



International
Labour
Organization

Anticipate, prepare and respond to crises

INVEST NOW IN RESILIENT OSH SYSTEMS



World Day for Safety
and Health at Work 2021

Report

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Anticipate, prepare and respond to crises

INVEST NOW IN
RESILIENT OSH SYSTEMS

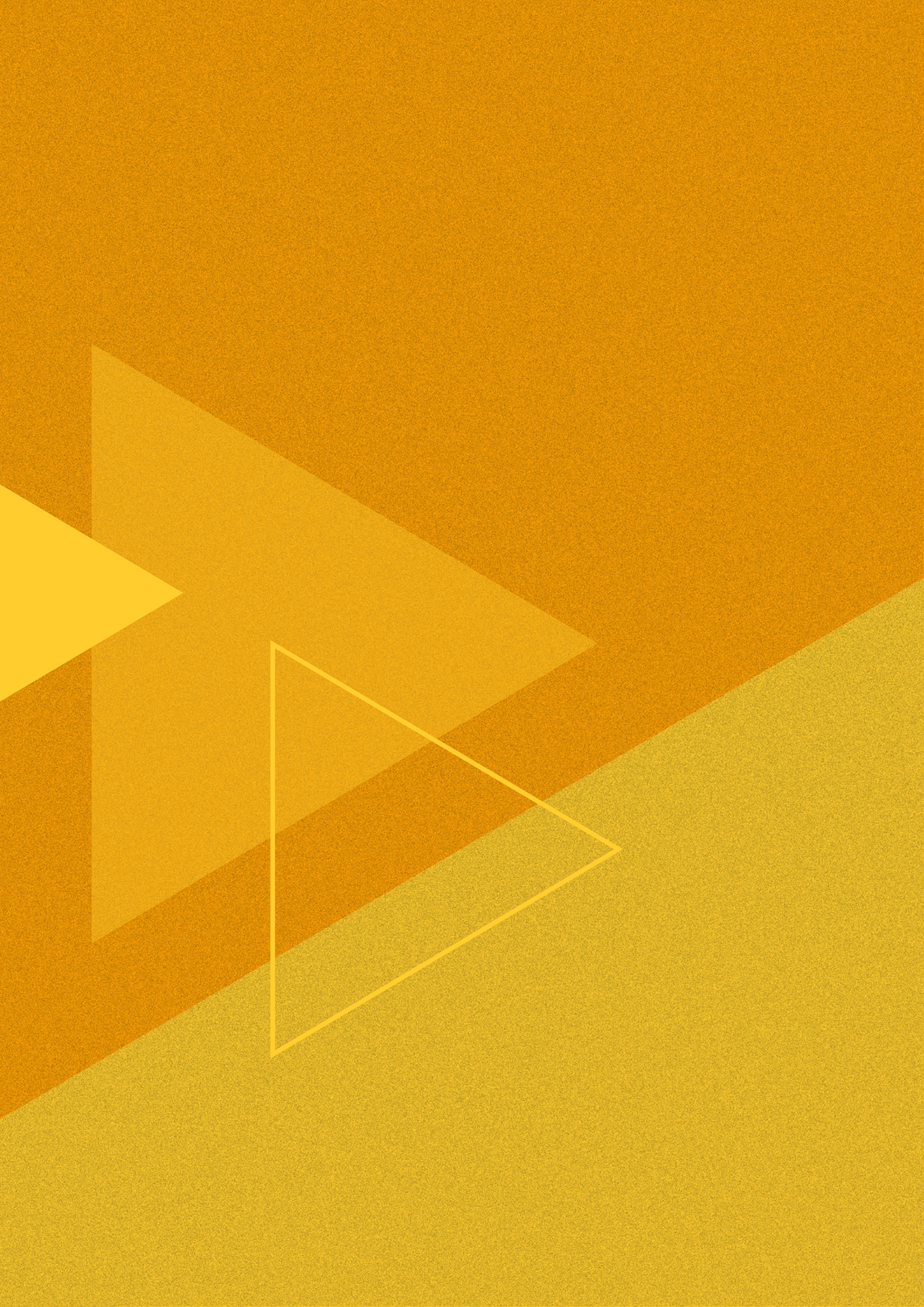
World Day for Safety
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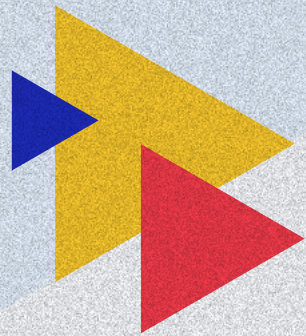
Report

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Introduction

The COVID-19 pandemic has had a profound impact on nearly every aspect of the world of work – from the immediate threat of acquiring the virus to lockdowns, the closure of businesses, school closures, widespread job losses in key sectors, impacts on global supply chains and restrictions on mobility (ILO, 2020s). These rapid changes in response to the pandemic have resulted in high levels of unemployment, a loss in working hours and business closures, and precarious employment for many workers. Informal workers and enterprises have been particularly vulnerable during the crisis to occupational safety and health (OSH) risks as they lack sufficient and appropriate protections. The ripple effects of the crisis have, in turn, affected working conditions, wages and business continuity (ILO, 2021a). The crisis has also highlighted the importance of access to protections such as sick leave and social benefits.

About this report

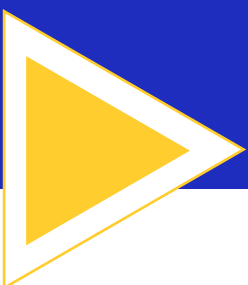
This report examines elements of a strong and resilient OSH system. It provides examples from the COVID-19 pandemic to highlight the way in which OSH systems can build strength following a crisis, enabling them to face unforeseen challenges in the future and protect the safety and health of workers – while supporting the survival and business continuity of enterprises. It aims to raise awareness of this need for a resilient system and to serve as a reference for national authorities, employers, workers and their organizations, OSH practitioners and other interested parties. The Occupational Safety and Health Convention, 1981 (No. 155) provides a blueprint for setting up and implementing comprehensive national occupational safety and health (OSH) systems based on prevention and continuous improvement. The strategy advocated for by Convention No. 155 calls for action in essential areas pertaining to OSH, namely for the formulation, implementation and periodical review of a national OSH policy; the full participation at all levels of employers, workers and their respective organizations; the definition of duties and rights of employers, workers and their representatives; and the requirements regarding knowledge, information, education and training.

The relevance and importance of the national policy and systems approach advocated for in Convention No. 155 has been reaffirmed through the Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187), which provides further guidance on a systems approach to the management of OSH at all levels and the progressive establishment of a preventive safety and health culture.

The report describes six main areas of national OSH systems that require investment to enable countries to better face and recover from crises, covering the main elements outlined in Article 4 of the Convention No. 187 (hereinafter referred to as C187). It examines specific actions and initiatives taken by the national authorities, social partners and other stakeholders at the national and international level to address the crisis and its repercussions.

Chapter 1 describes **national OSH regulatory frameworks** covering laws and regulations, collective agreements where appropriate, and any other relevant instruments on occupational safety and health (C187, Article 4.2(a)) and mechanisms for ensuring compliance with national laws and regulations, including systems of inspection (C187, Article 4.2(c)). It discusses how these policies function to ensure OSH, including the unique role they have played during the pandemic, and the extent to which the current crisis has shaped OSH legislation and monitoring. The crisis has emphasized the need for OSH legislation which can adapt to unforeseen contexts and allow for rapid and appropriate responses, thus enabling the management of newly emerging risks. Compliance with these regulations is also important, and labour inspection systems should also be reinforced to be able to adapt to meet these new challenges.

Chapter 2 discusses **national OSH institutional frameworks**, including the authority or body, or authorities or bodies, responsible for occupational safety and health, designated in accordance with national law and practice (C187, Article 4.2(b)), as well as a national tripartite advisory body, or bodies, addressing occupational safety and health issues (C187, Article 4.3(a)). This competent authority provides leadership, which is crucial during crises as the situation rapidly changes and evolves. A national OSH institutional framework should also provide for the collaboration with relevant insurance or social security schemes covering occupational injuries and diseases (C187, Article 4.3(g)), which in the context of COVID-19 have been essential to keeping workers safe.



Chapter 3 provides an overview of the importance and roles of **occupational health services** in accordance with national law and practice (C187, Article 4.3(d) and the Occupational Health Services Convention, 1985 (No. 161) and its accompanying Recommendation (No. 171) and their role in crisis prevention and response. These bodies have the responsibility to conduct risk assessments, inform workplace policy and action, monitor the work environment, assess workers' health and provide preventive health services. During times of crises, occupational health services are well-positioned to respond to health threats in the workplace, as they are already well-informed about the specific hazards facing workers in their sector and aware of any new risks that might emerge. They have played a particularly key role in the health sector during the COVID-19 crisis, because maintaining the health and safety of workers has been critical to the continuity of services for the public.

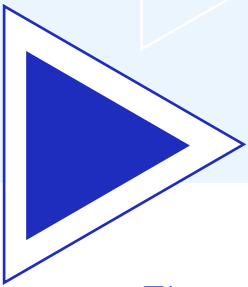
Chapter 4 examines **information, advisory services and training on OSH**. Information and advisory services on occupational safety and health (C187, Article 4.3(b)) are key elements of the national OSH system, providing vital, updated information to workers and employers during routine work and emergency scenarios. In crisis situations such as COVID-19, information evolves rapidly, and making sure this information is passed on to workers in a timely manner is crucial to safety and health. Advocacy and awareness-raising campaigns are important to promote OSH on key topics. In the case of COVID-19, there have been campaigns to raise awareness on topics such as the risk of transmission of the virus among essential workers, and the increases in violence and harassment that have occurred, including domestic violence, as people have been confined to their homes. The provision of occupational safety and health training (C187, Article 4.3(c)) is also important when responding to crises, as workers need to be trained on changing work arrangements and new procedures.

Chapter 5 focuses on **data collection and research on OSH**. Research on occupational safety and health (C187, Article 4.3(e)) and mechanism[s] for the collection and analysis of data on occupational injuries and diseases (C187, Article 4.3(f), and the Protocol of 2002 to the Occupational Safety and Health Convention, 1981) are important elements of an occupational safety and health system. Gathering OSH data and information, as well as putting in place systems of notification, allow governments and workplaces to make informed decisions on OSH policy and to respond – especially during emerging situations with unknown risks. When crises span multiple countries, international cooperation is key to exchanging valuable insights and lessons learned, as well as specific expertise from relevant parties.

Chapter 6 focuses on **strengthening OSH management systems at the enterprise level to prevent and respond to OSH risks**, including arrangements to promote, at the level of the undertaking, cooperation between management, workers and their representatives as an essential element of workplace-related prevention measures (C187, Article 4.2(d)), and support mechanisms for a progressive improvement of occupational safety and health conditions in micro-enterprises, in small and medium-sized enterprises and in the informal economy (C187, Article 4.3 (h)). Cooperation between management and workers is essential to creating a safety culture in which workers are engaged and participate in creating solutions for mitigating risk. Indeed, risk assessments made in consultation with workers are key to identifying areas of potential hazards. During the COVID-19 pandemic, many hazards arose that went beyond the actual risk of infection with the virus. Many workplaces encountered violence and harassment, and also had to cope with ergonomic and chemical concerns. In micro-, small and medium-sized enterprises (MSMEs) and in the informal economy, many workers lacked basic sufficient OSH protection during the COVID-19 pandemic, such as sick leave, and on the job they also lacked access to PPE, hygiene stations and other infection reduction strategies.

The **annexes** to this report provide **tools, resources** and **other guidance** on ways to respond to the pandemic, which have been developed by the ILO, other international organizations, national and regional bodies, and the social partners.

The COVID-19 pandemic: A global challenge for safety and health at work



The pandemic has exposed workers and people in the world of work to the risk of infection with the novel coronavirus. In some countries, up to 20-30 per cent of new COVID-19 infections may be attributed to workplace exposure (ILO and WHO, 2021d), and certain workplace settings – such as healthcare and social care – have been particularly affected. Workplaces in which workers spend time indoors in close proximity to one another, including during work interactions, shared accommodations and transport (WHO, 2020f), have, in some cases, become sources of outbreaks of the virus. This may be attributed to the difficulty of practising physical distancing indoors and poor ventilation.

Occupational Safety and Health Statistics during the COVID-19 pandemic

Up to

20-30% OF COVID CASES

may be attributed to work exposures in some countries

(ILO and WHO, 2021d)

65% OF ENTERPRISES SURVEYED

reported that worker morale has been difficult to sustain while teleworking

(ILOw, 2020)

Closed work environments¹ pose

18.7

GREATER ODDS OF TRANSMISSION

compared to open air environments

(Nishiura et al., 2020)

Globally there are

136 MILLION

workers in health and social work who are at serious risk of acquiring COVID-19 in the workplace

(ILO, 2020h)

7,000 healthcare workers' deaths

globally may be attributed to COVID-19

(Amnesty International, 2020)

In the Americas, COVID-19 has infected over **570,000** healthcare workers and killed 2,500

(PAHO, 2020)

In European countries, **25% OF CASES** have occurred among healthcare workers

(ECDC, 2020)

In African countries, health workers constitute more than **5% OF CASES** with some countries accounting for more than 10%

(WHO AFRO, 2020)

14% OF ALL GLOBAL INFECTIONS

occurred in healthcare workers

(WHO, 2020d)

1 in 5 HEALTHCARE WORKERS GLOBALLY

have reported depression and anxiety symptoms during the pandemic

(Pappa, S., et al., 2020)

1 Work environments that were indoors or had minimal ventilation.

In addition to the risk of acquiring the novel coronavirus, workers in all sectors have faced other hazards during the pandemic that have emerged due to new work practices and procedures adopted to mitigate the spread of the virus. Mitigation strategies have rapidly been adopted, including administrative and engineering controls, working from home arrangements, increased use of PPE and disinfection, etc. These measures might help slow the spread of the virus, but they can create new OSH risks, including chemical, ergonomic and psychosocial hazards.

Healthcare and emergency workers – but also essential workers – have faced many stressful situations at work as a result of the COVID-19 pandemic. Increased workloads, longer working hours and reduced rest periods have become the norm during the crisis. The risk of violence and harassment at work has also risen, with consequences for both physical and mental well-being. Many healthcare workers have had to confront difficult decisions resulting in moral fatigue, such as choosing how to allocate limited resources when faced with many serious cases in intensive care.

Teleworking has been widely implemented in many settings – and while this is often essential to limit the spread of the virus and maintain jobs and business continuity, it has led to certain OSH concerns including ergonomic and psychosocial risks. It might provide workers with increased flexibility but many of them also struggle with “presenteeism” (the blurring of lines between work and private life), musculoskeletal disorders caused by stationary work in front of a computer, the responsibility of caring for children or parents while working, and the social isolation that may come from not being in the office – which affects professional development (ILO, 2021b).

The pandemic has also witnessed an increase in the number of cases of domestic violence, including for workers confined to the home due to lockdowns, with up to five times more calls globally to domestic violence helplines (UN Women, 2020a).

► The crucial role of international labour standards in responding to the COVID-19 crisis

“International labour standards provide a tried-and-trusted foundation for policy responses that focus on a recovery that is sustainable and equitable”

Guy Ryder, ILO's Director-General

International labour standards (ILS) contain specific guidance for safeguarding decent work in the context of crisis response, including guidance that can be of relevance to the evolving COVID-19 pandemic or other public health emergencies. Firstly, promoting, respecting and implementing key provisions of ILS relating to occupational safety and health, working arrangements, protection of specific categories of workers, non-discrimination, social security or employment protection ensures that workers, employers and governments can maintain decent work while adjusting to the socio-economic consequences of the COVID-19 pandemic. Secondly, a wide range of ILO labour standards on employment, social protection, wage protection, promotion of micro-, small and medium- sized enterprises (MSMEs) or workplace cooperation contain specific guidance on policy measures that can be taken when tackling the crisis and promoting recovery (ILO, 2020x).

One of the most recent ILS, the Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205), outlines a strategic approach to crisis response. Such a response should promote safe and decent working conditions and be based on social dialogue. Recommendation No. 205 also advocates building resilience to prevent, mitigate and prepare for crises and their adverse effects, through the identification, evaluation and management of risks (including emergency response preparedness), effective social dialogue and business continuity management.

In the context of COVID-19, there are a number of relevant provisions in ILS that protect workers from the risk of contagion. The protection of workers against sickness, disease and injury related to their work environment, as embodied in the Preamble to the Constitution of the ILO, has been a central issue for the ILO since 1919. Currently, there are more than 40 instruments specifically dealing with OSH, providing for minimum standards aimed at the control and management of work-related risks and the protection of workers across a wide range of occupations and situations in which work takes place. In addition, nearly half of ILO instruments deal directly or indirectly with OSH issues, and their guidance extends to the specific situation of certain categories of workers, such as nursing personnel, domestic workers, migrant workers, seafarers or fishers, who are particularly vulnerable in the current context. In addition, the current crisis has highlighted the need for discussion on future instruments to address biological hazards.

Core standards on OSH

- ▶ The [Occupational Safety and Health Convention, 1981 \(No. 155\)](#), and its accompanying [Recommendation \(No. 164\)](#), call for the adoption of a coherent national OSH policy, as well as action to be taken by governments and within enterprises to promote safety and health and to improve working conditions. The [Protocol of 2002 to the Occupational Safety and Health Convention, 1981 \(No. 155\)](#) complements the Convention, incorporating further requirements for the recording and notification of occupational accidents and diseases, as well as for the publication of related annual statistics.
- ▶ The [Occupational Health Services Convention, 1985 \(No. 161\)](#), and its accompanying [Recommendation \(No. 171\)](#), provide for the establishment of occupational health services, which are entrusted with essentially preventive functions and are responsible for advising the employer, the workers and their representatives in the enterprise on ways to maintain a safe and healthy working environment.
- ▶ The [Promotional Framework for Occupational Safety and Health Convention, 2006 \(No. 187\)](#), and its accompanying [Recommendation \(No. 197\)](#), provide for the consistent and systematic treatment of OSH issues and the recognition of existing Conventions on OSH. The Convention is aimed at establishing and implementing coherent national OSH policies and promoting a national preventative safety and health culture, through the establishment of a national OSH system.

At the ILO Centenary, in June 2019, the Conference adopted a resolution requesting the Governing Body “to consider, as soon as possible, proposals for including safe and healthy working conditions in the ILO’s framework of fundamental principles and rights at work” (ILO Governing Body, 2020). The COVID-19 pandemic, and its profound impacts on the world of work, has exemplified the importance of occupational safety and health.

▶ Strengthening national OSH systems

Crises such as COVID-19, which occur without warning, test the capability and resilience of public health and OSH systems. In the present crisis, workers and employers were not only suddenly faced with the urgent threat of the virus, but confronted with many other risks and issues that required an effective response. It is therefore of the utmost importance to build up resilient national OSH systems that are able to absorb unforeseen threats and cope with new risks, while continuing to protect workers from the many existing OSH hazards and ensuring the continuity of economic activity. While the broader public health systems have borne the ultimate responsibility for preventing the spread of the COVID-19 virus or other public health crises, the action of the actors in the world of work, and particularly in the field of OSH, has been crucial in the emergency response. Indeed, the world of work has been heavily affected by the crisis and OSH actors have been uniquely positioned to respond to the threats that specific sectors face. It is therefore crucial for the wider national emergency response to integrate the OSH response within its national emergency preparedness and response plans in the face of such crises.

Investment in OSH, both programmatically and financially, contributes to a strong OSH system at the national level – a system that is prepared to respond to crises such as COVID-19, major industrial accidents, natural disasters and other unforeseen challenges.

Acknowledging that robust national OSH systems are key to safeguarding lives and livelihoods, it is vital to ensure that they are well-resourced to better absorb the impacts of any challenges head on, and to bolster public and private institutions. Investing in these systems is therefore not only necessary to guarantee that they can respond to crises but, more importantly, that they can prepare for and mitigate such crises.

► Reinforcing social dialogue

The COVID-19 pandemic has demonstrated the importance of social dialogue, not only in responding to crises but also in preventing and promoting good OSH conditions. Effective social dialogue between governments, employers' and workers' organizations is in fact essential to promote social justice, inclusive economic growth, improved working conditions and sustainable enterprises.²

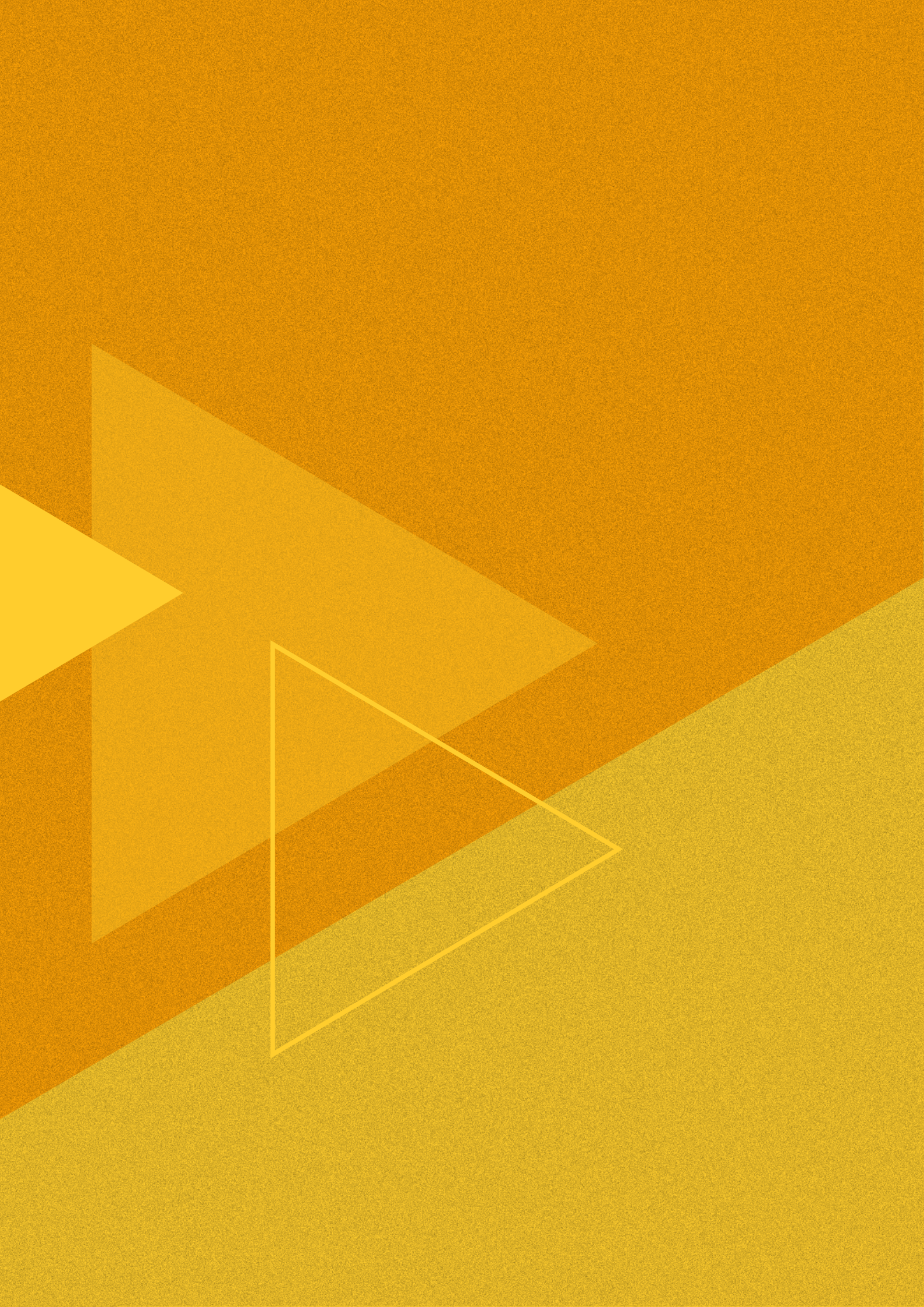
A climate of trust, built through social dialogue and tripartism, is essential for the effective implementation of measures to address emergencies such as COVID-19, which require quick but effective action.

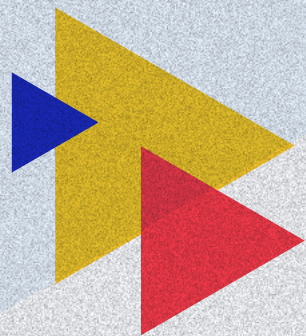
Strengthened respect for, and reliance upon, mechanisms for social dialogue create a strong foundation for building resilience and encouraging commitment from employers and workers to the necessary policy measures. This is particularly key during times of heightened social tension.

The following chapters describe the key elements of a national OSH system, grouped into six main areas (for the purpose of this report): national OSH policy and regulatory frameworks; national OSH institutional frameworks; occupational health services; information, advisory services and training on OSH; data collection and research on OSH; and mechanisms for strengthening OSH management systems at the enterprise level to prevent and respond to OSH risks.

Having a sound and resilient OSH system in place can build capacity to face future emergencies and the challenges they bring in their wake, and protect workers' safety and health while supporting the survival and business continuity of enterprises.

² See ILO brief on Social dialogue on occupational safety and health in the COVID-19 context. Ensuring a safe return to work - Practical Examples.





1

National OSH policy and regulatory frameworks

A sound national OSH policy and regulatory framework is essential for the protection and promotion of physical and mental health at work. The COVID-19 pandemic has affected the safety and health of workers worldwide. The risk of workplace transmission and other associated risks, brought about by the prevention and protection measures taken, have exacerbated existing and emerging OSH risks – including psychosocial risks, poor ergonomics, exposure to chemicals and workplace accidents. This situation calls for strong national OSH policies and regulatory frameworks to ensure that working environments are safe and healthy, and that there is a clear and well-known established set of rights and duties.

Health crises, natural disasters and other unforeseen emergencies can strike anywhere and at any time without notice. Comprehensive policies and regulation, complemented by consistent and timely guidance, can help roll out an effective and efficient preparedness and response strategy, protecting the world of work from important consequences. The ILO Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205) advises that in recovering from crisis situations, governments, in consultation with the social partners should review, establish or reinforce labour legislation, if necessary, including provisions on labour protection and OSH.

When faced with an unforeseen crisis, countries may also develop new OSH policies and regulations or amend existing ones to counter the threat to workers' health and safety more effectively. During the COVID-19 pandemic, at least 188 countries and territories around the world have developed or amended their OSH policies, regulations and/or guidelines, defining the actions and measures to be adopted by employers to prevent the spread of COVID-19 at the workplace, often through use of social dialogue.³

► 1.1 Strengthening effective national OSH policies and regulatory frameworks to better respond to crises and emergencies

Strong national OSH policies and regulatory frameworks contribute to resilient health and labour systems within countries, preparing them to better respond to crises by increasing their chance of business recovery or continuity and protecting workers' safety and health.

Both the Occupational Safety and Health Convention, 1981 (No. 155) and the Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187) call for the adoption and implementation of a coherent national OSH policy aimed at preventing occupational accidents and diseases, by minimizing, so far as is reasonably practicable, the causes of hazards inherent in the working environment (C 155, Art. 4(2)).

To adequately implement an OSH policy, a comprehensive and functional regulatory framework is needed, covering all workers and addressing all OSH-related risks to which workers may be exposed, irrespective of what type of job they do, the industry in which they work, or any other circumstances.

An effective OSH regulatory framework can be built on the basis of a single overarching OSH Act covering all workers and all economic activities to be implemented at a high level (i.e., applicable to all workers and branches of economic activity). It should establish the context for the remaining regulations and define the employers' general obligations and the workers' rights and responsibilities. In times of crisis, such as the COVID-19 pandemic, these basic rights and duties should remain in effect, in addition to any extraordinary measures taken. This legal framework is particularly important to ensure that workers enjoy their basic OSH rights in the event of increased risks and hazards, and a potential shift in resources to deal with the crisis at hand. The regulatory framework must also include mechanisms for ensuring compliance, including a sound labour inspection system.

³ The ILO database - COVID-19 and the world of work. Country policy responses - collects policies, regulations and other measures implemented by governments, employers' and workers' organizations in 188 countries and territories to combat the spread of the disease, while mitigating its pernicious effect on the economy and labour market. The database is available at: <https://www.ilo.org/global/topics/coronavirus/regional-country/country-responses/lang--en/index.htm#UN>



Core standards on OSH

The Occupational Safety and Health Convention, 1981 (No. 155), and its accompanying Recommendation (No. 164), define the basic OSH rights and responsibilities of workers and employers that should be included in national legislation. All of these are also essential in the prevention and mitigation of the negative safety and health effects of pandemics such as COVID-19 in the world of work.

EMPLOYERS	WORKERS AND THEIR REPRESENTATIVES
<p>Responsibilities</p> <ul style="list-style-type: none"> ▶ Ensure, so far as is reasonably practicable, that the workplaces, machinery, equipment and processes under their control are safe and without risk to health (C. 155, Art. 16(1)) ▶ Ensure, so far as is reasonably practicable, that the chemical, physical and biological substances and agents under their control are without risk to health when the appropriate measures of protection are taken (C. 155, Art. 16(2)) ▶ Provide, where necessary, adequate protective clothing and protective equipment to prevent, so far as is reasonably practicable, risk of accidents or of adverse effects on health (C. 155, Art. 16(3)); such personal protective clothing and equipment should be provided, without any cost to the worker (R. 164, Para. 10(e)) ▶ Provide, where necessary, for measures to deal with emergencies and accidents, including adequate first-aid arrangements (C. 155, Art. 18) ▶ Ensure that workers and their representatives are consulted, informed, and trained on OSH associated with their work (C. 155, Art. 19(c-d)) 	<p>Rights</p> <ul style="list-style-type: none"> ▶ Receive adequate information and training on OSH (C. 155, Art. 19(c-d)) ▶ Enquire into – and be consulted by the employer on – all aspects of OSH associated with their work (C. 155, Art. 19(e)) ▶ Remove themselves from a work situation which they have reasonable justification to believe presents an imminent and serious danger to their life or health, without undue consequences (C. 155, Art.13) <p>Responsibilities</p> <ul style="list-style-type: none"> ▶ Co-operate with the employer in the field of OSH (C.155, Art. 19(a-b)) ▶ Take reasonable care for their own safety and that of other persons who may be affected by their acts or omissions at work (R. 164, Para.16 (a)) ▶ Comply with instructions given for their own safety and health and those of others (R. 164, Para.16 (b)) ▶ Use safety devices and protective equipment correctly and not render them inoperable (R. 164, Para.16(c)) ▶ Report forthwith to their immediate supervisor any situation, which they have reason to believe could present a hazard and which they cannot themselves correct (R. 164, Para.16 (d)) ▶ Report any accident or injury to health, which arises in the course of or in connection with work (R. 164, Para.16 (e))

To complement the OSH Act, the regulatory framework might also include:

- ▶ **laws and regulations**, covering specific sectors or hazards and defining the mandatory minimum standards and objectives for hazard control, safe levels, training, etc.;
- ▶ **codes of practice and technical standards**, complementing the law by providing more specific guidance to employers (and workers) on how to comply with the law;
- ▶ **collective bargaining agreements**, resulting from negotiations between employers (and their organizations) and workers (and their organizations);

During times of crisis, new regulations, codes of practice and collective agreements may need to be developed and adopted, as appropriate.

Regulations and guidelines should also, when applicable, take a sectoral approach, taking into account the different levels and types of risks workers face in various sectors (and the specificities for workers in micro-,small, and medium-sized enterprises), as well as the appropriate policy responses and OSH measures.

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Recognition of COVID-19 as an occupational disease

The consideration of COVID-19 as an occupational injury⁴ is contingent upon each country's national legislation. Determining whether COVID-19 as an occupational injury – and the way to prove it – depends upon the national OSH legal framework.

As a general guidance, always to be adapted to national regulations, the sequence is as follows:

- ▶ In broad terms, for COVID-19 to be considered an occupational disease:
 - A. the worker should have been exposed to a specific risk; and
 - B. this risk should be deemed to be the determining cause of the illness.
- ▶ If the illness is listed in the national list of occupational diseases, the occupational origin shall be presumed to exist.
- ▶ If the illness is not listed in the national list of occupational illnesses, and the national legislation allows for diseases other than the ones included in the list to be declared as an occupational disease (mixed system), the following must be proven:
 - › the existence of the occupational risk; and
 - › the causal link between the occupational risk and illness. Proving the simple possibility of a causal link is not enough.

A probability approaching certainty is needed.

4 Although normally the question is whether infection from COVID-10 may be considered as an occupational disease, there are countries where it might be considered as a "work accident" (e.g., in Spain and Italy). It would therefore be acceptable to talk a about "work-related injury", as it includes both accidents and diseases arising in the course of, or in connection with, work.

Subject to the provisions of each national legislation, the following should be considered:

- ▶ Infection with COVID-19 should be regarded as an occupational disease when it is established that there is a direct link between exposure to a hazard arising from work carried out at the request of the employer and the disease contracted by the worker.
- ▶ Infection with COVID-19 in persons who have had occupational contact with sources of the virus with a particular risk of contamination should be considered an occupational disease in the context of the ILO list of occupational diseases.⁵
- ▶ According to the ILO Employment Injury Benefits Convention, 1964 (No. 121) [Schedule I amended in 1980], infectious diseases can be regarded as occupational when contracted in an occupation where there is a particular risk of contamination, such as in health or laboratory work or other work carrying a particular risk of contamination.
- ▶ Currently, many countries allow for the recognition of COVID-19 as an occupational accident or disease for healthcare workers or emergency personnel;⁶ in some countries, this also applies to workers in essential services.⁷ Some other countries have chosen to expand such recognition, without limiting it to specific sectors or occupations.⁸

The ILO has compiled a database of member States that qualify COVID-19 as an occupational disease or accident (ILO, 2020t).

5 According to the List of Occupational Diseases Recommendation, 2002 (No. 194) (updated 2010), diseases caused by biological agents at work not directly mentioned in the list (which is the case for COVID-19) can be recognized as occupational where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to the biological agents arising from work activities and the disease(s) contracted by the worker. Recommendation 194 also states that general respiratory diseases not included in the list can be recognized as occupational diseases where a direct link can be established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to risk factors arising from work activities and the disease(s) contracted by the worker.

6 In some cases, healthcare workers or emergency personnel who contracted COVID-19 in the workplace were already covered under existing legislation – for example, Turkey (see Government of Turkey, [Social Insurance and General Health Insurance Act No. 5510 of 31 May 2006](#)); and Belgium (see FEDRIS: Maladies professionnelles, FAQ COVID-19, available at: <https://www.fedris.be/fr/FAQ-Covid-19>); in other member States, new regulations have been adopted to include COVID-19 – for example Colombia (see Ministerio del Trabajo, Decreto 676 de 2020, 19 May 2020).

7 For example, Argentina (see Government of Argentina, Decree No. 367/2020)

8 For example, Italy recognizes COVID-19 as an occupational injury in the case all workers (see Decreto legge of 17 March 2020); Spain in the case of any person affected in the course of work, in respect to temporary incapacity to work (see Real Decreto-ley 6/2020, de 10 de marzo, por el que se adoptan determinadas medidas urgentes en el ámbito económico y para la protección de la salud pública); and Denmark in the case of any worker who contracts COVID-19 in such a way that constitutes a probable likelihood of exposure to the virus in connection with work (see [Ius Laboris](#), 14 May 2020)



▶ 1.2 Promoting a management system approach to OSH

The policy and regulatory framework should promote the implementation of an **OSH preventive culture**⁹ and the adoption of a **management system approach to OSH**.¹⁰

Building a sound OSH management system in the workplace is also essential for a timely and effective response during a public health crisis, such as the COVID-19 pandemic.

To implement such a system, policies and regulations should require employers to ensure the following key elements (among others):

- ▶ hazard identification and risk assessment;
- ▶ implementation of prevention and control measures;
- ▶ training and information for workers;
- ▶ surveillance of workers' health;
- ▶ emergency prevention, preparedness and response;
- ▶ recording, documentation and notification of OSH information;
- ▶ investigation of occupational accidents and diseases,
- ▶ consultation and cooperation with workers' representatives.

All these elements are important for the protection of workers' health and safety in normal times, but they become even more critical during emergencies. This theme will be further developed in the following chapters. In addition, governments need to provide specific guidance for employers and workers to address and manage the new hazards and risks that have emerged during the crisis.

9 The Promotional Framework of Occupational Safety and Health Convention, 2006 (No. 187) defines a "national preventative safety and health culture" as a culture in which the right to a safe and healthy working environment is respected at all levels, where government, employers and workers actively participate in securing a safe and healthy working environment through a system of defined rights, responsibilities and duties, and where the principle of prevention is accorded the highest priority (Art. 1).

10 According to Convention No. 187, in formulating its national policy, each Member, in light of national conditions and practice and in consultation with the most representative organizations of employers and workers, shall promote basic principles such as assessing occupational risks or hazards; combating occupational risks or hazards at source; and developing a national preventative safety and health culture that includes information, consultation and training (Art. 3(3)).

► 1.3 New legal requirements to prevent the spread of the virus in the workplace

The COVID-19 crisis emphasizes the need for national OSH legislation to adapt proactively to new contexts and to allow for **rapid and appropriate emergency responses**.

During the pandemic, enterprises have been asked to identify potential sources of exposure to the novel coronavirus, taking into account all work areas and tasks performed by workers. In many countries, regulations, technical standards and/or collective agreements have been adopted to address the specific conditions of different sectors, with detailed **procedures and protocols to prevent and deal with cases of COVID-19 in the workplace**.

Generally, a number of requirements have been introduced aiming at assessing and managing the risk of contagion at work. These measures should follow the hierarchy of controls. As a first order of action, many governments have hence called for the temporary closure of workplaces to fully eliminate the risk of contagion at work.

Almost all countries have issued guidance or requirements on **physical distancing in the workplace**, including strategies such as physical barriers, staggered shifts and a certain percentage of workers who can be on the premises at any one time.

Many countries have also introduced legal requirements on how employers must **respond to positive cases of COVID-19 in the workplace**.

Personal protective equipment (PPE) such as face masks have also been widely adopted and mandated in workplaces by governments around the world.



Implementation of workplace guidelines in the Republic of Korea

Data issued early on in the COVID-19 pandemic in the Republic of Korea suggested that approximately 15.7 per cent of COVID-19 cases occurred in relation to work. The government responded to this unprecedented public health crisis by developing workplace guidelines including stipulations on physical distancing, flexible scheduling, early testing of workers and disinfection of workplaces. These comprehensive guidelines drew from lessons learned during the 2015 MERS outbreak and included elements of isolation and quarantine, social distancing, community containment, hygiene, sick leave and flexible working arrangements. The implementation of these guidelines resulted in very few reported infections in workplaces – even in sectors such as manufacturing (Eun-A Kim, 2020).

Noting the risk of transmission that can occur during commuting, many countries have issued guidance or measures to allow **safe and staggered commuting to and from the workplace**.



- ▶ Ethiopia introduced free government buses to help prevent crowding on public transport during the daily commute of public servants (Ethiopian Investment Commission, 2020).
- ▶ Ghana introduced extra buses for healthcare workers in several key cities (Ministry of Health, Ghana).
- ▶ Armenia required enterprises to ensure that workers were able to safely commute to and from the workplace (PWC, 2020).
- ▶ The United Arab Emirates required employers not to exceed 25 per cent of vehicle seating capacity when transporting workers to and from the workplace (ILO, 2020).
- ▶ Hotels, public social facilities, guesthouses and dormitories belonging to public, private, and civil society organizations in Turkey were offered as temporary accommodation for healthcare workers who could not return to their homes after strenuous shifts in the hospital (Republic of Turkey, 2020).

In many countries, enterprises have been required to implement **working from home arrangements** – whenever possible – as a preventive measure to limit physical contact among workers and thus the spread of the novel coronavirus.



- ▶ Cyprus (Government of Cyprus, 2020), Singapore (Ministry of Manpower, Singapore, 2020) and the Dominican Republic (Ministry of Labour, Dominican Republic, 2020) have adopted new regulations on teleworking or leave with a view of protecting vulnerable populations. Other countries have amended legislation concerning teleworking arrangements. In Italy, the Prime Minister amended legislation to authorize teleworking without an individual agreement between employers and workers, while retaining other principles from the existing law (Eurofound, 2020).

National public health authorities, in line with the WHO, strongly urge those who have tested positive for COVID-19 – or who are in close contact with a positive case – to quarantine from work. If governments want workers to follow this guidance consistently, they must ensure that workers who go into quarantine are protected from unfair dismissal and are provided with sick pay and benefits.



- ▶ In Canada, all workers who are recommended or directed by the chief medical officer to quarantine are entitled to 14 days of protected unpaid leave (Government of Alberta, 2020).
- ▶ In Austria, Finland, Germany and Sweden, workers who were quarantined due to contact tracing for COVID-19 were entitled to the same benefits as sick workers, including, in the cases of Finland and Sweden, paid sick leave (OECD, 2020).

G20 OSH Experts Network Survey: Key Measures Adopted to Protect OSH of Workers during COVID-19

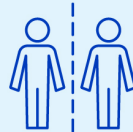
The G20 OSH Experts Network¹¹ in collaboration with the ILO, conducted a survey in 12 countries, including Argentina, Australia, China, France, Germany, Indonesia, Italy, Japan, Russia, Spain, Turkey and the United Kingdom (G20 OSH Experts Network, 2021). The survey examined how countries responded to the pandemic and the types of measures they took to slow the spread of the virus at work.

ENGINEERING CONTROLS



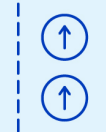
73%

Ventilation/
air filters



64%

Physical
barriers



64%

Using marker tape on the floor,
one-way systems, etc.

ORGANIZATIONAL/ ADMINISTRATIVE MEASURES



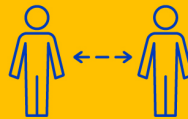
82%

Teleworking



80%

Holding
meetings virtually



73%

Physical
distancing



64%

Involving workers in
reviewing and updating
risk assessments



64%

Measures to control other
risks related to the COVID-19
crisis and the changes put in
place to deal with it



64%

Training of workers



63%

Working time
arrangements/shifts to
reduce number of workers
onsite at once



73%

Discontinuing
nonessential travel



64%

Keeping workers
updated



64%

Making sure that employees
take regular breaks and
set working hours to ensure
not to work long hours

OTHER MEASURES



82%

Use of personal
protective equipment



73%

Monitoring and
supervision



73%

Cleaning surfaces
and ensuring hygiene



64%

Measures/procedures
to deal with workers
presenting symptoms
or tested positive

¹¹ The G20 OSH experts network was established in 2015 with the mission of facilitating the exchange of knowledge and expertise among G20 countries, addressing global policy and technical challenges as well as finding solutions based on collaboration and providing access to the information and expertise of the network.

▶ 1.4 Adopting provisions to address associated OSH risks

Risk assessment and management should not only focus on the risk of exposure to the virus, but also on identifying any hazards and minimizing any risks that might arise due to the OSH measures and new work processes and arrangements adopted to prevent contagion, including working from home. These may include ergonomic, chemical, or psychosocial risks, which may affect workers in different ways, depending on their particular occupation, their sector of work, and their individual circumstances.

Specific regulations or guidance should be developed to prevent these risks and protect both the physical and mental health of workers.

Not only healthcare and emergency workers but also those involved in the production and sale of essential goods, in delivery and transportation, or in ensuring the security and safety of the population, may be exposed to higher psychosocial risks as a result of the COVID-19 pandemic. Increased workloads, longer working hours and reduced rest periods are a common concern for workers in these sectors. Some governments have responded to these needs by developing guidelines on ways to integrate the prevention of psychosocial risks and the protection of mental health into other OSH measures related to the pandemic.



- ▶ The Government of Malaysia, for example, has emphasized the need to conduct mental health assessments for workers alongside proper mitigation strategies within their management guidelines for workplaces (Ministry of Health, Malaysia, 2020).
- ▶ The Government of Canada has produced a resource hub for mental health and wellness during the COVID-19 pandemic, with specific information on workplace mental health (Mental Health Commission of Canada, 2020).
- ▶ The United States Centers for Disease Control and Prevention (CDC) has also produced resources on coping with stress for workers during the COVID-19 pandemic (CDC, 2020a).
- ▶ In Colombia, the Ministry of Labour has created a framework for minimum measures to be taken on evaluation and intervention for psychosocial risk factors and other mental health concerns during the COVID-19 pandemic (Ministry of Labour, Colombia, 2020).

Teleworking, where applicable, may also expose workers to specific psychosocial risks, such as social isolation, communication difficulties, an excess volume of work, longer working hours and a blurring of lines between work and family life (ILO, 2020y).



- ▶ The Government of Chile has issued legislation on teleworking in response to the pandemic, which includes a reference to workers' rights, stress and mental health, working time arrangements and the right to disconnect (ILO, 2020b).

Ensuring safe and healthy working conditions in home settings can be challenging for employers, as their control over the home working environment may be limited. It is therefore even more crucial now to make sure that workers are involved and cooperate in the implementation of appropriate OSH measures. Innovative strategies and open dialogue between employers and workers are paramount, and employers can support workers remotely by providing them with the right tools and equipment to work from home. It is also important that workers and employers communicate regularly, and that workers are provided with adequate and up-to-date information and guidance materials on OSH, including on ergonomics, psychosocial factors and other OSH-related risks.

In addition, cases of physical and psychological violence and harassment tend to rise during an infectious disease outbreak. This is compounded by an increase in social stigma and discrimination against those infected, as well as against those perceived to have come into contact with the virus.

In many countries, policies and regulations have been implemented to prevent discrimination during the pandemic.



- ▶ In Barbados it is forbidden to publicly identify quarantined or isolated people (Jones, 2020).
- ▶ In Botswana, a tripartite agreement was announced to prevent discrimination, victimization and harassment of suspected cases in the workplace (ILO, 2020p).
- ▶ Healthcare workers, such as doctors, nurses and other emergency personnel, have been particularly at risk of discrimination, violence and harassment, as many perceive them to be at high risk of the virus or to blame for economic shutdowns and other measures. In response to reports of attacks against healthcare workers during the pandemic, a number of countries have introduced new laws and regulations to specifically deter such acts.
- ▶ India has introduced a new legal ordinance making physical violence against healthcare and frontline workers an offense punishable by up to seven years' imprisonment (The Times of India, 2020).
- ▶ Algeria amended its penal code in July, providing protection for healthcare workers from verbal and physical attacks, with penalties of five to ten years imprisonment for offenders (Library of Congress, 2020).

When distancing and confinement measures are put in place and people are encouraged to stay at home – and, when possible, to work from home – the risk of domestic violence is also likely to increase. ILO's Violence and Harassment Convention, 2019 (No. 190) calls on member States to recognize violence and harassment, including domestic violence, and to mitigate their impact in the world of work. It also provides for the elimination of discrimination at work.

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▶ 1.5 Mechanisms for ensuring compliance with national laws and regulations, including systems of inspection

“Mechanisms for ensuring compliance” imply all the efforts, activities, initiatives or schemes undertaken by any of the stakeholders (public agencies, social partners and others) to promote, monitor and enforce compliance with relevant OSH laws and regulations at the workplace.

A strong **labour inspection system** in place is a prerequisite for giving effect to OSH regulations, identifying cases of non-compliance, helping to rectify them, and preventing new cases.

Labour inspection functions

Article 3 of the Labour Inspection Convention, 1947 (No. 81) defines the main functions of labour inspectors:

- ▶ to secure the enforcement of the legal provisions relating to conditions of work and the protection of workers while engaged in their work, such as provisions relating to hours, wages, safety, health and welfare, the employment of children and young people and other connected matters, in so far as such provisions are enforceable by labour inspectors;
- ▶ to supply technical information and advice to employers and workers concerning the most effective means of complying with the legal provisions;
- ▶ to bring up to the competent authority any defect or abuse not specifically covered by existing legal provisions.

However, there are other mechanisms that can complement labour inspection activities and contribute strongly to compliance with OSH standards. These include advisory services, codes of conduct, contractual requirements, awareness raising and employer incentives (ILO Governing Body, 2014).

The role of labour inspection during the COVID-19 crisis

During the COVID-19 pandemic, labour inspectors have been requested to intensify their efforts to promote compliance with OSH regulations, including compliance with any new measures adopted to prevent the spread of the virus in workplaces. It is important that labour inspectorates have a strategy to deal with such emergencies so that they do not neglect the enforcement of other regulations and ensure a continued response to other persistent OSH risks.

In many countries, labour inspectors are considered to be essential public workers and, as such, are subject to government decisions taken in a special period that is tantamount to a state of emergency – as is the case with COVID-19. In this situation, the inspectorate is called upon to support the government's overall response to COVID-19, and more specifically, to implement plans for the prevention and mitigation of the disease at the workplace – including emergency preparedness – in the context of business continuity plans and according to the results of risk assessment.

In those countries where labour inspectors are not considered essential public workers, inspectorates face a dilemma: either to close down their services, like other non-priority public services, or to continue to work and respond to calls for help and assistance from workers and employers, despite the very high risks of contagion they may face. In most countries, labour inspectors have continued providing services, but using a primarily electronic type of response (email and phone). Physical inspections only take place at workplaces requiring inspection of COVID-19 measures, or where there is an OSH emergency.



- In Australia, teleconference meetings were held to discuss the impact of COVID-19 on various jurisdictions and to share information to encourage consistent approaches for operational matters. Australia also reported that inspectors at high risk were accommodated by moving them to office-based work and minimizing their field activities. Field inspections were also generally minimized and virtual meetings were utilized for presentations and advisory visits when feasible. Field visits were only conducted when a non-field response was not appropriate (G20 OSH Experts Network, 2021).

Labour inspection strategies should include measures to protect labour inspectors from the risk of contagion as well as from other hazards in the course of their duties (for example, the risk of violence and harassment that may increase during emergencies). During the COVID-19 pandemic, labour inspection has also played an important role in ensuring that the risks and impacts of COVID-19 in the workplace are addressed in a way that covers all workers, including contract workers and day labourers.



- Faced with the unprecedented risk that COVID-19 poses to workers, the province of Ontario in Canada has moved to employ the largest number of labour inspectors in its history. These labour inspectors have been given the power to inspect any workplace to ensure COVID-19 protections are in place (Government of Ontario Newsroom, 2020).
- In Singapore, the entire inspection personnel have been mobilized to inspect workplaces as well as dormitories where workers are housed, with a focus on OSH issues related to COVID-19. In addition to this, more than 100 officers have been assigned to check on companies who failed to implement flexible work arrangements, a five-fold increase from previous efforts.
- Mexico has expanded labour inspections during the pandemic to ensure that work being performed onsite in enterprises is deemed essential; to verify compliance with COVID-19 prevention and control requirements; and to monitor compliance with other legal provisions concerning the functioning of workplaces during the pandemic (L&E Global, 2020b).
- In Myanmar, workplaces were ordered to close and could only resume operations if a labour inspection team ensured that they were in compliance with COVID-19 control and prevention guidelines issued by the Ministry of Health and Sports (Hamada and Matsumoto, 2020).

Labour inspectors have also been called upon to ensure compliance in certain high-risk settings for the virus, such as businesses providing essential supplies.



- In Uruguay, supermarkets were inspected to supervise the implementation of the COVID-19 health emergency protocol.¹²

Inspectors can also serve in an advisory capacity to workplaces, providing guidance on how they may improve their prevention strategies.



- In March 2020, the Spanish Labour Inspection department created a specific Management Unit to deal with the impact of COVID-19 on the world of work. This unit aims to strengthen preventive actions, protecting workers' individual and collective rights that may be ignored or limited in times of a pandemic; this is in addition to coordinating and unifying criteria in the inspection reports based on temporary employment regulation proceedings. It also issued an operational criterion on measures and actions taken by the Labour and Social Security Inspectorate regarding situations arising from the new Coronavirus (SARS-CoV-2) (Ministry of Labour and Social Welfare, Spain, 2020).

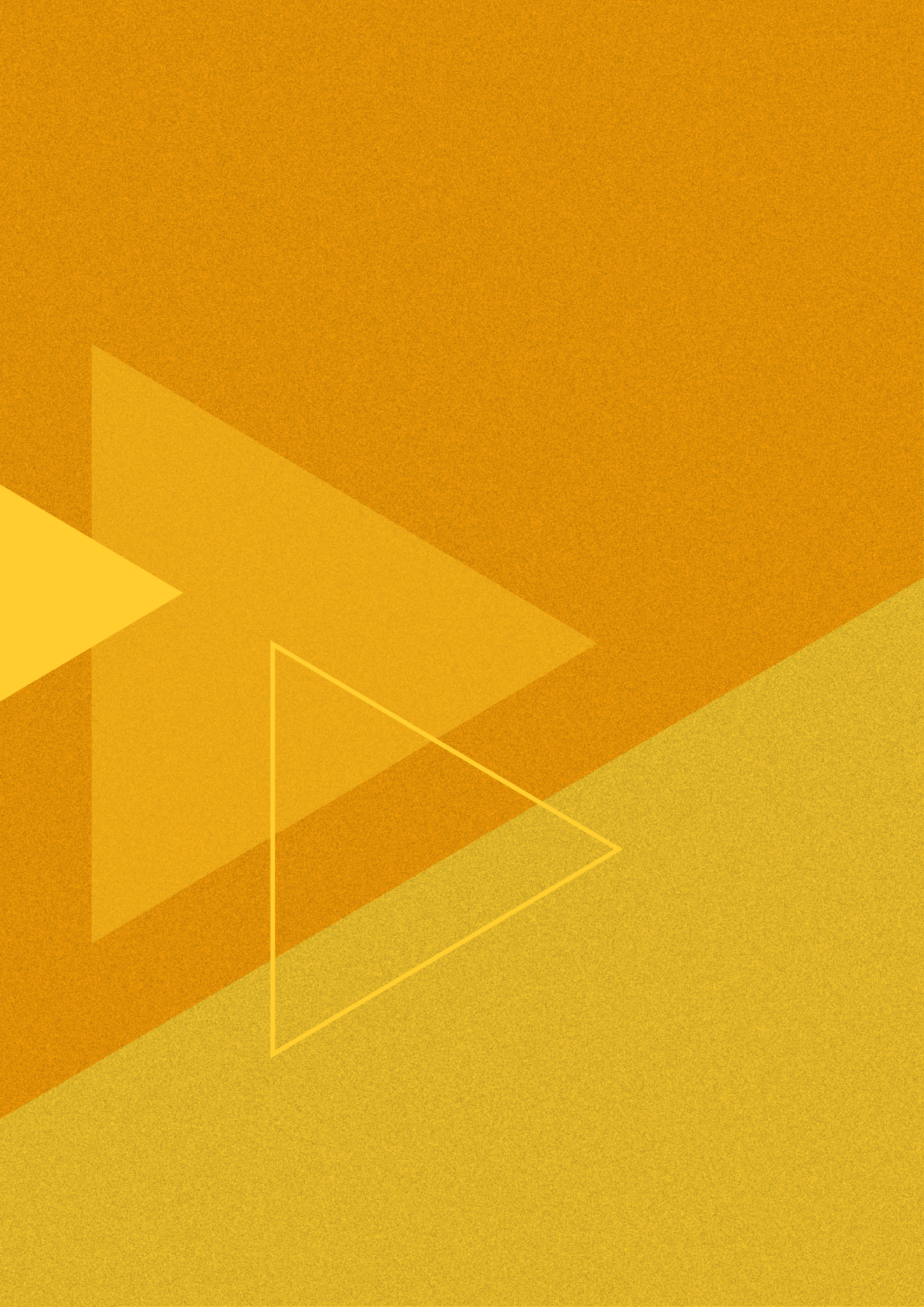
Incentives for promoting compliance among employers

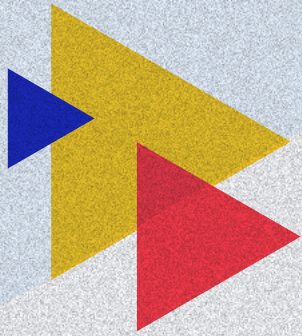
Faced with a range of new mandatory and recommended measures to reduce the risk of COVID-19 transmission, as well as to address other OSH risks that have emerged due to changes in the world of work, employers have had to invest resources in OSH while concurrently feeling the economic effects of the pandemic on revenue in many sectors. Economic incentives have been a strategy for motivating employers to invest in prevention work in OSH. These have come in a range of forms including tax incentives, insurance-related incentives, matching funds and non-financial incentives, such as recognition and awards (EU-OSHA, 2021).



- In the Philippines, the government has created a “COVID-19 Response Award”, which granted to employers who successfully stop the spread of the virus in their workplaces through policies and programmes that include collaboration between employers and workers in their implementation (PEZA, 2020). The criteria for this award were drawn from the Prevention and Mitigation of COVID-19 at Work Action Checklist (ILO, 2020u), developed by the ILO.
- In the United States, a tax credit for employers of up to US\$10,000 per worker was created to incentivize small businesses to pay sick leave to workers who contracted COVID-19 (IRS, 2021).

¹² Source: Information provided by the National Labour Inspectorate of Uruguay.





2

National OSH institutional frameworks

Faced with an unprecedented public health emergency, governments have had to take rapid measures to curb the spread of the virus, adopting new regulations, managing information on the pandemic and protection measures, and organizing for urgent action through social dialogue with employers and workers. This crisis continues to demonstrate the need for a strong national OSH framework with a competent OSH authority actively involved in the discussion. This national framework should include mechanisms to ensure social dialogue on OSH and coordination with other ministries and institutions – including those dealing with employment injuries, social security and public health – at all levels (national, regional and local). The COVID-19 response has clearly shown the need for intersectoral collaboration between the various government ministries and almost all sectors.

▶ 2.1 An authority or body responsible for OSH

Leadership on OSH has been crucial throughout the COVID-19 pandemic. OSH regulations and guidelines have been rapidly introduced and updated on the basis of the latest findings.

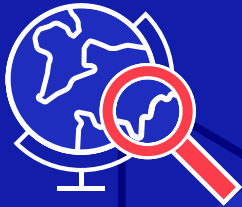
Having a competent OSH authority at the national level, which provides trusted leadership during times of crisis, is key to enabling a more coordinated and rapid response. In most countries, this authority is the Ministry of Labour and Social Affairs, whereas in others it may be the Ministry of Health or another national institution with financial and administrative autonomy.

Functions of the competent OSH authority

The Occupational Safety and Health Recommendation, 1981 (No. 164), in its Paragraph 4, enumerates the main functions of the national competent authority in OSH, which include (among others):

- ▶ issuing or approving regulations, codes of practice or other suitable provisions on OSH and the working environment, account being taken of the links existing between safety and health, on the one hand, and hours of work and rest breaks, on the other;
- ▶ from time to time reviewing legislative enactments concerning OSH and the working environment, in the light of experience and advances in science and technology;
- ▶ undertaking or promoting studies and research to identify hazards and finding means of overcoming them;
- ▶ providing information and advice, in an appropriate manner, to employers and workers and promoting or facilitating cooperation between them and their organizations, with a view to eliminating hazards or reducing them as far as practicable;
- ▶ providing specific measures to prevent catastrophes, and to co-ordinating and making coherent the actions to be taken at different levels, particularly in industrial zones where undertakings with high potential risks for workers and the surrounding population are situated;
- ▶ providing appropriate measures for workers with disabilities.

As OSH responsibilities are often shared between a number of government institutions and bodies, it is vital to establish sound working relationships and mechanisms at the national and local levels. This pandemic has clearly shown that there is a need for a coordinated response to address OSH concerns, especially as the workplace is often the source of an outbreak of COVID-19.



Australia National COVID-19 Coordination Commission, Industrial Relations Working Group

In Australia, the National COVID-19 Coordination Commission established an Industrial Relations Working Group early in the pandemic in April 2020, with a view to supporting safe and healthy working environments during the COVID-19 crisis through engagement with a variety of stakeholders (NCCC, 2020).

The IR Working Group brought together experts from health and labour along with employers' and workers' representatives. The core focal points included Safe Work Australia, the Department of Health, the national Workplace Relations, Employment and Safety team, and the Fair Work Commission.

The group works in coordination with Safe Work Australia and local governments to develop guidelines for safe workplaces in a range of industries, to ensure workers and employers are informed of health and safety risks and to formulate safe working practices as new health issues arise (AMMA, 2020).

▶ 2.2 A national tripartite advisory body addressing OSH issues and the impact of COVID-19

In response to the pandemic, countries all over the world have taken rapid and drastic actions – including lockdown measures and restrictions – to curb the spread of the virus. As these measures have affected all aspects of society and had an impact on national economies and the world of work, social dialogue has played a vital role in introducing appropriate OSH measures that take into account the needs of workers, employers and governments, and in crafting appropriate and sustainable solutions.

The most common mechanism developed by countries to guarantee workers' and employers' participation in OSH governance is the OSH national tripartite advisory body (sometimes named council or committee) on which all or most of the ministries, institutions and social partners involved are represented. Its roles and functions vary considerably from country to country, ranging from a consultative role on the activities and projects of the main institutions to a decision-making role in the definition of national policies, priorities, and action plans, as well as in drafting laws and regulations.

The OSH tripartite advisory body should be involved in any decision-making at the national level, including in the issuance of instructions or guidance to mitigate the impact of COVID-19. Building consensus through a tripartite approach paves the way for a better implementation of protection measures, even when these are complex.



- ▶ In Canada, the Canadian Centre for Occupational Health and Safety (CCOHS) is governed by a tripartite council made up of government, employers and workers' representatives (ILO, 2020m). This body has provided training and produced fact sheets, resources and pandemic information, and also has a portal for companies to share lessons learned with other enterprises.
- ▶ Tripartite dialogue in Kenya resulted in the construction of a tripartite rapid response team that is tasked with implementing new OSH regulations during the pandemic (ILO, 2020z).
- ▶ In Turkey, social dialogue helped in the development of COVID-19 publications, which were prepared in collaboration with the national tripartite OSH body (G20 OSH Experts Network, 2021).
- ▶ In France and Italy, national tripartite OSH bodies were the main setting through which COVID-19 protocols and procedures for the workplace were developed. (G20 OSH Experts Network, 2021).

In many other countries, social dialogue has been an essential step in creating measures to mitigate the risk of COVID-19 in the workplace (ILO, 2020z).



- ▶ In Belgium, the social partners and the Ministry of Employment collaborated to develop a guide on reducing the risk of COVID-19 transmission at work (ILO, 2020z).
- ▶ In Ireland, the “Return to Work Safely Protocol” was released by the Irish government after discussions with the social partners; it includes issues such as physical distancing, hygiene, mental health and ventilation (TUAC, 2020).
- ▶ In Italy, tripartite dialogue resulted in two protocols on health and safety which were adopted at the national level (ILO, 2020a).

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▶ 2.3 Collaboration with relevant insurance or social security schemes covering occupational injuries and diseases

A national OSH system is mainly aimed at promoting continuous improvements at the workplace to prevent occupational injuries, diseases and deaths. However, it is also concerned with the management of accidents and illnesses when they do occur.

In this context, employment injury benefits provide medical care, vocational rehabilitation and benefits to workers who are injured on the job or who develop occupational diseases. They also grant survivors' benefits to the families of victims of occupational fatalities.

The ILO Social Security (Minimum Standards) Convention, 1952 (No. 102) defines the traditional contingencies covered by social security, including employment injury benefits – which are the oldest form of social security coverage and the most widespread in the world.

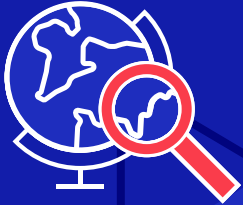
As mentioned earlier in the text, if a person contracts COVID-19 as a result of working in a place where there is a particular risk of contamination, or where a direct link is established between the exposure to the biological agents arising from work activities and the disease, this might be considered as a work or occupational injury. In line with the Employment Injury Benefits Convention, 1964 (No.121), workers who are infected by COVID-19 as a result of their work should be entitled to healthcare, and to the extent that they are incapacitated for work, to cash benefits or compensation (ILO, 2020x).

Throughout the pandemic, many healthcare workers and other key workers have fallen ill from the coronavirus, resulting in serious illness and sometimes death. Many countries are taking action to extend workers' compensation coverage to include at least first responders and healthcare workers impacted by COVID-19.

In some cases, governments have amended national or federal policies and regulations to ensure that COVID-19 infections among certain workers are presumed to be work-related – and therefore covered under workers' compensation. This presumption places the burden on the employer and insurer to prove that the infection was not work-related, making it easier for those workers to file successful claims.



- ▶ An emergency bill passed in the Australian state of Victoria extended the period of workers' compensation by six extra months for eligible workers (Welsh, 2020)
- ▶ In Saudi Arabia, families of healthcare workers who die from COVID-19 will receive approximately US\$133,000 in compensation (AlTaHER, 2020).
- ▶ Argentina created a presumption of occupational illness for workers in essential activities who contract the virus (Ius Laboris 2020a).



Extension of workers' compensation in the United States of America

The COVID-19 epidemic in the United States has resulted in certain categories of workers facing higher risks of exposure, such as healthcare workers, first responders and essential workers.

Existing policies at the state and federal level do not generally guarantee workers' compensation for community-spread illnesses as it can be difficult to prove causation tied directly to the place of work (NCSL, 2020).

Faced with the increased risk of some groups of workers contracting COVID-19 at work, a number of states have amended their policies to extend workers' compensation and add a presumption that certain infections are work-related – thus entitling these workers to compensation (NCSLL, 2020). As of December 2020, 17 of 50 states had extended workers compensation to cover COVID-19 as an occupational disease by use of legislation, executive order or policy changes (NCSL, 2020). In some cases, this presumption of coverage applies only to healthcare workers and first responders, for example in Alaska, Minnesota, Utah and Wisconsin. Several states extend the coverage to include all essential workers, such as those working in grocery stores, as in California, Kentucky and Illinois. Wyoming, for example, includes COVID-19 as a work-related illness for all categories of workers. In the state of California, a law enacted in September 2020 created a presumption that the illness or death of a worker from COVID-19 came from their employment if they tested positive at the site of employment and were not exclusively teleworking (Halpern and Elkayam, 2020). Meanwhile, other states have had legislation pending in the state congress with a view to expanding workers' compensation coverage.

In addition, persons affected by COVID-19 should have access, for as long as required, to adequate healthcare and services of a preventive and curative nature, including general practitioner care, specialist care (at hospitals and outside); the necessary pharmaceutical supplies; hospitalisation where necessary; and medical rehabilitation.¹³ In order to promote public health and equity, it is also important that this provision extends to cover all categories of workers, including migrants and those in the informal economy.

Furthermore, in line with the Medical Care and Sickness Benefits Recommendation, 1969 (No. 134), workers who are absent from work for the purpose of compulsory quarantine or for undergoing preventive or curative medical care and whose salary is suspended should be granted a (sickness) cash benefit.

¹³ See notably the Social Protection Floors Recommendation, 2012 (No. 202), (Paras. 4, 5 and 8), Part II of the Medical Care and Sickness Benefits Convention, 1969 (No. 130), and Part II of the Social Security (Minimum Standards Convention, 1952 (No.102).

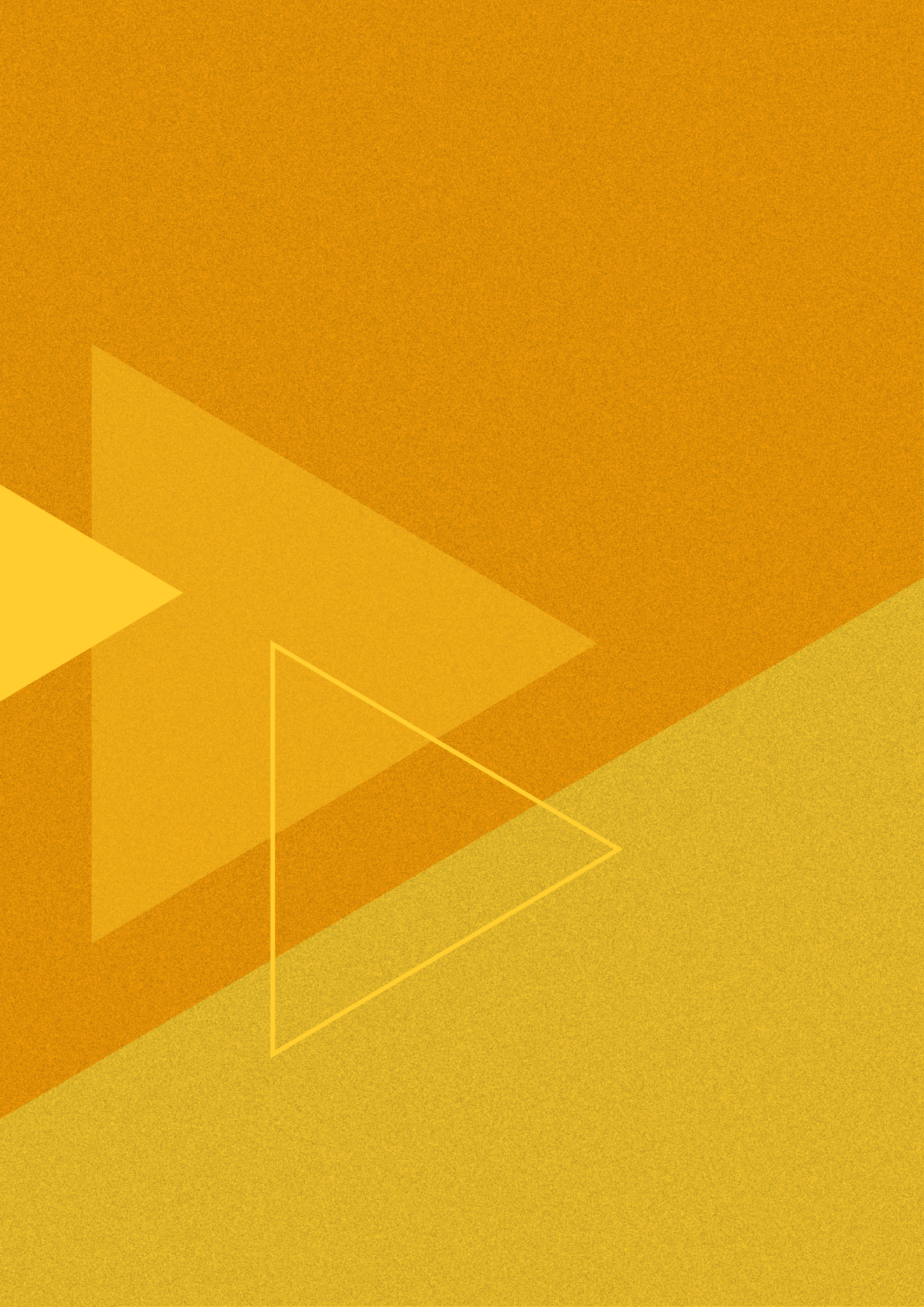


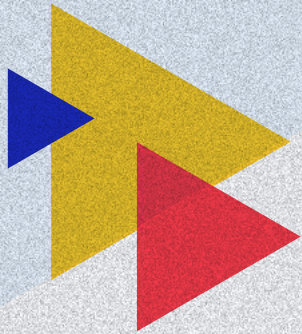
- ▶ Workers in Canada are entitled to weekly cash benefits if they are unable to work due to contracting COVID-19, are self-isolating, or belong to a vulnerable population – such as those with underlying conditions (Government of Canada, 2020).
- ▶ In Denmark, workers are entitled to up to 16 weeks of fully paid leave if they are diagnosed with COVID-19, required to quarantine, or have been told to stay home by their employer (ILO, 2020m).
- ▶ The Finnish Social Security Institution (KELA) pays sickness allowances for the full loss of income when workers are quarantining on account of contracting an infectious disease (ILO, 2020z(i)).
- ▶ In Turkey, incapacity allowance was provided for both workers at high risk (identified through contact tracing), as well as workers who tested positive and received treatment for COVID-19 (Republic of Turkey, 2020b).

Finally, workers with family responsibilities – in relation to a dependent child or another member of their immediate family who needs their care and support – should have the possibility to obtain leave of absence in the event of that family member’s illness.



- ▶ In France, parents of children who are unable to go to school because it has closed are entitled to 20 days of paid leave (Local fr, 2020).
- ▶ The United States also extended paid leave under the Families First Coronavirus Response Act for workers caring for a child whose school was closed – or child care provider unavailable – on account of COVID-19 (US Department of Labour, 2020a)
- ▶ In Finland, parents or guardians of a sick child are also entitled to a sickness allowance if their child has been quarantined and the parent is unable to go to work (ILO, 2020z(i)).
- ▶ Germany, in response to the pandemic, introduced a new claim for compensation into the Infection Protection Act to compensate parents with children up to 12 years who were unable to work because of closures of child-care (Kindergarten) and schools resulting from an official directive (2020q).





3

Occupational Health Services

Occupational health services look into the effect of work on people's health and, conversely, the effect of their health status on their work performance. The COVID-19 pandemic has brought to light, more than ever, the need for such services to act as a bridge between public health and workplaces.

▶ 3.1 Scope and functions of occupational health services during the COVID-19 crisis

The Occupational Health Services Convention, 1985 (No. 161), defines occupational health services as services dedicated to essentially preventive functions and responsible for advising employers, workers and their representatives at the enterprise on: (a) the requirements for establishing and maintaining a safe and healthy working environment that will facilitate optimal physical and mental health in relation to work; (b) the adaptation of work to the capabilities of workers, taking into consideration their state of physical and mental health.

The Convention specifies that occupational health services should include the following functions as appropriate to the occupational risks at the workplace:

- ▶ identification and assessment of the risks from health hazards in the workplace;
- ▶ surveillance of the factors in the working environment and working practices which may affect workers' health, including sanitary installations, canteens and housing where these facilities are provided by the employer;
- ▶ advice on planning and organization of work, including the design of workplaces, on the choice, maintenance and condition of machinery and other equipment and on substances used in work;
- ▶ participation in the development of programmes for the improvement of working practices, as well as testing and evaluation of health aspects of new equipment;
- ▶ advice on occupational health, safety and hygiene and on ergonomics and individual and collective protective equipment;
- ▶ surveillance of workers' health in relation to work;
- ▶ promotion of the adaptation of work to the worker;
- ▶ contribution to measures of vocational rehabilitation;
- ▶ collaboration in providing information, training and education in the fields of occupational health and hygiene and ergonomics;
- ▶ organization of first aid and emergency treatment;
- ▶ participation in analysis of occupational accidents and occupational diseases.



Changes to occupational health services during the pandemic in the United Kingdom

During the pandemic, occupational health services in the UK's National Health Service (NHS) found themselves overwhelmed – along with nearly all the other health services throughout the country. In response to the unprecedented effects that the pandemic had on workers, occupational health services made various modifications to their model of work. A recent study of occupational health physicians in the UK found that 51 per cent of occupational health services had extended their hours to include weekends or out-of-hours services. In addition, 21 per cent employed additional workers. As COVID-19 was a very common concern of workers, many of these services set up a dedicated telephone line and email for inquiries (Ranka et al., 2020).

Occupational health services may be set up by enterprises themselves, by public authorities, by social security institutions, by any other authorized bodies or, indeed, by a combination of any of these. They may be established for a single enterprise or as a common service for a number of enterprises.

The Availability of Occupational Health Services: A Global Challenge

Although the establishment of occupational health services is mandatory under many national laws, with a survey performed prior to COVID-19 found that around 67 per cent of respondent countries had policies in this area, the coverage of the working population by such services was generally low (Rantanen et al., 2017). The same survey suggested global coverage to be about 24.8 per cent, varying widely between countries and regions – reaching on average 5-10 per cent in developing countries and 20-50 per cent in industrialized ones, with a few exceptions (Rantanen et al., 2017).

Even in countries where coverage rates are high, there are gaps, with small-scale enterprises, certain mobile workers, migrant workers, construction, agriculture and informal workers and the self-employed being underserved, with less than 15 per cent covered by occupational health services (WHO, 2017). Many of these underserved sectors and industries are also the most hazardous for workers in terms of the risk of injuries and disease in relation to work.

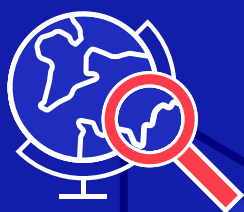
The coverage of occupational health services also varies in terms of services provided. While around 69 per cent of countries offered mixed services (both preventive and curative), only 29 per cent provided preventive services (Rantanen et al., 2020).

Protecting health workers and emergency responders

Occupational health services in healthcare facilities play a critical role in protecting the health and safety of healthcare workers and other emergency responders, as they help to maintain an adequate and functional workforce and ensure the continuity of the emergency response and essential health services.

In this context, the WHO-ILO Global Framework for National Occupational Health Programmes for Health Workers, calls for the strengthening of health systems in order to ensure workers' health and safety in healthcare settings, protect patients' health, ensure high levels of patient care, and contribute to sustainable and health communities (WHO, 2020f). This action also implies creating or building up existing occupational health programmes with sufficient budgets.

During pandemics and other emergency situations, the emergency response and the continuity of routine services are contingent upon the resiliency of the healthcare sector and the health and safety of healthcare and emergency personnel.



Adapting occupational health services in times of crisis in the Bronx, New York, United States

A large acute care hospital in the Bronx, United States, known as NYC Health + Hospitals/Jacobi had to rapidly adapt their occupational health services when they found themselves at the epicentre of the COVID-19 pandemic in April 2020 (Sydney et al, 2020). In order to efficiently and effectively meet the new needs brought on by the crisis, the hospital's occupational health services modified their location, staffing and data tracking.

The occupational health services unit adapted its space to the new requirements by moving to a location closer to the main hospital to reduce the transport needs of sick or injured staff and to be closer to the hospital's laboratory services. The new space, which was a converted section of the ambulatory clinic area, also allowed occupational health services to increase from four to 16 rooms.

With an increased demand for clinical workers in occupational health services, interdisciplinary staff from across the hospital were redeployed to fulfil this need.

An enhanced data-tracking system allowed staff to track the symptoms of healthcare workers alongside their date of quarantine and expected date of return to work.

These rapid, innovative adjustments led to a successful response early on in the pandemic.



Occupational health services in a tertiary hospital in Singapore

A tertiary care hospital in Singapore adopted a three-pronged approach in response to the COVID-19 pandemic (Hwang et al., 2020). In order to ensure business continuity and the health and safety of its staff, the hospital's occupational health services focused on three key areas: individual staff protection, staff workforce protection, and the prevention of nosocomial infection.

In order to protect individual staff from infection, the hospital's occupational health services screened new workers for their fitness for work, vaccinated against diseases, and provided appropriate PPE – depending on the risk of the area.

To protect the staff workforce, there was surveillance of all staff after travel or COVID-19 exposure, including symptom screening and temperature checks.

Finally, in order to prevent nosocomial spread throughout the hospital, a “standardized report sick protocol” was created, and “return to work assessments” were routinely used.

This comprehensive approach allowed the hospital to adapt to new challenges brought about by the pandemic and to keep workers and management safe.

▶ 3.2 Monitoring of the working environment and risk assessment

Throughout the pandemic, occupational health services have played a key role in helping employers to assess and mitigate the risk of contagion, as well as other risks that have arisen due to the introduction of new measures and work processes.

The scope of monitoring the working environment – as defined by the Occupational Health Services Recommendation, 1985 (No. 171) – includes:

- ▶ identification and evaluation of the environmental factors which may affect the workers' health;
- ▶ assessment of conditions of occupational hygiene and factors in the organization of work which may give rise to risks for the health of workers;
- ▶ assessment of collective and personal protective equipment;
- ▶ assessment – where appropriate – by valid and generally accepted monitoring methods, of exposure of workers to hazardous agents;
- ▶ assessment of control systems designed to eliminate or reduce exposure.

Surveillance in the working environment includes the identification of hazardous agents and processes, as well as the assessment of the exposures to such situations and the possible health outcomes. This process provides information on the organization's occupational health needs and indicates the priorities for preventive and control actions. During the COVID-19 pandemic, occupational health services have helped enterprises to keep their workplaces safe and healthy, and to align with new guidelines and requirements.



- ▶ In the Netherlands, enterprises are required to hire occupational physicians or engage an occupational health and safety service to be involved in matters such as clearance to return to work or risk assessments (Knox et al., 2020).
- ▶ In France, occupational health services also assume an advisory role during risk assessments and with respect to reopening businesses, within the framework of the national protocol to ensure workers' health and safety in the context of the COVID-19 epidemic (French Ministry of Labour, Employment and Economic Inclusion, 2020b).

For the many enterprises that have shifted to teleworking, occupational health services can also contribute to safe home working environments.



- ▶ In New Zealand, occupational health professionals, specifically those specializing in ergonomics, have helped workers set up ergonomically-sound home office environments with information technology equipment that supports healthy teleworking (HASANZ, 2020).

► 3.3 Surveillance of workers' health and provision of first-aid services

The main purpose of a health examination is to assess a worker's fitness to carry out certain jobs; to identify any health impairment that may be related to the exposure to harmful agents inherent in the work process; and to identify cases of occupational diseases in accordance with national legislation.

Recommendation No. 171 provides that occupational health services should record data on workers' health in personal confidential files. Personal data relating to health assessments may be communicated to others only with the informed consent of the worker concerned. In addition, provisions should be adopted to protect the privacy of the workers and to ensure that health surveillance is not used for discriminatory purposes or in any other manner prejudicial to their interests¹⁴.

Occupational health services are traditionally responsible for the organization of first-aid and emergency treatment. This covers preparedness for accidents and acute health conditions in individual workers, as well as readiness for response in collaboration with other emergency services in the event of serious accidents affecting the enterprise as a whole.

In the context of the COVID-19 pandemic, occupational health services – as part of their role to monitor workers' health and provide first aid and an emergency response – have often been responsible for tracking confirmed and suspected cases, tracing any potential contagion, instructing workers to quarantine, and notifying public health and social security authorities of their findings.



- Occupational health services in the United Arab Emirates have provided a comprehensive surveillance system during the pandemic, which has included ongoing health monitoring, testing, telehealth consultations and advice on appropriate quarantine timelines. They have also efficiently monitored the status of the entire workforce to aid management (News 4 U, 2020).
- In New Zealand, occupational health nurses led contract tracing efforts within many enterprises, advising workers on how and when to self-isolate in cases of COVID-19 transmission or close contact with an infected colleague (HASANZ, 2020).

¹⁴ For more information about workers' health surveillance and the protection of workers' privacy, see the [ILO Technical and ethical guidelines for workers' health surveillance](#) (Occupational Safety and Health Series No. 72), 1998.

▶ 3.4 Adaptation of work to workers and the protection of vulnerable groups

Occupational health services are responsible for making recommendations that facilitate the adaptation of work to the workers and protect vulnerable groups of workers. These adaptations may focus on, inter alia, selecting a job that minimizes adverse effects, providing special equipment or protective devices, or prescribing sick leave. They may also be required temporarily in the event of workers recovering from an injury or disease.

Particular groups of workers, such as migrant workers, contract workers and day labourers, may face unique risks due to the nature of their jobs. Migrant workers may live in unstable or shared accommodation, and may have difficulty prioritizing safety and health due to their employment status. Other workers may be particularly vulnerable to the adverse effects of the virus on account of their age, medical history or other factors.

The role of occupational health services in this field is fundamental during the COVID-19 pandemic. Not only can they contribute towards optimizing work in accordance with a worker's state of health (taking into account all known risk factors such as age, ethnicity or body mass index), but they can recommend adjustments to the workstation, temporary restrictions, the granting of specific equipment, the compulsory wearing of masks in certain workstations, help with home care and even support vaccination campaigns and strongly encourage workers to get vaccinated.



- ▶ In Belgium, the United Kingdom, France and New Zealand, occupational physicians have worked with employers to assess the susceptibility of workers to COVID-19 – either on account of their jobs or pre-existing conditions. They have sought to find solutions to mitigate risk when necessary, such as isolated offices, teleworking arrangements and PPE. (HASANZ, 2020) (Asanati and Paul, 2020) (Ministry of Labour, Employment and Social Inclusion, France, 2020) (Knox and Marks, 2020).
- ▶ In France, as part of the nationwide roll-out of COVID-19 vaccines, occupational physicians have worked alongside the public health system to vaccinate eligible workers. Workers have not been obliged to receive the vaccine, but may receive it from their occupational physician when they are eligible in the context of the national vaccination strategy. In order to ensure worker confidentiality, occupational health services have been encouraged to administer vaccines at occupational health centres, when possible (De Florival et al, 2021)(FranceInfo, 2021).

▶ 3.5 The advisory role

Occupational health services have a vital role to play during the COVID-19 crisis in advising the management, employers, workers and their representatives and health and safety committees on preventive and control measures, which must be adequate to prevent exposure to the virus during normal operating conditions and emergencies (for example, if cases are detected in the workplace). Account must also be taken of modifications in work processes and procedures to prevent other OSH risks.

Educational and training activities are closely linked to the advisory task that occupational health professionals perform vis-a-vis the employers and workers. They are of particular importance in this context, when there are changes in the layout of workplaces, workstations, equipment and in the organization of work.

Occupational health services should also provide workers with personal advice concerning their health in relation to work. They can help increase workers' awareness of occupational hazards to which they are exposed and discuss with them existing health risks and ways to protect their health – such as adequate protective measures and the proper use of personal protective equipment.



- ▶ In Canada, occupational nurses have played a key role in reopening businesses during the pandemic, informing workers of preventive measures, managing workers' stress over exposure, and giving educational information about the virus (Neustaeter, 2020).

Another important task is to provide advice and information to employers, management and workers in relation to their return to work following accidents or diseases. This will support a rapid rehabilitation, reduce absenteeism and promote a good psychosocial climate in the enterprise.

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▶ 3.6 Provision of general preventive and curative health services

Recommendation No. 171 promotes the provision of curative and general healthcare services as functions of occupational health services, where appropriate. These services include the prevention and treatment of non-occupational illnesses and other relevant primary healthcare services.

The Recommendation also prescribes that occupational health services may, taking into account the organization of preventive medicine at the national level, fulfil the following functions:

- ▶ carry out immunizations in respect to biological hazards in the working environment;
- ▶ take part in campaigns aimed at the protection of workers' health;
- ▶ collaborate with the health authorities within the framework of public health programmes.

During the COVID-19 pandemic, the immediate need to address the communicable disease crisis caused many resources to be diverted from the prevention of non-communicable and chronic diseases – which, in 2019, accounted for 74.37 per cent of all deaths globally, with cardiovascular diseases, cancers, chronic respiratory diseases and diabetes being among some of the highest causes of death (IHME, 2020).

In many cases, occupational health services are well placed to deliver programmes promoting health, which point out that factors such as diet, exercise, alcohol use and mental health make individuals at higher risk for developing severe complications related to COVID-19 (Caluori, 2020).



- ▶ In Italy, the pandemic highlighted the importance of preventive occupational health services, as prevention became key in the face of COVID-19 – with enterprises shifting from a model of evaluating workers' fitness for work to one of ensuring the job was equipped for the workers' health and safety (Mutti, 2020).
- ▶ In New Zealand, occupational therapists and psychologists helped workers manage stress and anxiety arising from their work and the pandemic. They also provided support to management and leadership on how to lead in the context of uncertainty (HASANZ, 2020).

Occupational health services may also be called upon to provide general non-occupational healthcare for workers' families. The extension of such services depends on the infrastructure of the health system in the community. When operating in remote or medically underserved areas, it may even be expedient to provide such services alongside occupational healthcare. For instance, occupational health services may provide ambulatory treatment, which is normally provided by a general practitioner, during working hours. They may dispense simple forms of treatment, or even more comprehensive medical care – depending on the agreements reached with the social security or other insurance institutions reimbursing the cost of the workers' treatment. This supplementary general healthcare in hard-to-reach areas and populations can be particularly critical during emergencies, such as the COVID-19 crisis, when many public health entities have been under tremendous pressure.

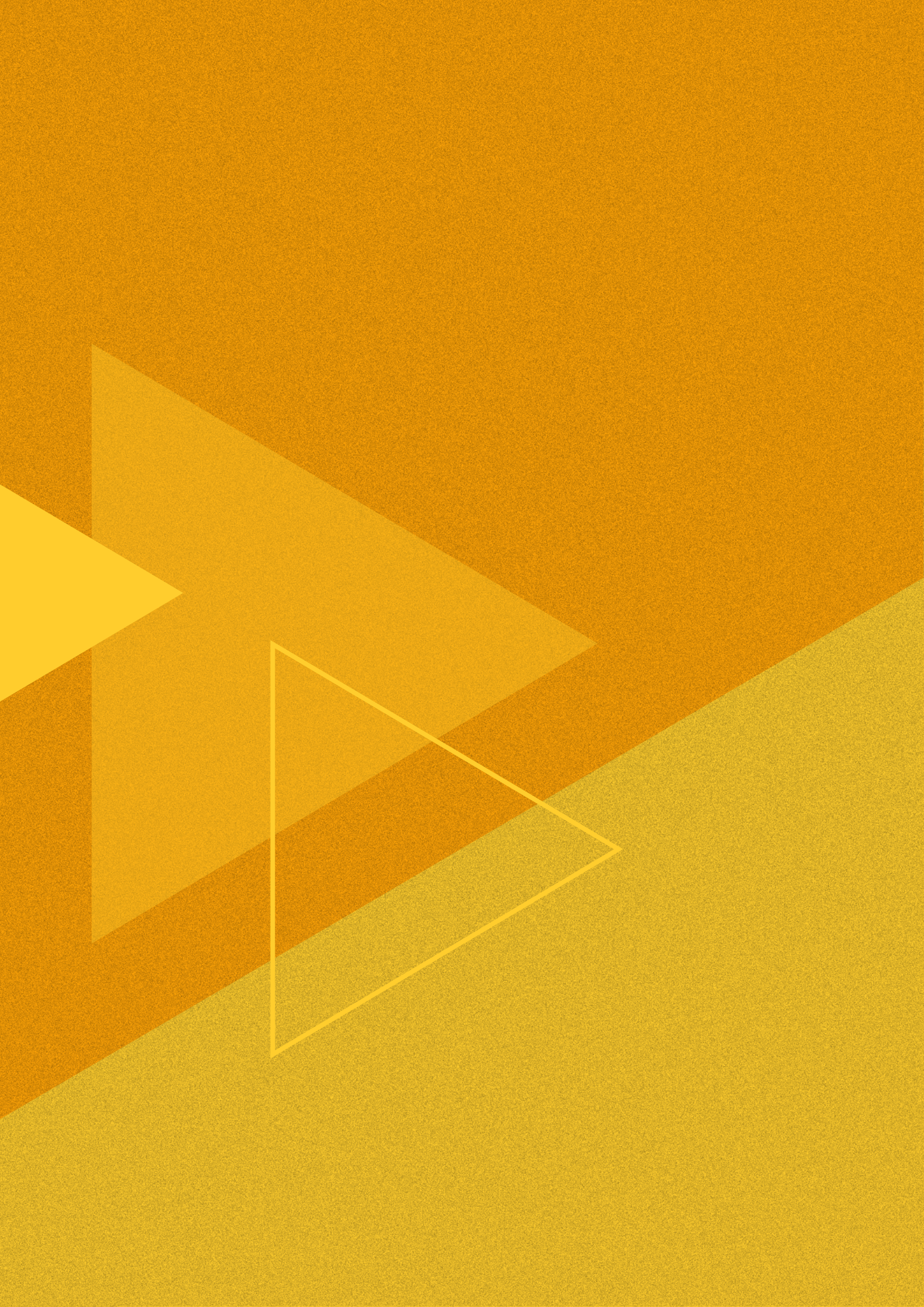


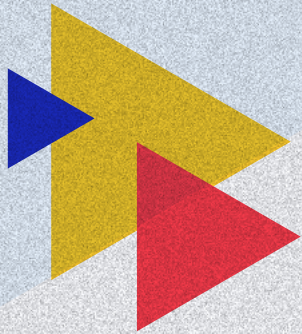
► 3.7 Collaboration with external services

Occupational health services should establish close relations with external services and institutions, such as the country's general public health system and institutions and facilities in local communities. These relations should start at the level of primary healthcare units and extend to the level of hospital-based specialized services, some of which may also provide occupational health services. They are especially important when workers have to be referred to specialized health services to be appropriately assessed and treated for occupational injuries and diseases, and also provide an opportunity to mitigate the possible adverse effects of non-occupational health problems on attendance and work performance.

Emergency response organizations and first-aid providers – such as ambulance services, hospital outpatient and emergency clinics, poison control centres, police and fire brigades, and civic rescue organizations – can ensure the expeditious treatment of acute injuries and illnesses and assist in planning for and responding to major emergencies.

Appropriate links with social security and health insurance institutions can facilitate the administration of benefits and functioning of the workers' compensation system.





4

Information, advisory services and training on OSH

In many countries, employers and workers do not have sufficient knowledge about occupational hazards in the workplace or how to prevent and control risks. In some cases, the culture of prevention in general is inadequate and requires a continuous effort to raise awareness, as well as specific measures to inform and train all those interested in how to avoid or control exposures to occupational hazards.

Public authorities have come to realize that the provision of information, advocacy and technical assistance are prerequisites for functional systems. The aim of such initiatives is not only to raise awareness of the law amongst enterprises and the general working population, but also to positively influence the attitudes of employers and workers towards it and to create a more preventive culture. It is also worth noting the importance of social dialogue in the dissemination of information on OSH, particularly in times of crisis. Workers' representatives are uniquely positioned to contribute to facilitating communication with workers about emerging risks and how they affect them.

As mentioned in the first chapter, OSH regulations in most countries require enterprises to identify hazards, assess risks and implement measures to prevent and control such risks. Convention No. 155 stipulates that employers should ensure workplaces and processes are safe and without risk to health and should provide, where necessary, adequate protective clothing and equipment (Art. 16). During the COVID-19 pandemic, additional requirements have been introduced to prevent exposure to the virus in the workplace. Effective and coordinated communication and information are clearly needed to promote compliance – and thus the adoption – of adequate OSH measures.

In addition, information about the mode of transmission of a disease, and ways to avoid its spread, must be widely disseminated to enable people to effectively protect themselves and others.

Provisions on information and training in the ILO OSH standards

According to the ILO core standards on OSH, information and training are key elements in the promotion of safe and healthy working environments, which – importantly enough – should be considered in the formulation of a **national OSH policy**. These provisions are an important reference in contexts such as the current pandemic; in fact, additional provisions might be envisaged, or existing ones strengthened, with a view to preventing the transmission of disease in the workplace.

Article 5 of Convention No. 155 mentions **training** as one of the main spheres of action to be taken into account in the policy to achieve adequate levels of safety and health, while Article 14 calls on member States to adopt measures to promote the inclusion of OSH issues at all levels of education and training.

Convention No. 187 stipulates that the national OSH policy should promote, inter alia, the development of a national preventative safety and health culture that includes **information**, consultation and **training** (Art. 3).

Paragraph 5 of Recommendation No. 197 specifies that in promoting such national preventative safety and health culture, member States should seek, among other things, to:

- raise workplace and public **awareness** on OSH through **national campaigns** linked with, where appropriate, workplace and international initiatives;
- promote mechanisms for delivery of **OSH education and training**, in particular for management, supervisors, workers and their representatives and government officials responsible for safety and health; and
- provide **information and advice** to employers and workers and their respective organizations and to promote or facilitate cooperation among them with a view to eliminating or minimizing, so far as is reasonably practicable, work-related hazards and risks.

Convention No. 187 also provides that the **national OSH system** should include, where appropriate **information and advisory services** on OSH, as well as the provision of OSH **training** (Art. 4.3(b, c)).

Recommendation No. 164 also calls upon the national competent authorities to provide **information and advice** to employers and workers and promote cooperation between them and their organizations, with a view to eliminating hazards or reducing them as far as practicable (Para. 4(d)).

▶ 4.1 Information and advisory services on OSH

In order to be effective, a national OSH system should include structures at the national level to provide information and advice on OSH to different target groups with varying purposes. It should aim at:

- ▶ raising awareness among employers, workers and their representatives and the general population of the importance of the prevention of occupational accidents and diseases and the need for OSH practices;
- ▶ informing employers and other people concerned of the importance of preventive duties;
- ▶ conducting occupational safety and health training and research;
- ▶ enabling OSH specialists to access the essential up-to-date information and resources to perform technical activities.



US National Institute for Occupational Safety and Health and COVID-19 Research

The US NIOSH funds a number of centres involved in research that, during the pandemic, included research on COVID-19 in many diverse sectors (University of Illinois, 2020). In 2020, the Institute coordinated and compiled data received from all 25 NIOSH centres in response to a survey on COVID-10 related research, training, webinars, activities and tools that had been developed or were in the pipeline.

The research on COVID-19 and occupational health focuses on areas such as mental health, respiratory protection, hygiene and disinfection, the reopening of workplaces and workers' rights. COVID-19 specific research and resources that were developed included training programmes for agricultural workers, home healthcare workers and remote workers, as well as a range of other topics.

Governments should ensure that OSH advisory services are available in sufficient quantity and quality to provide enterprises with the guidance and technical assistance they need.



It becomes even more important to make suitable OSH advice and information available in the context of a pandemic. In addition to the information that governments pass on to the general public, adequate information should be provided to the social partners, who play a key role in preventing the spread of the infection at the workplace. In particular:

- **employers and managers** should be informed about how to implement the new temporary regulations, policies and guidelines that are relevant to their organization, and of their responsibility in relation to OSH recommendations and COVID-19;
- **workers and their representatives** should be informed of the correct use of equipment and procedures for preventing and combating the infection, as well as of their responsibility to adhere to practical OSH recommendations.

Systems of rapid communication are needed to disseminate information on the way the pandemic is developing and the measures taken at government level to stem them. These can include: television, radio, newspapers and magazines, websites, advertisements, newsletters and telephone help-lines. However, experience has shown that although extensive media coverage of the pandemic is essential to encourage precautionary and preventive measures, it may also create unnecessary panic and anxiety in society if it is not properly disseminated. For this reason, a balance must be sought between clear information on the gravity of the pandemic and the measures necessary to halt its spread, and reassurances of a positive outcome if there is strict adherence to these measures.

OSH national authorities and bodies have played a leading role in the dissemination of information on the pandemic, creating ad hoc sites and producing materials for different sectors that are easily reproducible for distribution to workers or posted at the workplace. Such initiatives are even more important for MSMEs that do not have the in-house expertise and capacity to design these materials themselves.



- The Health and Safety Executive (HSE) of the United Kingdom provides OSH guidance on a variety of topics related to the pandemic including risk assessment, use of PPE, disinfection, physical distancing and ventilation, in addition to sectoral guidance (HSE, 2020a).
- The Government of Switzerland has also created COVID-19 posters for businesses that can be adapted for their specific prevention needs (BAG Switzerland, 2020).
- The Colombian Safety Council (Consejo Colombiano de Seguridad, CCS) produced a variety of technical reference documents on OSH and COVID-19 focusing on topics such as sectoral recommendations and containment of COVID-19 in the workplace (CCS, 2020).
- The Occupational Safety and Health Administration in the United States (OSHA) has produced a number of general posters, such as how to correctly wear a mask, as well as posters tailored to various sectors including agriculture, the automotive industry, healthcare, fish and seafood processing, and general workplaces (US OSHA, 2020). These posters were made available in a variety of languages and can be downloaded and printed by workplaces.
- In the Canadian province of Ontario, the government produced posters to provide guidance on cleaning, the use of equipment, retail transactions, workplaces, and gardening and landscaping (Government of Ontario, 2020b).
- In India, the Ministry of Health and Family Welfare produced and disseminated materials on how to effectively communicate with workers and people who are suspected or confirmed to have COVID-19 (Ministry of Health and Family Welfare, India, 2020).

The social partners in many countries have also been very active in collaborating with governments and supporting their members to take action in the workplace for preventing and mitigating the spread of COVID-19.



- ▶ The General Confederation of Enterprises in Cote d'Ivoire produced posters with symbols and facts about preventing COVID-19 transmission in the workplace (CGECI, 2020).
- ▶ The Federation of Belgian Enterprises (VBO-FEB) produced a guide for employers on implementing social distancing (VBO FEB, 2020).
- ▶ The Building and Wood Workers' International (BWI) has produced a health and safety guidebook for trade unions during the pandemic, including processes for assessing risk and detailed information on COVID-19, PPE use, and cleaning and disinfection practices (BWI, 2020).

During the COVID-19 crisis there was an exponential increase of people working from home. National OSH bodies, the social partners and other entities have provided materials to support employers and workers in implementing effective teleworking practices that ensure safety and health.



- ▶ The International Trade Union Confederation (ITUC) has developed guidance on teleworking, which discusses effective arrangements for remote workers during the pandemic, the right to disconnect, ensuring decent work, and other OSH concerns (ITUC, 2020).
- ▶ The HSE has produced a practical workstation checklist for teleworkers so that they can complete a basic assessment of their ergonomic environment to protect them from injuries (HSE, 2020b).
- ▶ In the province of New Brunswick in Canada, the government has provided tips on working safely from home, with a focus on ergonomics, work-life balance and exercise (WorkSafe NB, 2020).
- ▶ The International Organisation of Employers (IOE) has developed guidance, including on teleworking, which aims at safeguarding a healthy and safe environment, while also facing the need of securing business sustainability to preserve jobs and maintain the well-being of their workforce (IOE, 2020).

▶ 4.2 Awareness-raising campaigns

Awareness-raising campaigns are of particular importance in pandemic situations, when the situation evolves rapidly – as do the rules and protocols to be applied in the workplace. Governments, in consultation with the social partners, adopt and modify these rules fairly frequently. In fact, OSH awareness-raising campaigns are an effective way of disseminating essential information and of sensitizing workers, employers and communities about their rights and responsibilities in this area. The strategic use of the media and social media platforms makes it possible to expand the spread of such campaigns and to strengthen their impact.



- ▶ In Myanmar, a virtual campaign for a “Safe Return to Work” was created on a Facebook page. A popular local singer lent support to this page, which helped increase traffic (Vision Zero Fund, 2020).
- ▶ A campaign in Belize, launched by the Chamber of Commerce and Industry (BCCI) and the National Trade Union Congress of Belize (NTUCB), has been created to develop knowledge and raise awareness of occupational safety and health during COVID-19 (ILO, 2021c).
- ▶ In Spain, the Ministry of Equality launched an information campaign on gender-based violence, which included a focus on people experience violence while in lockdown (UN Women, 2020).
- ▶ A campaign in Indonesia developed infographic videos to promote OSH implementation, social dialogue and workplace cooperation (BetterWork, 2020). The campaign included a social media aspect with a series of sessions on Instagram, during which key experts discussed topics about the pandemic affecting garment workers, including working conditions.



Awareness raising campaigns for OSH in coffee value chains in Mexico

In Mexico, a range of audiovisual resources were created as part of a campaign developed by the ILO Vision Zero Fund and the National Federation of Coffee Growers. The aim of the project was to raise awareness amongst workers of safety and health at work in coffee value chains during COVID-19.

The campaign included a radionovela (radio soap opera), with 10 installments raising awareness on a range of OSH topics, including mitigating the risk of COVID-19 during harvest time. Radio spots were also created, in alliance with the National Federation of Coffee Growers, to discuss the dangers of COVID-19 and how to stay safe in the coffee sector. Finally, a series of videos was created, discussing COVID-19 prevention in agriculture, as well as cleaning, disinfection and other mitigation measures.

The novel coronavirus has also triggered further violence and harassment, including domestic violence.¹⁵As many essential workers on the frontline of the pandemic have experienced violence (Amnesty International, 2020b), many groups have organized campaigns calling for an end to violence against these workers.

Throughout the pandemic, the social partners have been particularly vocal on the importance of raising awareness and taking concrete steps to address the increase in domestic violence.

¹⁵ According to UN Women, the rise in domestic violence after the first wave of COVID-19 was at least 25 per cent (although it has not yet been fully identified). Calls to national hotlines for domestic violence rose five-fold in some countries after people started working from home due to isolation policies implemented during the outbreak.



- ▶ A union of workers in the retail industry in Australia introduced a campaign early on in the pandemic, calling on the public to respect retail workers and emphasizing that violent behaviour and abuse would not be tolerated (SDA, 2020).
- ▶ The Zimbabwe Congress of Trade Unions created a poster raising awareness on violence and harassment during the COVID-19 pandemic and provided contact information for resources (ZCTU, 2020).
- ▶ In November 2020, the Public Service International union launched a Twitter campaign on preventing violence and harassment in the world of work. The campaign noted that the COVID-19 pandemic had exposed links between the world of work and violence, particularly for those teleworking and faced with domestic violence – including digital forms of violence and harassment (PSI, 2020).

▶ 4.3 Provision of training on OSH

In the context of the COVID-19 pandemic, OSH training plans have been amended to cover new risks, such as preventing transmission of the virus, implementing administrative and engineering controls to curb viral spread, and averting psychosocial effects due to changing work arrangements. The pandemic has shown that the presence of an OSH management system – composed of competent and trained employers, managers and workers’ representatives – makes it easier and quicker to adapt the training to new needs. This particularly holds true if existing training already includes risk assessment, emergency preparedness and response and business continuity plans.¹⁶ The involvement of workers’ representatives in training is also important, as they are in a unique position, due to their understanding of the particular issues that workers face, to encourage education of workers on COVID-19 and promote good behavioural change.



- ▶ In South Africa, the government requires that all workers returning to work complete a training on COVID-19 and OSH (Ministry of Labour, South Africa, 2020).
- ▶ In Ireland, the Health and Safety Authority (HSA) has created a “Return to Work Safely Induction” online course, which workers are required to take before returning to work, alongside other resources to guide enterprises through returning to work safely (HSA, 2020).
- ▶ The ILO and the African Union Development Agency (AUDA-NEPAD) developed and conducted 12 modules of virtual training on COVID-19 and OSH which were attended by over 1000 participants (AUDA-NEPAD, 2020).

¹⁶ In the ILO Guidelines on occupational safety and health management systems (ILO-OSH 2001), a specific role is given to OSH training. Arrangements should be established and maintained to ensure that all persons are competent to carry out the safety and health aspects of their duties and responsibilities. The employer should have, or should have access to, sufficient OSH competence to identify and eliminate or control work-related hazards and risks, and to implement the OSH management system.



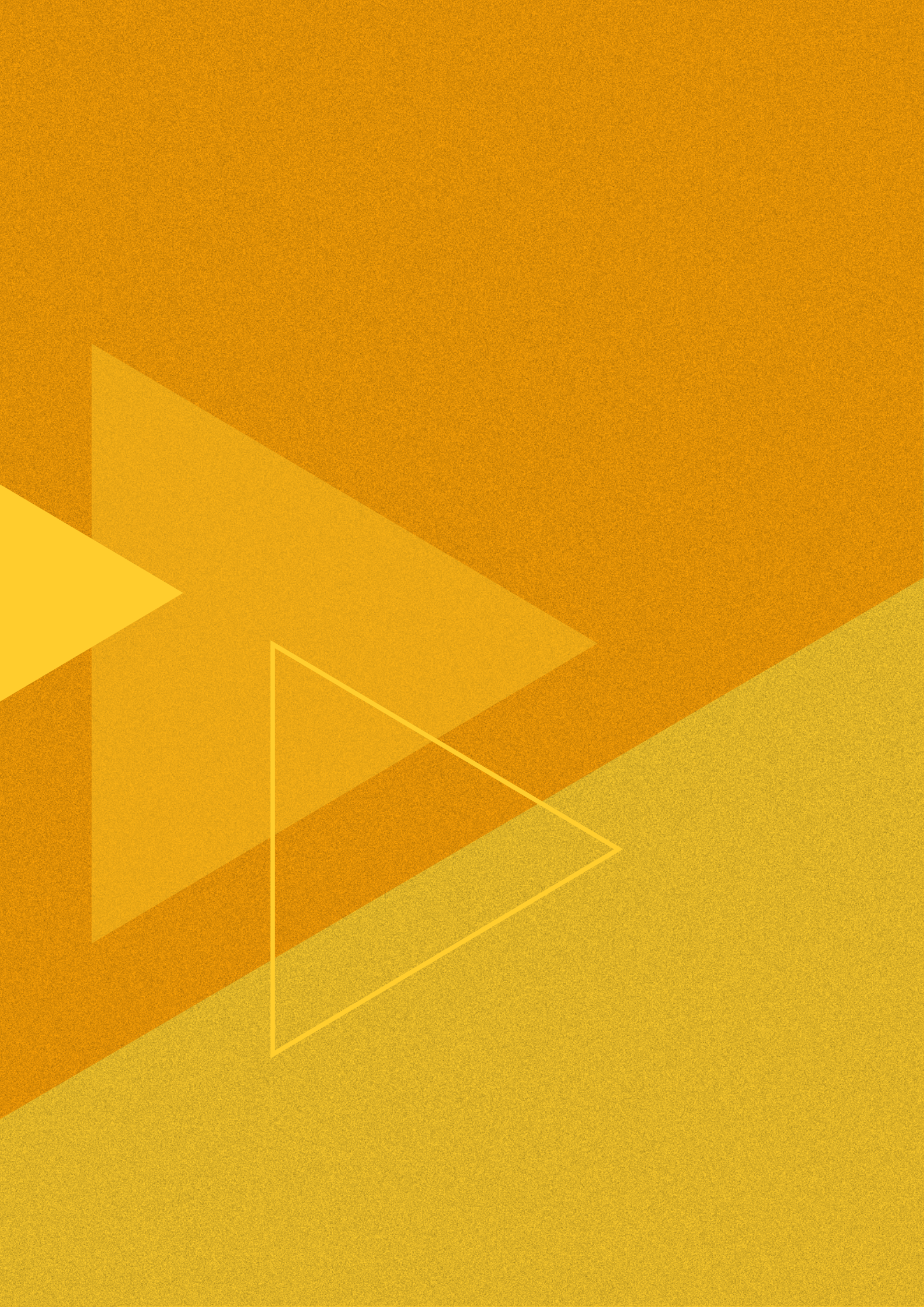
In addition, with various sectors facing different levels of risk and mitigating factors, sector-specific training is also vital.

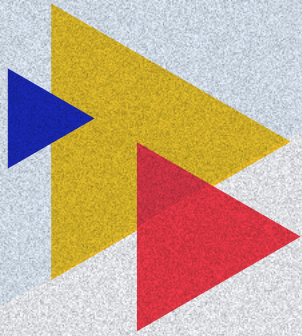


- ▶ In Singapore, the Building and Construction Authority has created a compulsory online COVID-Safe Training for Workers in the construction sector, which focuses on the risks specific to these workers (BCA, 2020).
- ▶ The United States National Institute of Environmental Health Sciences has created training tools tailored to essential workers returning to work during the COVID-19 pandemic (NIEHS NIH, 2020).
- ▶ Training specific to healthcare workers has also been prolific, with international bodies such as the WHO creating an online training for healthcare workers (WHO 2020b).

Other private organizations and unions have created sector-specific training for various areas of work in the time of COVID-19, such as grocery workers, death care workers and the chemical industry.

Many stakeholders in OSH and the world of work have produced guidance, trainings and other resources on COVID-19 and OSH. A compilation of these resources may be found in the annexes to this report.





5

Data collection and research on OSH

Under the United Nations 2030 Sustainable Development Goals¹⁷ and multiple ILO standards on OSH, countries have committed to the collection and utilization of reliable OSH data. These data are, in fact, essential for developing informed policies, laws and regulations, strategies and other measures in this area. This is particularly true for situations such as the COVID-19 pandemic and other emergencies, where public authorities need to regularly assess the situation and make informed, evidence-based decisions. They also need to collect data on specific segments of the population and workers so that they can identify the groups most at risk and take targeted measures.

¹⁷ Sustainable Development Goal (SDG) 8 provides for the promotion of inclusive and sustainable economic growth, full and productive employment and decent work for all.. The UN definition of Target 8.8 is to protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment. Target 8.8 countries are asked to report on the following indicator (Indicator 8.1.1): Frequency rates of fatal and non-fatal occupational injuries, by sex and migrant status. See: [Goal 8, United Nations Department of Economic and Social Affairs \(un.org\)](#).

Having a comprehensive and effective system for gathering and analysing information helps countries to collect and analyse data and investigate different OSH-related issues. Such systems should include appropriate mechanisms and structures for the recording and notification of occupational accidents and diseases. They should also have the appropriate research capacity to be able to identify new and emerging risks, as well as preventive techniques for addressing them. If countries have these capacities, they can promptly focus their studies and research on current needs. This includes guiding decision-makers through health crises, such as the COVID-19 pandemic, by collecting data and generating science-based information.

Data from the workplace can be particularly important during the spread of the novel coronavirus, as it is a new virus with certain unknown properties and behaviours. Taking stock of confirmed and suspected cases of COVID-19 in the workplace, and analysing how the virus spreads, helps to identify breaches of return-to-work protocols and deficiencies in preventive and protective measures, thus allowing for corrective measures if necessary.

▶ 5.1 Gathering OSH data and information in times of a global health crisis

It goes without saying that OSH information includes data on occupational accidents and diseases. However, there are other significant data for assessing the preventive capability of enterprises, such as the existence and availability of occupational health services, the existence of risk assessment reports, the provision of OSH training and the most common breaches of OSH regulations.

Surveys and studies, both general and by sector, can be carried out to ascertain employers' and workers' opinions on critical aspects of the organization and implementation of preventive measures in enterprises.



- ▶ A study in Vietnam explored the impact of workplace health and safety training during the COVID-19 pandemic on workers' compliance with behavioural safety protocols and their awareness of the risk of COVID-19 (Chi et al, 2000)
- ▶ Research in the hospitality industry in China looked at a restaurant as a case study to explore how organizations can facilitate workers' compliance with COVID-19 safety measures (Hu et al., 2020). The study revealed a four-step process leading to deep compliance in individual workers. This began with a heightened individual sense of risk and health awareness, followed by the perception of COVID-19 safety measures as being useful, finally followed by behavioural adaptation and integration of measures into the work routine. The study also demonstrated the importance of management commitment to workplace safety and of organizational crisis strategies.



Two studies on healthcare workers' knowledge and perception of COVID-19 from Nigeria and Afghanistan

A survey of healthcare workers in the South-South area of **Nigeria** (Ogolodom et al., 2020) was carried out to assess their knowledge, attitudes and fears about COVID-19. The survey included questions about their awareness of the pandemic; the way in which they received information and updates on COVID-19 at work; their assessment of their risk at work; how they perceived the workplace safety measures; and obstacles to feeling safe while on the job. Most respondents (62 per cent) felt that workplace safety was inadequate. Many workers commented that a lack of social insurance served as a barrier to service delivery, and that PPE and additional training were needed for all workers.

A similar study carried out in eight provinces of **Afghanistan** (Raghavan, et al, 2020) assessed 213 health professionals' perceptions, awareness and knowledge of the coronavirus; it also asked workers what types of training they received, if any, and what types of prevention strategies were being employed at their workplaces. Notably, 55 per cent of respondents replied that they had not any training in the use of PPE, and some workers had knowledge gaps concerning COVID-19 transmission. Workers reported various prevention measures including hygiene practices, physical distancing and various types of PPE. In many cases there were shortages of N-95 masks and not enough PPE to last more than three or four weeks.

The social partners may also collect data about their members' perceptions and experiences.



- ▶ The ITUC carried out a survey of 148 trade unions across 107 countries, collecting data on workers' experiences during the pandemic, looking at access to safe workplaces and other provisions such as PPE (ITUC, 2020b).
- ▶ A survey conducted by UNI Global Union examined COVID-19 responses and experiences of trade unions around the world, with over 60 per cent of respondents noting that they were impacted by shortages of PPE and disinfectants (UNI Global Union, 2020). Workers in the same survey also reported difficulties with the "right to disconnect" while teleworking or in temporary quarantine.



- ▶ Trade union surveys also revealed the mental health impacts of the crisis, with the NSZZ Solidarnosc Commerce Union in Poland reporting workers being stressed from working long hours in close contact with potentially infectious customers (UNI Global Union, 2020, p.7). A union of security officer workers in Peru also reported that some workplaces were forbidding voluntary isolation and failing to provide workers with PPE (UNI Global Union, 2020, p. 8).
- ▶ The International Organisation of Employers (IOE) produced a joint survey with the ILO, which looked at the challenges that COVID-19 presented to enterprises, the impact it had on them, and their responses (ILO-ACT/EMP and IOE, 2020). The survey also included information about OSH responses, revealing that organizations had implemented changes such as weekly OSH advisories, resource handbooks and noted needs such as increased OSH training.

Labour inspection statistics – including data on occupational accidents and diseases, compliance and other OSH-related issues – are essential for strategic planning, programming and the evaluation of inspection activities and responses at the national level^{18,19} In the context of COVID-19, a number of countries have strengthened their inspection systems and redefined workplans, giving priority to monitoring the application of the measures envisaged to deal with COVID-19 in the workplace.

¹⁸ See [the Labour Inspection Convention, 1947 \(No. 81\), Article 21](#)

¹⁹ The ILO has published two complementary guides on the collection, interpretation and reporting of labour inspection data: [Guide on the Harmonization of Labour Inspection Statistics and Collection, 2016](#); and [Use of Labour Inspection Statistics – A short guide \(2017\)](#).

► 5.2 Collection and analysis of data on occupational injuries and diseases

In most countries, the notification of occupational accidents and diseases is an obligatory duty of enterprises and employers, which must prepare and send an “accident report” both to the insurance institution and to the labour inspectorate, as well as to the competent OSH authority. In countries where COVID-19 has been recognized as an “accident” or “disease” it must be notified in accordance with these regulations.

Provisions on the recording and notification of occupational accidents and diseases in ILO instruments

Convention No. 155 requires member States to progressively establish and apply procedures for the notification of occupational accidents and diseases by employers as well as by other entities such as insurance institutions, occupational health services, medical practitioners and other bodies directly concerned (Art. 11(c)).

The Protocol of 2002 to the Occupational Safety and Health Convention, 1981 (P 155) details the requirements and procedures for both recording and notification (Arts. 3 and 4).

Convention No. 187 also calls for the inclusion in the national system for OSH of a mechanism for the collection and analysis of data on occupational injuries and diseases, taking into account relevant ILO instruments (Art. 4.3(f)).

Conventions Nos. 81 (Art. 14) and 129 (Art. 19.1) determines that the labour inspectorate is to be notified of industrial accidents and cases of occupational disease in such cases and in such manner as may be prescribed by national laws or regulations.

The ILO code of practice on recording and notification of occupational accidents and diseases provides guidance to decision-makers about procedures and arrangements for the recording and notification of occupational accidents and diseases, commuting accidents, dangerous occurrences and incidents, and their investigation and prevention. It states that the competent authority should:

- specify which categories or types of occupational accidents, occupational diseases, commuting accidents, dangerous occurrences and incidents are subject to requirements for reporting, recording and notification;
- establish and apply uniform requirements and procedures for employers and workers at the level of the enterprise, physicians, health services and other bodies, as appropriate, regarding reporting and recording of occupational accidents, cases and suspected cases of occupational diseases, commuting accidents, dangerous occurrences and incidents;
- establish and apply uniform requirements and procedures for the notification of occupational accidents, occupational diseases, commuting accidents and dangerous occurrences to the competent authority, insurance institutions, labour inspectorates, health services and other authorities and bodies directly concerned, as appropriate;
- make appropriate arrangements for the necessary coordination and cooperation between the various authorities and bodies;
- make appropriate arrangements for guidance to be provided to employers and workers to help them comply with the legal obligations.

The under-reporting of occupational accidents and diseases is a challenge that most countries face. In particular, only a small fraction of the diseases caused or aggravated by work are reported – and they typically include those that can have either an occupational or non-occupational cause. In addition, healthcare systems do not always investigate or report the actual cause of the ailment. Given these circumstances, under-reporting is such a frequent and widespread phenomenon that statistics rarely provide an idea of the real incidence of occupational diseases. Other sources of data may help to fill these gaps such as trade union surveys, analysis of compensation cases and sick leave surveys.

An efficient recording and notification system is particularly important and useful in emergency situations, such as the COVID-19 pandemic, to allow the collection of accurate data and to quickly identify outbreaks of cases.



- In the European Union, various countries differed with respect to their recognition of COVID-19 as an occupational injury or disease. Eurostat therefore created a new reporting code specifically for COVID-19 infections so that this data could be collected throughout the pandemic (Eurostat, 2020).

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Trends of occupational accidents and diseases during the COVID-19 pandemic in Italy

In Italy, the National Institute for Insurance against Accidents at Work (Istituto Nazionale Assicurazione contro gli Infortuni sul Lavoro, INAIL) reported that during the first ten months of 2020, the overall rates of injury had decreased by approximately 21.1 per cent from the previous year (INAIL, 2020). However, 16 per cent of all occupational injuries notified from January to October of 2020 had been COVID-19 cases²⁰. These occurred frequently amongst health technicians (39.3 per cent), health and social care operators (20 per cent), doctors (10.1 per cent), social welfare workers (8.4 per cent), administrative workers (3.4 per cent), health managers (1.1 per cent) and drivers (1 per cent). During the same period, fatal injuries in the workplace increased by 15.6 per cent compared to 2019 due to deaths from COVID-19, which accounted for one third of all deaths notified.

By sector, the number of occupational injuries reported in the first 10 months of 2020 decreased by 13.0 per cent in industry and services, 19.7 per cent in agriculture and 61.3 per cent in the public sector.

In the public sector in particular, injury and disease notifications dropped by 93 per cent between March and June, due to the use of remote work by almost all workers in this sector (especially during the first lockdown and after the summer period) and the closure of schools and universities.

However, there was a notable increase in occupational injuries recorded in the health and social care sector compared to 2019, two thirds of which were attributed to COVID-19: an increase of 117 per cent in the first ten months, with peaks of over 500 per cent in March and over 450 per cent in April.

The differences noted between the first 10 months of 2020 and 2019 are mainly due to factors related to the COVID-19 epidemic. The decrease in overall occupational injuries may be attributed to the suspension of non-essential production activities between 9 March and mid-May, the simultaneous closure of schools, and the impossibility for companies to resume production at full capacity in the post-lockdown period. Conversely, the inclusion of injuries related to COVID-19 infections occurring in the workplace had a significant impact on the increase in the number of deaths recorded.

²⁰ INAIL recognized COVID-19 as an occupational injury in Italy under Circular No. 13 of April 3, 2020. See: [COVID-19 per i contagi sul lavoro garantite le stesse prestazioni degli infortuni](#).

A lack of knowledge by employers, workers and other parties (including medical and healthcare providers) of the possibility and/or obligation to notify and record occupational accidents, diseases, dangerous occurrences and suspected cases of occupational diseases, is a key barrier to the collection of reliable OSH data. This is compounded by a fear of sanctions and negative consequences, which the parties believe might affect the enterprise's reputation.

Responsible authorities, in collaboration with the social partners and other interested parties, need to educate employers, workers and other parties about their responsibilities, and to enforce their compliance with notification and recording requirements.



- ▶ In Northern Ireland (United Kingdom) the Health and Safety Executive provides a list of criteria to guide employers when they should report a COVID-19 case or dangerous occurrence to the government (HSENI, 2020).
- ▶ The United States OSHA also provides guidance for employers clarifying when COVID-19-related hospitalizations or fatalities must be reported, according to the law (US Department of Labor, 2020b).

▶ 5.3 Research on OSH and COVID-19

Studies and research are often necessary to better ascertain the realities of OSH situations for which the available information sources do not provide sufficient data.

Countries have approached the organization of such services in various ways. Whereas most industrialized countries have a national institute or a comparable structure with research, training, information and consultation services on OSH as its main functions, such structures are rare in the developing world. If such an institution is lacking, these services may be provided by university research groups, social security institutions, national health service systems, governmental occupational health and safety authorities, or private consultants, in consultation with workers and their representatives. When a specialized centre for OSH does exist at the national level, collaboration between this body and other research institutions remains important. In the case of the current pandemic, many relevant stakeholders have contributed their research expertise to produce rapid data on how the situation is affecting workers in a range of sectors, with key relevancy to OSH.

The experiences of many industrialized countries has demonstrated the advisability of creating a specialized centre for OSH research and development that can:

- ▶ provide continuous scientific support for setting standards and occupational exposure limits;
- ▶ develop and implement criteria for evaluating competences in the various OSH disciplines;
- ▶ provide and promote the creation of educational training programmes to increase the number and competence of OSH specialists;
- ▶ provide information and advice on OSH matters to employers and managers, trade unions, government agencies and the general public;
- ▶ conduct or commission any necessary research on OSH (ILO, 2012).

In the case of the COVID-19 crisis, OSH studies and research can be particularly relevant, as demonstrated by the following four groups.

1. Analyses of sectors and occupations help to identify the specific risks in a certain sector or industry and the most common solutions applied to mitigate or eliminate them. These ‘risk maps’ are very useful for businesses in the sector, as well as for the development and updating of regulations and technical standards and the provision of targeted guidance, information and training and technical assistance.

In an epidemic context such as COVID-19, sectoral studies can analyse the main sources of exposure to the virus and, at the same time, identify other risks associated with the disease, such as psychosocial risks or exposure to situations of violence – thus shedding light on which sectors are particularly affected and why. Sectoral studies can also identify which areas are most economically affected by the pandemic, with the greatest risk of job losses, and analyse the consequences that the prospect of economic and job loss generates on the mental and physical health of workers and entrepreneurs.



- Research on healthcare workers in Japan during the COVID-19 pandemic examined factors affecting mental health. The study reported that increased workloads, increased working hours, fear of contagion and stigma were all common factors related to worsening mental health in workers (Makino et al, 2020). Research on frontline medical workers in China revealed that workers were reporting high rates of depression (50.3 per cent), anxiety (44.6 per cent) and insomnia (34.0 per cent) (Gold, 2020). Research from Bangladesh revealed instances of suicides by workers who had become unexpectedly unemployed during the crisis or had their businesses closed due to lockdowns (Bhuiyan et al., 2020).

As many workers have shifted to full- or part-time teleworking during the pandemic in many regions, research on the effects of remote work has been important to mitigate its emerging effects.



- In Portugal, a survey on teleworkers assessed the way they had adapted to their new style of work and the difficulties they had encountered. Respondents noted that the transition itself was very easy; however, many expressed difficulties related to a lack of resources related to office support infrastructure, such as printers or the internet, their work-life balance, and a lack of social communication with colleagues (Tavares et al, 2020).

2. Analyses of groups of workers help to gain a deeper knowledge of the situation of particular groups of workers who are presumed to be exposed to special or unusually severe risks. In the case of COVID-19, research has identified that people with certain underlying medical conditions are at an increased risk of developing a severe form of the illness or dying when infected (CDC, 2020b). This type of research can guide workplace policies including teleworking arrangements and other mitigating strategies.

3. Analyses of health consequences aim to identify, mainly through epidemiological research, health impairments which may have resulted from specific risks and working situations.

4. Assessment of compliance are carried out to assess the degree of compliance with legal requirements by sector, region and type of enterprise, with the aim of increasing the adherence of duty-holders. This is of particular relevance for regulations determining preventive and control measures against COVID-19.

5. Studies on the efficiency of various COVID-19 OSH prevention measures. This can add value to the development of effective, efficient and evidence based policies and prevention measures in response to COVID-19.

▶ 5.4 International cooperation

During crises such as COVID-19, international information sources on studies and research conducted in other countries can be very useful and save a considerable amount of research, time and effort. Although a problem might seem specific to one country, most problems are easily relatable elsewhere – and may indeed have already been studied or investigated in another country.

In the face of the COVID-19 crisis, the ILO is providing international guidance on the protection of workers' safety and health to identify sustainable short, medium- and long-term solutions for individuals, workers, communities and nations. The ILO has compiled a database of policy responses by its member States, including OSH policies and guidance at the national level (ILO, 2020r).

International cooperation and exchange of information

The Promotional Framework for Occupational Safety and Health Recommendation, 2006 (No. 197) emphasizes the ILO's role in relation to the promotion of international cooperation and exchange of information on OSH. This role may be particularly relevant during global pandemics, when experiences and lessons learned in one country quickly become a reference for other countries facing the same problem. Throughout the COVID-19 pandemic, the ILO has provided technical guidance as well as compiled a database of actions taken at the national level in the area of OSH.²¹

According to Paragraph 15, the ILO should:

- ▶ facilitate **international technical cooperation** on OSH with a view to assisting countries, particularly developing countries, for the following purposes:
 - › to strengthen their capacity for the establishment and maintenance of a national preventative safety and health culture;
 - › to promote a management systems approach to OSH; and
 - › to promote the ratification, in the case of Conventions, and implementation of instruments of the ILO relevant to the promotional framework for OSH;
- ▶ facilitate the **exchange of information** on national policies, systems and programmes on OSH, including on good practices and innovative approaches, and on the identification of **new and emerging hazards and risks** in the workplace; and
- ▶ provide information on **progress** made towards achieving a safe and healthy working environment.

²¹ See ILO resource [COVID-19 and the world of work: Country policy responses](#).



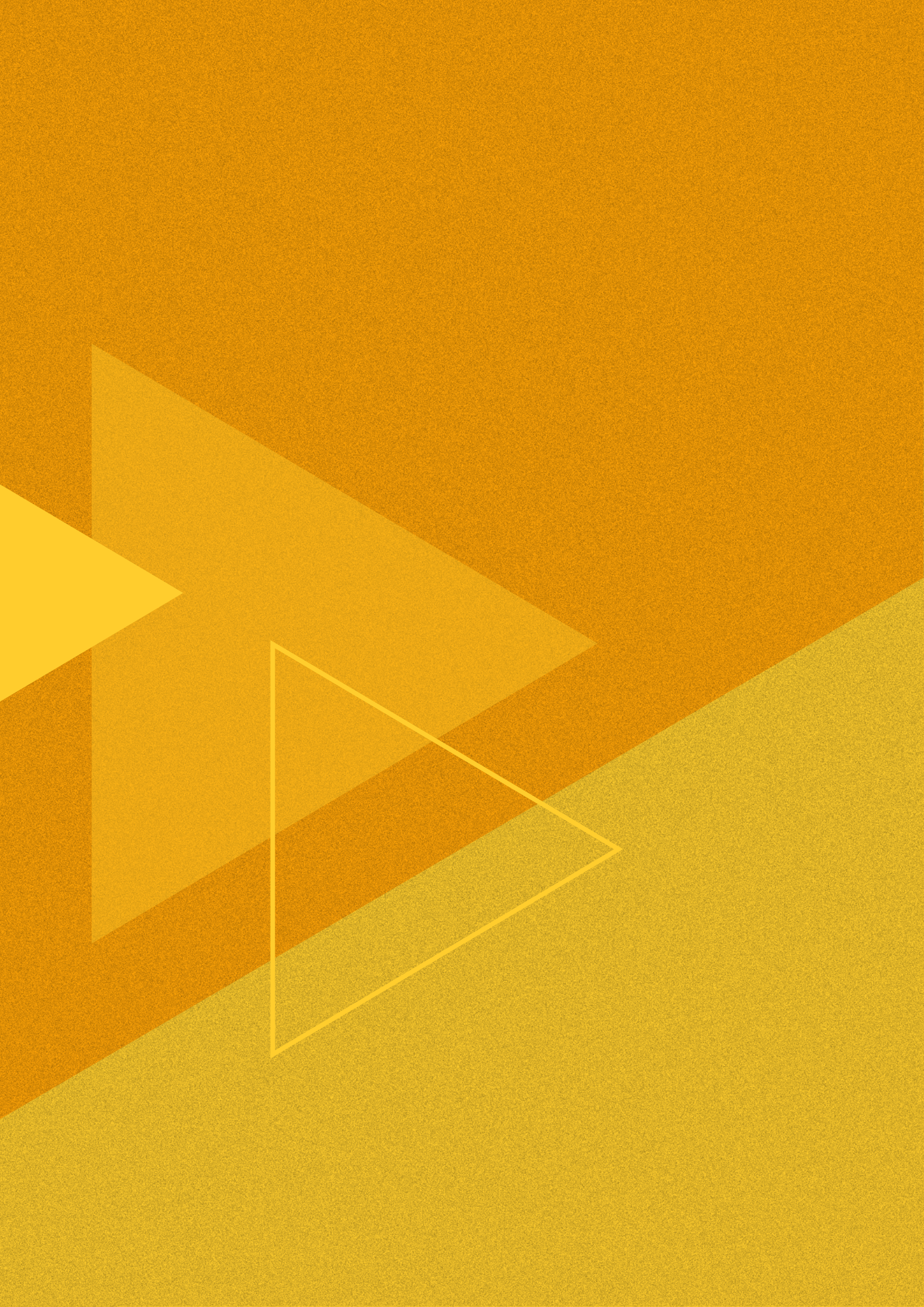
In 2020 the G20 OSH Experts Network, in collaboration with the ILO, conducted a survey in 12 G20 countries, examining the impact of the pandemic on OSH and the role of the national OSH system in responding to the pandemic across five areas including through national policy, national tripartite OSH bodies, labour inspection, occupational health services and data collection (G20 OSH Experts Network, 2021). This survey collected data on good initiatives around the world and examined how countries responded to the pandemic. Its aim was to raise awareness, exchange best practices and disseminate knowledge, while highlighting areas for improvement and initiatives for action to improve OSH during the pandemic.

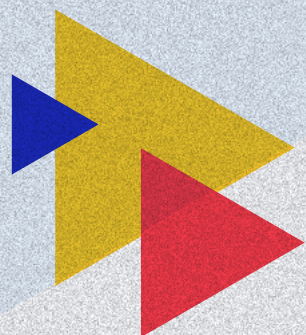
Other international agencies, each one in its specific specialized field, play an important role in providing technical advice, ensuring cooperation between countries, coordinating research, and disseminating results and best practices. For example, the WHO has led much of the international response to the COVID-19 crisis, providing technical guidance and data (WHO, 2021). The Organisation for Economic Co-operation and Development (OECD) has tracked countries' employment and social policy responses to COVID-19, including metrics related to occupational safety and health (OECD, 2020).

UN Women has provided guidance on the prevention of gender-based violence and domestic violence that has increased during the COVID-19 lockdowns. It has also collected supporting data and conducted rapid assessments of the situation (UN Women, 2020c). A rapid assessment found an increase in the number of calls made to domestic violence helplines – while at the same time these services have been cut on account of mitigation efforts and redirected funding for COVID-19 (UN Women, 2020c).

Other international organizations focus on producing guidance for specific sectors, often relevant to OSH and the world of work. The FAO, which specializes in food and agriculture, has examined the impact of COVID-19 on the food and agriculture sector (FAO, 2020). The International Air Transport Association (IATA) has also published research on COVID-19 transmission in passenger air travel (BW Businessworld, 2020).

International organizations and forums can also offer support in identifying and adopting gender-responsive measures to address the health, economic, employment and social impact of the pandemic on workers in all sectors – including the self-employed, casual and informal workers, and especially those in MSMEs, in both urban and rural areas.





6

Strengthening OSH management systems at the enterprise level

During the COVID-19 pandemic, workplaces have had to adopt adequate policies and measures to prevent contagion. There has been a need for thorough OSH risk assessments, carried out in accordance with the hierarchy of controls and established duties laid down in ILO standards²² and guidance²³. It is vital that workplaces develop action plans for the prevention and mitigation of the disease. These should include emergency preparedness, as part of their business continuity plans, and be in line with the results of risk assessments. Cooperation between employers, management and workers is therefore essential to ensure sustainability in implementing risk management measures.

22 See the [Occupational Safety and Health Convention, 1981 \(No. 155\)](#)

23 See [Guidelines on occupational safety and health management systems, ILO-OSH 2001](#)

► 6.1 Promoting cooperation between management, workers and representatives in the workplace

Creating a safety culture while promoting worker engagement has been found to reduce the risk of safety incidents, with workplaces with higher worker engagement reporting 64 per cent fewer safety incidents and 58 per cent fewer hospitalizations (Harter et al., 2020). This is particularly relevant during the COVID-19 global crisis and other emergencies, as new hazards and risks may increase rapidly due to the crisis situation and in light of newly adopted measures. In such times of uncertainty and rapid change, involving workers and giving them a sense of ownership in the response is important to ensure that solutions are sustainable and appropriate.

The importance of cooperation between management, workers and representatives in ILO standards

According to the Occupational Safety and Health Convention, 1981 (No. 155), the **national policy on OSH** should **promote communication and co-operation** at the levels of the working group and the undertaking and at all other appropriate levels up to and including the national level (Art. 5 (d)). To this end, the competent authorities in each country should provide information and advice, in an appropriate manner, to employers and workers and promote or facilitate co-operation between them and their organisations, with a view to eliminating hazards or reducing them as far as practicable (Occupational Safety and Health Recommendation, 1981 (No. 164), Para. 4(d)).

The Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187) calls for the inclusion in the **national system for OSH** of **arrangements to promote, at the level of the undertaking, cooperation between management, workers and their representatives** as an essential element of workplace-related prevention measures (Art. 4.2(d)).

Convention No. 155 also recognizes the **co-operation between management and workers and/or their representatives** as an **essential element of organisational and other measures taken at workplace level** (Art. 20). The measures taken to facilitate such co-operation should include, where appropriate and necessary, the appointment, in accordance with national practice, of workers' safety delegates, of workers' safety and health committees, and/or of joint safety and health committees; in joint safety and health committees, workers should have at least equal representation with employers' representatives (Recommendation No. 164, Para 12(1)).

Workers' participation is a key element of the OSH management system in the workplace, as highlighted in the ILO Guidelines on occupational safety and health management systems, ILO-OSH 2001. The employer should ensure that workers and their safety and health representatives are consulted, informed and trained on all aspects of OSH, including emergency arrangements associated with their work. The establishment of a safety and health committee can be an effective way of ensuring consultation and collaboration between the employer, management and workers.

During the COVID-19 pandemic, one challenge has been to ensure cooperation between management and workers who are working from home. To this end, employers should commit to maintaining regular communication by means of email, newsletters, internal web pages, video calls and virtual meetings, dedicated apps, etc.



- ▶ A study on teleworking productivity and engagement during the COVID-19 crisis in Austria, Germany and the Russian Federation found that isolation had a negative impact on productivity, as workers were less engaged without team interaction. (Kim and Coghlan, 2020). The paper suggested improving team interaction and competence development to keep workers engaged while teleworking.
- ▶ The International Organisation of Employers (IOE) produced guidance on teleworking during COVID-19, suggesting measures to ensure cooperation such as regular communication, mutual trust and the use of online collaborative tools (IOE, 2020).

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► 6.2 Conducting a comprehensive risk assessment

The risk assessment process involves the identification, assessment and control of risks, with the aim of avoiding, minimizing or eliminating them. It is very important to actively involve workers and their representatives – and safety and health committees, where appropriate – in this process.

Hazard identification and risk assessment

All occupational hazards should be identified, and their associated risks assessed, on an ongoing basis. In the context of the COVID-19 pandemic it is very important to conduct a comprehensive risk assessment, which takes into consideration the work environment, the task in hand, the potential threat – if any, for example for frontline staff – and the measures already available, such as engineering or organizational controls and PPE. The risk assessment needs to consider the entire working day, including access to common areas such as cafeterias, sanitary facilities or places where people circulate²⁴. Account should be taken of the various types of risks that might arise, such as biological, chemical, physical or psychosocial hazards, including exposure to violence and harassment.

The risk assessment should also bear in mind workers' individual characteristics. Based on information currently available, older adults and people of any age who have serious underlying medical conditions might be at a higher risk of severe illness from COVID-19.

Workers with disabilities may also be at a greater risk of contracting COVID-19 for several reasons (difficulties in accessing hygiene facilities, in practicing social distancing, and in accessing information, etc.) (WHO, 2020e). Employers can support workers with disabilities during the COVID-19 crisis by adopting flexible work arrangements – such as teleworking – and the use of paid leave, and by making infection control measures accessible (WHO, 2020e).

Migrant workers are particularly vulnerable to OSH risks in general, as well as during crises such as COVID-19. This may be attributed to a number of reasons: they may not speak the local language(s), they may have limited knowledge of the host community, and they may be unable to access or understand information on OSH measures or their rights as workers (WHO, 2020f). In addition, some migrants may fail to report unsafe working environments because they fear sanctions on account of their employment status or their need for a steady income. Many migrant workers also reside in shared accommodation with little to no possibility of physical distancing or access to adequate hygiene measures (ILO, 2020z(ii)).



- In December 2020, there was a COVID-19 outbreak in a shrimp market near Bangkok, Thailand, where many migrant workers work. This prompted the market and nearby dormitories to go into lockdown, affecting nearly 10,000 migrant workers in the area. The contact tracing of these infections was difficult, as smugglers took advantage of the migrants' situation and the fact they had to support themselves during the pandemic (Thongnoi, 2021). This has highlighted the need to create tailored strategies for preventing COVID-19 in vulnerable worker populations, such as migrants.
- A study in Malaysia examined the specific risks that migrants face in connection with COVID-19. Many of them were reluctant to get tested, as they feared immigration raids. They also faced communication barriers and were unable to understand materials and guidance on COVID-19. To tackle this challenge, the International Organization for Migration produced health information in a variety of languages for workers in Malaysia (Wahab, 2020).

²⁴ In addition, when applicable, employer-provided dormitories and workplace transport.

The risk assessment should consider not only risks to workers but also to suppliers, clients and visitors to employers' premises.

Adoption of OSH measures to prevent COVID-19 transmission in the workplace

Based on hazard identification and risk assessment, preventive measures should be identified and implemented, following the hierarchy of controls.

Applying the hierarchy of controls to COVID-19

Elimination and substitution. Since it is not yet possible to completely eliminate the hazard (novel coronavirus), it may be possible to reduce exposure and the rate of transmission by substituting old work processes for new ones (e.g., implementing working-from-home-arrangements).

Engineering controls. These types of controls reduce exposure to hazards without relying on worker behaviour and can be the most cost-effective solutions to implement. Engineering controls include for example:

- ▶ improving ventilation, for example by increasing ventilation rates in the work environment; installing high-efficiency air filters when required; installing specialized negative pressure ventilation in some settings (such as airborne infection isolation rooms in healthcare settings and autopsy rooms in mortuary settings);
- ▶ installing physical barriers, such as clear plastic sneeze guards;
- ▶ installing a drive-through window for customer service.

Administrative and organizational controls. These types of controls consist of changes in work policy or procedures in order to reduce or minimize exposure to a hazard. These measures may have different purposes, including:

- ▶ ensuring physical distancing (e.g., introducing extra shifts, having workers present on alternate days and/or distributing entry, exit and break times to reduce the total number of workers in a facility at a given time);
- ▶ promoting good hygiene practices, directed at both workers (e.g., promoting frequent and thorough handwashing, encouraging respiratory etiquette, discouraging workers from using other workers' phones, desks, offices or other work tools and equipment, etc.) and the workplace (e.g., improving regular housekeeping, including routine cleaning and disinfecting, etc.)
- ▶ implementing infection control practices (e.g., establishing policies on health monitoring, implementing screening processes, adopting response measures for sick or potentially infected workers, etc.).

Personal protective equipment (PPE). Even if PPE is generally considered a measure of last resort, it is necessary to prevent certain types of exposure during the COVID-19 pandemic, in particular for the most hazardous occupations, such as healthcare. The correct use of PPE can help prevent exposure, but it should not take the place of other prevention strategies, whenever possible. PPE should be provided by the employer at no cost to workers. To be effective, PPE must be selected on the basis of the hazard to the worker; properly fitted and periodically refitted; worn consistently and properly when required; regularly inspected, maintained and replaced as necessary; and properly removed, cleaned and stored or disposed of, as applicable, to avoid contaminating the worker, others or the environment. The types of PPE required during the COVID-19 pandemic are contingent upon the risk of infection while working and the tasks that may lead to exposure. Employers should regularly check national references for updates about recommended PPE.

According to the ILO OSH 2001 Guidelines, prevention and control measures should be adapted to the hazards and risks encountered by the enterprise; be reviewed and modified if necessary on a regular basis; comply with national laws and regulations; reflect good practice; and consider the current state of knowledge. In the COVID-19 context, employers should regularly consult occupational health services – national or local OSH and public health authorities and bodies – which may have developed information materials to promote workplace prevention of risk of exposure to the virus and other technical advice.

OSH measures are not only aimed at protecting the safety and health of workers, but also that of other people in the workplace, such as suppliers, contractors, clients and patients. These measures are thus essential to reduce community transmission and protect the health of customers.



- ▶ In Singapore, adhering to sector-specific standards allows enterprises to receive the SG Clean quality mark (Tan, 2020). In order to be certified, businesses must implement hygiene and cleanliness practices, including specific practices when interacting with suppliers, contractors and customers. Restaurants have implemented various new practices to curb the spread of COVID-19 and receive this certification, such as maintaining physical distances between customers, sanitizing tables and equipment, and using contactless methods of payment.
- ▶ In Iceland, shops implemented measures to protect customers. These included: making hand sanitizer readily available; enabling customers to disinfect their shopping baskets; providing gloves for workers; limiting the number of customers in the shop at any one time; placing protective plastic screens in front of checkouts; and providing markings on the ground to remind customers of physical distancing (Vinnueftirlitid, 2020).
- ▶ In the United Kingdom, pubs and bars implemented measures such as contactless ordering through apps and outdoor dining, and they only allowed seated service (HM Government, 2020).

The ILO produced a number of tools to support employers and workers during the COVID-19 crisis.

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ILO tools to protect workers' safety and health during COVID-19 crisis

- ▶ Prevention and Mitigation of COVID-19 at Work: Action checklist (April 2020)
- ▶ In the face of a pandemic: Ensuring Safety and Health at Work – World Day for Safety and Health at Work Report (April 2020)
- ▶ A safe and healthy return to work during the COVID-19 pandemic – Policy Brief (May 2020)
- ▶ A Safe Return to Work: Ten Action Points (May 2020)
- ▶ Managing work-related psychosocial risks during the COVID-19 pandemic – Instructional Material (June 2020)
- ▶ Practical Guide on Teleworking during the COVID-19 pandemic and beyond (July 2020)
- ▶ COVID-19 and health facilities: Checklist of measures to be taken in health facilities (July 2020)
- ▶ Hand hygiene at the workplace: an essential occupational safety and health prevention and control measure against COVID-19 – Briefing Note (September 2020)
- ▶ Prevention and mitigation of COVID-19 at work for small and medium-sized enterprises: Action Checklist (August 2020)

The ILO has also developed a range of sectoral briefs that include sections focused on OSH issues. These and additional tools and resources developed by the ILO, other international organizations, regional and national bodies, and the social partners, are listed in the Annexes to this report.

Management of change during the COVID-19 crisis

In times of crisis such as the COVID-19 pandemic, the management of change is an essential issue to be considered in the prevention and control of OSH hazards and risks. According to the ILO-OSH 2001 Guidelines, there is an OSH impact due to internal changes (such as those in staffing or due to new processes, working procedures, organizational structures or acquisitions) and of external changes (for example, as a result of amendments to national laws and regulations, organizational mergers, and developments in OSH knowledge and technology). This potential OSH impact should be evaluated and appropriate preventive steps taken prior to the introduction of changes. The same principles must be applied when the changes, abrupt and sudden, concern an emergency situation such as COVID-19.

A workplace hazard identification and risk assessment should be carried out before any modifications or introduction of new work methods, materials, processes or machinery. Such assessment should aim at avoiding that measures implemented – in the case of COVID-19 to prevent virus exposure – create new sources of risk. For example, healthcare workers may face risks arising from the use of heavy PPE, such as physical marking on faces, heat stress and dehydration. Workers required to work from home may be exposed to specific psychosocial and ergonomic risks. A continuous monitoring of OSH conditions and appropriate risk assessment is thus required to reduce, to the extent possible, the new hazards and potential negative effects resulting from control measures related to the risk of contagion.

Addressing psychosocial risks during the COVID-19 pandemic

The coronavirus pandemic has induced a considerable degree of fear, worry and concern in the overall population and in the world of work. Both workers and employers have faced anxiety produced by the health risks of COVID-19, uncertainty about how long the crisis will last, and the possibility of losing their jobs or being forced to close their businesses.

During the pandemic, there have been radical changes imposed on work processes in terms of organization, methods, conditions and risks.

Some categories of workers have been more affected than others, such as frontline workers (including healthcare and emergency workers), workers involved in the production of essential goods, those engaged in delivery and transport, or workers responsible for ensuring the safety and security of the population. In many cases these workers have had to face multiple difficulties: the worry of being infected and transmitting the virus to their families; an increased workload; and the discomfort of wearing PPE during long working hours. Migrant workers have also faced increased stigma and discrimination, as rhetoric and fears around the virus crossing borders have fuelled xenophobic sentiments (IOM, 2020).

Many workers suddenly found themselves working from home and being exposed to specific psychosocial risks, such as isolation, longer working hours, the lack of an adequate and equipped work space, and a possible overlapping of professional and family duties.

According to a recent survey conducted by the Society for Human Resource Management (SHRM), around 71 per cent of employers reported that they had struggled to adjust to remote work, with 65 per cent of enterprises reporting that worker morale has been difficult to sustain while teleworking (ILO, 2020w).

In this context, it is therefore important to remember that employers have the responsibility, in consultation with workers, to take measures to manage psychosocial risks that may arise due to new working conditions. It can be challenging for employers to ensure that their workers adopt and implement adequate OSH in their home environment, which presents a range of unknown variables and risks. Collaboration and communication between employers and workers is therefore vital, as employers can fulfil their duty of guaranteeing their workers' safety and health by providing up-to-date information and risk assessment checklists, and conducting virtual ergonomic consultations, for example.

The ILO guide *Managing work-related psychosocial risks during the COVID-19 pandemic* provides employers and managers with key elements to consider when assessing psychosocial risks and implementing preventive measures to protect the well-being of their workers during the COVID-19 pandemic. The guide considers ten areas for action²⁵ at the workplace level relevant for the prevention of work-related stress and the promotion of health and well-being, both in times of lockdown and in the following phases of return to work (ILO, 2020y).

Violence and harassment (both physical and psychological) should also be included in the risk assessment process²⁶.

Throughout the pandemic, many workers have been the targets of violence and harassment, especially frontline and essential workers.

25 Including the environment and equipment; workload; work-pace and work-schedule; violence and harassment; work-life balance; job security; management leadership; communication, information and training; health promotion and the prevention of negative coping mechanisms; social support; and psychological support.

26 As required in the Violence and Harassment Convention, 2019 (No. 190), specifically in Article 4, member States should prohibit in law violence and harassment, establish or strengthen enforcement and monitoring mechanisms, and put in place a comprehensive strategy in order to implement measures to prevent and combat violence and harassment. In accordance with Article 9, employers should take steps commensurate with their degree of control to prevent violence and harassment in the workplace.



- ▶ A bus driver in Bayonne, France, was killed after asking three men to wear face masks, which were mandatory on all public transport in France (BBC, 2020).
- ▶ Miners in Poland, who had disproportionate rates of COVID-19 infection, faced blame and public abuse from the community, as people on social media blamed miners for increases in infections. This prompted Poland's JSW, the largest coking coal producer in Europe, to launch a campaign defending miners and their families (Reuters, 2020).
- ▶ In the United States there have been many reported cases of workers facing attacks. For instance, a restaurant worker in Louisiana was assaulted after telling customers that they could not sit in a group of 13 within the restaurant due to physical distancing requirements. An airline worker in the state of Arizona was also hit by a woman who was refused entry onto the plane as she would not wear a mask (Porterfield, 2020). In Maryland, two women working at an ice-cream shop were brutally attacked after asking two customers to wear masks within the establishment, resulting in both women having broken bones and one requiring eye surgery (Stone, 2020).
- ▶ In Mexico, the Ministry of the Interior documented dozens of cases of aggression towards healthcare workers, with 70 per cent of these being towards women (Ministry of the Interior, Mexico, 2020). A nurse in Mexico reported that she had had chlorine thrown at her while she was walking down the street (Semple, 2020). Several cities created dedicated transport services for healthcare workers after many public bus operators refused to let them board (WHO, 2020a).
- ▶ The Karachi Civil Hospital in Pakistan erupted in violence in May 2020 when 70 people stormed into the hospital and attacked healthcare workers because a deceased relative had died from COVID-19 (Ali, 2020).

During the second wave of COVID-19, some countries noted an increase in the population's intolerance against frontline workers – those same workers who in the first wave had been considered “angels” or “heroes”. Increased acts of verbal and physical violence were recorded.



- ▶ During the second wave in Italy, healthcare workers experienced a shift in public opinion toward growing anger and a belief that they might be to blame for restrictions on the economy (Berardi, 2020). This shift in public opinion, coupled with stress from the work itself, has led to many healthcare workers feeling burnt-out. A new law, enacted in September 2020, aims to address violence against health and socio-health professionals through preventive measures, training courses, and the monitoring of episodes of violence²⁷.

Lockdowns, which have resulted in many workers teleworking, have resulted in more people – especially women – being subjected to an increased risk of domestic violence (both physical and psychological) during the pandemic. The Violence and Harassment Convention, 2019 (No. 190) includes provisions for member States to mitigate, so far as is reasonably practicable, the impact of domestic violence on the world of work²⁸. Due to the virus's economic toll, many resources that were previously focused on tackling domestic violence have also been diverted to address immediate COVID-19 needs (UN Women, 2020a).

²⁷ Law No. 113 of 14 August 2020.

²⁸ See the ILO Violence and Harassment Convention, 2019 (No. 190), Article 10(f).



- ▶ A study in Argentina found a 32 per cent increase in calls to a domestic violence hotline in Buenos Aires during the lockdown, with another study finding a similar link between stay-at-home orders and increases in domestic violence (Perez-Vincent et al., 2020).
- ▶ Another survey of 15,000 women in Australia found that 4.6 per cent of women had experienced either physical or sexual assault from a cohabiting partner, with two-thirds of those who experienced violence saying that it had begun following the start of the pandemic (Boxall et al., 2020).
- ▶ Several bodies have produced guidance for employers on addressing domestic violence during COVID-19. The WHO has produced a guide on preventing and responding to violence against women during the pandemic (WHO, 2020c). In the United Kingdom, a network of employers produced a domestic abuse toolkit for employers outlining the state of the problem and proposed actions to support workers (The Princes Responsible Business Network, 2020).

Emergency prevention, preparedness and response

A sound OSH management system should include the establishment and maintenance of emergency prevention, preparedness and response arrangements. According to the ILO OSH 2001 Guidelines, such arrangements should:

- ▶ identify the potential for accidents and emergency situations, and address the prevention of OSH risks associated with them;
- ▶ be made according to the size and nature of activity of the enterprise;
- ▶ ensure that the necessary information, internal communication and coordination are provided to protect all people in the event of an emergency at the worksite;
- ▶ provide information to, and communication with, the relevant competent authorities, and the neighbourhood and emergency response services;
- ▶ address first-aid and medical assistance, firefighting and evacuation of all people at the worksite;
- ▶ provide relevant information and training to all members of the organization;
- ▶ be established in cooperation with external emergency services and other bodies – where applicable.

If a company has a comprehensive workplace emergency preparedness plan set up to deal with health crises and pandemics, it will be better placed when facing an unforeseen situation, including a crisis such as COVID-19, to organize a rapid, coordinated and effective response. Similarly, it will be easier to adapt the measures already envisaged in the plan to the specific emergency situation that arises.

A workplace COVID-19 emergency plan has to consider all the work areas within the enterprise and the activities carried out by the workers. It also has to identify potential sources of exposure and take the necessary measures to prevent and manage the pandemic, in accordance with the regulations and measures defined at the national level by the government – and in coordination with the social partners. The plan should also provide for specific procedures on ways to deal with workers who contract COVID-19 at work or outside, including quarantine for contact cases, tests and surveillance, etc. These procedures should also take into account the privacy and confidentiality of workers.



- ▶ In Canada, employers have created workplace plans in consultation with workers, which include risk reduction measures such as screening workers for COVID at the start of every shift and implementing contact tracing – where workers are notified of potential exposures without receiving any identifying information about the contact (Government of Ontario, 2020a).
- ▶ In New Zealand, workplaces have been required to conduct contact tracing for workers and customers, when relevant (Government of New Zealand, 2020).

► 6.3 Support mechanisms for the progressive improvement of OSH conditions in MSMEs and the informal economy

Micro-, small and medium-sized enterprises (MSMEs), as well as the informal economy, have been particularly hard hit by the effects of the pandemic. Many of them lack the resources to invest in OSH, particularly when faced with a surge of risks due to the virus, and a fair number of their workers are already at higher risk of occupational accidents or diseases – which jeopardizes both the companies and employment.

Reaching out to employers and workers in MSMEs and the informal economy is perhaps the most daunting challenge for OSH systems. MSMEs often find it hard to meet official OSH requirements and to comply with new OSH regulations adopted to reduce the transmission of COVID-19 in the workplace.

In recent years, countries have designed special initiatives to address this situation, for example by strengthening partnerships with the social partners, supporting the building of strategic partnerships (e.g., with public health care systems, social security institutions, NGOs and education institutions), and promoting mentorship by large employers and partnerships between large companies and MSMEs. A range of strategies has also been employed to encourage good OSH practices in MSMEs, such as developing networks of MSMEs, involving workers and management together in an integrative approach, and building trust between other stakeholders and MSMEs (Treutlein, 2009).



Webinars to promote COVID-19 prevention in MSMEs and informal workplaces

The ILO Country Office in New Delhi (India) organized a series of webinars for implementing prevention measures and supporting workers in MSMEs and the informal economy in South Asia.

The webinars were developed for a range of stakeholders, including government officials, and representatives of employers' and workers' organizations. Specific webinars were developed targeting workers in MSMEs as well as those in the informal economy.

The webinars built on the ILO's experience in the region and used a participatory action-oriented training (PAOT) approach. They encouraged the participants to share good practices on practical steps to prevent COVID-19 at the workplace, focusing on physical distancing, workers' hygiene, self-health checks and joint risk assessments.



Protecting and supporting workers in the coffee sector in Colombia during COVID-19

The National Federation of Coffee Growers and the Ministry of Agriculture and Rural Development in Colombia jointly developed a protocol for mitigating the risk of COVID-19 transmission in the coffee sector. This protocol provided specific measures and guidance for small farms, as well as tailored information for those working on medium-sized and large farms.

In addition, the Departmental Committees of Coffee Growers also created a strategy that included “isolation centres” for harvesters who did not have a home or residence in their area of work, so that they could quarantine and recover if they presented symptoms or tested positive for the virus.

The informal economy

The risks associated with COVID-19 are exacerbating the existing vulnerabilities of poor workers in the informal economy. The full or partial lockdown measures implemented in many countries, affecting some 5 billion people globally, have had a number of detrimental effects on about 1.6 billion informal workers, working in sectors such as accommodation and food services, manufacturing, the wholesale and retail trades and agriculture – with women over-represented in the most hard-hit sectors (ILO, 2020d).

Workers in the informal economy, especially in developing countries, simply must work, despite restrictions on movement and social interaction, lockdowns and other measures. They often do not have access to social protections such as sick leave or sick pay. In addition, at home, overcrowded and unsanitary living conditions make physical distancing nearly impossible. Not being able to comply with the precautions mandated by health authorities may contribute to social tension and transgressive practices and behaviour, which endanger governments' efforts to protect the population and fight the pandemic. Informal workers often do not have access to PPE, sanitizer or hand-washing stations, putting them at increased risk of infection (ILO, 2020d).

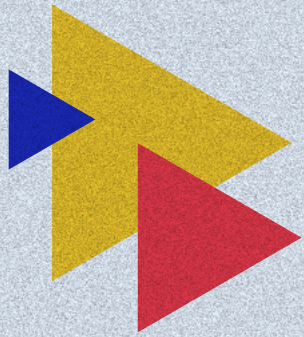


- ▶ A study of countries on the African continent looked at the various government responses to support the informal economy and encourage safe behaviour. These included strategies such as cash transfers, financial assistance and other forms of social assistance (Schwettmann, 2020). In South Africa, COVID-19 health and safety guidelines were developed and shared with informal workers who worked in open-air markets and street stalls (WIEGO, 2020).
- ▶ Informal waste pickers in Curitiba, Brazil, were provided with PPE and training on how to prevent COVID-19 transmission (C40 Knowledge Hub, 2020).
- ▶ Zimbabwe worked to mitigate the impacts of COVID-19 on the informal economy, specifically, on informal food markets, by engaging in worker consultations and hazard identification (ILO, 2021d).



Looking forward: Resilient OSH systems to face the next crisis

The COVID-19 pandemic has had a major impact on the world of work. Workers have not only had to run the risk of contracting the virus at the workplace, but they have also been subjected to mobility restrictions. There has been an increase in teleworking arrangements and the closure of many commercial and manufacturing activities. The ripple effects of the crisis have, in turn, impacted the labour market, working conditions and wages – and, in many cases, access to protections such as sick leave and social benefits. The pandemic has clearly shown the importance of strengthening and creating resilient OSH systems, and we must carry this lesson with us into the future. The crisis has exemplified the importance of OSH as a key actor within the broader emergency response and public health system. National emergency preparedness and response should actively integrate OSH preparedness within their national emergency plans. Investing in OSH systems will not only contribute towards responding to the current pandemic and recovering faster by avoiding further contagion, but will create resilience to face any future crises that might lie ahead.



International Labour Standards (ILS) serve as an important reference for protecting decent work in the context of crisis responses. Standards covering the area of occupational safety and health can be adapted to situations related to the COVID-19 pandemic. The set of ILS on employment, social protection, wage protection, MSME promotion and workplace cooperation also provide guidance for dealing with the socio-economic repercussions of the pandemic. ILO member States should recognize that ratifying and implementing these standards equips them better to face any crisis. Indeed, the respect of ILS contributes to a culture of social dialogue and workplace cooperation that can be key to recovery and prevent a downward spiral in employment and labour conditions – both during and after the crisis.

The ILO Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205), outlines a strategic approach to crisis responses,²⁹ emphasizing the importance of social dialogue in responding to crisis situations.³⁰ It also highlights that a crisis response should promote safe and decent working conditions.³¹

The importance of **social dialogue**, in all areas of a crisis response, has been evident throughout the pandemic. It is vital to consult and communicate with workers and their representatives in order to create responses that take into account the needs of workers, employers and the whole society. Effective social dialogue helps deliver the solutions that are best adapted to the prevailing circumstances, builds trust and confidence. A multi-level social dialogue approach corresponds to the fourth pillar of the ILO policy response to the COVID-19 crisis.

In the field of OSH, the **Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187)** and its accompanying **Recommendation (No. 197)**, provide for a coherent and systematic framework to promote a national preventive safety and health culture, recognizing the importance of existing Conventions on OSH. This framework outlines elements of an OSH system, which are of major importance in maintaining safety and health for workers at all times, including responding to crises. **The Occupational Safety and Health Convention, 1981 (No.155)** provides a framework for the functions and responsibilities that employers, workers and national authorities have in respect to OSH.

Strong national OSH policies and regulatory frameworks contribute to resilient health and labour systems within countries, preparing them to better respond to crises by increasing their chance of business recovery or continuity and protecting workers' safety and health. As described in Chapter 1, in many countries, **regulations, technical standards and/or collective agreements** have been adopted to address the specific conditions of different sectors, often with detailed procedures and protocols to prevent and deal with cases of COVID-19 in the workplace. Rapid legal responses, adopted in consultation with the social partners, will also be required to address other emergencies and put in place prescriptions to guide duty holders on the adequate adoption of OSH measures.

This situation has also highlighted the need to have in place solid **labour inspection systems**, capable of intervening on a large scale to make sure that the established measures, such as those put in place to slow the spread of the virus, are consistently applied in all types of enterprises. The fact that labour inspectors interact constantly with workplaces places them in a privileged position to provide reliable information on applicable new legal provisions to employers and workers on a regular basis. This may have an impact on compliance.

²⁹ Recommendation No. 205 calls on member States to recognize the vital role of employers' and workers' organizations in crisis response, taking into account the Freedom of Association and Protection of the Right to Organise Convention, 1948 (No. 87), and the Right to Organise and Collective Bargaining Convention, 1949 (No. 98).

³⁰ Recommendation No 205, Para. 7 (k) and 8 (i).

³¹ Recommendation No. 205, Para. 9(d).

The COVID-19 crisis also demonstrates the necessity for a strong **national OSH institutional framework**, with a competent authority on OSH proactively involved in consultation at the national level. A **national OSH authority** that provides leadership and acts as a trusted body in a crisis has a stronger chance of producing more coordinated and rapid responses, and of increasing levels of trust in the population. This, in turn, may influence behaviours to comply more with the guidance provided.

Social dialogue is essential for deciding upon appropriate OSH measures that take into account the complex needs of workers, employers and governments and develop appropriate and sustainable solutions; the institutional framework for this dialogue is usually the **OSH national tripartite advisory body**.

The COVID-19 pandemic has brought to light the need for **occupational health services** to act as a bridge between public health systems and the workplace. The services provided can be varied, including advice, consultation, education and training; case monitoring; and notification to health and social security authorities.

There is also a strong need for effective and coordinated communication and information to promote compliance and the subsequent adoption of adequate OSH measures at the workplace. This may include **awareness raising, information, advisory services and training on OSH**. Systems of rapid communication are required to disseminate information quickly, and they must closely follow the trends of the pandemic and the measures taken at government level to stem them.

OSH data are essential for developing informed policies, laws and regulations, strategies and measures on OSH, particularly in emergency contexts, where public authorities need to regularly assess the situation and make informed, evidence-based decisions. During the COVID-19 pandemic, **data collection** and **OSH research** can help identify the groups most at risk (to take targeted measures), as well as the main sources of exposure to the virus and other related risks (for example, psychosocial risks or exposure to violence). In the field of research, international exchange and cooperation are a prerequisite for comparing data, progressing rapidly in analysis, and drawing inspiration from other countries' experiences.

At the **workplace level**, having an efficient **OSH management system** in place, with mechanisms to involve workers in OSH implementation, is vital to ensure that solutions are sustainable and appropriate³². During the COVID-19 pandemic, workplaces have needed to adopt new procedures and measures to prevent contagion and mitigate other risks that arise, including due to changes in working arrangements. To face these new challenges, enterprises should have the necessary expertise to undertake a comprehensive **risk assessment**, which considers the work environment, the task at hand, the threat and the measures already available, so that it might identify and implement preventive measures – in accordance with the hierarchy of controls. Attention should also be paid to psychosocial risks, including those associated with violence and harassment. If a company has a comprehensive workplace **emergency preparedness** plan set up to deal with health crises and pandemics, it will be in a better position – when facing unforeseen situations, including crises such as COVID-19 – to organize rapid, coordinated and effective responses.

In conclusion, while the public health system has a responsibility to prevent the spread of the COVID-19 virus and other public health threats to the entire population, strong and effective national OSH systems are essential to safeguard the life and health of workers, and for this they must be equipped with adequate human, material and financial resources. Recent crises – such as the 2020 ammonium nitrate explosion in Beirut, numerous natural disasters, and public health threats including the Ebola epidemics and the Fukushima nuclear disaster – have all tested the strength of crisis response systems and had strong implications for the safety and health of workers. While strengthening OSH systems in response to COVID-19 will help governments, employers and workers safeguard health in the workplace, building up these resilient systems will also provide a foundation to respond to other unforeseen events and crises that may occur in the future.

³² See: The **Promotional Framework for Occupational Safety and Health Recommendation**, 2006 (No. 197)



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► Annexes

Selected resources on COVID-19 and the world of work

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
A global survey of employer and business membership organizations: Inside impacts and responses to COVID-19	ILO	This survey examines the demands and challenges faced by employer and business membership organizations including factors related to OSH.	https://www.ilo.org/actemp/publications/WCMS_749379/lang--en/index.htm
A quick reference guide to common COVID-19 policy responses	ILO	This reference guide discusses common policy measures in response to the pandemic that affect businesses directly or indirectly including a section on enhancing safety and health at work.	https://www.ilo.org/actemp/publications/WCMS_754728/lang--en/index.htm
COVID-19 and the world of work	ILO	This web portal provides resources and news on how COVID-19 is affecting the world of work.	https://www.ilo.org/global/topics/coronavirus/lang--en/index.htm
COVID-19 and the world of work: Country policy responses	ILO	This database compiles country policy responses to COVID-19 and is updated regularly, including policies on OSH.	https://www.ilo.org/global/topics/coronavirus/regional-country/country-responses/lang--en/index.htm
ILO Standards and COVID-19 (coronavirus)	ILO	This FAQ document provides key provisions of international labour standards relevant to the evolving COVID-19 outbreak	https://www.ilo.org/global/standards/WCMS_739937/lang--en/index.htm
Needs assessment survey: The impact of COVID-19 on enterprises	ILO	This survey tool helps employers and business membership organizations evaluate priorities and challenges of enterprises during the pandemic including questions about health risks.	https://www.ilo.org/actemp/publications/WCMS_752426/lang--en/index.htm

Resources developed by other international organizations

COVID-19 and its impact on businesses and workers	Office of the United Nations High Commissioner for Human Rights (OHCHR)	This website discusses the impact of COVID-19 on businesses and workers, including the safety and health of workers.	https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25843&LangID=E
Policy Brief: The World of Work and COVID-19	United Nations	This policy brief outlines the impacts of COVID-19 on the world of work, including the importance of comprehensive approaches to the return to work including the protection of workers' safety and health.	https://www.ilo.org/employment/Informationresources/covid-19/other/WCMS_748323/lang--en/index.htm
Tracking Public Health and Social Measures: A Global Dataset	World Health Organization (WHO)	This database includes public health and social policies from around the world that have been applied to slow or stop the spread of COVID-19.	https://www.who.int/emergencies/diseases/novel-coronavirus-2019/phsm
Mitigating the impacts of COVID-19 on OSH: Country Responses Survey Report	G20 OSH Experts Network, ILO and Government of Turkey	This publication includes the results of a survey conducted in 13 countries, examining the impacts of COVID-19 on the world of work.	https://www.ailevecalisma.gov.tr/media/74298/g20-osh-experts-network-campaign-survey-report.pdf

Selected tools and resources on preventing COVID-19 infections in the workplace

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
A 10-step tool for a safe and healthy return to work in times of COVID	ILO	This tool recommends steps for a safe reopening of workplaces during the pandemic.	https://www.ilo.org/americas/publicaciones/WCMS_745881/lang--en/index.htm
Enterprise survey tool: Assessing training needs resulting from COVID-19	ILO	This tool can be used by employer and business membership organizations to assess training needs, including those focused on OSH.	https://www.ilo.org/actemp/publications/WCMS_751610/lang--en/index.htm

Prevention and Mitigation of COVID-19 at Work ACTION CHECKLIST	ILO	This tool offers a simple and collaborative approach to assess COVID-19 risks as a step to take measures to protect the safety and health of workers.	https://www.ilo.org/global/topics/safety-and-health-at-work/resources-library/publications/WCMS_741813/lang--en/index.htm
Safe return to work: Guide for employers on COVID-19 prevention	ILO	This guide provides recommendations for OSH practices on COVID-19 prevention, mental health and safe returns to work.	https://www.ilo.org/actemp/publications/WCMS_744033/lang--en/index.htm
Safe Return to Work: Ten Action Points	ILO	This tool provides a list of preventive action measures that employer, workers and other parties can take toward healthy returns to work.	https://www.ilo.org/global/topics/safety-and-health-at-work/resources-library/publications/WCMS_745541/lang--en/index.htm
Social Dialogue, Skills and COVID-19	ILO	This publication discusses the importance and role of social dialogue during management of the COVID-19 pandemic, including training and considerations for occupational safety and health.	https://www.ilo.org/global/publications/books/WCMS_758550/lang--en/index.htm
The New Training Package on Essentials in Occupational Safety and Health (EOSH)	International Training Centre of the ILO (ITCILO)	This training tool includes modules on creating a safety and health culture at work, including sections on emergency responses and a dedicated section on COVID-19. <i>Available for a fee.</i>	https://www.itcilo.org/projects/new-training-package-essentials-occupational-safety-and-health-eosh

Resources developed by other international organizations

Infographics on public health, environmental and social determinants of health	WHO	This infographic gives simple, easy to understand tips for keeping workers safe in the workplace.	https://www.who.int/phe/infographics/en/
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WHO resources for non-healthcare workplaces	WHO	This website includes resources from WHO on protecting workers and clients in workplaces during COVID-19.	https://www.who.int/news/item/09-03-2020-covid-19-occupational-health
Resources developed by regional and national bodies			
Action Guide for Work Centers Against COVID-19	Government of Mexico	This action guide outlines measures that work centers can take to prevent the spread, including training, planning and monitoring. <i>Available only in Spanish</i>	https://www.gob.mx/stps/documentos/guia-de-accion-para-los-centros-de-trabajo-ante-el-covid-19
Clinical Occupational Health Guidelines	African Union	This document outlines occupational safety and health measures to take in the workplace to reduce the risk of contagion.	https://www.nepad.org/sites/default/files/resourcefiles/Volume%206_AU%20COVID-19_OSH%20Guidelines%20Series_Clinical%20Occupational%20Health_EN_Final%282%29.pdf
Coronavirus: EU guidance for a safe return to the workplace	European Commission	This publication discusses measures for a safe and healthy reopening of workplaces.	https://ec.europa.eu/commission/presscorner/detail/en/ip_20_729
Coronavirus information	Institution of Occupational Safety and Health	This resource hub includes links to guidance on COVID-19 prevention, healthy workplaces and other safety considerations.	https://iosh.com/coronavirus/#
Coronavirus: medidas de prevención en el trabajo (Coronavirus: prevention measures at work)	Government of Peru	This website provides recommendations for workers to prevent exposure to COVID-19 at work. <i>Available only in Spanish.</i>	https://www.gob.pe/8737-ministerio-de-salud-coronavirus-medidas-de-prevencion-en-el-trabajo
Coronavirus: Resources for Workers	National Council for occupational safety and health, US	This webpage compiles resources such as factsheets, industry and occupational specific information.	https://coshnetwork.org/coronavirus
COVID-19 Health and Safety Resources	Canadian Centre for Occupational Health and Safety	This web page includes tip sheets and guidance on preventing COVID-19 at work.	https://www.ccohs.ca/products/publications/covid19-tool-kit/

COVID-19 Posters for the workplace	Occupational Safety and Health Administration (OSHA), US	Posters on COVID-19 for the workplace	https://www.osha.gov/pls/publications/publication.athruz?pType=Industry&pID=651
COVID-19 Resources	Government of Singapore	This webpage contains a range of resources including posters, videos and guidance on COVID-19.	https://www.gov.sg/article/covid-19-resources
COVID-19 Safety in the workplace	South African Government	This webpage includes information on opening workplaces, including specific information for small businesses, monitoring and enforcement, sectoral guidelines and other safety and health information.	https://www.gov.za/covid-19/companies-and-employees/safety-workplace
COVID-19: Back to the workplace – adapting workplaces and protecting workers	EU OSH Wiki	This website provides guidance on safe workplace practices during COVID-19.	https://oshwiki.eu/wiki/COVID-19:_Back_to_the_workplace_-_Adapting_workplaces_and_protecting_workers
Epidemics and the workplace	European Agency for Safety and Health at Work (EU OSHA)	This website outlines risks and hazards present during epidemics that affect the workplace, infection prevention and control and other resources and references.	https://oshwiki.eu/wiki/Epidemics_and_the_Workplace
Face coverings and face masks at work during the coronavirus (COVID-19) pandemic	Health and Safety Executive, UK	This web page discusses different types of face coverings and how to properly use them in the workplace to reduce the risk of transmission.	https://www.hse.gov.uk/coronavirus/ppe-face-masks/face-coverings-and-face-masks.htm
Guidance for workplace preparedness for COVID-19	Ministry of Health & Indigenous Medical Services, Sri Lanka	This document outlines key steps for workplaces to taken in mitigating the risks associated with the pandemic.	https://www.epid.gov.lk/web/images/pdf/Circulars/Coronavirus/guidance%20for%20workplace%20preparedness%20for%20covid%20version%202.pdf
Guidance on Preparing Workplaces for COVID-19	US OSHA	This documents provides recommendations and descriptions of safety and health standards in workplaces.	https://www.osha.gov/Publications/OSHA3990.pdf

Guidelines for Workplaces to Prevent Coronavirus Infection	Finnish Institute of Occupational Health	This website provides links to resources on guidelines for ensuring OSH during the pandemic.	https://www.ttl.fi/en/fioh-coronavirus-instructions/
Occupational Hygiene Resources	European Network Education and Training in Occupational Safety and Health (ENETOSH)	This resource page provides links to publications and resources about OSH and COVID-19.	https://www.enetosh.net/webcom/show_article.php/_c-178/_nr-19/i.html
Prevention measures for COVID-19	Korea Occupational Safety and Health Agency	This website includes a range of publications on OSH measures for different sectors.	https://www.kosha.or.kr/english/news/COVID-19.do
Protect vulnerable workers during the coronavirus (COVID-19) pandemic	Health and Safety Executive, UK	This web page is dedicated to discussing how to support workers who belong to high-risk groups in regards to COVID-19 complications.	https://www.hse.gov.uk/coronavirus/working-safely/protect-people.htm
Returning to work safely	Health Service Executive, Ireland	This webpage outlines best practices for returning to work during COVID-19.	https://www2.hse.ie/conditions/coronavirus/returning-to-work-safely.html
Risk assessment during the coronavirus (COVID-19) pandemic	Health and Safety Executive, UK	This webpage describes steps to undertaking a risk assessment for COVID-19 risk in the workplace.	https://www.hse.gov.uk/coronavirus/working-safely/risk-assessment.htm
Todo sobre el COVID-19 (All about COVID-19)	Government of Mexico	This webpage includes information and guidelines on COVID-19 including training materials and resources aimed at workers. <i>Available only in Spanish.</i>	https://coronavirus.gob.mx/
Ventilation and air conditioning during the coronavirus (COVID-19) pandemic	Health and Safety Executive, UK	This web page discusses the importance of good ventilation and how to improve ventilation and different types of systems.	https://www.hse.gov.uk/coronavirus/equipment-and-machinery/air-conditioning-and-ventilation.htm

What to include in your COVID-19 risk assessment	Health and Safety Executive, UK	This document outlines how to create a risk assessment for COVID-19 in the workplace.	https://www.hse.gov.uk/coronavirus/assets/docs/risk-assessment.pdf
Resources developed by social partners (trade unions and employers' organizations)			
Coronavirus Updates – Workers' Rights, Tools & Resources for dealing with COVID-19	Australian Council of Trade Unions (ACTU)	This web page serves as a resource center for workers focused on COVID-19 and includes resources such as fact sheets, checklists and sector specific guidance.	https://www.actu.org.au/coronavirus
COVID-19	IndustriALL	This webpage links to fact sheets, posters, videos and reports on measures to be taken at the workplace.	http://www.industriall-union.org/covid-19
COVID-19 Coronavirus – Guidance for unions	TUC	This resource hub provides updated comprehensive guidance for unions and workers on measures to protect workers' safety and health.	https://www.tuc.org.uk/resource/covid-19-coronavirus-guidance-unions-updated-04-jan-2021
COVID-19 Pandemic Resources	AFL-CIO	This webpage includes links to general workplace guidance on COVID-19.	https://aflcio.org/covid-19
COVID-19 Your Rights at Work	New Zealand Council of Trade Unions	This website compiles fact sheets and FAQ on COVID-19 in the workplace.	https://www.union.org.nz/covid19/
IOE Guidance on surviving COVID-19 and coming out strong	IOE	This document lists steps businesses can take during the pandemic to protect workers.	https://www.ioe-emp.org/index.php?eID=dumpFile&t=f&f=146627&token=4e8749b067659f215a24581a1022c57ca83e24aa
IOE Paper on diverse labour measures implemented by employers in response to COVID-19	IOE	This document provides examples of measures taken by different employers around the world in response to the pandemic in areas such as sick leave, teleworking, working time hours and social distancing, for instance.	https://www.ioe-emp.org/index.php?eID=dumpFile&t=f&f=146872&token=1cc322eba7d7bf815e77d1cb499edd289eb859df
Key issues on the return to work	ITUC CSI IGB	This document discusses key return to work issues including occupational safety and health.	https://www.ituc-csi.org/IMG/pdf/ituc_-_key_issues_on_the_return_to_work.pdf

Return to work during COVID-19	IOE & SHRM	This guide provides key questions and resources for businesses to consider while implementing return-to-work plans.	https://www.ioe-emp.org/index.php?eID=dumpFile&t=f&f=146927&token=95f77af25c3b311556866b99e6a4e72ea047b277
Safe at work: generic guide for combatting the spread of COVID-19 at work	IOE and VBO-FEB	This guide talks about general measures to be taken at the workplace as well as specific measures for different sectors and types of workers.	https://www.ioe-emp.org/index.php?eID=dumpFile&t=f&f=146953&token=e272cd777b821e33d6ccbd572888a1b413245bff

Selected tools and resources on working from home

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
An employers' guide on working from home in response to the outbreak of COVID-19	ILO	This publication provides guidance to employers on teleworking protocols for their staff.	https://www.ilo.org/actemp/publications/WCMS_745024/lang--en/index.htm
Keys for effective teleworking during the COVID-19 pandemic	ILO	This website includes tips for effective teleworking.	https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_739879/lang--en/index.htm
Practical Guide on Teleworking during the COVID-19 pandemic and beyond	ILO	This guide provides recommendations for effective teleworking during the pandemic and beyond.	https://www.ilo.org/travail/info/publications/WCMS_751232/lang--en/index.htm
Working from home: From invisibility to decent work	ILO	This report discusses the risks associated with working from home and how they might be addressed	https://www.ilo.org/global/publications/books/forthcoming-publications/WCMS_765806/lang--en/index.htm

Resources developed by other international organizations			
Telecommuting tips	United Nations	This web page includes tips on safe and healthy telecommuting.	https://www.un.org/en/coronavirus/telecommuting-tips
Resources developed by regional and national bodies			
Health and safety responsibilities when working from home	Work Safe BC, Canada	This web page gives recommendations on how to keep workers safe and healthy while teleworking.	https://www.worksafebc.com/en/about-us/news-events/announcements/2020/March/health-safety-responsibilities-when-working-from-home
How do I set up a workstation at home?	Safe Work Australia	This fact sheet describes with diagrams how to set up a good home work station.	https://www.safeworkaustralia.gov.au/sites/default/files/2020-05/Working_from_home_Workstation_Setup_%20Guide-COVID-19.pdf
Protect home workers	Health and Safety Executive, UK	This web page describes how employers can support home workers and includes information on management, ergonomics and mental health.	https://www.hse.gov.uk/toolbox/workers/home.htm
Seven practical human factors and ergonomics (HF/E) tips for teleworking/home-learning using tablet/smartphone devices	International Ergonomics Association	This publication discusses practical tips for appropriate ergonomics with considerations for the COVID-19 pandemic.	https://iea.cc/seven-practical-human-factors-and-ergonomics-hf-e-tips-for-teleworking-home-learning-using-tablet-smartphone-devices/
Working from home	Safe Work Australia	This web page includes information on safe and healthy teleworking.	https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/general-industry-information/working-home
Working well from home	Human Factors & Ergonomics Society of Australia Inc.	This document discusses common ergonomic problems that workers face while teleworking and how employers can support healthy homework environments.	https://www.ergonomics.org.au/documents/item/640

Working remotely during COVID-19: Your mental health and well-being	American Psychiatric Association, US	This web page provides information for people who are teleworking on how to manage mental health as well as how managers and human resources professionals can support workers.	http://workplacementalhealth.org/Employer-Resources/Working-Remotely-During-COVID-19
Resources developed by social partners (trade unions and employers' organizations)			
IOE Guidance on teleworking in the times of COVID-19	IOE	This document outlines the main challenges faced during teleworking and gives examples of measures to mitigate the risks.	https://www.ioe-emp.org/index.php?eID=dumpFile&t=f&f=146628&token=1e0e1c25f45d3147283485cf43a24897ebf5a8a3
ITUC Legal Guide – Telework	ITUC	This guide outlines key principles for effective teleworking, specifically looking at legislation and social dialogue.	https://www.ituc-csi.org/IMG/pdf/ituc_legal_guide_telework_en.pdf
Teleworking – or working from home	Victorian Trades Hall Council, Australia	This website outlines the duties of employers, advice for workers and other information about teleworking in the midst of the pandemic.	https://www.ohsrep.org.au/teleworking_-_or_working_from_home

Selected tools and resources on psychosocial risks (including violence and harassment) during the COVID-19 crisis

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19: How to combat stigma and discrimination at the workplace	ILO	This video discusses how trade unions can address stigma and discrimination at the workplace in connection with the pandemic.	https://www.ilo.org/actrav/media-center/video/WCMS_762627/lang--en/index.htm
Managing work-related psychosocial risks during the COVID-19 pandemic	ILO	This document outlines actions that workplaces can take to mitigate the psychosocial risks during the pandemic. The annex of this document also includes many resources on COVID-19 and mental health.	https://www.ilo.org/wcmsp5/groups/public/--ed_protect/---protrav/--safework/documents/instructionalmaterial/wcms_748638.pdf

Resources developed by other international organizations			
Coping with stress during the 2019-nCoV outbreak	WHO	This infographic provides ways for people to cope with stress in healthy ways during the pandemic.	https://www.who.int/docs/default-source/coronaviruse/coping-with-stress.pdf?sfvrsn=9845bc3a_2
COVID-19 and ending violence against women and girls	UN Women	This issue brief discusses evidence of the impact of COVID-19 on violence against women and includes recommendations for prevention and response to this threat.	https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls
Mental health and psychosocial considerations during the COVID-19 outbreak	WHO	This document outlines important mental health and psychosocial considerations during the outbreak, including dedicated sections focused on healthcare workers, childcare professionals and other specific groups of workers.	https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_2
Mental health and psychosocial support in the COVID-19 response	IOM	This guidance document and toolkit explains common mental health risks of migrant populations, including migrant workers, and how to address them during the pandemic.	https://eea.iom.int/sites/default/files/publication/document/MHPSS-COVID-19-Guidance-Toolkit-v3-EN.pdf
Policy Brief: COVID-19 and the Need for Action on Mental Health	UN	This policy brief discusses the impact of COVID-19 on mental health and outlines strategies to minimize the consequences of the COVID-19 pandemic on mental health.	https://www.un.org/sites/un2.un.org/files/un_policy_brief-covid_and_mental_health_final.pdf
The Shadow Pandemic: Violence against women during COVID-19	UN Women	This web page compiles resources from UN Women on COVID-19 and the increased risk of violence toward women.	https://www.unwomen.org/en/news/in-focus/in-focus-gender-equality-in-covid-19-response/violence-against-women-during-covid-19

Resources developed by regional and national bodies

Coronavirus and mental health at work	Advisory, Conciliation and Arbitration Service (ACAS), UK	This website provides tips and resources on supporting workers mental health.	https://www.acas.org.uk/coronavirus-mental-health/managing-workplace-mental-health
Guidance for mental health and psychosocial support for COVID-19	African Union & Africa Centers for Disease Control and Prevention (CDC)	This document provides guidance on mental health and psychosocial risks during the pandemic including practical steps to mitigate these risks.	https://africacdc.org/download/guidance-for-mental-health-and-psychosocial-support-for-covid-19/
Limiting workplace violence related to COVID-19	US Centers for Disease Control and Prevention (CDC)	This webpage provides information for employers and workers on how to mitigate the risk of violence and harassment for retail, services and other customer based workplaces.	https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/business-employers/limit-workplace-violence.html
Mental Health Resources	Ministerio de Salud, Argentina	This web page compiles guidelines and recommendations regarding mental health, including many focused on workers.	http://www.msal.gob.ar/index.php/component/bes_contenidos/?filter_problematika=28&filter_soporte=0
MHCare for COVID HCWorkers	South Africa	This web page includes links to resources focused on mental health of healthcare workers	https://covidcaregauteng.co.za/covidcare/resources/
Tips for Battling Stress and Anxiety during COVID-19	Government of Singapore	This web page discusses signs and effects of stress, ways to cope with stress and anxiety and provides links to resources on the topic.	https://www.gov.sg/article/tips-for-battling-stress-and-anxiety-during-covid-19

Resources developed by social partners (trade unions and employers' organizations)

Coronavirus: what you need to know – staff mental health and wellbeing	NEU (National Education Union), UK	This website provides ten areas of action on how to protect workers mental health during the COVID-19 crisis.	https://neu.org.uk/advice/coronavirus-what-you-need-know-staff-mental-health-and-wellbeing
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Domestic and intimate partner violence and COVID-19	American Federation of Labor and Congress of Industrial Organizations (AFL-CIO)	This website discusses domestic violence and the effects on workers.	https://aflcio.org/covid-19/domestic-and-intimate-partner-violence-and-covid-19
Mental Health at Work	Canadian Labour Congress	This web portal provides access to information and support regarding mental health and work.	https://canadianlabour.ca/labour-education/mental-health-work/

Selected sector-specific tools and resources on COVID-19

Healthcare and emergency

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and care workers providing home or institution-based care	ILO	This sectoral brief discusses occupational safety and health challenges that home and institution-based care workers face.	https://www.ilo.org/sector/Resources/publications/WCMS_758345/lang--en/index.htm
COVID-19 and health facilities: Checklist of measures to be taken in health facilities	ILO	This checklist provides steps health facilities can take to protect health workers.	https://www.ilo.org/sector/Resources/publications/WCMS_750808/lang--en/index.htm
COVID-19 and public emergency services	ILO	This policy brief discusses the risks that public sector frontline workers face during the pandemic.	https://www.ilo.org/sector/Resources/publications/WCMS_741467/lang--en/index.htm
Guidelines on decent work in public emergency services	ILO	These sectoral guidelines serve as a reference tool during the design and implementation of policies and programmes on health in the emergency sector.	https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/--sector/documents/normativeinstrument/wcms_626551.pdf
ILO Sectoral Brief: COVID-19 and the health sector	ILO	This brief outlines the impact of COVID-19 on workers in the health sector, including OSH aspects and discusses tools and responses.	https://www.ilo.org/wcmsp5/groups/public/---ed_dialogue/---sector/documents/briefingnote/wcms_741655.pdf

Occupational safety and health in public health emergencies: A manual for protecting health workers and responders	ILO	This manual provides an overview of occupational safety and health risks that emergency responders and health workers face during disease outbreaks and other emergencies.	https://www.ilo.org/global/topics/safety-and-health-at-work/resources-library/publications/WCMS_633233/lang--en/index.htm
Occupational safety and health in the health services sector	ILO	This resource list includes relevant International labour standards, Codes of practice, guidelines, training materials, working papers and briefing notes on OSH in the health services sector.	https://www.ilo.org/global/topics/safety-and-health-at-work/industries-sectors/WCMS_219020/lang--en/index.htm

Resources developed by other international organizations

Coronavirus Disease (COVID-19) Outbreak: Rights, roles and responsibilities of health workers, including key considerations for occupational safety and health	WHO	This report outlines the rights and responsibilities of healthcare workers in order to protect both workers and the people they come into contact with.	https://www.who.int/docs/default-source/coronaviruse/who-rights-roles-respon-hw-covid-19.pdf?sfvrsn=bcabd401_0
WHO resources for protection of health workers and emergency responders	WHO	This website includes links to WHO materials on health workers and protecting them from COVID-19 transmission.	https://www.who.int/news/item/09-03-2020-covid-19-occupational-health

Resources developed by regional and national bodies

Advisory for managing health care workers working in COVID and non-COVID areas of the hospital	Ministry of Health and Family Welfare, India	This document provides guidelines for prevention and control of COVID-19 in healthcare facilities.	https://www.mohfw.gov.in/pdf/AdvisoryformanagingHealthcareworkersworkinginCOVIDandNonCOVIDareasofthehospital.pdf
Health and Wellness of Health Workers Guidelines	African Union	This document provides guidelines on occupational safety and health for healthcare workers during COVID-19.	https://www.nepad.org/sites/default/files/resourcefiles/Volume%203_AU%20COVID-19_OSH%20Guidelines%20Series_Health%20and%20Wellness%20of%20Health%20Workers_EN_Final%282%29_0.pdf

Healthcare Workers and Employers	US OSHA	This guidance provides recommendations for safety and health standards in healthcare workplaces during COVID-19.	https://www.osha.gov/coronavirus/control-prevention/healthcare-workers
How we're helping frontline workers stay healthy and safe at work	Work Safe New Zealand	This website discusses challenges that frontline workers, such as healthcare workers face during the pandemic.	https://www.worksafe.govt.nz/managing-health-and-safety/novel-coronavirus-covid/how-were-helping-frontline-workers/
Recomendaciones para equipos de salud (Recommendations for health teams)	Government of Argentina	This website includes information for healthcare teams functioning during the pandemic on safety and health. <i>Available only in Spanish.</i>	https://www.argentina.gob.ar/coronavirus/equipos-salud

Resources developed by social partners (trade unions and employers' organizations)

About the novel coronavirus (Covid-19) outbreak	National Nurses United, US	This web page provides resources on COVID-19 for nurses.	https://www.nationalnursesunited.org/covid-19
Building resilience across borders: a policy brief on health worker migration	PSI	This document discusses health worker migration in the context of the pandemic, looking at strategies to strengthen health and social care sectors including workplace safety protections.	https://publicservices.international/resources/publications/building-resilience-across-borders?id=11444&lang=en
Coronavirus (COVID-19) Information and Resources for Members	Health Services Union (HSU) National, Australia	This web page provides links to resources on COVID-19 specific to the healthcare industry.	https://hsu.net.au/covid-19/
COVID-19 advice for health workers	UNISON, UK	This web page provides advice and resources for healthcare workers during COVID-19.	https://www.unison.org.uk/at-work/health-care/big-issues/covid-19-advice-health-workers/
COVID-19: Your rights as a health worker	Public Services International (PSI)	This fact sheet outlines the rights of healthcare workers during the pandemic. <i>Available also in: Spanish and French</i>	https://pop-umbrella.s3.amazonaws.com/uploads/26a00c1f-2123-4d96-86e7-37c2f575fe06_PSI_Covid_EN.pdf

Agriculture and forestry

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and the impact on agriculture and food security	ILO	This brief discusses the impact of the pandemic on the agriculture sector and steps to protect the OSH of workers.	https://www.ilo.org/sector/Resources/publications/WCMS_742023/lang--en/index.htm
Guía práctica de prevención y mitigación de la COVID-19 en la agricultura en Honduras	ILO & Honduran Council of Private Companies	This guide provides recommendations on prevention and mitigating the spread of COVID-19 in the agriculture sector, written specifically for Honduras. <i>Available only in Spanish.</i>	https://www.ilo.org/americas/publicaciones/WCMS_753480/lang--es/index.htm
Guía práctica de prevención y mitigación de la COVID-19 en la cadena de valor del café en Honduras	ILO & Honduran Coffee Institute	This guide provides recommendations on prevention and mitigation of COVID-19 in the coffee value chain. <i>Available only in Spanish.</i>	https://www.ilo.org/americas/publicaciones/WCMS_753479/lang--es/index.htm
Impact of COVID-19 on the forest sector	ILO	This sectoral brief discusses occupational safety and health considerations in the forestry sector during the COVID-19 pandemic.	https://www.ilo.org/sector/Resources/publications/WCMS_749497/lang--en/index.htm
Practical guide for the prevention and mitigation of COVID-19 in agriculture	ILO	This instructional material provides practical guidance for the prevention and mitigation of COVID-19 transmission in agricultural activities.	https://www.ilo.org/global/about-the-ilo/how-the-ilo-works/departments-and-offices/governance/labadmin-osh/programmes/vzf/WCMS_746984/lang--en/index.htm
Occupational health and safety protocols in the coffee value chain: Emphasis on prevention and mitigation against COVID-19 in Mexico	ILO Vision Zero Fund	These five protocols discuss prevention and mitigation strategies in the coffee value chain.	https://www.ilo.org/americas/publicaciones/WCMS_755956/lang--es/index.htm

Resources developed by other international organizations

Q&A: COVID-19 pandemic – impact on food and agriculture	FAO	This web site compiles common questions about the impact of COVID-19 on agriculture and food.	http://www.fao.org/2019-ncov/q-and-a/impact-on-food-and-agriculture/en/
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Resources developed by regional and national bodies

Activités agricoles (Agriculture activities)	Ministère du travail de l'emploi et de l'insertion, France	This fact sheet provides information on safety and health for workers in agriculture. <i>Available only in French.</i>	https://travail-emploi.gouv.fr/le-ministere-en-action/coronavirus-covid-19/protection-des-travailleurs/article/fiches-conseils-metiers-et-guides-pratiques-pour-les-salaries-et-les-employeurs
Agriculture and COVID-19 safety	Work Safe BC, Canada	This web site provides resources on keeping workers safe in the agriculture industry during COVID-19.	https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-industry-information/agriculture
COVID-19 Infection Prevention for Agricultural Employers and Employees	California Department of Industrial Relations	This guidance document provides information on training, procedures and practices for preventing COVID-19 in the agricultural industry.	https://www.dir.ca.gov/dosh/Coronavirus/COVID-19-Infection-Prevention-in-Agriculture.pdf
Occupational health and safety under the pandemic	World Banana Forum	This website includes documents and information on OSH for banana farm workers.	http://www.fao.org/world-banana-forum/projects/bohesi/urgent-covid-19/en/

Resources developed by social partners (trade unions and employers' organizations)

Basic principles of protection from COVID-19	IUF Asia/Pacific	This web page provides information on protect against COVID-19 for farm workers.	https://iufap.blog/occupational-exposure-to-covid-19/basic-principles-of-protection-from-covid-19-6/
#COVID-19 Emergency: Impact on EFFAT sectors and best practices from the affiliates	European Federation of Food, Agriculture and Tourism Trade Unions (EFFAT)	This webpage compiles initiatives, measures and resources for agriculture workers during the pandemic.	https://effat.org/featured/covid-19/

Education

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and the education sector	ILO	This sectoral brief discusses the impacts of COVID-19 on the education sector, including occupational safety and health.	https://www.ilo.org/ankara/areas-of-work/covid-19/WCMS_742025/lang--en/index.htm
Supporting teachers in back-to-school efforts: Guidance for policy-makers	International Task Force on Teachers for Education 2030-UNESCO-ILO	These guidelines provide a series of recommendations to support policy-makers designing back-to-school policies and developing school reopening procedures. <i>Also available in French and Spanish.</i>	https://teachertaskforce.org/knowledge-hub/supporting-teachers-back-school-efforts-guidance-policy-makers
Supporting teachers in back-to-school efforts – A toolkit for school leaders	International Task Force on Teachers for Education 2030-UNESCO-ILO	This Toolkit was designed for school leaders to support and protect teachers and education support staff in the return to school following COVID-19 related closures. <i>Also available in Arabic, French and Spanish.</i>	https://teachertaskforce.org/knowledge-hub/supporting-teachers-back-school-efforts-toolkit-school-leaders
Resources developed by other international organizations			
Checklist to support schools re-opening and preparation for COVID-19 resurgences or similar public health crises	WHO	This checklist aims to protect the health of workers in the education sector and children in educational settings.	https://www.who.int/publications/i/item/9789240017467
Considerations for school-related public health measures in the context of COVID-19	WHO	This document is an annex to “Considerations for implementing and adjusting public health and social measures in the context of COVID-19”. It is intended to help policy makers and educators with making decisions on running schools as safely as possible during the COVID-19 pandemic. <i>Also available in French and Spanish.</i>	https://www.who.int/publications/i/item/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19

Schools and other educational institutions transmission investigation protocol for coronavirus disease 2019	WHO	This protocol provides guidance for investigating transmission of SARS-CoV-2 in schools and other educational institutions. <i>Also available in French and Spanish.</i>	https://www.who.int/publications/i/item/WHO-2019-nCoV-Schools_transmission-2020.1
Resources developed by regional and national bodies			
COVID-19 Ouverture des écoles: Modalités pratiques et protocole sanitaire	Ministère de l'éducation nationale, de la jeunesse et des sports, France	This web page provides information on practical guidance for reopening schools to keep workers and students safe. <i>Available only in French.</i>	https://www.education.gouv.fr/covid19-ouverture-des-ecoles-modalites-pratiques-et-protocole-sanitaire-305467
COVID-19: More Information	Ministerio de educación y formación profesional, España	This web page provides links to information about COVID-19 measures in the education sector. <i>Available only in Spanish.</i>	http://www.educacionyfp.gob.es/mc/fse/covid-19/mas-informacion.html
Education Sector Guidelines	African Union	These guidelines outline occupational safety and health measures for education facilities.	https://www.nepad.org/sites/default/files/resourcefiles/Volume%204_AU%20COVID-19_OSH%20Guidelines%20Series_Education%20Sector_EN_Final.pdf
Education and training	Safe Work Australia	This web page provides information for safety and health in the education sector.	https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/education-and-training
Protecting School Staff	US CDC	This website provides information and recommendations on safety and health in primary and secondary education worksites.	https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-staff.html
Schooling in the time of COVID-19	WHO Europe – UNICEF/ECARO	This resource pack provides an easy-to-use, 1-stop shop for information in the form of practical tools and tips for parents/caregivers, teachers, authorities and school administrators.	https://www.euro.who.int/en/media-centre/events/events/2020/08/high-level-virtual-meeting-on-schooling-during-the-covid-19-pandemic/who-europe-background-document-in-preparation-to-the-high-level-virtual-briefing-for-ministers-of-health-on-schooling-during-the-covid-19-pandemic

Resources developed by social partners (trade unions and employers' organizations)

Coronavirus: checklist for continued opening	GMB, NEU, UNISON and UNITE unions	This checklist outlines how schools should respond to protect the safety of both teachers and students.	https://neu.org.uk/advice/coronavirus-checklist-continued-opening
Coronavirus: health and safety	National Education Union (NEU), UK	This webpage contains advice for members and union representatives on how to protect in the workplace during the coronavirus crisis.	https://neu.org.uk/coronavirus-health-and-safety
Coronavirus Hub	NASUWT – The Teachers Union, UK	The Coronavirus Hub contains advice and support on school safety, remote working, furlough, mental health.	https://www.nasuwat.org.uk/advice/health-safety/coronavirus-guidance.html
COVID-19 and the Academic Workplace - Resources for Members	Canadian Association of University Teachers (CAUT), Canada	This web page provides resources for university teachers in Canada.	https://www.caut.ca/content/covid-19-and-academic-workplace-resources-members
COVID-19 – Educating Through Crisis / Know your Rights	National Education Association (NEA), USA	This web page compiles guidance from NEA's legal experts relating to education professionals' rights, responsibilities, pay, and benefits amid school reopenings.	https://www.nea.org/advocating-for-change/covid/know-your-rights
COVID-19 Resources	American Federation of Teachers (AFT), USA	This web page includes a “Plan To Safely Reopen America’s Schools And Communities”, information and resources for staff and leaders on mental health, legal rights, etc.	https://www.aft.org/coronavirus
Education International Guidance on Reopening Schools and Education Institutions	Education International	This guidance comprises a set of five dimensions that should be considered by governments, in dialogue with educators and their unions, when planning education re-opening.	https://www.ei-ie.org/en/detail/16760/education-international-guidance-on-reopening-schools-and-education-institutions

FORWARD TO SCHOOL - Guidance, Considerations and Resources for and from Education Unions to Inform Decision-Making in Times of Covid-19	Education International	Built around the five pillars of the “EI Guidance on Reopening Schools and Education Institutions”, this publication provides information, evidence and examples of union actions in more than 50 countries across all regions, to inform the response of education unions when planning reopening.	https://www.ei-ie.org/en/detail/16862/learning-from-one-another-ei-publishes-forward-to-school
Guía de medidas de seguridad y salud frente a la covid-19 en centros educativos	Federación de Enseñanza de Comisiones Obreras (FECCOO), Spain	This guide discusses security measures and OSH measures for COVID-19 in educational centers. <i>Available only in Spanish.</i>	149a5f74fe0533a645f1bce3bd322064000063.pdf (cc oo.es)
Guiding principles on the COVID-19 pandemic	Education International	This website provides recommendations for the education sector to safeguard teacher and student health.	https://www.ei-ie.org/en/detail/16701/guiding-principles-on-the-covid-19-pandemic
Information hub for educators and their unions during the COVID-19 crisis	Education International	This web page provides information for teachers, education support personnel and their unions.	https://www.ei-ie.org/en/dossierdetail/16670/covid-19-education-unions-stand-united-and-mobilise
UCU coronavirus advice	University College Union (UCU), UK	This web page contains guidance for members on coronavirus and their rights at work.	https://www.ucu.org.uk/coronavirus

Hotels, restaurant and tourism

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and accommodation and food service activities: Prevention and control checklist	ILO	This checklist discusses how to prevent and mitigate the spread of COVID-19 in accommodation and food service establishments.	https://www.ilo.org/sector/Resources/publications/WCMS_754201/lang--en/index.htm
COVID-19 and food retail	ILO	This sectoral brief discusses the impact of COVID-19 on food retail establishments, including occupational safety and health.	https://www.ilo.org/sector/Resources/publications/WCMS_741342/lang--en/index.htm

COVID-19 and the tourism sector	ILO	This sectoral brief discusses the impact on the tourism sector including discussions on how to protect workers in this sector.	https://www.ilo.org/sector/Resources/publications/WCMS_741468/lang--en/index.htm
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Resources developed by other international organizations

COVID-19 and Food Safety: Guidance for Food Businesses	WHO	This document provides guidance for businesses working in food service.	https://www.who.int/publications/i/item/covid-19-and-food-safety-guidance-for-food-businesses
Operational considerations for COVID-19 management in the accommodation sector: interim guidance	WHO	This document provides guidance on preventing and mitigating the risk of COVID-19 in the accommodation sector.	https://www.who.int/publications/i/item/operational-considerations-for-covid-19-management-in-the-accommodation-sector-interim-guidance
Policy Brief: COVID-19 and Transforming Tourism	UN	This brief discusses the impacts of COVID-19 on tourism and measures to protect workers in this sector.	https://www.un.org/sites/un2.un.org/files/sg_policy_brief_covid-19_tourism_august_2020.pdf

Resources developed by regional and national bodies

Coronavirus: Recomendaciones y prevención en el trabajo (Coronavirus: Recommendations and Prevention at Work)	Government of the Province of Buenos Aires	This website provides recommendations for food services workers and workers in essential services on safety and health in the workplace.	https://www.gba.gov.ar/trabajo/noticias/coronavirus_recomendaciones_y_prevenici%C3%B3n_en_el_trabajo
Food and Retail Sector Guidelines	African Union	This document provides guidelines on occupational safety and health in the food and retail sector during COVID-19.	https://www.nepad.org/sites/default/files/resourcefiles/Volume%205_AU%20COVID-19_OSH%20Guidelines%20Series_Food%20and%20Retail%20Sector_EN_Final%282%29.pdf
Hotels, Resorts and Lodges	US CDC	This website includes information on safety measures for workers and employers at hotels, resorts and lodges during COVID-19.	https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/hotel-employees.html

Reopening and adapting your food business during COVID-19	UK Government	This webpage provides guidance and links focused on safe and healthy business practices in the food retail sector.	https://www.food.gov.uk/business-guidance/reopening-and-adapting-your-food-business-during-covid-19
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Resources developed by social partners (trade unions and employers' organizations)

COVID-19 Resources	UNITE Here, US	This web page provides COVID-19 resources for workers in the hospitality industry.	https://unitehere.org/campaign/covid-19-resources/
Safety at Work	United Food and Commercial Workers (UFCW), US and Canada	This web page provides resources for grocery store workers on COVID-19 and safety and health.	https://www.ufcw21.org/safety-at-work

Industries

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and logging	ILO	This checklist outlines steps to be taken in the logging industry to protect workers safety and health during the COVID-19 pandemic.	https://www.ilo.org/wcmsp5/groups/public/--ed_dialogue/---sector/documents/publication/wcms_765055.pdf
COVID-19 and the automotive industry	ILO	This sectoral brief discusses the impact of the pandemic on the automotive industry and ways to protect workers in these workplaces	https://www.ilo.org/ankara/areas-of-work/covid-19/WCMS_741343/lang--en/index.htm
Gendered impacts of COVID-19 on the garment sector	ILO	This brief discusses the gender aspects of COVID-19 in the garment sector, including OSH risks.	https://www.ilo.org/asia/publications/WCMS_760374/lang--en/index.htm
Resources developed by regional and national bodies			
Better work and COVID-19	Better Work	This web page provides resources for workers, employers and governments in the garment sector focused on the pandemic and safety and health.	https://betterwork.org/1-better-work-response-to-covid19/

Manufacturing Facility Assessment	CDC, US	This web site provides guidance for workers and employers in the manufacturing sector during the pandemic.	https://www.cdc.gov/coronavirus/2019-ncov/php/manufacturing-facilities-assessment-tool.html
Ouvrier de production (Production workers)	Ministere du travail, de l'emploi et de l'insertion (Ministry of Labor) France	This document provides guidance on safe and healthy production activities during the pandemic. <i>Available only in French.</i>	https://travail-emploi.gouv.fr/le-ministere-en-action/coronavirus-covid-19/protection-des-travailleurs/article/fiches-conseils-metiers-et-guides-pratiques-pour-les-salaries-et-les-employeurs

Resources developed by social partners (trade unions and employers' organizations)

COVID-19 steel industry response	World Steel Association	This web page provides resources on COVID-19 and the steel industry.	https://www.worldsteel.org/about-us/who-we-are/COVID-19-response-steel-industry.html
COVID-19 Union Responses	Building and Wood Workers' International	This web page provides links to information about union responses to the pandemic.	https://www.bwint.org/cms/covid-19-union-response-1689
Principles for action on COVID-19 in textile, garment, shoes and leather industries	IndustriALL Union	This document provides areas of action for textile manufacturing enterprises during the pandemic. <i>Available in English, French, Spanish and Arabic.</i>	http://www.industriall-union.org/principles-for-action-on-covid-19-in-textile-garment-shoes-and-leather-industries
Protocolo de trabajo frente al COVID-19 para empresas de fabricación de tejas, ladrillos y piezas especiales de arcilla cocida (Work protocol against COVID-19 for companies that manufacture tiles, bricks and special pieces of fired clay)	Federación de empresas de la rioja, España	This document provides information on safe and healthy working practices for workers in manufacturing companies. <i>Available only in Spanish.</i>	https://sie.fer.es/esp/Asesorias/Prevencion_PRL_COVID-19/Guias_Sectoriales/Prevencion_De_Riesgos_COVID19/Protocolo_Trabajo_frente_al_COVID-19_empresas_fabricacion_tejas_ladrillos_piezas_especiales_arcilla_cocida/webFile_28713.htm

Transport

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and civil aviation	ILO	This sectoral brief discusses the impact of the pandemic on civil aviation, including risks for workers in this sector.	https://www.ilo.org/sector/Resources/publications/WCMS_741466/lang--en/index.htm
COVID-19 and road transport	ILO	This sectoral brief discusses the impact of the pandemic on road transit supply chains, including key OSH issues.	https://www.ilo.org/sector/Resources/publications/WCMS_746914/lang--en/index.htm
COVID-19 and Urban Passenger Transport Services	ILO	This sectoral brief discusses the impact of COVID-19 on workers in urban passenger transport including considerations for occupational safety and health.	https://www.ilo.org/sector/Resources/publications/WCMS_757023/lang--en/index.htm
Resources developed by other international organizations			
Evidence to recommendation: COVID-19 mitigation in the aviation sector	WHO	This document discusses recommendations for mitigating COVID-19 risk in the aviation sector.	https://www.who.int/publications/i/item/evidence-to-recommendation-covid-19-mitigation-in-the-aviation-sector
Promoting public health measures in response to COVID-19 on cargo ships and fishing vessels	WHO	This document discusses how to have safe and healthy workplaces on cargo ships and fishing vessels.	https://www.who.int/publications/i/item/WHO-2019-nCoV-Non-passenger_ships-2020.1
Supporting healthy urban transport and mobility in the context of COVID-19	WHO	This publication discusses how urban transport can remain safe and healthy during the pandemic, including for workers.	https://www.who.int/publications/i/item/9789240012554

Resources developed by regional and national bodies

Chauffeur Livreur (Delivery Driver)	Ministere du travail, de l'emploi et de l'insertion, France	This document provides guidance for workers in delivery, transport and logistics. <i>Available only in French.</i>	https://travail-emploi.gouv.fr/le-ministere-en-action/coronavirus-covid-19/protection-des-travailleurs/article/fiches-conseils-metiers-et-guides-pratiques-pour-les-salaries-et-les-employeurs#transports
Employer information for bus transit operators	US CDC	This website has information on safe and healthy work practices for workers in bus transportation.	https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.html
Preventing Spread of Coronavirus Disease 2019 (COVID-19) Guideline for Airlines – Fourth Edition	Civil Aviation Administration of China	This document provides guidelines on safety and health for airplane companies and workers.	https://www.icao.int/MID/Documents/RPTF%20Stream%203/CAAC%20Preventing%20Spread%20of%20Coronavirus%20Disease%202019%20(COVID-19)%20Guideline%20for%20Airlines-4th%20edition.pdf

Resources developed by social partners (trade unions and employers' organizations)

COVID-19: Protecting Transport Workers' Rights	European Transport Workers' Federation	This web page links to guidance, visuals and information on safety and health for transport workers during COVID-19.	https://www.etf-europe.org/activity/covid-19/
TWU COVID-19 Resources	Transport Workers Union of America	This website includes resources and news focused on COVID-19 and the transportation sector, including division specific fact sheets.	https://www.twu.org/covid-resources/#resources

Other

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 action checklist for the construction industry	ILO	This action checklist provides practical measures to keep workers safe on construction sites during the pandemic.	https://www.ilo.org/global/topics/safety-and-health-at-work/resources-library/publications/WCMS_764847/lang--en/index.htm
COVID-19 and mining: Prevention and control checklist	ILO	This checklist is a tool to help implement and continuously improve practical actions to prevent and mitigate the spread of COVID-19 in mining.	https://www.ilo.org/sector/Resources/publications/WCMS_747049/lang--en/index.htm
COVID-19 and the media and culture sector	ILO	This briefing note discusses the impacts on COVID-19 on the media and culture sector including considerations for OSH.	https://www.ilo.org/sector/Resources/publications/WCMS_750548/lang--en/index.htm
Resources developed by regional and national bodies			
Employer information for office buildings	US CDC	This document provides guidance on how to protect workers in office buildings. <i>Available in: Spanish, Chinese and other languages</i>	https://www.cdc.gov/coronavirus/2019-ncov/community/office-buildings.html
Mining and Industries Guidelines	African Union	This document provides guidance on occupational safety and health in mines and industries in the context of COVID-19.	https://www.nepad.org/sites/default/files/resourcefiles/Volume%2020_AU%20COVID-19_OSH%20Guidelines%20Series_Mining%20and%20Industries_EN_Final%282%29_0.pdf
Protocolo para oficinas corporativas ante pandemia COVID-19 (Protocol for corporate offices)	Ministerio de salud publica y bienestar social, Paraguay	Guidelines on safety and health in office settings during the pandemic. <i>Available only in Spanish.</i>	https://www.mspbs.gov.py/dependencias/portal/adjunto/40ef57-Protocolo para OFICINAS CORPORATIVAS.pdf

Working safely during COVID-19 in offices and contact centres	UK Government	This documents provides guidance for office workplace environments in the pandemic.	https://assets.publishing.service.gov.uk/media/5eb97e7686650c278d4496ea/working-safely-during-covid-19-offices-contact-centres-041120.pdf
Resources developed by social partners (trade unions and employers' organizations)			
Coronavirus updates – workers' rights, tools and resources for dealing with COVID-19	ACTU	This resource hub includes industry specific materials and checklists.	https://www.actu.org.au/coronavirus
The Coronavirus Hub	GMB Union	This webpage includes a risk assessment guide, checklists, information for at risk sectors (such as health and social care, schools and retail establishments) and vulnerable workers.	https://www.gmb.org.uk/get-it-right-coronavirus-hub
Construction Sector: COVID-19 Guide	UNITE, the Union	This guide outlines COVID-19 risk assessment and other measures to take in the construction sector.	https://unitetheunion.org/media/3530/212-constructionsectorcovid19guide-2020-11-30-v02g-toc.pdf
COVID-19 – Standardized Protocols for All Canadian Construction Sites	Canadian Construction Association	This protocol outlines prevention and detection measures to be taken at construction worksite.	https://www.cca-acc.com/covid-19-resources/
Responding to COVID-19 in Construction	Laborers' Health and Safety Fund of North America	This document provides guidance for construction worksites on prevention and control measures.	https://www.lhsfna.org/index.cfm/coronavirus/

Selected tools and resources on informal workers

TITLE	ORGANIZATION	DESCRIPTION	LINK
Resources developed by the ILO			
COVID-19 and informal economy	ILO	This resource page provides links to resources on COVID-19 and the informal economy, including information on OSH.	https://www.ilo.org/global/topics/employment-promotion/informal-economy/publications/WCMS_743546/lang--en/index.htm
Resources developed by other international organizations			
COVID-19 Analytical Snapshot #49: Impacts on migrants in informal economies	International Organization for Migration (IOM)	This fact sheet discusses the impacts that COVID-19 has had on migrants in informal economies.	https://www.iom.int/sites/default/files/documents/covid-19_analytical_snapshot_49_-_migrants_in_informal_economies.pdf
Impact of COVID-19 on informal workers	FAO	This report outlines the common vulnerabilities of informal workers during the pandemic and provides policy recommendations to mitigate the risks they face.	http://www.fao.org/policy-support/tools-and-publications/resources-details/en/c/1270457/
Resources: COVID-19 Guidelines for Informal Traders	Women in Informal Employment: Globalizing and Organizing	This web page provides resources for informal traders such as street vendors, workers in markets and other informal trades.	https://www.wiego.org/resources/resources-covid-19-guidelines-informal-traders-south-africa
Resources developed by regional and national bodies			
South Africa's informal sector in the time of Covid-19	Centre for Development and Enterprise, South Africa	This publication discusses the impacts of COVID-19 on workers in the informal economy.	https://media.africaportal.org/documents/south-africas-informal-sector-in-the-time-of-covid-19.pdf
Resources developed by social partners (trade unions and employers' organizations)			
For Informal Workers: COVID-19 Crisis and Resources	Women in Informal Employment: Globalizing and Organizing	This web page provides safety and prevention resources for informal workers such as domestic workers, informal traders and waste pickers.	https://www.wiego.org/informal-workers-covid-19-crisis-resources

▶ **International Labour Organization**

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