



ATHENA LINOS
WILHELM KIRCH
Editors

*Promoting
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Foreword by Karen Messing

 Springer

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This book is dedicated to all working women

Foreword

In general, women's health is better if they work, however this is not true for working-class women (Romito 1994). In fact, all women's health is at risk if their jobs expose them to risk factors such as toxic or infectious agents, infections, repetitive movements, awkward postures, and heavy time pressure (Vogel 2003, Messing & Mergler 2006). Therefore, health promotion for women involves two components: preventing workplace-induced damage to health, and using the workplace as a place to promote healthy behavior and detect illness (Karnaki et al., this volume). Research is lacking in both areas, and this book is, I hope, part of a serious European effort to fill the gaps.

Relatively little is known about women's occupational health. At least since the publication of *Women's Work, Women's Health* (Stellman 1978), occupational health researchers have been aware of a severe deficit in research on women, which continues to this day (McDiarmid & Guce 2001, Messing & Mergler 2006). Not only are women often ignored, but the treatment of sex as a variable has not been appropriate (Niedhammer et al. 2000, Messing et al. 2003). This book presents a wealth of information that will be useful to those wanting to improve workplace-related health for women.

I hope it will inspire researchers and practitioners to increase efforts to understand the consequences of the sexual division of paid and unpaid labor in women's health, the interactions between biological sex differences and workplace conditions, and the health effects of women's social situation in the workplace. For example, with recent transformations in global labor-force practices and the increasing proportion of atypical and precarious jobs, especially for women (Cranford et al. 2003), we need to know a lot more about the health effects of such terms of employment. More broadly, we should know more about all the effects of sex discrimination in the labor market and on the job (Bond et al. 2004, Schmitt et al., this volume).

This book also presents several interesting case studies of health promotion for women, as well as important theory concerning health promotion. We need to know even more, however, about how to produce change in the workplace and more about how women's needs can be met in practice, given their position in the hierarchy, their social roles, and the constraints put on them. For example, we know that women in health care are exposed to many communicable diseases that can affect their health (Tsiodras, this volume). Carpentier-Roy [1991], however, tells us that nurses

are reluctant to put physical barriers between themselves and their patients, especially when the patients are close to death. How can health protection be reconciled with the essential act of caring, which is fundamental to nursing and a recognized and valued part of women's social role? We ourselves have observed that cleaners are excluded from information about the health state of patients whose rooms they clean. How to reconcile health protection with confidentiality? We also learn from this book that the workplace is a good place to give women important information related to cessation of smoking (Merkur, this volume). We have observed that food servers and other women working under time pressure with very short breaks use cigarettes to transition between accelerated movements and relaxation. How can practitioners consult with employers to change working conditions to make the use of this unhealthy tool unnecessary? These and other puzzles must be resolved by talking to and observing women workers—to identify what is important to them about their jobs, and how they deal with the challenges in their working environments.

Unfortunately, we cannot assume that such things will be done just because they are a good idea. In a holistic consideration of health promotion, Chapter 9's section on breastfeeding (Geuskens & Burdorf) invites workers and practitioners to weigh the benefits of breastfeeding against the dangers of contamination of the infant by toxic substances present in the workplace. The authors propose that the workplace adapt to the presence of nursing women in a number of ways. Malenfant (1996) has shown in her study of the experiences of pregnant workers, however, that it can be dangerous to ask too loudly for the workplace to adjust to women's specific needs. It is unfortunately still true that, in most workplaces, even unionized women workers must avoid any act that marks them as a different group from male workers, who are seen as the norm (Messing et al. 2006). Researchers and practitioners must therefore collaborate to make workplaces more likely to adapt to the needs of all workers. This book should be an important step toward transforming research and practice in health promotion in Europe, so women can gain social and economic equality without endangering their health.

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Preface

In the past few decades, the European workforce has seen a substantial rise in the number of employed women. There is an increasing trend in women entering most occupations while still carrying the responsibilities of domestic labor. Professional and domestic demands can be overwhelming and difficult to balance, thus placing women in a very sensitive yet powerful position. Working women face increased risks as a consequence of their employment and domestic undertakings, yet they have the power to influence the health habits and behaviors of their family and, to a certain extent, of their social contacts. In addition, successful work-life balance constitutes an important health resource.

Understandably, the delivery of health promotion programs specifically addressing women is of utmost importance due to their multiplying effect. What better place to address women than the workplace—a setting where peer pressure can exercise an extremely positive influence. Occupational settings offer the possibility of reaching large numbers of women at regular intervals, which is a critical element in the success of any health promoting intervention.

Despite all this, health-related initiatives are limited and have not taken into account the potential of women for disseminating health-promoting messages. Such initiatives should stem from health authorities, public health professionals (including occupational safety and health services), employers, and employee associations. All these parties need to understand that investing in the health and welfare of their employees and their families has a direct positive impact on productivity and wealth.

Some might argue that health interventions addressing just women in the workplace constitute gender discrimination, yet one can easily find counter arguments by looking at recent data published by the World Health Organization (WHO) in 2004.* Part-time work is more common for women than men, women are under-represented in permanent employment contracts, and female unemployment rates are much higher compared to men, indicating instability in professional life and higher exposure to health risks. Mental health problems, stress, burnout syndrome, work-related violence, and sexual harassment constitute important public health issues affecting more women than men, and are directly related to work.

*World Health Organization (2004) Gender, Health and Work. Geneva: Department of Gender, Women and Health (GWH).; <http://www.who.int/gender/documents/en/>

This book is an effort to provide public health professionals with background knowledge in organizing health-promoting programs, and enable them to address a series of health issues—some of which are exclusively relevant to women.

The book is divided into four parts. Part I provides an overview of the principles and concepts of health promotion for working women, and provides a methodological framework for the design and implementation of health promotion programs. The first part of the book also includes a review of the relevant European Union (EU) legislative framework.

Part II reviews specific health topics of particular interest to working women, namely, occupational diseases, mental health and work-life balance, musculoskeletal disorders, work-related violence, bullying and sexually harassment, and communicable diseases. In Part III, special emphasis is made on two particular health issues concerning working women—reproductive health and breastfeeding. The final part reviews lifestyle determinants such as smoking, alcohol, and nutrition from a woman's perspective, and in view of the special role women still have in most of today's family and societal structures.

Athena Linos
Wilhelm Kirch

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