from manufacturing processes, all of which can lead to serious health problems including respiratory diseases and eyesight problems. Because women are often considered more dexterous, they are also typically segregated into jobs that require a higher level of motor skills, resulting in a greater incidence of repetitive strain injuries (RSIs) among women.⁵

In a study on the stone industry in Rajasthan, India, it was found that women were engaged in tasks such as cutting cobblestone in sandstone stockyards, and processing tasks including making figurines, storing, and packing. These are typically considered unskilled jobs that pay less than roles occupied by men, with no employment security. Women in Rajasthan stone quarries were noted to face serious exploitation, with no access to benefits including health care and maternity leave, meaning they have to return to work almost immediately after childbirth.⁶

Gender roles and societal norms

Women experience higher levels of job-related stress due to factors such as balancing unpaid care responsibilities, which leads to health problems including stress, cardiovascular diseases and depression. Societal norms often place the expectations of caregiving on women. This results in a ‘double burden’ of having to carry out domestic unpaid work, such as childcare, cleaning and cooking, in addition to employment.

OSH is a critical issue that impacts workers across all sectors, and businesses have an obligation to protect workers in their supply chains from physical and mental harm resulting from the work they do. The COVID-19 pandemic and resulting impacts on business operations was a stark reminder of how important a healthy workforce is, for productivity and overall performance. The pandemic also served as reminder of the disproportionate impact that such crises have on women workers in terms of their health and safety, the burden of unpaid care and the higher probability of losing their jobs.⁷

Why it makes sense to adopt a gender-responsive OSH approach

There are various international commitments and national laws regarding the rights of women workers. In the UK, these include mandatory legal frameworks such as the [Equality Act](#), [Modern Slavery Act](#), [Gender Pay Reporting](#) regulations and national legislation. Voluntary international frameworks include gender components of the [UN Guiding Principles on Business and Human Rights](#), the [Sustainable Development Goals](#), the UN's [Women's Empowerment Principles](#), and the [ETI Base Code](#). More recently the [EU Corporate Sustainability Due Diligence Directive](#) explicitly mandates companies to adopt a gender lens to their human rights due diligence processes.

Within the [ETI Base Code](#), there is clear reference to both gender equality – with Base Code clause 7 calling for no discrimination at work on the basis of gender – and occupational health and safety – by ensuring that working conditions are safe and hygienic.

A gender-responsive approach to addressing OSH risks acknowledges the differences that exist between men and women workers, identifying their differing risks and proposing preventative measures, to ensure that effective solutions are provided. Not only is this the right thing to do but it also results in significant benefits for both buyers and suppliers alike: unsafe workplaces cost money by reducing the performance and productivity of workers.

There is also a personal cost to workers who get injured or fall sick because of the work they do, such as lost wages, medical costs, inability to provide for their families and an overall negative impact on their wellbeing.

The key benefits for both buyers and suppliers to invest in gender-responsive OSH approaches:

Buyer's business case

- ▶ Lower overall costs of business operations
- ▶ Enhanced brand reputation
- ▶ Compliance with legal requirements
- ▶ Better risk mapping and management in the supply chain
- ▶ Positive differentiation in the market
- ▶ Consumers' trust and loyalty
- ▶ Compliance with soft law requirements

Supplier's business case

- ▶ Reduction in workplace accidents and associated costs
- ▶ Improved worker satisfaction
- ▶ Improved worker retention
- ▶ Reduced absenteeism and turnover
- ▶ Increased productivity
- ▶ Better business relationships with customers

Climate change and OSH

Climate change related impacts such as [extreme heat](#), air pollution and flooding pose a serious risk to workers' occupational health and safety.

As ambient temperatures rise, the body has to work harder to keep its internal temperature within a comfortable and safe range. This can lead to heat exhaustion and potentially heat stroke. Alongside temperature, other factors also play a role, such as humidity and the duration and intensity of physical exertion. Rising temperatures also increase the risk of workplace accidents, as workers struggle to concentrate, and judgement is impaired. At temperatures above 30 degrees Celsius, the risk of workplace accidents increases by 5-7%; at temperatures above 38 degrees, accidents are 10-15% more likely.⁸

People with medical conditions, or those who are elderly or pregnant are the most at risk of suffering the consequences of extreme heat at work. These workers need to be identified, and additional support and precautions put in place to protect them, with no infringement on other rights (such as reductions in pay, working hours, redundancy). For example, any PPE required for work must be appropriate and comfortable for use in higher temperatures (e.g. gloves, facemasks, coveralls). Women workers and their representatives should be consulted and part of decision-making on appropriate PPE.



Case study: Gender and climate change training with labour inspection departments in Egypt, Morocco, and Tunisia⁹

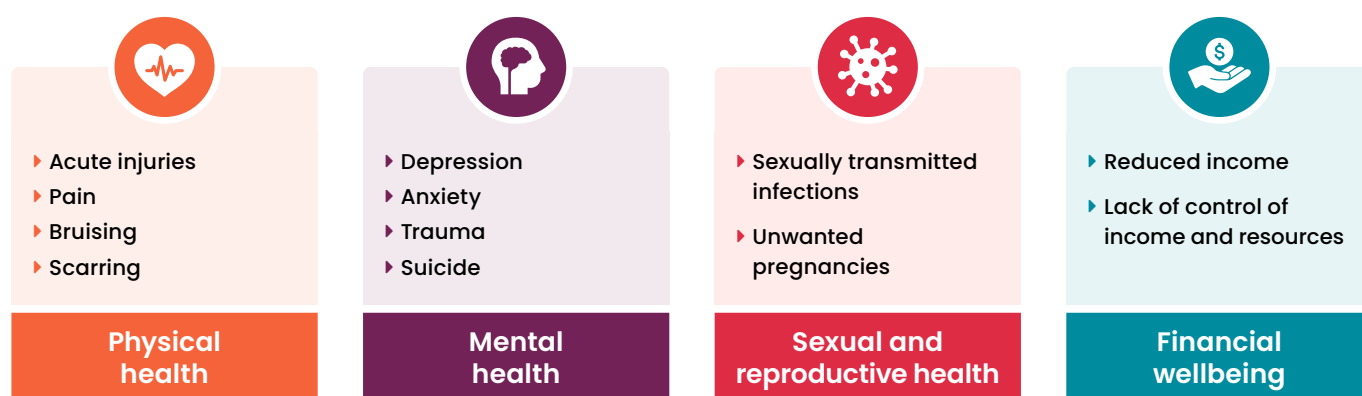
In 2023, as part of the Decent Work for Women project, the ILO and relevant Ministries of Labour organised capacity-building training sessions for 80 labour inspectors in Tunisia, Morocco, and Egypt. The training focused on enhancing the labour inspectors' awareness of their role in advising, monitoring, and supporting companies on climate-related issues, particularly those connected to occupational safety and health (OSH).¹⁰

The sessions explored both the direct and indirect impacts of climate change on women's health in the workplace. These included heat stress affecting women in agriculture and outdoor jobs, vector-borne diseases, air quality and water scarcity concerns, extreme weather events, and changes in occupational patterns that affect tasks commonly performed by women. Additionally, the psychosocial stress associated with worries about family, homes, and communities in the context of climate change was highlighted.

The workshops emphasised the need for effective OSH measures, providing training on climate-related health risks, and promoting gender-responsive policies. As a result of these workshops, the first group of regional labour inspectors was trained on climate change concepts and authorised to lead local awareness-raising initiatives.

Gender-based violence and harassment (GBVH) is an OSH issue

In 2019, the ILO ratified [Convention 190 \(C190\)](#) and its accompanying [Recommendation 206](#), which advocates for a world in which every worker is protected from violence and harassment, including GBVH. This encompasses all categories of workers, including employees, persons in training such as interns and apprentices, volunteers, job seekers and job applicants. It applies to all sectors (public, private, formal and informal) and covers all forms of violence and harassment (verbal, physical, social, sexual or psychological) that occur anytime and anywhere in all places and circumstances related to work, regardless of the location, size, sector or type of enterprise.



Source: Social Development Direct, [Addressing Gender-Based Violence and Harassment \(GBVH\) in the Private Sector](#) (2020), accessed 3 April 2025

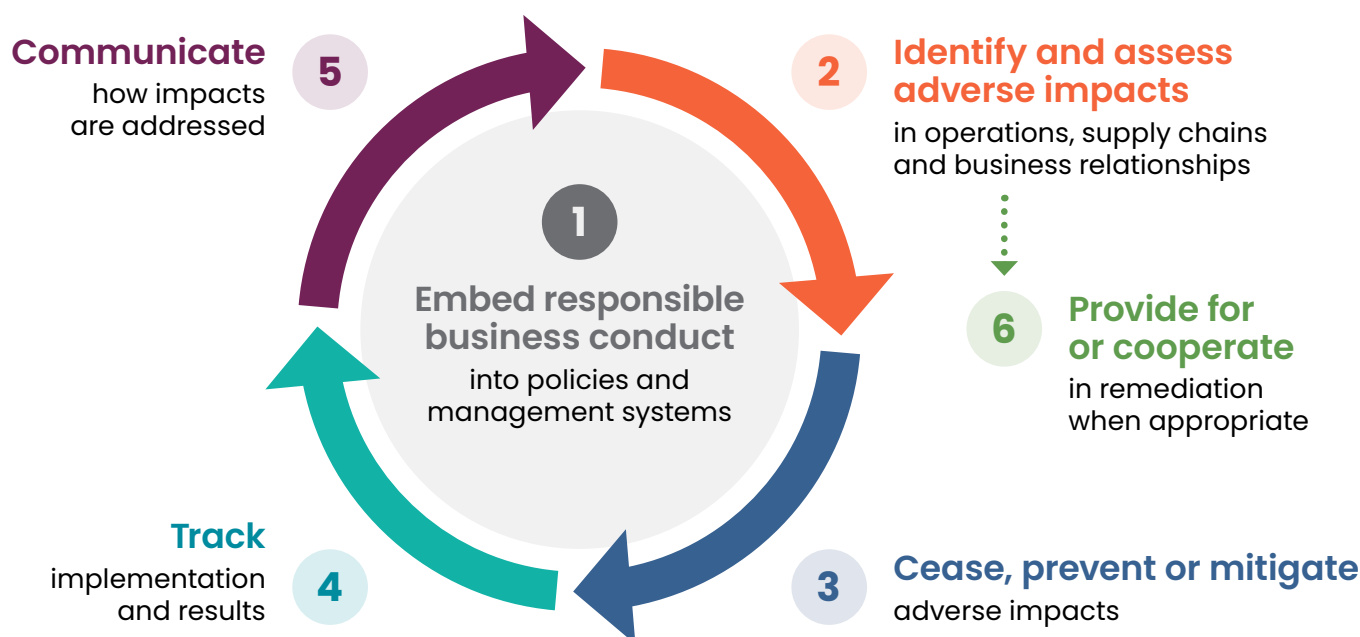
GBVH affects the health and wellbeing of workers in many ways (see figure above). A key article in the ILO's C190 states that violence and harassment and associated psychosocial risks must be taken into account in the management of OSH. This essentially means that by including violence and harassment against workers – particularly women – as an OSH issue, employers will be in a better position to assess GBVH risks and put in place measures to prevent them.



Applying a gender-responsive HRDD approach to OSH

Gender-responsive Human Rights Due Diligence (GRHRDD) is the process whereby gender as a cross-cutting dimension is integrated within each step of the due diligence process (see figure below). It goes beyond adding gender as a separate thematic area and provides a more holistic approach to addressing human rights risks in supply chains, thus advancing gender equality.

OECD Human rights due diligence cycle



Source: OECD, [Due Diligence Guidance for Responsible Business Conduct](#) (2018), page 21, accessed 3 April 2025

Developing OSH policies with a gender lens

The first step of GRHRDD is to incorporate a gender lens into policies and management systems to ensure that your business is committed to respecting human and labour rights, including women's rights, in line with national and international standards. For some companies, this might mean starting from the beginning to develop new policies whilst for others, this could involve revising current policies to reflect commitments to advancing gender equality. It is important to cover all supply chain relationships and activities of other business partners, and to engage suppliers in the process to ensure that they also have strong policies and management systems.

Depending on what you produce and where you operate, a standalone OSH policy might be necessary, and in some cases, a legal requirement. Your supplier code of conduct should reflect the need to ensure all workers in your supply chains are working under safe and hygienic conditions. The minimum requirements for this are contained in the [ETI Base Code](#) clause 3.

If you already have a standalone OSH policy, this provides an entry point to strengthen the gender lens by making explicit commitments to protecting the safety and health of all workers, men and women, by preventing work-related injuries, ill health, diseases and incidents. If you do not currently have a standalone OSH policy, you can include additional language in your supplier codes of conduct or relevant supplier manuals adding a requirement to assess OSH risks with a gender lens and ensure measures are in place to tackle the differential needs of men and women workers.



ETI Base Code clause 3:

Working conditions are safe and hygienic

- 3.1** A safe and hygienic working environment shall be provided, bearing in mind the prevailing knowledge of the industry and of any specific hazards. Adequate steps shall be taken to prevent accidents and injury to health arising out of, associated with, or occurring in the course of work, by minimising, so far as is reasonably practicable, the causes of hazards inherent in the working environment.
- 3.2** Workers shall receive regular and recorded health and safety training, and such training shall be repeated for new or reassigned workers.
- 3.3** Access to clean toilet facilities and to potable water, and, if appropriate, sanitary facilities for food storage shall be provided.
- 3.4** Accommodation, where provided, shall be clean, safe, and meet the basic needs of the workers.
- 3.5** The company observing the code shall assign responsibility for health and safety to a senior management representative.

How to engage suppliers on gender-responsive OSH

Suppliers have a responsibility to protect all workers regardless of their gender, or other characteristics including race, age and ethnicity. Given the importance of OSH as a fundamental right at work, every supplier should have an OSH policy written in a format and language that can be understood by all workers. Though in many countries it is a legal requirement, the content and way that OSH policies are implemented vary. The OSH policy should be clearly displayed in the workplace and should be continuously socialised to all workers, old and new. Below are examples of provisions that can be shared with suppliers to support and incentivise them to develop and implement robust gender-responsive OSH policies and processes.



Example: Gender-responsive provisions from BSR's report "Gender Equality in Codes of Conduct Guidance"¹¹

- ▶ Access to basic healthcare services shall be ensured to workers in accordance with national law and international norms (...), recognising gender differences and specifically facilitating services for migrants and their dependents who may face language and other social barriers.
- ▶ Reasonable actions (e.g., providing on-site clinics, a strong referral system, and external health providers) shall be taken to ensure that workers have access to health services and insurance that serve the distinctive concerns and needs of women and men.
- ▶ On-the-job attention and accommodations shall be given to ensure that the reproductive rights of women – and men – workers are respected. This includes ensuring access to family planning products and services, care relating to pregnancy, maternity leave and childcare. Affordable feminine hygiene products should be available to women workers.
- ▶ Flexible working arrangements and on-site facilities should be offered to women who are pregnant or nursing.
- ▶ Men and women workers working with hazardous materials will be informed of the potential risks to their reproductive health. To prevent unsafe exposure to hazardous chemicals and hazardous substances, appropriate accommodations shall be made for pregnant women.
- ▶ The number of toilets within reasonable distance of the workplace required under applicable laws shall be provided. In addition, the following should also be considered: number of toilets based on number of workers, privacy for each individual and gender, accessibility, and hygiene. Undue restrictions shall not be imposed on the time and frequency of toilet use.
- ▶ Workplace policies and practices are established to ensure that women – and men – have the agency to take rest and water breaks when needed and take leave to receive nonemergency services from on-site or off-site health service providers.
- ▶ Where doctors, nurses, or other health professionals are required on site, they should be qualified not just to provide curative care for injuries, but also to address the broader health needs of men and women workers, including providing referrals to accessible, affordable, quality services off site.
- ▶ Both women and men workers shall have access to childcare services.

OSH management systems

An OSH management system provides a way to assess and improve performance in the workplace to address safety and health risks, by outlining what needs to be done and how, as well as how to monitor progress and identify areas for improvement.

OSH management systems are critical to the implementation of the OSH policy within a supply chain, but they can only function properly when effective social dialogue takes place, for example, through health and safety committees or collective bargaining agreements. Workers' representatives on the safety and health committee must be elected by workers and the selection process should not be influenced by management. It is vital that women workers are included in the process and given an equal chance of being part of the OSH committee. They must also receive the right training and information to participate in effective social dialogue on OSH issues and any preventative measures.

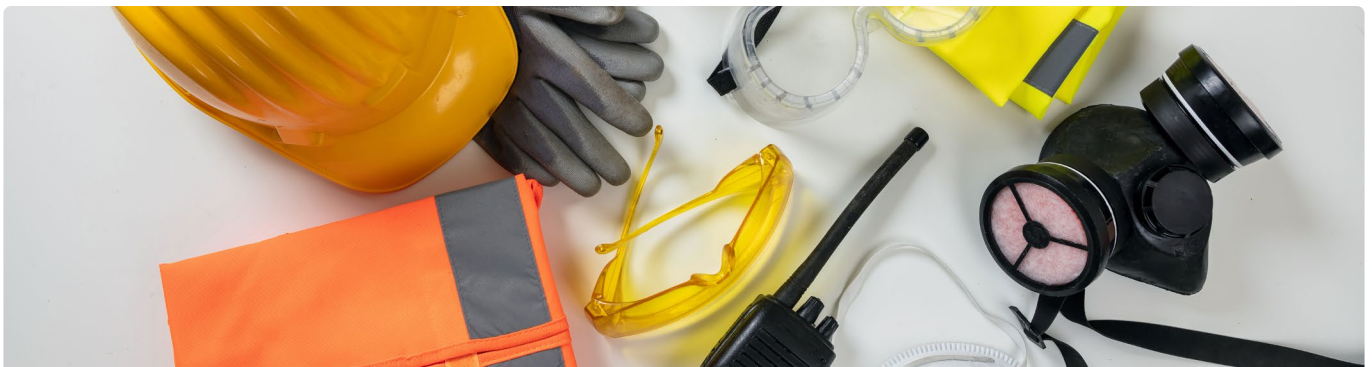


Use the OSH policy checklist to understand what your suppliers are doing regarding OSH and gender, as part of GRHRDD.



Resources: How can occupational safety and health be managed?¹²

- ▶ Does the supplier/factory have a written OSH policy? Does it cover everyone including part-time, contracted and temporary workers?
- ▶ Is someone from senior management responsible for implementing the policy?
- ▶ Are copies of the policy available in local languages and explained to all workers, men and women?
- ▶ Were workers or their representatives consulted in drawing up the policy, particularly women and other marginalized groups?
- ▶ Is there a safety and health committee at the factory? Are workers involved in this committee and is there a gender balance? Are health and safety issues and priorities of concern to women workers regularly discussed?
- ▶ Do all workers receive safety and health training and understand the provisions of the policy?
- ▶ Are there safety representatives (women and men) (management and/or workers) in the factory? Have these safety representatives received training?



Identifying and assessing OSH risks with a gender lens

In any manufacturing setting, OSH is a pertinent risk area that should always be acknowledged. The likelihood and severity of OSH risks will depend on various factors including sectoral, geographic and product hazards and risks, the organisation of work and production processes, worker agency and representation and overall OSH management.

Begin with a broad scoping exercise across areas of the business, including supply chains, to identify the likelihood and severity of OSH risks on workers. To add a gender lens to this process, it is important to overlay where women workers are prevalent and what types of roles they typically occupy. In sectors where the predominant workforce is women, OSH risks are likely to impact them simply because of their sex. For example, chemicals and hazardous materials are significantly more dangerous for pregnant women. This scoping exercise should also look at compliance with local labour laws on OSH for example emergency preparedness, worker accommodation, health services, worker protection, chemicals and hazardous materials and OSH management systems.



Gather information to understand high-level OSH risks in the sector(s) you operate within. Where there are information gaps, consult relevant stakeholders and experts. Further research and consultation may be required to understand how OSH risks specifically impact women workers.

The broad scoping exercise can then be followed by in-depth assessments to identify and assess actual and potential OSH-related risks. Information for this can be derived from numerous sources including OSH inspection reports, human rights impact assessments, or assessments carried out by other companies, multistakeholder initiatives, trade unions and civil society organisations.

When analysing the data, it might be the case that a gender lens has not been applied, which means the disproportionate impacts of OSH risks on women workers has not been acknowledged or understood. If additional resources are available, these could be utilised to conduct targeted assessments to understand and capture the gendered impacts of OSH risks through engagement with potentially impacted rightsholders. When consulting worker representatives and trade unions, there should be adequate representation of women to ensure their views and concerns can be heard.



Conduct in-depth assessments to identify and assess actual and potential OSH-related risks with a gender lens, drawing on secondary data/reports. Where possible, conduct targeted assessments and consult with women rightsholders.



Resources: Research outputs from the Multi-actor Partnership (MAP) on gender-responsive occupational health and safety in the garment and footwear sector¹³

Funded by the German government, the MAP project, led by [SÜDWIND Institute](#) and [Femnet](#), aims to contribute to the implementation of adequate occupational health and safety measures for workers in the garment and footwear sector in India and Indonesia. A key output of the project activities includes in-depth studies into the conditions of women workers in the sector in India by Cividep and in Indonesia by the Trade Union Rights Consortium (TURC).

- ▶ **CIVIDEP India:** [Worked to the bone: understanding health vulnerabilities and healthcare access to women garment workers in Bangalore](#)
- ▶ **TURC Indonesia:** [Under the Weight of Production Targets and Reproductive Labor: Exploring Women Workers' Occupational Health and Safety in Indonesia's Shoe and Footwear Industry](#)

Gender-specific site-level risk assessments

Given that biological differences, job segregation and gender roles all contribute to the varying experiences of occupational risks and hazards for workers, it is important to conduct site-level risk assessments using confidential surveys to gather insights. These assessments help reveal issues related to occupational safety in the workplace for women, including workplace hygiene, accessibility and effectiveness of health services and the risks of physical and psychological violence (of which women and other marginalised groups are more vulnerable).

Gender-based OSH risks categories:

- ▶ **Physical risks:** Work environments that result in musculoskeletal injuries and disorders such as lower back pain, pain in limbs due to the repetitive nature of work carried out by women, eye problems from exposure to dust and chemical, physical violence and harassment.
- ▶ **Psychosocial risks:** Psychosocial hazards and risks that can lead to work-related stress, burnout, violence, discrimination and harassment. Women also disproportionately bear the burden of unpaid care work, which adds to their mental stress.
- ▶ **Reproductive health risks:** Certain workplace hazards can affect the reproductive health of women such as chemical, biological and physical hazards including chemicals, metals, dyes and solvents; noise vibration; radiation; and infectious diseases. In addition, heavy lifting and standing or sitting for long periods of time have all been identified as occupational risks for pregnant women.

Site-level assessments can be conducted by the employer or commissioned by the buying company as part of a wider stakeholder engagement process.

The STITCH Partnership's "[Framework on Meaningful Stakeholder Engagement](#)" help businesses to embed meaningful stakeholder engagement into their human rights due diligence efforts through the implementation of five key principles.

When conducting site-level assessments, there is a need to gather gender-disaggregated data that assesses physical, psychosocial and reproductive health risks for workers, using both quantitative and qualitative data (worker interviews/surveys) collection methods. The data and analysis support strategic planning, implementation, monitoring and evaluation of OSH-related policies and programmes at site level.



When conducting site-level OSH assessments, include indicators that compile gender-disaggregated data on the experiences of women and men workers, using quantitative and qualitative data collection methods. Although not exhaustive, the list below provides examples of indicators to consider.



Resources: Suggested set of OSH indicators (disaggregated by male/female workers)¹⁴

Percentage of:

- ▶ Workers who say they can move freely in and out of the workplace
- ▶ Workers who have been injured in the workplace
- ▶ Workers who complain of musculoskeletal pain
- ▶ Workers who say they can access health services as needed
- ▶ Workers who say toilets are accessible, safe, and hygienic
- ▶ Workers regularly working overtime
- ▶ Workers who say they take paid leave when they are sick
- ▶ Workers who say their employer adjusts tasks and/or provides adequate protective equipment for pregnant workers
- ▶ Workers who say that it is safe for women to commute to and from the workplace
- ▶ Workers who are aware of the policy addressing violence and harassment in the workplace
- ▶ Workers who are aware they have access to whistle-blower ethics hotlines and worker ombudsman/HR complaints process
- ▶ Workers who trust the factory's grievance mechanism/complaints procedure
- ▶ Workers who understand what constitutes sexual harassment
- ▶ Grievances related to sexual harassment (out of all grievances)
- ▶ Addressed sexual harassment grievances
- ▶ Workers who say harassment against women is unacceptable
- ▶ Workers who do not stigmatize survivors of violence against women
- ▶ Workers who are aware of modern family planning products/contraceptives
- ▶ Women workers who say they come to work when menstruating
- ▶ Workers who say women should be able to negotiate their own sexual and reproductive decisions
- ▶ Eligible workers taking parental leave
- ▶ Workers returning to work after parental leave



Example: Safety walks: A tool to assess risk factors for women in the workplace and surrounding areas^{15,16}

Safety walks are an important tool to help understand where and when women workers feel unsafe in the workplace and surrounding areas. It is usually conducted by a team comprising managers, supervisors, health and safety representatives and workers including women as part of a self-audit or inspection. Safety walks are particularly helpful in understanding where risks of violence and harassment might be high (e.g. due to poor lighting in the area), given the difficulties of gaining visibility of such issues through conventional grievance mechanisms. More importantly, it gives voice to women workers and validates their concerns around their safety in the workplace.

How is it conducted:

- ▶ Plan for the walk: constitute the team, identify areas to be inspected;
- ▶ Conduct the walk and document findings. This process must be led by women workers and their representatives;
- ▶ De-brief: review findings and prioritise actions to be taken;
- ▶ Implement corrective actions. Keep all workers involved of steps being taken;
- ▶ Monitor, review and improve.



Developing prevention and mitigation measures that address gender-related OSH risks

For prevention and mitigation measures to effectively address gender-related OSH risks, they must draw from the findings of risk assessments that have been conducted with a gender lens. Furthermore, prevention and mitigation measures should be developed in consultation with impacted and potentially impacted rightsholders and their representatives to devise appropriate actions and implement the plan.¹⁷ This means ensuring women workers and their representatives are part and parcel of the solution.

Overarching prevention and mitigation measures that employers should have in place:

- ▶ Functional OSH management systems that assess and improve performance in the workplace in relation to addressing safety and health risks, by outlining what needs to be done and how, as well as how to monitor progress and identify areas for improvement. This must include workplace data systems that incorporate gender-disaggregated health and safety information, as well as collect data beyond workplace injuries and exposures.
- ▶ Gender-balanced health and safety committee (reflecting workforce demographics) that can engage in social dialogue with their employer.
- ▶ Regular training for supervisors and management on gender-related health and safety issues, that integrate aspects of sexual and reproductive health issues for women workers, promotion of well-being including physical, mental and social well-being, as well as gender-based violence and harassment.
- ▶ Training for health and safety inspectors on how to integrate a gender lens to OSH risks assessments.
- ▶ Regular communication of important health and safety information to all workers, in a language and format they can understand, considering different literacy levels.



Example: Additional preventative measures for addressing gender-related OSH risks¹⁸

Measures employers can take to address psychosocial risks:

- ▶ Accessible third-party grievance mechanisms, clearly defined processes for handling cases (particularly of GBVH), mediation and post-incident counseling.
- ▶ Monitoring hours and ensuring overtime is voluntary and workers can take leave when needed. Ensure effective production planning of work orders to avoid reoccurring overtime and risks of undue stress or burn out.
- ▶ Flexible working arrangements, particularly for women workers, with support to take maternity leave when needed and return to their jobs and equal opportunities after the leave period.
- ▶ Where applicable, ensure functional childcare facilities on-site or in partnership with local organisations in the community.

Measures employers can take to address physical risks:

- ▶ Reviewing the health impacts of tasks such as carrying of heavy loads, highly repetitive movements, strenuous positions and prolonged sitting and/or standing on women workers and adjusting when needed.
- ▶ Provision and access to basic healthcare services on-site for workers provided in accordance with national law. Services should be resourced with qualified healthcare professionals that can address the health and well-being needs of all workers (including sexual and reproductive health).
- ▶ Providing necessary personal protective equipment (PPE) that is in the correct size for women workers and with training on to use it. Adapting PPE for pregnant workers.
- ▶ Safe transportation (especially when working overtime) and accommodation (where applicable) for women workers. Regular review of transportation and accommodation facilities to ensure violence and harassment is not taking place.
- ▶ Provision of adequate, gender-segregated toilet facilities within reasonable distance, and considering privacy, accessibility and hygiene for all workers.
- ▶ Ensure no restrictions on toilet breaks for all workers.

Measures employers can take to address reproductive health risks:

- ▶ Regularly evaluating job-related risks for pregnant women, for example, ensuring they are not exposed to hazardous substances or conducting strenuous tasks.
- ▶ Specific measures for pregnant women and mothers such as rest breaks, nursing breaks, time off for medical appointments.
- ▶ Provision of health insurance that meets the specific needs of all workers, both women and men.
- ▶ Paid maternity benefits and flexible working arrangements for women who are returning to work after childbirth.
- ▶ Provision of family planning/contraceptive products on site or make referrals to health clinics or hospitals where women can access information, services, and products.
- ▶ Provision of free or highly subsidised feminine hygiene products and proper disposal options for these products.
- ▶ Provision of breastfeeding facilities that are accessible to women workers as well as the time off needed to use them.



Use the preventative measures provided as a guide for engaging with your suppliers on gender-responsive OSH prevention and mitigation measures. These should always be designed in consultation with women workers and their representatives.



Resources:

Levi Strauss & Co Worker Wellbeing Programme

Levi Strauss & Co's approach to worker well-being goes beyond labour compliance to support financial empowerment, health and family well-being. The approach starts with listening to workers with suppliers surveying factory workers to hear first-hand what they need to be more engaged, healthy and productive employees. Once identified, the company and its suppliers partner with local and national non-profits and NGOs to implement programs to meet the needs of workers. By 2025, the company aims to implement Worker Well-being with all strategic suppliers, reaching 300,000 workers.

► [Worker wellbeing guidebook](#)



Resources:

BSR HerHealth Project Resources

BSR's HERproject is a collaborative initiative that strives to empower low-income women working in global supply chains. Bringing together global brands, their suppliers, and local NGOs, HERproject drives impact for women and business via workplace-based interventions on health, financial inclusion, and gender equality. Since its inception in 2007, HERproject has worked in more than 1,000 workplaces across 17 countries and has increased the well-being, confidence, and economic potential of more than 1,225,000 women and 775,000 men.

The HerHealth component of the programme had developed a number of resources and trainings materials around on women's health in factory setting:

► [HerHealth Training Modules](#)

► [HerHealth Videos](#)



The importance of trade unions in gender-responsive OSH

Trade unions play a vital role in promoting workplace safety in several ways:

- ▶ Trade unions advocate for the health and safety needs of all workers, including women. They ensure that gender-specific risks and concerns are addressed in workplace policies and practices;
- ▶ Negotiating health and safety provisions in collective bargaining agreements, which can include specific OSH issues that impact women workers;
- ▶ Educating workers and health and safety committees on how to identify hazards, report them and be part of the solutions;
- ▶ Supporting employers to ensure workplaces are safe and healthy for all workers by raising awareness on gender-specific occupational risks and educating workers on their rights and safety measures.

Unfortunately, many factories are still not unionised and therefore fail to realise these benefits. More efforts are needed to ensure that women workers actively participate in unions. Research on the role of trade unions in addressing GBVH in the ICT, electrical and electronics sector highlights how important it has been for unions to consult with women workers, listen to their experiences and encourage them to make complaints on GBVH.¹⁹

The presence of women leaders in the unions builds trust and opens up safe spaces trust and opening up safe spaces for women to confidentially talk about GBVH. Women leaders have carried out training, awareness-raising programmes, and discussion groups and have found creative ways to engage with women workers in building trust and breaking the silence on GBVH. However, participating in unions is not always easy, particularly when women have care responsibilities. These constraints must be acknowledged and responded to so that women have opportunities to take on leadership roles in trade unions.



Tracking and monitoring progress on gender-response OSH measures

Step 4 of the due diligence process encourages companies to monitor and track the implementation and effectiveness of commitments and activities designed to minimise human rights impacts at site level. A key tool for this is through periodic third-party reviews or audits, which can help to identify areas where less progress is being made.

In the case of OSH, current audit methodologies tend to focus on identifying physical issues such as blocked fire exits, exposed wires, machine maintenance and so on. When it comes to examining OSH issues from a gender perspective, the current approaches are largely ineffective. That is, the questions asked in audits do not account for the differential impact of OSH issues based on gender, and auditors usually lack the skills and capacity to effectively integrate a gender lens during audits.

Periodic audits can determine if an OSH management system is in place, adequate and effective in protecting the safety and health of women and men workers, including aspects of the following:

- ▶ Gender-responsive OSH policy
- ▶ Gender-balanced worker participation
- ▶ Responsibility and accountability for implementing OSH policy
- ▶ Competence and training for key stakeholder groups such as health and safety committees
- ▶ OSH management system documentation
- ▶ Communication
- ▶ Investigation of work-related injuries, ill health, diseases and incidents, and their impact on safety and health performance
- ▶ Prevention and control measures including how well they respond to gender-related issues
- ▶ Emergency prevention, preparedness and response²⁰

Audits must be conducted by competent people who are independent of the activities being audited and are gender balanced in their team composition. This would allow for meaningful engagement with women workers who are impacted by OSH issues in a safe and confidential manner. The results and conclusions should be communicated to those responsible for corrective actions but also workers and their representatives (trade unions, safety and health committee).



Ensure audits are conducted with a strong gender lens by competent, gender-balanced audit teams at all supply chain sites. Incorporate verification measures into your audit methodologies and follow-up with suppliers on their corrective action plans.



Resources:

Auditor guide to conducting a gender-sensitive audit

Developed by BSR, [Gender Equality in Social Auditing Guidance](#) provides practical guidance and tips for social auditors on how to identify gender-sensitive issues during a social audit. Audit company (second-party or third-party) professionals can also incorporate this information into their training plans, audit protocols, and methodologies. The guide contains four sections:

- ▶ Process for identifying and assessing gender-sensitive issues
- ▶ Gender-sensitive worker interview techniques
- ▶ Tips for reporting gender-sensitive issues
- ▶ Verification measures for different code-of-conduct categories



Example:

Verification measures on gender and OSH for auditors²¹

Policy commitments:

- ▶ Check that policies provide a framework that accommodates the needs and protects the health of women, including policies that:
 - ▶ Take appropriate steps to ensure reproductive health and protect pregnant women from hazardous substances and occupational accidents
 - ▶ Establish the right to rest, drink, take toilet breaks, or see healthcare staff when needed, with a specific focus on pregnant and breastfeeding women
 - ▶ Ensure workers have access to health services outside of the workplace for non-emergency health care
- ▶ Check that the workplace provides health insurance to all eligible workers as required by law.
- ▶ Check that workplace policies give all workers the right to request flexible working arrangements to accommodate health and well-being issues. If so, check whether there are restrictions on these arrangements.
- ▶ Check policies to ensure that there is no denial of sick leave (auditor should note where such denial is related to pregnancy or childcare responsibilities).
- ▶ Check that the workplace has a process for disseminating and displaying important health messages for workers, in a language and format that all workers can understand.
- ▶ Check that the workplace has policies or management systems to ensure that its health clinics/infirmaries meet basic standards of cleanliness, confidentiality, and quality of care.
- ▶ Check that workplace data systems incorporate health information that is disaggregated by gender and that includes workplace infirmity or health function data beyond workplace injuries and exposures.

Processes at site level:

- ▶ Check that the site has a manager responsible for health and safety. Does the manager's remit cover broader worker well-being and health promotion practices? What authority do they have to implement changes?
- ▶ Check that the site conducts health and safety risk assessments including gender-specific provisions such as for physical, psychosocial, sexual and reproductive health.
- ▶ Check the training provided: does it extend beyond OSH? To whom is it offered and are training records up to date? What does the content include?
- ▶ Check that any on-site healthcare facilities meet minimum basic public health standards for cleanliness, confidentiality, privacy, health information, quality and non-expired medicines, and referrals.
- ▶ Check that the health facility collects gender-disaggregated data on the types of service and information it provides to both women and men workers. Conduct an analysis to identify trends and possible differentiated worker health needs.
- ▶ Check that workers have access to healthcare insurance that meets their specific needs. Is it provided as a workplace benefit?
- ▶ Assess what products and information the clinic has to address menstrual hygiene and women's health needs.
- ▶ Check whether there are clean and hygienic toilets, within reasonable distance of the workplace, separated by gender and meeting legal requirements.
- ▶ Check whether there are healthcare professionals on site. What level of qualification do they have? Do they have clear job descriptions defining areas of authority and responsibility?
- ▶ Check whether the law requires flexible working arrangements to be offered to women and men workers on request. Does the site accommodate circumstances such as pregnancy or nursing?
- ▶ Check whether the workplace makes all allowances for pregnant or nursing mothers in line with the law, e.g. rest and breaks, medical appointments, nursing breaks, and a suitable private quiet space.
- ▶ Check that any childcare facilities are legal and meet any local laws/regulations. Where external childcare services are provided, verify evidence that it meets local laws/regulations.

Worker impact:

- ▶ Trend analysis through document checks to:
 - ▷ Check for any correlation in absenteeism of women workers with health-related issues (e.g. what is the number of absences related to menstruation as a percentage of total?)
 - ▷ Check termination/resignation records of former workers for trends, especially if linked to menstrual health, pregnancy, or breastfeeding issues
 - ▷ Check for unauthorised deductions (e.g. for sick leave, medical appointments). This is particularly important for vulnerable workers such as piece-rate workers, who may be unable to recoup costs of sick leave linked to themselves or their dependents

- ▶ Gauge worker impact and empowerment, assessing women's awareness and agency, as well as workplace practices impacting women through interviews. Suggested questions include:
 - ▷ Do workers feel that their health and well-being needs are adequately addressed at work?
 - ▷ Are workers aware of available healthcare facilities on site? Are they aware of their health rights?
 - ▷ Do women have access to and use of modern family planning products?
 - ▷ Are women workers aware of good menstrual hygiene methods and do they have access to affordable feminine hygiene products at work?
 - ▷ Do all workers have easy access to a doctor/nurse/on-site clinic or external health provider that can meet all their health and well-being needs (including OSH, sexual and reproductive health, and general well-being)?
 - ▷ Are on-site healthcare professionals able to address broader health concerns of women and men workers and refer to quality off-site services where needed?
 - ▷ Do workers feel comfortable accessing on-site healthcare facilities whenever they need to?
 - ▷ Are workers aware of, and informed of, any risks to reproductive health and any programmes to prevent exposure to hazardous substances? Do they know of appropriate accommodations for any special conditions?
 - ▷ Are workers aware of any harassment or disciplinary action related to leave during working hours for toilet breaks or healthcare needs?
 - ▷ Have workers been absent from work because of menstruation or other reproductive health issues?
 - ▷ Do women feel comfortable seeking medical attention during or post pregnancy?
 - ▷ Do workers feel comfortable requesting access to flexible working arrangements?
 - ▷ Do workers feel that the childcare arrangements meet their needs?
 - ▷ Does the workplace offer additional committees where relevant that specifically address women's needs (e.g. health and safety related to women's reproductive health, sexual harassment)?



Step 5



Communicating progress on addressing gender-related OSH impacts

Communicating internally and externally on addressing OSH impacts in a gender-responsive manner has numerous benefits for business. Internal communication should include details on how gender-related OSH risks have been identified and assessed, as well as the actions taken to prevent or mitigate them. External communication should be focused on impacted rightsholders, in a manner that is accessible and culturally sensitive. Regularly communicating with your suppliers on gender and OSH helps them to better understand your approach as a responsible business, secure their buy-in to continue supporting this work.



Continuously communicate the need for a gender-responsive OSH approach internally in particular with sourcing teams who regularly interact with suppliers. Encourage them to engage suppliers on the issue.



Grievance and remedy of gender-related OSH impacts

Grievance mechanisms play an important role in helping to identify and remediate safety and health issues in supply chains. It is important that they are effective and can identify and resolve OSH issues before they escalate and affect more workers. The most robust and sustainable model for any workplace grievance mechanism is a mature system of industrial relations with trade unions. Functional and effective trade unions can address individual grievances raised by workers, support remedial processes and collective disputes. However, there is still work to be done within trade unions to include women leaders and ensure women are part of designing the solution.

Across most production countries, there are legal requirements around establishing OSH committees comprising of both workers and management. The role of such committees is to ensure the workplace is safe by developing, implementing and monitoring health and safety policies and procedures. It is important that such committees are representative of the workforce, by ensuring that there are sufficient numbers of trained women workers on the committee. Where possible, including women in management positions can help balance power dynamics and support women workers on the committee to discharge their responsibilities. Members of the health and safety committee need to have the necessary skills, training and experience around workplace safety in general, but this should include training on how to deal with GBVH cases. In factories where specific committees exist to address GBVH, these should provide the first point of call for receiving complaints, conducting investigations and resolving GBVH issues.

When OSH related grievances are raised, it is important that they are addressed and remediated quickly, which often requires some form of intervention. For some gender-related OSH issues such as GBVH, the severity of the grievance will determine the course of action e.g. rape and physical assault are criminal acts which require criminal investigations. Remedy in GBVH cases must utilise a survivor-centric approach, where the worker is protected from retaliation and provided with the necessary physical and psychosocial support. In some cases, remedial processes require compensation in case there is a loss of earnings or the need for medical attention. ETI's [Access to Remedy: Practical guidance](#) for companies includes useful insights on how businesses can develop robust grievance mechanisms and remedy for their supply chains, including the need for gender-sensitive operational grievance mechanisms.



Advocate for freedom of association at your supplier sites, as this is the most robust and sustainable mode of workplace grievance mechanisms. Regularly evaluate the functionality of the OSH committee and/or other committees tasked with dealing with GBVH issues at supplier sites to ensure they are gender-responsive. Request gender-disaggregated grievance data.



Case study: Bangladesh agreement on health and safety in the textile and garment industry²²

The Bangladesh Safety Program is a legally binding agreement between garment brands and trade unions to ensure worker health and safety in the textile and garment industry.²³ The origins of the agreement date back to 2013 after the Rana Plaza Building tragically collapsed, killing over 1,000 workers and injuring thousands more. The Accord on Fire and Building Safety in Bangladesh, which began as a five-year agreement to pursue workplace safety in the Ready-Made Garment (RMG) sector, transitioned into the International Accord for Health and Safety in the Textile & Garment Industry signed in 2021.²⁴ Signatories commit to continue supporting workplace safety programs in Bangladesh through the RMG Sustainability Council and to establish workplace safety programs in other countries according to the outcome of feasibility studies. The 2021 International Accord contains the same components that underpinned the success of earlier Accords, including respect for freedom of association, independent administration and implementation, a high level of transparency, provisions to ensure remediation is financially feasible, safety committee training and worker awareness programme, and an independent complaints mechanism. Over 180 company signatories signed the International Accord in the first year of this agreement.

The International Labor Rights Forum conducted an assessment into the Accord on Fire and Building Safety in Bangladesh, and found that it:

- ▶ Is an independent and responsive avenue through which garment workers in Bangladesh are regularly raising concerns of safety violations.
- ▶ Provides responsive and meaningful action and is successful at securing remediation. As a result, workers are increasingly more likely to trust and use the complaint mechanism.
- ▶ Ensures that workers are able to exercise their right to refuse dangerous work.
- ▶ Protects workers from retaliation.
- ▶ Provides apparel brands and retailers with knowledge of factory-level issues that would otherwise go undetected and unreported, allowing them to remediate.
- ▶ Provides transparency by publicly reporting on all complaints received, with details about their current status and resolution.
- ▶ Reduces potential gender bias in worker access, because, through the Accord's training program, all workers in each factory receive information about how to use the complaint mechanism.²⁵



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Ethical Trading Initiative

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