

IMPROVING OCCUPATIONAL SAFETY AND HEALTH IN THE GARMENT SUPPLY CHAIN DURING THE COVID-19 PANDEMIC

VISION

ZERO

A compilation of awareness, assessment, guidance and capacity building tools

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Improving Occupational Safety and Health in the garment supply chain during the COVID-19 pandemic. A compilation of awareness, assessment, guidance and capacity building tools

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Acronyms

GSCs	Global Supply Chains
ILO	International Labour Organization
LABADMIN/OSH	Labour Administration, Labour Inspection and Occupational Safety and Health
MLVT	Ministry of Labour and Vocational Training
МоМ	Ministry of Manpower
OSH	Occupational Safety and Health
PCR	Polymerase Chain Reaction
PPE	Personal Protective Equipment
SDG	Sustainable Development Goals
SMEs	Small and Medium Enterprises
VZF	Vision Zero Fund
WHO	World Health Organization



Introduction to the toolkit

In 2016, the Group of Seven (G7) countries asked the ILO to administer the Vision Zero Fund. The initiative, which was later endorsed by the G20, mobilizes governments, employers, workers and other stakeholders to take collective action to achieve zero severe fatal work-related accidents, injuries and diseases in global supply chains (GSCs).¹ The Fund is an integral component of the International Labour Organization's (ILO) Safety and Health for All Flagship Programme.

The Fund's interventions are clustered into the following three outcomes:

- Global and national stakeholders confirm their commitment to OSH by taking action to enhance OSH in global supply chains
- Strengthened system of OSH services, legislation, policy, availability of data and compliance in targeted countries
- Female and male workers in targeted global supply chains and countries benefit from reduced exposure to OSH hazards and improved access to employment injury insurance.

About 60% of global trade today is organized within the GSCs. While the contribution of GSCs to global economic growth and job opportunities is evident, their impact on the living and working conditions and the safety and health of workers in developing countries raises important concerns.²

The Fund is active in three global supply chains, namely agriculture, construction and garment/ textiles and will expand to other high-risk sectors as the Fund grows and evolves. To date, its work has benefited more than 7,0 million workers directly and indirectly.

Since the start of the pandemic, **Vision Zero Fund** has responded to the evolving needs of its constituents and stakeholders. At the global level, the Fund mobilized resources to implement COVID-19 mitigation measures, in particular in the garment sector, and produced and disseminated various technical tools such as OSH policy advice documents to ensure that employers, workers and their families were protected against the direct and indirect health hazards of COVID-19. At the country level, VZF teams carried out a range of tailor-made activities such as awareness raising campaigns on OSH/COVID-19, training on cleaning and disinfection, facilitative inspections etc to support workers and employers in alleviating the effects of COVID-19 and limit disruptions to global supply chains.

¹ For more information on Vision Zero Fund, see https://vzf.ilo.org/

² ILO, Factsheet on OSH in Global Supply Chains ILO EU project to improve knowledge base on safety and health in global supply chains to support G20 work on safer places, 1 September 2016.

With financial support from Germany, and in collaboration with ILO's Social Protection Department and ILO's Better Work Programme, the Fund designed and implemented a project entitled "Protecting garment sector workers: occupational safety and health and income support in response to the COVID-19 pandemic". The project consisted of two components, namely the provision of income support, and the implementation of measures to mitigate the impact of the pandemic on the safety and health of garment sector workers. The income support component was implemented by the ILO Social Protection (SOCPRO) Department, while the OSH component was implemented by the Vision Zero Fund in collaboration with the Better Work Programme. The OSH component of this project was operational in seven countries: Bangladesh, Cambodia, Ethiopia, Indonesia, Laos, Madagascar and Vietnam. Key areas of support under the OSH component of the project included supporting constituents and stakeholders in designing and implementing practical workplace prevention and mitigation measures; capacity building around risk assessment and emergency preparedness; awareness initiatives for workers and their families as well as other stakeholders and service providers and to facilitate dialogue and discussions to strengthen policy initiatives for better management of future epidemics.

About the toolkit on OSH

A number of knowledge products on COVID-19 risk assessment, COVID-19 mitigation and prevention measures and COVID-19 OSH knowledge and awareness were developed across the project countries. These products were prepared and disseminated to ILO constituents and project partners.

This toolkit synthesizes and describes a selected set of these knowledge products so that stakeholders can have access to them. It also includes global tools that were adapted and implemented at country level. Although the project focussed on the garment sector in the seven target countries, most of the products can be adapted and used in other sectors and countries.



Figure 1: Countries in which the project was active

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The structure of the toolkit is as follows:

- Part 1 of the toolkit introduces the importance of OSH, the role of the ILO in promoting awareness about OSH issues in the workplace and assisting governments, employers and workers to put in place mechanisms to alleviate the risks of OSH hazards. There is a particular focus on the work done by the ILO to address the OSH concerns that emerged during the COVID-19 pandemic;
- Part 2 explains the objective of the toolkit and provides a summary of selected knowledge products;
- Part 3 describes in detail the tools that are summarized in part 2. It explains what the tool is, who is it for, how to use the tool and provides the web link to access the tool along with further reading recommendations related to the topic.
- At the end of the toolkit, readers can find a glossary with definitions of OSH concepts, including those related to the COVID-19 pandemic, key information related to the virus and country responses to COVID-19.





Background

Why focus on Occupational Safety and Health?

Safe and healthy work is the right of workers and is the basis of sustainable development. Yet every day, people die as a result of occupational accidents or work-related diseases. According to the September 2021 joint estimates by the ILO and the World Health Organization (WHO), each year at least 1.9 million people die, and 90 million disability-adjusted life years (DALYs) are estimated to be attributable to exposure to 19 major occupational risk factors. Additionally, there's some 360 million non-fatal occupational accidents each year (resulting in more than 4 days of absence of work).³ Furthermore, accidents and injuries at work have a detrimental impact on enterprises as it affects productivity, interrupts production, impedes competitiveness as well as enterprise reputation. This has an overall impact on the economy as it is estimated that **lost workdays represent almost 4 per cent of the world's annual gross domestic product (GDP)**.⁴

The importance of occupational safety and health (OSH) is recognized in the 2030 Agenda of Sustainable Development. Investment in OSH is necessary to achieve **Sustainable Development Goal (SDG) 3**, to ensure healthy lives and promote well-being for all at all ages and **SDG 8**, to promote inclusive and sustainable economic growth, employment and decent work for all – in particular Target 8.8, 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.



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ILO and OSH

Decent, safe and healthy working conditions has been pivotal in the mission of the International Labour Organization (ILO) since it was established in 1919. The **Labour Administration**, **Labour Inspection and Occupational Safety and Health Branch (LABADMIN/OSH)**⁵ works with governments, employers and workers to create wide-reaching awareness of the human and economic costs of work-related fatalities, injuries and diseases. It also endeavours to make health and safety of workers a central theme on the international agenda. In the areas of labour administration and labour inspection, LABADMIN/OSH supports ILO constituents, particularly Ministries of Labour and their labour inspection systems, in discharging their functions related to achieving compliance with labour laws and regulations, prevention and settlement of labour disputes and improving working conditions for all workers.

³ ILO and WHO; WHO/ILO joint estimates of the work-related burden of disease and injury, 2000-2016: global monitoring report, 2021.

⁴ Hämäläinen, P.; Takala, J.; Boon Kiat, T, *Global Estimates of Occupational Accidents and Work-related Illnesses* 2017 (XXI World Congress on Safety and Health at Work, Singapore, Workplace Safety and Health Institute, 2017).

⁵ ILO, About Labour Administration, Labour Inspection and Occupational Safety and Health Branch (LABADMIN/OSH).

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The ILO has adopted more than 40 standards specifically dealing with occupational safety and health as well as over 40 Codes of Practice. Nearly half of the ILO instruments deal directly or indirectly with occupational safety and health issues.⁶

ILO standards are legal instruments drawn up by the ILO's constituents (governments, employers and workers) and set out basic principles and rights at work. They are either Conventions (or Protocols), which are legally binding international treaties that may be ratified by member states, or Recommendations, which serve as non-binding guidelines. In many cases, a Convention lays down the basic principles to be implemented by ratifying countries, while a related Recommendation supplements the Convention by providing more detailed guidelines on how it could be applied.⁷ ILO standards on OSH provide essential tools for governments, employers and workers to establish sound prevention, reporting and inspection practices for safety and health at work.

ILO Codes of Practice⁸ provide OSH guidance for public authorities, employers, workers, enterprises and specialized occupational safety and health protection bodies in certain economic sectors (e.g. construction, opencast mines, coal mines, iron and steel industries, non-ferrous metals industries, agriculture, shipbuilding and ship repairing, forestry), on protecting workers against various hazards (e.g. radiation, lasers, visual display units, chemicals, asbestos, airborne substances) and on recording of occupational accidents and work-related diseases. Codes of practice are not legally binding instruments and are not intended to replace the provisions of national laws or regulations or accepted standards.

The ILO has also worked towards developing guidelines, which are the outcome documents of tripartite meetings of experts. The guidelines on OSH management systems (ILO-OSH 2001) and ethical guidelines for workers' health surveillance are the two key documents in this regard. These guidelines are practical recommendations intended for use by all those who have responsibility for OSH management.

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

On 11 March 2020, the WHO declared COVID-19 a global pandemic. At the time, there were more than 118,000 cases in 114 countries and 4,291 people had lost their lives.⁹

According to the WHO, by the end of 2021, the pandemic had resulted in 5.5 million deaths.¹⁰ Labour shortages caused by COVID-19 related illness or deaths, coupled with multiple national lockdowns disrupted supply chains globally resulting in a slow down or temporary halt in the flow of raw materials and finished goods. This affected production and had huge impacts on the labour market. The ILO estimates that COVID-19 has resulted in the most severe crisis for the world of work since the Great Depression of the 1930s.¹¹

⁶ ILO, "International labour standards on occupational safety and health".

⁷ ILO, "Conventions and Recommendations".

⁸ ILO, "Codes of practice on OSH".

⁹ WHO, "WHO Director-General's opening remarks at the media briefing on COVID-19", 11 March 2020.

¹⁰ WHO, WHO epidemiological updates Dec 2021.

¹¹ ILO, ILO Monitor: COVID-19 and the world of work. Seventh edition, 25 January 2021.

Table 1: Impact of COVID-19 on labour market ¹²

8.8%

DECLINE IN WORKING HOURS

These working-hour losses (relative to the fourth quarter of 2019) are equivalent to 255 million full-time jobs and approximately four times greater than during the global financial crisis in 2009.

8.3%

DECLINE IN LABOUR INCOME

The decline in global labour income (before taking into account income support measures) amounts to US\$3.7 trillion or 4.4 per cent of global gross domestic product.

81 million

INCREASE IN PERSONS OUTSIDE THE LABOUR FORCE

Employment losses in 2020 translated mainly into rising inactivity rather than unemployment. Accounting for 71 per cent of global employment losses, inactivity increased by 81 million, which resulted in a reduction of the global labour force participation rate by 2.2 percentage points in 2020 to 58.4 per cent.

In times of COVID-19, more than ever, OSH should be a top priority. The pandemic has put to danger workers and people in the world of work as they are exposed to the risk of infection with the novel coronavirus. Workplaces in which workers spend time indoors in close proximity to one another, including during work interactions, shared accommodations and transport have, in some cases, become sources of outbreaks of the virus.¹³

Investment in OSH during the pandemic has become fundamental to not only PROTECT WORKERS AND FAMILIES but is also critical to ensure the continuity of enterprises and avoid supply chain disruptions.

In addition to the threat of acquiring the virus, workers have encountered other hazards during the pandemic, which have arisen because of the implementation of novel work practices to mitigate the spread of COVID-19. Various control measures like working from home, increased cleaning and disinfection and increased use of personal protective equipment (PPE) have been extensively adopted. Although these measures have proved to slow the spread of the virus, they have resulted in new OSH issues like chemical, ergonomic and psychosocial hazards. Workers are also facing stress because of increased workloads, longer working hours and reduced rest periods during the pandemic. Additionally, many workers are at risk of facing discrimination when infected with the virus, which can have negative effects on their mental well-being. Working from home has become the norm in many sectors during the pandemic.

An unescapable outcome of this pandemic is the need to protect employers, workers as well as third parties in contact with the enterprise. As a result, the adjustment of workplaces to the changing nature of the pandemic needs to remain central in the agenda of governments, employers and workers.

¹² ILO, COVID-19 and labour statistics.

¹³ WHO, Promoting the health of migrant workers in the WHO European Region during COVID-19. Interim guidance, 6 November 2020.

"The impact of COVID-19 on the safety and health of workers has been profound. For all workers the threat posed by COVID-19 extends beyond catching the virus itself. There could be no clearer demonstration of the importance for us all of a strong resilient OSH environment. Strong OSH systems have been the bedrock of our pandemic response. Investing in them will be essential if we are to be ready for future crises."

> Guy Rider ILO Director General

COVID-19 pandemic: impact on the garment sector

In March 2020, when the COVID-19 outbreak was declared a global pandemic, large-scale lockdowns restricting movement and economic activity, disrupted the GSCs and forced garment manufacturers in various countries to either halt production or lower capacity. Global garment trade shrank in the first half of 2020. Garment manufacturers experienced disruptions of up to 60 per cent on their imported input supply and imports from Asia's garment-producing countries to major buying countries dropped by as much as 70 per cent.¹⁴ Cancellations of orders by buyers were common at the beginning of the pandemic.

Table 2: Impact of COVID-19 on the garment sector in select countries at the start of the pandemic

In **BANGLADESH**,

by April 2020, most factories closed their operations after the government declared closure to prevent the spread of COVID-19. Exceptions were made for factories that still had orders or that were producing PPE.¹⁵ According to the Bangladesh Garment Manufacturers and Exporters Association, buyers either suspended or cancelled purchase orders worth more than US\$3.15 billion due to COVID-19. This affected 1,136 factories. The drop in demand affected 2.26 million workers.¹⁶ More than one million garment workers in Bangladesh were already fired or furloughed.17

In CAMBODIA,

as of April 2020, the Ministry of Labour and **Vocational Training** declared in its official figures that 91 Cambodian factories had partially or fully suspended their production for one to two months. Trade unions in Cambodia, such as the National Trade Union Confederation and the Collective Union of Movement of Workers encouraged the Cambodian government to temporarily suspend garment production to mitigate the risk of spreading COVID-19.18

In INDONESIA,

as of April 2020, 45 factories part of the Better Work Indonesia programme stopped, temporary closed or significantly decreased operations. 14 factories adapted their production lines since March 2020 to produce PPE for prevention and handling of COVID-19.¹⁹

In VIETNAM,

in early March 2020 garment manufacturers started to experience order cancellations or suspensions from Western buyers. According to the Ministry of Labour, Invalids and Social Affairs, many garment manufacturers had reduced shifts and overtime.²⁰ The government put into effect stringent social distancing rules nationwide to control the spread of COVID-19.

14 ILO, The supply chain ripple effect: How COVID-19 is affecting garment workers and factories in Asia and the Pacific, October 2020.

- 15 Better Work, Industry Update/National Response, 2 April 2020.
- 16 Bangladesh Garment Manufacturers and Exporters Association, Impact of COVID-19 on Bangladesh RMG industry, 1 April 2020.
- 17 Mark Anner, Abandoned? The Impact of Covid-19 on Workers and Businesses at the Bottom of Global Garment Supply Chains (Penn State, Center for Global Workers' Rights CGWR, March 2020).
- 18 Long Kimmarita, "Factories pressured to close amid pandemic concerns", Phnom Penh Post, 24 March 2020.
- 19 Better Work, Industry Update/National Response, 2 April 2020.
- 20 Joe Buckley, "Vietnam Labour Update 52", Tinyletter, 23 March 2020.

As a consequence of the COVID-19 pandemic, industry experts suggest that global production of medical PPE increased by at least 300 per cent at the peak, principally driven by demand for masks. This ramp-up started at the end of Q1/beginning of Q2 of 2020 to compensate for a global shortage and to satisfy forward-looking surge orders from governments and private entities. Global volume for PPE continued to increase in 2021, where consumer and non-healthcare workplace demand accounted for approximately 60 to 70 per cent of the total demand, due to significant adoption and continued use of surgical masks. While it is estimated that 50 to 60 per cent of this supply increase was driven by existing global players expanding their production capacities, 40 to 50 per cent came from (i) a partial shift in production by adjacent industry manufacturers (e.g., in garment/textiles) and (ii) entirely new but smaller-scale local players.²¹

As some garment factories got into manufacturing PPE and some others continued operations to meet their client's orders, in the context of the pandemic, the virus responsible for COVID-19 and its characteristics, including transmission patterns and the persistence of the virus on different surfaces added to the garment sector's existing OSH vulnerabilities. Garment workers became especially exposed to the health risks that COVID-19 constitutes. This is because they commonly work in crowded settings, very close to thousands of other workers. The 2021 ILO publication - Occupational safety and health improvement in the garment industry - drivers and constraints: a synthesis review also shows that there is a general lack of health and hygiene facilities in garment factories such as insufficient number of lockers, changing rooms, showers, adequate accessible toilets and eating area for employees.

Additionally, women workers largely make up the workforce in the garment sector. As a result, they are not only exposed to the threat of being infected but are also adversely impacted by the increased stress of balancing work as well as caring responsibilities. Further, measures taken to curb the spread of the virus in garment enterprises resulted in psychosocial, ergonomic and chemical hazards. Workers in garment enterprises producing the much in demand PPE kits also faced an increase in work related stress and harassment at work.

Table 3: OSH challenges in the garment sector

SOME GENERAL OSH CHALLENGES IN THE GARMENT FACTORIES:

- Excessive noise
- Improper lighting level
- Insufficient ventilation
- Extreme heat
- Blocked or not clearly marked exit ways
- Unguarded moving parts of machinery
- Open electrical wires
- Poor fire safety (lack of fire detection and firefighting equipment)
- Absence of health facilities: Not providing a sufficient number of lockers, changing rooms, showers, adequate accessible toilets and eating area for employees
- Poor ergonomic design of workstations and work condition
- Exposure to dangerous chemicals

Sources: Occupational safety and health improvement in the garment industry - drivers and constraints: a synthesis review, VZF 2021; Better Work, "Better Work Indonesia: Garment Industry 5th Compliance Synthesis Report", ILO Better Work, Sept. 2015 and Better Work, "Interpreting (Non-) Compliance: The Role of Variegated Capitalism in Vietnam's Garment Sector", ILO Better Work, 2013.

ILO's COVID-19 response in the garment sector

In light of the challenges resulting from the pandemic on the garment sector, the ILO facilitated and supported the Call to Action. It is an international multi-stakeholder initiative, which endeavours to stimulate industry-wide action to protect garment workers' incomes, health and employment and supports employers to survive during the COVID-19 crisis and to come together to establish sustainable systems of social protection for a more just and resilient garment industry. The LABADMIN/OSH Branch of the ILO, global programmes such as the OSH Flagship programme Safety+Health for All, Vision Zero Fund COVID-19 Response and Better Work have been instrumental in implementing ILO's COVID 19 response measures in the garment sector from an OSH perspective. The response measures have been implemented with a view to complement national response measures. An overview of country-specific national responses in country that were part of the German funded project Protecting Garment Sector Workers project, is provided as Annexure III.

In addition to these specific measures, the ILO's broad range of labour standards related to occupational safety and health are also extremely relevant in providing a normative framework in the context of COVID-19 pandemic and its implications on workers and businesses.

Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187)

According to article 2 of the Convention, countries shall take active steps towards achieving progressively a safe and healthy working environment and promote continuous improvement of occupational safety and health to prevent occupational injuries, diseases and deaths. During the pandemic, even countries that had not ratified the convention took measures to promote a safe and healthy environment.

Occupational Safety and Health Convention (No. 155) and Recommendation (No. 164)

A number of provisions in Convention No. 155 and its Recommendation offer prevention and protection measures to mitigate the negative safety and health effects of pandemics such as COVID-19 in the world of work.

The Convention states that employers have the overall responsibility of ensuring that all practicable preventive and protective measures are taken to minimize occupational risks.²² OSH measures shall not involve any expenditure for workers.²³ Additionally, employers are responsible for providing, where necessary and so far as is reasonably practicable, adequate protective clothing and protective equipment, at no cost to the worker.²⁴ Employers are responsible for providing adequate information and appropriate training on OSH²⁵; consulting workers on OSH aspects associated with their work²⁶; and providing measures to deal with emergencies.²⁷

The Convention as well as the recommendation also attributes responsibility on the workers. It states that workers are responsible for cooperating in the fulfilment of the OSH obligations

²² Art. 16 of the Occupational Safety and Health Convention, 1981 (No. 155) provides that: "Employers shall be required to ensure that, so far as is reasonably practicable, the workplaces [...] under their control are safe and without risk to health."

²³ Art. 21 of C.155.

²⁴ Arts. 16(3) and 21 of C.155.

²⁵ Art. 19(c) and (d) of C.155.

²⁶ Art. 19(e) of the C.155.

²⁷ Art. 18 of C.155.

placed on them by their employer, complying with the prescribed safety measures, taking reasonable care for the safety of others (including avoiding exposing others to health and safety risks), and use safety devices and protective equipment correctly.²⁸ Arrangements in workplaces shall mandate workers to report to their immediate supervisor any situation which they have reasonable justification to believe presents an imminent and serious danger to their life or health.

Workers also have rights. For example, until the employer has taken remedial action, if necessary, the employer cannot require workers to return to a work situation where there is continuing imminent and serious danger to life or health.²⁹ Workers have the right to remove themselves from a work situation that they have reasonable justification to believe presents an imminent and serious danger to their life or health. When a staff member exercises this right, he or she shall be protected from any undue consequences.³⁰

Occupational Health Services Convention, 1985 (No. 161) and Recommendation (No. 171)

Occupational health services are entrusted with essentially preventive functions and responsible for advising the employer, the workers and their representatives in the undertaking on the requirements for establishing and maintaining a safe and healthy working environment, which will facilitate optimal physical and mental health in relation to work as well as the adaptation of work to the capabilities of workers in the light of their state of physical and mental health.³¹ Workers should be informed in an adequate and appropriate manner of the health hazards involved in their work.³²

Employment Injury Benefits Convention, 1964 (No. 121) and List of Occupational Diseases Recommendation, 2002 (No. 194)

According to paragraph 29 of Schedule I of the convention, infectious or parasitic diseases contracted in an occupation where there is a particular risk of contamination can be considered an occupational disease for work involving exposure to risk, including health or laboratory work and other work carrying a particular risk of contamination. This is also upheld in paragraph 1.3.9 of the Annex of the List of Occupational Diseases Recommendation, 2002 (No. 194). Therefore, infection by COVID-19, if contracted as a result of work, could be considered as a work or employment injury.

The examination of the recent national practices reveals that, in some of the most affected countries, the authorities have considered infection by COVID-19 as a work-related accident to ensure easier and faster access to associated benefits. With the same objective, a number of countries have expressly recognized COVID-19 to be an occupational disease, and notably with respect to health workers and other workers particularly exposed. In some countries, the authorities have stated that infection by COVID-19 contracted at work would be treated as a work-related injury, without specifying in which category it would fall. Information on the measures and national practices can be found on the ILO's collection of state practice to address infection by COVID-19 as a work-related injury.

²⁸ Art. 19 of C.155 and Para. 16 of the Occupational Safety and Health Recommendation, 1981 (No. 164).

²⁹ Art. 19(f) of C.155.

³⁰ Art. 13 of C.155.

³¹ Related to Art. 16 of the Occupational Health Services Convention, 1985 (No. 161).

³² Para. 22 of the Occupational Health Services Recommendation, 1985 (No. 171).



The toolkit: Getting Started

What is this toolkit for?

This toolkit brings together useful tools to increase occupational safety and health (OSH) within garment supply chains. It provides a comprehensive overview of each tool's scope and utility.

By using this toolkit, you will:

- Learn about the preventive measures in the workplace against the risk of contagion of COVID-19 and other risks associated with the pandemic
- Promote good practices in the formulation of OSH protocols to address safety and health in times of COVID-19, based on, among others, preventive principles and social dialogue

Who is this toolkit for?

This toolkit can be applied by any stakeholder working in the garment supply chain, such as:

- Governments
- Employers and their representatives
- Workers and their representatives
- Joint health and safety committees
- Occupational health service providers
- Supervisors and middle managers
- Institutions and organizations with a mandate on safety and health at work
- Other public bodies with responsibilities over the world of work

How to use this toolkit?

The toolkit includes:

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- A brief introduction to OSH and COVID-19
- A library containing relevant resources and references divided into three central themes
- A glossary of the key concepts related to OSH and COVID-19

Overview of the toolkit

The toolkit has a two-tier classification system

Central themes

Tools are clustered around three central themes:

- Central theme 1: COVID-19 Risk Assessment
- Central theme 2: COVID-19 Mitigation and Prevention Measures
- Central theme 3: COVID-19 OSH Knowledge and Awareness

Types of tools

Each tool is also classified by type, indicated by the following icons:



Summary of the toolkit

Central theme 1: COVID-19 Risk Assessment

Type of tool	ΤοοΙ	What is it for?	Who it's for?	Languages
	a. Checklists to assess COVID-19 risks	Three different types of checklists that enterprises can use to assess workers' exposure to COVID-19 in relation to the complexities of their business operations. Information is to be used in the preparation of their responses to COVID-19.	The checklists are an enterprise management tool. However, the successful implementation of the tool is dependent on the cooperation between employers, supervisors and workers to gauge enterprise preparedness against COVID-19. Also useful for workplace safety and health committees or safety delegates.	Bahasa Chinese English French Romanian Spanish Ukrainian
	b. OSH in response to the COVID-19 pandemic - Rapid Needs Assessment & Response Plans: Preparation Guidelines for Country Level Interventions	This document contains a rapid needs assessment exercise that covers two main areas: • the overall situation at the national and regional levels • constituents' capacity and need to respond to the crisis. The exercise provides guidance to governments', employers' and workers' organizations as well as project teams for preparing OSH country level interventions to support efforts to ensure a safe work environment in the context of COVID-19.	 This tool is for: Employers and their representatives Workers and their representatives Governments Project design and implementation teams 	English French Spanish
() (金) () () () () () () () () () () () () ()	c. Risk Assessment in workplaces	The tool contains training materials in the form of PowerPoint presentations that can be used to train enterprises on how to conduct risk assessments. It also includes a risk assessment checklist.	 This tool is for: Employers and their representatives Workers and their representatives Supervisors and middle managers Joint health and safety committees Trainers/Consultants NGOs 	English Vietnamese



Central theme 2: COVID-19 mitigation and prevention measures

Type of tool	ΤοοΙ	What is it for?	Who it's for	Languages
	a. COVID-19 Control and Prevention	The tool, in the form a PowerPoint presentation, that explains the safety protocols to follow in the workplace like physical distancing; how to prepare disinfection solution; measures for pregnant women and lactating mothers. It also provides information on the role of the safety committee and available government services.	 Participants from the enterprise (medical staff, administration and compliance personnel, welfare officer, worker representatives of Safety Committee). 	Bangla English
	b. COVID-19 Cleaning and Disinfection	The tool contains a training manual that explains the difference between cleaning and disinfection, how and when to conduct each during the pandemic.	 Employers and their representatives Workers and their representatives Supervisors and middle managers Joint health and safety committees Trainers/Consultants NGOs 	English
	c. Posters and videos on mitigation and prevention techniques	The tool contains a set of posters and videos. The posters are aimed to promote and disseminate safety measures among workers, such as wearing masks, maintaining physical distance, washing hands and sanitizing the workplace. The videos explain: • How to wash hands • How to sanitize hands • How to use medical mask • How to use non-medical mask	The tool is aimed at workers. However, it needs to be circulated by employers, supervisors and middle managers and joint health and safety committees in the enterprise. It can also be disseminated by government agencies, employers and workers on their respective websites.	Amharic Bahasa
	d. Mechanisme de prevention et de contrôle des infections sur les lieux de travail	It is a presentation from Madagascar that explains a range of strategies for COVID-19 prevention, surveillance, detection and response. It is developed in collaboration with WHO, Madagascar.	 Employers and their representatives Workers and their representatives Supervisors and middle managers Joint health and safety committees Governments Trainers/Consultants NGOs 	French



Central theme 3: COVID-19 OSH knowledge and awareness

Type of tool	ΤοοΙ	What is it for?	Who it's for	Languages
	a. Digital behavioural change campaign for garment sector workers and communities	Campaign GIFs and short videos to encourage people to unite to fight against COVID-19. It focuses on dealing with stress and anxiety and is meant to generate confidence and motivation among workers affected by the pandemic.	The target audience is workers.	Khmer English
	b. Videos: Implementing COVID-19 measures at enterprises	The videos explain how measures taken to combat the spread of COVID-19 in enterprises in Ethiopia and Madagascar helped reduce the rate of illness among workers and increase worker morale.	The video is principally for the management and workers of other garment factories but can also be used by: • Trainers/Consultants • NGOs • Occupational Health Service Providers	Amharic –with English subtitles– Malagasy –with French subtitles–
	c. Poster on COVID-19 essentials	Awareness raising material on the various symptoms of COVID-19, maintaining a healthy lifestyle to build immunity against the virus and non- discrimination against people infected with the virus.	 Employers and their representatives Workers and their representatives Supervisors and middle managers Joint health and safety committees Trainers/Consultants NGOs 	Bahasa
Ø	d. Manual for labour inspection during the pandemic	The manual provides guidance on how to continue to conduct labour inspections and promote OSH culture in the enterprise during the pandemic.	The manual targets labour inspectors in government but it can also be used by: • Trainers • NGOs	Bahasa English
	e. Mobile application GOPY – technological platform for engaging and communicating with workers	GOPY is an interactive app (Android/iOS ready), which encourages the employers and employees to share their knowledge, experience, good compliance practices in the factories via the platform.	 This tool is for: Employers and their representatives Workers and their representatives Supervisors and middle managers Joint health and safety committees 	Vietnamese
	f. Radio campaign to raise public awareness about COVID-19 preventive measures	This radio campaign (launched in Jan-Feb 2022) aims at raising public awareness, especially among workers to continue prevention measure (5K message). A total of 22 radio sessions were broadcasted using the population radio channel Voice of Vietnam (VoV)	The tool targets workers, factory owners, brands and general community, especially in remote locations where radio usage is high.	Vietnamese



The toolkit

Central Theme 1: COVID-19 Risk Assessment

This central theme clusters a number of tools for conducting risk assessments to identify and evaluate the risks that arise at the workplace as a result of COVID-19 and adopt measures accordingly. It also contains a rapid needs assessment tool that can be used to design country level interventions or response plans to ensure safe work in the context of COVID-19.



A. CHECKLISTS TO ASSESS COVID-19 RISKS

Tools under this section are available in Bahasa, Chinese, English, French, Romanian, Spanish and Ukrainian.

WHAT ARE THESE TOOLS FOR?

This section clusters together four documents that enable Small and Medium Enterprises (SMEs) to assess COVID-19 risks in the workplace and helps them in preparing their response to the COVID-19 pandemic by ensuring that the workplace is prepared to protect the safety and health of their workers. The first tool was developed at a global level by the Fund's Secretariat in Geneva. Vision Zero Fund country team in Madagascar adpated the checklist to the respective country contexts. The first tool in this section provide comprehensive information on how to assess the risks and prioritize actions. The second and third tool are more rudimentary containing assessment questions that can be answered in a yes/no format. It allows enterprises to identify specific areas in which action needs to be taken.

Checklist: Prevention and mitigation of COVID-19 at work for small and mediumsized enterprises: Action Checklist and Follow up

Vision Zero Fund and ILO's Sustaining Competitive and Responsible Enterprises (SCORE) training programme developed an Action Checklist entitled Prevention and mitigation of COVID-19 at work for small and medium-sized enterprises.

This tool was developed during the peak of the pandemic. It is an adaption of the ILO action checklist, tailored to the needs of SMEs to help them assess COVID-19 risks. It simultaneously provides information on the measures to protect the safety and health of workers. The Action Checklist includes five checkpoints (I to V) against which enterprises should assess themselves. These five checkpoints are whether the enterprise:

- Collects and shares updated information about COVID-19
- · Has developed a company preparedness plan
- Conducts risk assessment
- Has organized work safely
- Has taken actions to protect and support workers by being in constant communication with them, providing leave and benefits, etc.

"Fiche de diagnostic", "Fiche de controle et de suivi" and "Fiche de Recensement des Entreprises"

The Madagascar country team developed the *fiche de diagnostic*, which records the enterprise performance and measures undertaken in the following areas in a yes/ no format:

- Has there been a case of COVID-19 in the workplace, yes/no and number of cases
- Actions undertaken to prevent the spread of COVID-19 (example communication about the virus, temperature check, physical distancing, cleaning and disinfection)

- Impact of the pandemic on the enterprises (example loss in working hours, personnel and difficulty in respecting labour norms)
- Provisions against occupational safety and health (example existence of proper ventilation, floor markings, cleanliness levels of work stations, canteens, toilets)
- Measures against biological risks (example provision of correct PPE, plan for cleaning and disinfection, plan for safe disposal of PPE)
- Existence and usage of risk assessment template

Based on the answers, the assessor can list recommendations/actions the enterprise must undertake in order to make its workplace safe against COVID-19. The enterprise is then assessed against these expected actions at a later date using the *fiche de controle*, which contains the list of recommended actions for the enterprise after the diagnostic visit, the status of implementation of the recommended measures, details on the difficulties encountered by the enterprise in implementing the recommendation and suggestion for improvement actions.

This checklist includes two parts "contrôle" et "suivi". This means that the intervention teams can return to the company after the "controle" to assess the level of implementation of the recommendations made. This is where the "Suivi" section is used. The "Fiche de recensement des entreprises » has been designed to be used at any stage of the implementation of the strategic plan.

The team implementing measures in various enterprises can consolidate all the activities implemented in the different types of enterprises using the *Fiche de Recensement des Entreprises*.

WHO IS THIS TOOL FOR?

The checklists were designed as part of the implementation of the strategic plan by labour inspectorate. Therefore, tools are primarily intended for the labour inspectorate. However, the checklists can also be used by:

- Employers and their representatives
- Workers and their representatives
- Joint health and safety committees
- Other OSH support functions (such as Occupational health service providers, social security)

The checklists can also be used by trainers/consultants to give training to enterprises – workers and management on risk assessment steps.

HOW TO USE THIS TOOL?

Enterprises can choose which checklist is most suited for their needs. The tool from Geneva requires enterprises to provide more detailed information than those from Bangladesh and Madagascar. The latter contains only questions against which the enterprise's actions against COVID-19 are assessed.

Irrespective of which checklist is chosen, all of them should be completed collaboratively by employers and workers representatives.

After completing the checklist, the enterprise should:

- Review each item.
- Develop a plan for all actions that are yet to be implemented. This action plan should list the activity that should be carried out, who will be responsible, what needs to be done and by when.
- Develop a communication plan to inform employees and customers of the actions taken by the enterprise to protect workers and the public from exposure to the virus.

What is needed to implement the tool?

To use the tool, the following resources are needed:

- Printed document for all the persons involved in undertaking the assessment. Alternately, the assessors can use an online version and should have access to a tablet, laptop when undertaking the assessment.
- Enterprise management and worker representatives to be trained on how to conduct the assessment safely using the document
- Enterprise management and worker representatives are provided PPE to undertake the assessment safely

What are the key activities to implement this tool?

Employer and worker representatives conducting the assessment should:

- Speak to workers while filling out the checklist
- Speak to management while filling out the checklist
- Conduct an enterprise walkthrough to check whether measures have been undertaken

KEY CONCEPTS

- Hazard identification
- Risk

- Risk assessment in the context of COVID-19
- Workplace

WHERE TO FIND THIS TOOL?

Prevention and mitigation of COVID-19 at work for small and medium-sized enterprises is available here in Bahasa, Chinese, English, French, Romanian, Spanish and Ukrainian

"Fiche de diagnostic", "Fiche de controle et de suivi" and "Fiche de Recensement des Entreprises" are available here



FURTHER READINGS AND RESOURCES

ILO (2013). Training package on workplace risk assessment and management for small and medium-sized enterprises

WHO (2020) How to use WHO risk assessment and mitigation checklist for mass gatherings in the context of COVID-19

OECD (2021). Covid-19 risk assessment - guidelines

Tsuyoshi Kawakami, Protecting Your Employees and Business from Pandemic Human Influenza - Action manual for small and medium-sized enterprises (ILO, 2009)

B. OSH IN RESPONSE TO THE COVID-19 PANDEMIC-RAPID NEEDS ASSESSMENT AND RESPONSE PLANS: PREPARATION GUIDELINES FOR COUNTRY LEVEL INTERVENTIONS

This tool is available in English, French and Spanish.

WHAT IS THIS TOOL FOR?

The tool is a document that provides guidance to governments', employers' and workers' organizations for preparing OSH interventions at a country level to ensure safe work in the context of COVID-19. It advises to design interventions by first understanding the outcomes of the pandemic in the country to date, identifying the measures that have been put in place to address them; collecting available data/ information on the labour market, OSH and labour inspection, health care and public health services; mapping the assistance that other organizations may be providing; and identifying all relevant existing policies, programmes and plans related to COVID-19. The document provides a list of questions that can be used to collect information through a combination of desk review and primary data collection methods by interviewing or consulting with national and regional authorities competent in OSH, occupational health services, public health services, health care providers/medical facilities, workers' organizations, employers' organizations, UN agencies and NGOs. The questions cover two main areas:

- the overall situation at the national and regional levels
- · constituents' capacity and need to respond to the crisis

While assessing the overall situation at the national and regional level, questions focus on finding out the health, economic and social impact of the pandemic on the local population. While assessing the constituents' capacity and need to respond to the crisis, questions focus on understanding the country's previous experience in dealing with similar crisis, finding out whether there are policies and programmes in place that aim to prevent exposure to and transmission of COVID-19 in the workplace and whether support to workers is available through employment injury insurance systems.

The findings from the assessment can then guide the creation of a response plan at the country level. The tool provides a response plan template where the proposed actions, duration and indicative budget are listed based on the findings of the assessment.

WHO IS THIS TOOL FOR?

The assessment is to be conducted by governments', employers' and workers' organizations, among others, in close consultation with the local ILO Office and/or constituents and/or partners on the ground.

HOW TO USE THIS TOOL?

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The document can be shared with ILO constituents in various countries interested in implementing project activities to respond to the current pandemic and future epidemics.

What is needed to implement the tool?

- Human resources: Persons qualified in conducting research and analysis and who have OSH knowledge are needed to conduct the assessment.
- Financial resources: Sufficient financial means for human resources or consultant are needed to conduct primary and secondary assessment.

What are the key activities to implement this tool?

The primary information is collected through consultations and interviews with:

- National and regional authorities competent in OSH (e.g. Ministry of Labour, Ministry of Health, national OSH institute, labour inspectorate, etc.).
- Occupational health services
- Public health services
- Health care providers/medical facilities
- Social security institutions, particularly employment injury institutions
- Workers' organizations
- · Employers' organizations
- Private sector entities
- Other ILO programmes or projects
- Other UN agencies and international organizations, including WHO
- Relevant non-governmental organizations and civil society organizations, including faith-based organizations and community groups

KEY CONCEPTS

- Community spread
- Competent authority
- Mitigation

Occupational Safety and Health Management System

WHERE TO FIND THIS TOOL?

The tool is available here in English, French and Spanish.

FURTHER READINGS AND RESOURCES

ILO Better Work (2020). Preventing and Handling Covid-19: A Guide for Factories in Indonesia

ILO (2020). Stop COVID-19 at work!

C. RISK ASSESSMENT IN WORKPLACES

This tool is available in: English and Vietnamese.

WHAT IS THIS TOOL FOR?

The tool comprises a set of presentations that can be used as training materials to deliver to enterprises over two-days of training. The tool starts with an introduction on COVID-19, how it spreads, characteristics of SARS-COV-2, symptoms and consequences of the pandemic in Vietnam. Then the presentation delves into how to conduct risk assessment. It provides 15 criteria for risk assessment such as number of workers in a concentrated area, factory ventilation level, whether temperature control is implemented, hygiene conditions, use of mask, etc. The tool includes a risk assessment template that can be used. If an enterprise scores less than 15 per cent against a criterion, then the risk of infection is classified as very low; for a score between 16 and 30 per cent, level of risk is low; between 31 and 50 per cent, the level of risk is moderate; a score between 51 and 80 per cent, the level of risk is high and a score between 81 and 100 per cent, the level of risk is classified as very high. The tool prescribes that a risk assessment be conducted every two weeks for a small enterprise.

The tool also provides some basic information about the safety measures that employees should follow before going to work, at work and at the end of the work. It also discusses strategies to be adopted when there is a confirmed COVID-19 case at the workplace and provides guidelines for developing a COVID-19 prevention plan at work.

The tool includes a quiz to be completed by participants at the end of the training. The quiz helps to evaluate the knowledge gained. Quiz findings can be used to inform future trainings.

WHO IS THIS TOOL FOR?

This tool is for:

- Employers and their representatives
- Workers and their representatives
- Supervisors and middle managers
- Joint health and safety committees
- Trainers/Consultants
- NGOs

HOW TO USE THIS TOOL?

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The presentations can be circulated by ILO constituents to enterprises, for them to use as training materials, and can also be used by an enterprise to train its employees on the safety measures.

What is needed to implement the tool?

To implement the measures mentioned in the presentation, the following resources are needed:

- Human resources: Qualified staff, with OSH knowledge, is needed to tailor and develop the training presentation and implement the courses and targeted measures. In the absence of in-house capacity, the enterprise can also choose to hire a consultant to carry out this work.
- Financial resources: Sufficient financial means for human resources and staff or consultant are needed to develop, tailor and implement training events and OSH improvement measures.

What are the key activities to implement this tool?

- Planning and developing a training event (agenda, mode of delivery, getting interested participants)
- Organize training event

KEY CONCEPTS

- Hierarchy of controls
- Personal Protective Equipment
- Risk

Risk Assessment

WHERE TO FIND THESE TOOLS?

The tool can be found here:

Guideline for risk assessment in workplaces and dormitories: English Guideline for risk assessment in workplaces and dormitories: Vietnamese

FURTHER READINGS AND RESOURCES

ILO (2020). Prevention and mitigation of COVID-19 at work for small and mediumsized enterprises ACTION CHECKLIST

ILO (2013). Training package on workplace risk assessment and management for small and medium-sized enterprises

OECD (2021). Covid-19 risk assessment - guidelines

Tsuyoshi Kawakami, Protecting Your Employees and Business from Pandemic Human Influenza - Action manual for small and medium-sized enterprises (ILO, 2009)

CDC, Cleaning and Disinfecting Your Facility - Every Day and When Someone Is Sick

WHO, Cleaning and disinfection of environmental surfaces in the context of COVID-19

Central Theme 2:

COVID-19 Mitigation and Prevention Measures

This central theme includes a series of protocols and preventive measures to avoid exposure and mitigate the spread of COVID-19 through the implementation of easily applied recommendations in the workplaces.



A. COVID-19 CONTROL AND PREVENTION

This tool is available in: English.

WHAT IS THIS TOOL FOR?

The tool is in the form of a presentation the provides information on COVID-19 safety protocols to be followed by workers when entering the enterprise and then safety measures to be followed within the enterprise while moving around the premises and implementing their work activities. It provides specific measures to be implemented by doctors, nurses or medical staff at the workplace. It also provides guidance on how to address COVID-19 outside the enterprise by informing about actions to take when encountering mild to medium to severe COVID-19 symptoms. The presentation provides information on hospitals handling COVID-19 cases in Bangladesh. It also includes links to courses that doctors and health workers can take.

WHO IS THIS TOOL FOR?

This tool is for:

- · Employers and their representatives
- Workers and their representatives
- Supervisors and middle managers
- Joint health and safety committees
- Trainers/Consultants
- NGOs

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HOW TO USE THIS TOOL?

The presentations can be circulated by ILO constituents to enterprises, for them to use as training materials, and can also be used by an enterprise to train its employees on the safety measures. Independent Trainers/Consultants or NGOs can also use this presentation to provide training or consultation to their target clients.

What is needed to implement the tool?

To implement the measures mentioned in the presentation, the following resources are needed:

- Human resources: Qualified staff, with OSH knowledge, is needed to tailor and develop the training presentation and implement the courses and targeted measures. In the absence of in-house capacity, the enterprise can also choose to hire a consultant to carry out this work.
- Financial resources: Sufficient financial means for human resources and staff or consultant are needed to develop, tailor and implement training events and OSH improvement measures.

What are the key activities to implement this tool?

- Planning and developing a training event (agenda, mode of delivery, getting interested participants).
- Organize training event

KEY CONCEPTS

- Cleaning
- Contact tracing
- Desinfection
- Hygiene
- Physical distancing
- Testing

WHERE TO FIND THIS TOOL?

The presentation, along with other useful resources is available in English at: Better Work Bangladesh COVID-19 resources - Better Work

FURTHER READINGS AND RESOURCES

WHO, Coronavirus disease (COVID-19) advice for the public: When and how to use masks

WHO, Mask use in the context of COVID-19

CDC, How to Protect Yourself & Others

B. COVID-19 CLEANING AND DISINFECTION

This tool is available in English.

WHAT IS THIS TOOL ABOUT?

The tool in the form of a training manual explains the following:

- The difference between cleaning and disinfection
- The areas that need to be cleaned and disinfected
- Steps to be undertaken before commencing cleaning and disinfection like handwashing, wearing the correct PPE and ventilating the area being cleaned.
- How to make cleaning and disinfectant solutions and which products are appropriate for which surfaces
- How to clean and disinfect various surfaces and areas
- Steps to be undertaken after finishing cleaning and disinfection like taking off the PPE and carefully disposing it, washing hands and taking a shower.

WHO IS THIS TOOL FOR?

- Employers and their representatives
- Workers and their representatives
- Supervisors and middle managers
- Joint health and safety committees
- Trainers/Consultants
- NGOs

HOW TO USE THIS TOOL?

The manual can be circulated amongst enterprises so that they can train their cleaning staff to implement the cleaning and disinfection activities accordingly. Alternatively, the manual can also be used by trainers or Joint Health and Safety Committees to train their workers and managers on the topic.

What is needed to implement the tool?

A training can be organized to share the content of this manual. For online training, a training agenda and detailed session plans need to be developed and an online event needs to be created. For face-to-face training, a training agenda, the development of training sessions and a location need to be found. For both types of events, financial and human resources are necessary in order to plan and develop the training and for its delivery.

What are the key activities to implement this tool?

- Reach out to potential enterprises and create awareness of the training event.
- Enrol participants.
- Develop the training agenda and the training material using the manual.
- Choose a training location (online or face to face).
- Deliver the training accordingly to plan.

KEY CONCEPTS

- Cleaning
- Desinfection
- Droplet transmission
- Hygiene

Personal Protective Equipment

WHERE TO FIND THIS TOOL?

The English version of the manual can be found here

FURTHER READINGS AND RESOURCES

CDC, Cleaning and Disinfecting Your Facility - Every Day and When Someone Is Sick

WHO, Cleaning and disinfection of environmental surfaces in the context of COVID-19

WHO, Coronavirus disease (COVID-19): Cleaning and disinfecting surfaces in nonhealth care settings

Better Work Vietnam Environmental sanitation and disinfection at workplaces and dormitories_EN versionEN-version.pdf

C. POSTERS AND VIDEOS ON COVID-19 MITIGATION AND PREVENTION TECHNIQUES

This tool is available in Amharic and Bahasa.

WHAT IS THIS TOOL ABOUT?

The tool contains a set of three posters in Amharic that display in a pictorial format the different COVID-19 control measures that workers should respect like masking, handwashing and physical distancing.

The tool also contains a set of posters and motion graphics in Bahasa on the following topics:

- How to wash hands
- How to sanitize hands
- How to use medical mask
- How to use non-medical mask
- How to safely reopen the workplace by ensuring that safety measures are put in place
- How to stay healthy at work through by maintaining a healthy work-life balance, diet and exercise

WHO IS THIS TOOL FOR?

The posters and videos are aimed at workers but they need to be circulated by employers, supervisors and middle managers and joint health and safety committees in the enterprise. Government agencies, employers' and workers' can also use them on their websites.

HOW TO USE THIS TOOL?

The posters can be used both physically at the workplace and virtually. The printed version of these posters is useful to directly reach the workers at the workplace, during training at the workplace, and during workers' and employers' organizations' meetings and trainings. Digital copies of the posters can be shared on government and workers' and employers' organizations' websites and social media in order to reach as many people as possible.

The videos can also be shared through social media and websites or they can be used by workers, workers' and employers' organizations, NGOs and other actors during any training or meeting organized by them.

What is needed to implement this tool?

To use this tool, the following resources are needed:

For the paper version in the workplace:

- A colour printer with ink
- Paper
- A safe space to disseminate the information and train the management and workers on the techniques promulgated on the posters
- A safe and appropriate space to hang the posters in the workplace

For the digital version:

• A website or social media platforms

For the videos:

- Share the videos on social media platforms to provide guidance on handwashing
- Use them in training or a meeting organized to discuss mitigation and prevention measures against COVID-19 through audio-visual equipment

What are the key activities to implement this tool?

- Disseminating the posters, either online or with printed versions.
- Disseminate the videos online.
- Training and awareness campaigns meant to increase employers' and workers' capacities to recognise the risks and take the right actions to minimize them.

KEY CONCEPTS

- Administrative controls
- Engineering controls
- Exposure
- Mitigation
- Physical distancing
- Personal Protective Equipment
- Transmission

WHERE TO FIND THIS TOOL?

The posters in Amharic are available here. The posters and videos in Bahasa are available here.

FURTHER READINGS AND RESOURCES

WHO, Coronavirus disease (COVID-19) advice for the public: When and how to use masks

WHO, Mask use in the context of COVID-19

CDC, How to Protect Yourself & Others

D. MECHANISME DE PREVENTION ET DE CONTRÔLE DES INFECTIONS SUR LES LIEUX DE TRAVAIL

This tool is available in French.

WHAT IS THIS TOOL FOR?

The presentation titled "Mechanisme de prevention et de contrôle des infections sur les lieux de travail" from Madagascar explains a range of strategies for COVID-19 prevention, surveillance, detection and response. It was developed in close collaboration with WHO Madagascar.

WHO IS THIS TOOL FOR?

This tool can be used by:

- Employers and their representatives
- Workers and their representatives
- Supervisors and middle managers
- Joint health and safety committees
- Governments
- Trainers/Consultants
- NGOs

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HOW TO USE THIS TOOL?

The objective of the presentation is to present in a simple way the different control measures that can be undertaken in the enterprise to maintain workplace safety against COVID-19. The presentation can be circulated to the enterprises and can be used by the enterprise to train its employees on the safety measures.

What is needed to implement the tool?

To implement the measures mentioned in the presentation, the following resources are needed:

- Human resources: Staff and consultant are needed to tailor and develop the training presentation and implement the courses and targeted measures.
- Financial resources: Sufficient financial means for human resources and staff or consultant are needed to develop, tailor and implement training events and OSH improvement measures.

What are the key activities to implement this tool?

• Planning and developing a training event (agenda, mode of delivery, getting interested participants)

• Provide training event



KEY CONCEPTS

- Administrative controls
- Engineering controls
- Hygiene
- Physical distancing
- Personal Protective Equipment
- Transmission

WHERE TO FIND THIS TOOL?

Mechanism de prevention et de controle des infections sur les lieux de travail (ilo.org)

FURTHER READINGS AND RESOURCES

ILO (2020). A safe and healthy return to work during COVID-19 pandemic.

ILO (2020). A 10 step tool for a safe and healthy return to work in times of COVID-19.

CDC, COVID-19 Employer Information for Office Buildings.

ILO Madagascar, 2022: Mesures de riposte contre la Covid-19 en milieu de travail (ilo. org)

Central theme 3:

COVID-19 OSH Knowledge and Awareness

This central theme provides basic information on what COVID-19 is, how it spreads, and the various country OSH-related initiatives focused on COVID-19.



A. DIGITAL BEHAVIOURAL CHANGE CAMPAIGN FOR GARMENT SECTOR WORKERS AND COMMUNITIES

This tool is available in Khmer and English.

WHAT IS THIS TOOL FOR?

In Cambodia, ILO conducted research during the second quarter of 2021 to gauge garment factory workers' understanding of COVID-19 and the extent of their misunderstanding that might have led to the spread of false information and stigma. The research concluded that the workers knew a lot about COVID-19 and ways to protect themselves. To motivate them to continue implementing the safety measures, a community engagement campaign on the theme of "Do not give up" (Su Su in Khmer) was organized. This is because the garment factory workers were found to be conscious that the risk of getting infected came from people around them and so the fight needed to be collective. The campaign focussed on staying united not only to fight the virus but also on supporting each other to combat the challenges brought upon by the pandemic.

The campaign built GIFs with accompanying messages. For example, a GIF promoting wearing masks read *"we can still smile with our eyes"*. The purpose of the GIFs is to keep the workers motivated to continue implementing the measures and remove the sense of isolation that has arisen as a result of the pandemic. GIFs convey global messages and can thus be part of a campaign in any country. In addition, a series of motivating videos and positive stories from women champions identified under this campaign were also developed. The latter is available at In Her Words: women workers share how they stay positive during Covid-19 - Better Work.

WHO IS THIS TOOL FOR?

The tool is aimed at workers. It can be circulated in the enterprise by employers, worker representatives and joint healthy and safety committees.

HOW TO USE THIS TOOL?

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This tool can be circulated in various groups on social media platforms, messaging services that workers use, emails or websites of the enterprises that workers have access to.

What is needed to implement the tool?

What is needed is workers' access to social media platforms, company websites, emails or messaging services on which the GIFs are electronically circulated.

What are the key activities necessary to implement this tool?

Employers, worker representatives, joint health and safety committees need to upload these GIFs on the channels that workers use.

KEY CONCEPTS

• Mental health; dealing with stress

WHERE TO FIND THIS TOOL?

Susu: Together we can make it-Digital Campaign Cambodia

FURTHER READINGS AND RESOURCES

In Her Words: women workers share how they stay positive during COVID-19 - Better Work

ILO (2020). Managing work-related psychosocial risks during the COVID-19 pandemic

WHO, Mental health & COVID-19

B. VIDEO: IMPLEMENTING COVID-19 PREVENTION MEASURES AT ENTERPRISES

This tool is available in Amharic with English subtitles (Ethiopia) and in Malagasy with French subtitles (Madagascar).

WHAT IS THIS TOOL FOR?

The video displays the different measures adopted by garment and textile factories in Ethiopia and Madagascar and how it has resulted in reduced infection rates and increased morale of workers. It shares experiences of sewing operators and weavers on the measures adopted by the factory before workers enter factory gates, during the working hours and before leaving the factory. The measures in the form of hand washing and changing into work clothes before starting work, screens in the work area and cafeteria and regular sanitizing during work and then hand washing and change of clothes before leaving helped allay their fears and kept them safe. Safety officers also shared how they responded by setting up a task force to manage the risks at work and how they regularly shared up to date information on the virus – what it is and how it spreads, the COVID-19 protocols that needed to be observed to stay safe.

WHO IS THIS TOOL FOR?

The video is principally for management and workers of other garment factories. But it can also be used by:

- Trainers/Consultants
- NGOs

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Occupational Health Service Providers

The video from Madagascar was also broadcast on TV channels and watched by 15 million people.

HOW TO USE THIS TOOL?

The objective of this tool is to spread awareness of good practices. This video can be used in a training by OSH service providers, trainers/consultants or NGOs to demonstrate some of the actions that can be undertaken to keep the workplace safe and the benefits it can have on employee morale and well-being. The videos can be broadcast on TV or shared through social media platforms to raise awareness.

What is needed to implement the tool?

Access to social media platform where the video is embedded.

The video can also be circulated through emails and on social media platforms by posting the link.

What are the key activities to implement this tool?

- Use the video in the workplace, during training events or any other events to build workers capacity in terms of workplace preparation, controls and prevention measures to take against COVID-19.
- Share the video on social media platforms to raise awareness about controls and prevention measures to take in the garment sector.



- Coronavirus
- COVID-19
- Prevention
- Mitigation

Occupational health surveillance

WHERE TO FIND THIS TOOL?

The Ethiopia Video is available here.

The Madagascar Video is available here

FURTHER READINGS AND RESOURCES

ILO, First Person COVID-19 stories from the world of work.

C. POSTERS ON COVID-19 ESSENTIALS

This tool is available in: Bahasa.

WHAT IS THIS TOOL FOR?

This tool contains three posters.

One poster includes a pictorial display of the key COVID-19 symptoms like fever, cough, cold and difficulty in breathing. This can be used by enterprises and other actors to keep reminding workers to check themselves against these symptoms before they leave for work and to stay at home or go to the nearest medical centre to get themselves tested if they display the symptoms.

Another poster encourages people to maintain a healthy lifestyle and raises awareness on how people should stay active and eat healthy to boost their immunity and reduce the risk of contracting COVID-19.

A third poster raises awareness about non-discrimination against people with COVID-19 and explains that COVID-19 can infect anyone and people should be encouraged to report infection to prevent its spread.

WHO IS THIS TOOL FOR?

- Employers and their representatives
- Workers and their representatives
- Supervisors and middle managers
- Joint health and safety committees
- Trainers/Consultants
- NGOs

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HOW TO USE THIS TOOL?

The posters can be used both at the workplace and virtually. The printed version of these posters is useful to directly reach the workers at the workplace, during training at the workplace, and during workers' and employers' organizations' meetings and training. Digital copies of the posters can be shared on government and workers' and employers' organizations' websites and social media in order to reach as many people as possible.

What is needed to implement this tool?

To use this tool, the following resources are needed:

For the paper version in the workplace:

- A colour printer with ink
- Paper

- A safe space to disseminate the information and train the management and workers on the techniques promulgated on the posters
- A safe and appropriate space to hang the posters in the workplace

For the digital version:

A website or social media platforms

What are the key activities to implement this tool?

The survey is implemented in three stages. It is important to ensure the existence of tripartite forums for social dialogue at all three of these stages in order to report on its implementation and so that its outcomes can be approved.

- Disseminating the posters, either online or with printed versions.
- Training and awareness campaigns meant to increase employers' and workers' capacities to recognise the risks and take the right actions to minimise them.

KEY CONCEPTS

- Coronavirus
- COVID-19

Mental health

WHERE TO FIND THIS TOOL?

The tool is available here.

FURTHER READINGS AND RESOURCES

WHO, Coronavirus disease (COVID-19)

ILO (2020). COVID-19 and the world of work: Ensuring no one is left behind in the response and recovery

WHO, COVID-19: addressing social stigma and discrimination

D. MANUAL FOR LABOUR INSPECTION DURING THE PANDEMIC

This tool is available in: Bahasa and English.

WHAT IS THIS TOOL FOR?

The manual explains that the key procedures applied for labour inspection during the pandemic are similar to the general labour inspection procedures that existed before the pandemic. These procedures include: planning, implementation and reporting. Although the procedures remain the same, the mechanism needs some change. For example, the manual details how the different steps in the implementation process can be done virtually:

- Sensitization: Inspectors can share sensitization materials on laws/regulations electronically with the enterprises and also request the latter to share all the materials they are aware of. Based on the materials submitted, inspectors will be able to gauge how familiar the enterprises are with the legal requirements.
- Assistance to newly established companies or companies that are expanding: Upon getting a request from a company or workplace, inspectors need to identify and codify the problems or needs of the company. After that they can prepare a presentation and other electronic material and provide the assistance online.
- Technical advice: This is the response of labour inspectors to companies that face specific/technical labour problems. Inspectors need to study and analyze the information related to cases or issues presented by the company and prepare online training agenda and materials and deliver the advice virtually.
- Examination: Examination in labour inspection is a series of activities carried out to ensure compliance with labour laws. It involves first inspection, agreed periodic inspections, special inspections in case there are complaints and re-examination by higher ranked inspectors. In the pandemic era labour inspectors shall basically carry out online inspections. For this, inspectors need to prepare questions in virtual forms, conduct online checks and speak to workers, their representatives, etc. through virtual meeting applications and issue an electronic Inspection Note on all findings of labour. Inspectors need to then monitor the implementation of the corrective measures online.
- Testing: There are two types of testing one is checking if the enterprise complies with work norms like child labour and the other is related to OSH. Testing can be done through document checking and visual inspection. Visual inspection steps will be the same as in Examination.
- Inquiry: It seeks and collects evidence that will clarify/shed light on the employment crime that has occurred in the enterprise. It involves coordinating with the police and the prosecutor's office to carry out investigations on labour related crimes, summoning and examining suspects, creating a case file and submitting it to the police. The activities are difficult to do online and inspectors should have the correct PPE and follow other control measures while undertaking this activity.



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WHO IS THIS TOOL FOR?

The manual targets labour inspectors in government. But it can also be used by:

- Trainers
- NGOs

HOW TO USE THIS TOOL?

The manual can be used in a training organized for labour inspectors.

What is needed to implement the tool?

A training can be organized to share the content of this manual. For online training, a training agenda, the development for training sessions and an online event needs to be created. For face-to-face training, a training agenda, the development of training sessions and a location need to be found. For both types of events, financial and human resources are necessary in order to plan and develop the training and for its delivery.

What are the key activities to implement this tool?

- Reach out to potential labour inspectors and create awareness of the training event
- Enrol participants.
- Develop the training agenda and the training material using the manual.
- Choose a training location (online or face to face).
- Deliver the training accordingly to plan.



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KEY CONCEPTS

- Competent authority
- Labour inspection
- Labour inspectorate

WHERE TO FIND THIS TOOL?

The tool is available in Bahasa here and in English here.

FURTHER READINGS AND RESOURCES

ILO, International Labour Standards on Labour inspection

ILO, Occupational Safety and Health - A Guide for Labour Inspectors and other stakeholders

E. MOBILE APPLICATION GOPY – TECHNOLOGICAL PLATFORM FOR ENGAGING AND COMMUNICATING WITH WORKERS

The tool is available in Vietnamese.

WHAT IS THIS TOOL FOR?

GOPY is an interactive application (Android/iOS ready), which encourages the employers and employees to share their knowledge, experience, good compliance practices in the factories via this platform. GOPY acts as an effective communications channel that forms worker-management connection and breaks down barriers and hierarchy.

WHO IS THIS TOOL FOR?

This tool is for:

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- Employers and their representatives
- Workers and their representatives
- Supervisors and middle managers
- · Joint health and safety committe

HOW TO USE THIS TOOL?

The users are registered Better Work Factories from Vietnam. The enterprises need to first install the application on their mobile phones following these steps:

Step 1: Download GOPY from Appstore (iPhone) or Play Store (Android).

Step 2: Register with your mobile phone or email.

Step 3: Select the company that you are working for and wait for verification.

Step 4: Add personal information, profile pictures and do survey as suggested by the app.

Step 5: After a successful verification, user can access the application features of exchanging experiences.

What is needed to implement the tool?

Users need to be registered Better Work Factories from Vietnam. They should have access to a smart phone and internet connection to use this application.

What are the key activities to implement this tool?

- Reach out to enterprises and create awareness about the application and incentivize them to use the application
- Verify and enrol enterprises.

KEY CONCEPTS

- Coronavirus
- COVID-19

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WHERE TO FIND THESE TOOL?

The tool is available here.

FURTHER READINGS AND RESOURCES

UNITAR, COVID 19 application and dashboard

F. RADIO CAMPAIGN TO RAISE PUBLIC AWARENESS ABOUT COVID-19 PREVENTIVE MEASURES

The tool is available in Vietnamese.

WHAT IS THIS TOOL FOR?

This campaign aims at raising public awareness, especially workers working in the industrial parks and encourages them to strictly follow the Vietnam Ministry of Health guidance of COVID-19 prevention measures (5K message) and understand the importance of continuously taking all the Precautionary measures to prevent COVID-19. It has a set of **22 radio sessions** featured with the links available on VOV (Voice of Vietnam) website.

WHO IS THIS TOOL FOR?

This tool is for:

- Employers
- Workers
- Supervisors and middle managers
- Joint health and safety committees
- General public

HOW TO USE THIS TOOL?

The target users of this radio campaign were the factories and workers that are associated with Better Work Factories from Vietnam. However, the campaign is also useful for reaching larger community of workers and general public, especially those living in remote areas where reach of radio is higher than other modes of communication and where internet-based communication is challenging. The campaign was broadcasted through Voice of Vietnam (VOV) radio channel to reach the largest number of listeners and workers and featured in peak hours (early morning and late afternoon sessions).

What is needed to implement the tool?

A prior information to stakeholders and target groups is required so that they are aware of the radio spot, its timing, theme etc. Factories can also encourage their workers to participate in the quizzes at the end of each radio session to raise their awareness about COVID-19 preventive measures and to also get a chance of winning prizes.

What are the key activities to implement this tool?

- Reach out to enterprises and create awareness about the campaign
- Inform workers about the campaign, including key information about the campaign such as the channel that broadcasts it, the timing, and about the quiz and the prize that the radio sessions offer

KEY CONCEPTS

• COVID-19

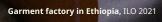
• Preventive measures against COVID-19

WHERE TO FIND THESE TOOL?

A sample of a radio session is available here.

FURTHER READINGS AND RESOURCES

UNITAR, COVID 19 application and dashboard



Annex I. Glossary

Administrative controls

Controls designed to limit the amount of time a worker spends at a potentially hazardous job.³³

Asymptomatic transmission

An asymptomatic laboratory-confirmed case is a person infected with COVID-19 who does not develop symptoms. Asymptomatic transmission refers to transmission of the virus from a person, who does not develop symptoms.³⁴

Biological hazard

It can be the presence of infectious agents or used sharp instruments. Pathogens can enter the human body through a puncture, abrasion, or cut in the skin, through mucous membranes, or by inhalation or ingestion.³⁵

In the context of the pandemic, exposure or contact with infectious clients, customers, suppliers, co-workers or contact with contaminated materials, surfaces and environments can cause persons to be infected and result in mild, moderate to severe respiratory illness and/or multiorgan failure, including injury of the heart, liver or kidneys. Some people who have had COVID-19, whether they have needed hospitalization or not, continue to experience symptoms, including fatigue, respiratory and neurological symptoms.

Chemical hazard

Exposure to hazardous materials which can cause injuries and lead to various diseases.

In the context of the pandemic, this can include exposure to powerful cleaning and disinfection materials (e.g., use of quaternary ammonium and sodium hypochlorite).

Cleaning

Cleaning helps to remove pathogens or significantly reduce their load on contaminated surfaces and is an essential first step in any disinfection process. Cleaning with water, soap (or a neutral detergent) and some form of mechanical action (brushing or scrubbing) removes and reduces dirt, debris and other organic matter such as blood, secretions and excretions, but does not kill microorganisms.³⁶

³³ Alli, B. O. (2008). Fundamental principles of occupational health and safety. International Labour Office - Geneva: ILO.

³⁴ WHO (2 April 2020).

³⁵ ILO, HealthWISE Action Manual. Work Improvement in Health Services, 2014.

³⁶ WHO, Essential environmental health standards in health care, 6 May 2020.

Contract tracing

Contact tracing is the process of identifying, assessing, and managing people who have been exposed to someone who has been infected with the COVID-19 virus.³⁷

Community mitigation

Community mitigation is a set of actions that people and communities can take to slow the spread of infectious diseases like COVID-19. The goal of community mitigation in areas with local COVID-19 transmission is to slow its spread and to protect all individuals, especially those at increased risk for severe illness, while minimizing the negative impacts of these strategies.³⁸

Community spread

Circulation of a disease among people in a certain area with no clear explanation of how they were infected—they did not travel to an affected area and had no close link to another confirmed case.³⁹

Competent authority

A minister, government department or other public authority with the power to issue regulations, orders or other instructions having the force of law. Under national laws or regulations, the competent authority may be given responsibilities for specific activities, such as for implementation of national policy and procedures for reporting, recording and notification, workers' compensation, and the elaboration of statistics.⁴⁰

Coronavirus

Coronaviruses are a large family of viruses that are common in animals and may cause illness in animals or humans. Occasionally, people get infected with these viruses which may then spread to other people. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The newly discovered coronavirus known as the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) causes the infectious disease – COVID-19.⁴¹

COVID-19

COVID-19 is the disease caused by a new coronavirus called SARS-CoV-2.42

³⁷ WHO, Coronavirus disease (COVID-19): Contact tracing, 28 July 2020.

³⁸ Centers for Disease Control and Prevention (CDC), About COVID-19: Frequently Asked Questions, 21 October 2021.

³⁹ Kathy Katella, Our New COVID-19 Vocabulary—What Does It All Mean?, (Yale Medicine, 7 April 2020).

⁴⁰ Alli (2008).

⁴¹ ILO (2020).

⁴² WHO, Q&As on COVID-19 and related health topics, 12 October 2020.

Disinfection

Disinfection is done after cleaning. A chemical disinfectant, such as chlorine or alcohol, should be applied after cleaning to kill any remaining microorganisms.⁴³

Droplet transmission

A form of direct transmission, this is a spray containing large, short-range aerosols (tiny particles suspended in air) produced by sneezing, coughing, or talking. Droplet transmission occurs—in general and for COVID-19—when a person is in close contact with someone who has respiratory symptoms.⁴⁴

Engineering controls

Common control measures, including isolation and enclosure ventilation.⁴⁵

Epidemic

This refers to a sudden increase in the number of cases of a disease, above what is typically expected in a particular area. COVID-19 is thought to have reached epidemic proportions in China in mid-January 2020.⁴⁶

Ergonomic principles

A concept whereby the work to be carried out is organized and specified – and tools and equipment designed and used – in such a way as to be matched with the physical and mental characteristics and capacity of the worker.⁴⁷

Exposure

The process of being exposed to something that is around; exposure can affect people in a number of different ways.⁴⁸

Hazard

A hazard is anything with the potential to cause injury or damage to a person's health. The potential for harm is a natural and permanent property of hazards.⁴⁹

44 Katella (7 April 2020).

46 Katella (7 April 2020).

⁴³ WHO, Cleaning and disinfection of environmental surfaces in the context of COVID-19, 15 May 2020.

⁴⁵ Ali (2008).

⁴⁷ Ali (2008).

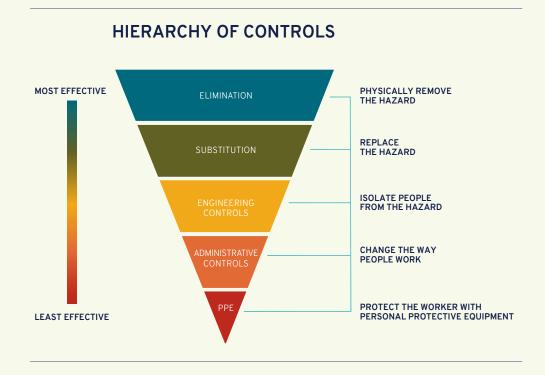
⁴⁸ Ali (2008).

⁴⁹ ILO, Improving occupational safety and health in small and medium-sized enterprises (comprising Trainer's Guide, Participant's Handbook and PPT slides), 2021.

Hazard identification

Hazard identification is part of the process used to evaluate if any particular situation, item, thing, etc. may have the potential to cause harm. Overall, the goal of hazard identification is to find and record possible hazards that may be present in your workplace.⁵⁰

Hierarchy of controls⁵¹



- Elimination/substitution. Since it is not yet possible to eliminate or substitute the occupational hazard (virus) if the workplace reopens, a combination of other preventive measures is required to protect workers from exposure to the coronavirus.
- Engineering controls. These include improving ventilation by increasing ventilation rates in the work environment; installing physical barriers, such as clear plastic sneeze guards; or installing a drive-through window for customer service.
- Administrative and organizational controls. These include changes in work policy or procedures in order to reduce or minimize exposure to a hazard, such as introducing extra shifts; physical distancing; or good hygiene and infection control practices like testing, directed at both workers and the workplace. Also includes keeping in touch with workers to identify whether workers need additional technical or psychosocial support.
- Personal Protective Equipment (PPE). While engineering and administrative controls are considered more effective, PPE may also be needed to prevent certain types of exposure, in particular for the most hazardous occupations.

⁵⁰ Canadian Centre for Occupational Health and Safety (CCOHS), OSH Answers Fact Sheets.

⁵¹ ILO, Prevention and mitigation of COVID-19 at work for small and medium-sized enterprises. Action checklist and follow up, 2020.

Hygiene

Hygiene at the workplace describes the practice of keeping oneself, and the surrounding environment, clean and free of infection risk. It includes personal and workplace practices that protect health and stop the spread of illness and disease, such as handwashing, bathing, laundering, food hygiene, and more. It also refers to the provision of facilities and services that can be used by everyone to help maintain health and prevent the spread of illness and disease, such as handwashing facilities with water and soap, showers, laundry facilities, food service facilities, and options for menstrual hygiene management. Hygiene encompasses interventions that promote hygienic behaviours and management at the workplace, taking into account both behaviours and facilities, which work together to form a hygienic workplace.⁵²

In the context of COVID-19, a key strategy for slowing the spread for COVID-19 is maintaining hand hygiene by washing hands with soap and water for at least 20 seconds.⁵³

In the context of COVID-19, respiratory hygiene is strongly encouraged. Experts advise to cover your mouth and nose with a tissue when you cough or sneeze; then throw used tissues in the trash; if you don't have a tissue, cough or sneeze into your elbow, not your hands; and remember to immediately wash your hands after blowing your nose, coughing or sneezing.⁵⁴

Incubation period

The incubation period for COVID-19, which is the time between exposure to the virus (becoming infected) and symptom onset, is on average 5-6 days, however can be up to 14 days.⁵⁵

International Labour Standards

International labour standards are legal instruments drawn up by the ILO's constituents (governments, employers and workers) and setting out basic principles and rights at work. They are either conventions, which are legally binding international treaties that may be ratified by member states, or recommendations, which serve as non-binding guidelines.⁵⁶

Isolation

In OSH terminology, isolation is an engineering control in which a hazardous job is moved to a place where fewer people will be exposed, or a worker is moved to a place where he or she will not be exposed at all.⁵⁷

In the context of COVID-19, isolation is the separation of people who are known to be infected with the COVID-19 virus from other who are not infected.⁵⁸

⁵² ILO, WASH@Work: a self-training handbook: first module: international policy framework, 2016.

⁵³ Katella (7 April 2020).

⁵⁴ CDC, Hygiene etiquette and practice: coughing and sneezing.

⁵⁵ WHO (2 April 2020).

⁵⁶ ILO, Introduction to International Labour Standards.

⁵⁷ Ali (2008).

⁵⁸ WHO (28 July 2020).

Labour Inspection

A government function carried out by specially appointed inspectors who regularly visit work sites in order to establish whether legislation, rules and regulations are being complied with. They normally give verbal and written advice and guidance to reduce the risk factors and hazards at the workplace. They should, however, possess and use stronger power, e.g. to stop the work in cases of immediate and serious safety and health hazards or if their advice is repeatedly and unreasonably neglected by the employer. The goal is to improve the work conditions and the work environment.⁵⁹

Labour inspectorate

The aim of prevention is to articulate as an obligation to minimize, so far as is reasonably practicable, the causes of hazards and risks in the workplace.⁶⁰

Mental health

Though many elements of mental health may be identifiable, the term is not easy to define. The meaning of being mentally healthy is subject to many interpretations rooted in value judgements, which may vary across cultures. Mental health should not be seen as the absence of illness, but more to do with a form of subjective well-being, when individuals feel that they are coping, fairly in control of their lives, able to face challenges, and take on responsibility. Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity specific to the individual's culture.⁶¹

Mitigation

The act to reduce the harmful impacts of hazards and risks.

Monitoring

Monitoring in the workplace is close observation to determine whether an area is safe for workers.⁶²

Occupational

Refers to issues related to the working life.

⁵⁹ Ali (2008).

⁶⁰ Ali (2008).

⁶¹ WHO Programme on Mental Health. 1998.; WHO. Mental Health, Fact Sheet 130. August 1996.; Mental Health: A Report of the Surgeon General. U.S.N.

⁶² Ali (2008).

Occupational health

In relation to work, indicates not merely the absence of disease or infirmity; it also includes the physical and mental elements affecting health which are directly related to safety and hygiene at work.⁶³

Occupational health surveillance

It is the ongoing systematic collection, analysis, interpretation and dissemination of data for the purpose of prevention. Surveillance is essential to the planning, implementation and evaluation of occupational health programmes and to the control of work-related ill health and injuries, as well as to the protection and promotion of workers' health. Occupational health surveillance includes workers' health surveillance and working environment surveillance.

Workers' health surveillance entails procedures for the assessment of workers' health by means of detection and identification of any abnormalities. Such procedures may include biological monitoring, medical examinations, questionnaires, radiological examinations and reviews of workers' health records, among others.

Working environment surveillance involves identification and assessment of environmental factors that may affect workers' health, such as the state of occupational hygiene and sanitation, organization of work, personal protective equipment and control systems, and workers' exposure to hazardous substances. Such surveillance may focus on accident and disease prevention, ergonomics, occupational hygiene, organization of work and psychosocial factors, among others.⁶⁴

Occupational health services

The term means services entrusted with essentially preventive functions and responsible for advising the employer, the workers and their representatives in the undertaking on-

- the requirements for establishing and maintaining a safe and healthy working environment which will facilitate optimal physical and mental health in relation to work;
- the adaptation of work to the capabilities of workers in the light of their state of physical and mental health.⁶⁵

Occupational Safety

Is the condition of being free from hurt, injury or loss.

Occupational Safety and Health

Occupational safety and health (OSH) is generally defined as the science of the anticipation, recognition, evaluation and control of hazards arising in or from the workplace that could

⁶³ ILO, Occupational Safety and Health Convention, 1981 (No. 155).

⁶⁴ ILO, Technical and ethical guidelines for workers' health surveillance, Occupational Safety and Health Series, No. 72, 1998.

⁶⁵ Article 1, Occupational Health Services Convention, 1985 (No. 161).

impair the health and well-being of workers, taking into account the possible impact on the surrounding communities and the general environment. This domain is necessarily vast, encompassing a large number of disciplines and numerous workplace and environmental hazards. A wide range of structures, skills, knowledge and analytical capacities are needed to coordinate and implement all of the "building blocks" that make up national OSH systems so that protection is extended to both workers and the Environment.⁶⁶

Occupational Safety and Health Management System

To manage OSH issues in a systematic, proactive and participative way, the ILO encourages companies to adopt and implement an OSH management system (OSHMS). An OSHMS is a set of activities, procedures, processes and resources used to establish an OSH policy in an organization, to achieve objectives and to continually assess and improve on them based on the "Plan-Do-Check-Act" model. The system includes assignment of responsibilities, identification and management of OSH risks, organization of personnel, provision of resources, communication, information, documentation and monitoring. The main goal of the OSHMS is to achieve continuous improvement of OSH performance. The commitment of top management to the process is essential. Participation and consultation of workers is also key. Such a system is often an important component of the overall company policy and management arrangements, and is integrated into the overall business model.⁶⁷

Outbreak

This shares the same definition as epidemic, with one exception—an outbreak usually refers to a more limited geographic area. COVID-19 started as an outbreak in Wuhan, the capital city of the Hubei province in China at the end of December 2019, when the Chinese government confirmed that it was treating dozens of cases of pneumonia of unknown cause.⁶⁸

Pandemic

An epidemic that has spread over several countries or continents, impacting many people. Pandemics typically happen when a new virus spreads easily among people who—because the virus is new to them—have little or no pre-existing immunity to it. COVID-19, which was declared a pandemic by the WHO in early March 2020, is the first pandemic known to be caused by the emergence of a new coronavirus.⁶⁹

Physical distancing

Physical distancing helps limit the spread of COVID-19 – this means we keep a distance of at least two metres (six feet) from other people or whatever distance is prescribed by the competent authority. The workplace should introduce measures to keep a distance of at least

68 Katella (7 April 2020).

⁶⁶ Alli (2008).

⁶⁷ ILO, Supporting companies OSH performance: A guide for Employers and Business Membership Organizations on OSH advocacy and services, 2019.

⁶⁹ Katella (7 April 2020).

two metres between people and avoid direct physical contact. Different countries may adopt a minimum standard of a different distance; therefore, it is key to respect the physical distance prescribed by the competent authorities.⁷⁰

Physical hazards

These include substances or activity that threaten physical safety. The most common physical hazards include high or low temperature, indoor air quality, noise and radiation.

In the context of the pandemic, lack of fresh air from the ventilation system can be a physical hazard.

Personal Protective Equipment

Equipment a worker wears as a barrier between himself or herself and the hazardous agent(s). COVID-19 PPE includes gloves, gowns, aprons, masks, respirators, goggles, and face shields.⁷¹

Prevention

The aim of prevention is to articulate as an obligation to minimize, so far as is reasonably practicable, the causes of hazards and risks in the workplace.

Preventive safety and health culture

One in which the right to a safe and healthy working environment is respected at all levels; where governments, 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.⁷²

Psychological hazards

Psychosocial hazards are those aspects of the design and management of work and its social and organizational contexts which have the potential for causing psychological or physical harm.⁷³

During an outbreak such as COVID – 19, the entire population is subjected to increased stress levels that can have serious effects on mental health, especially in cases where mandatory isolation at home is imposed. Workers can be affected because of the present and future uncertainty of the work situation or from changes in work processes and arrangements. Stress levels can increase because of lack of job security, multiple burdens such as working duties, household chores, home-schooling, etc. Additionally, individuals might be required to work

72 Ali (2008).

⁷⁰ ILO (August 2020).

⁷¹ Ali (2008).

⁷³ ILO, Workplace Stress: A Collective Challenge, 2016.

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longer hours and enjoy less rest periods because of an increase in absenteeism or resignations at work. Working from home can increase the isolation and lack of social support.

Quarantine

Quarantine is the separation of contacts from others after exposure to a probable or confirmed COVID-19 case – you may or may not be infected.⁷⁴

Risk

A combination of the likelihood of an occurrence of a hazardous event and the severity of injury or damage to the health of people caused by this event.⁷⁵

Level of risk in the context of COVID – 19 is the combination of:

- Probability/likelihood of being exposed to the virus, taking into account the characteristics of the virus, including its transmission, such as person-to-person transmission through small droplets from the nose or mouth or transmission via objects and surfaces contaminated with droplets.
- Severity of the resulting health outcomes, taking into account individual factors, including age, underlying diseases and health conditions, as well as the measures available to control the impact of the virus.

Risk assessment in the context of COVID – 1976



76 ILO (August 2020).

⁷⁴ WHO (28 July 2020).

⁷⁵ ILO, Guidelines on occupational safety and health management systems, ILO-OSH 2001 Geneva, International Labour Office, 2001.

Self-isolation

A voluntary agreement, this means you are to remain at home and not go to work. You will be expected to limit your movements outside and monitor your health for 14 days after returning from travel to a place known to have high numbers of COVID-19 infections.⁷⁷

Symptomatic transmission

By way of definition, a symptomatic COVID-19 case is a case who has developed signs and symptoms compatible with COVID-19 virus infection. Symptomatic transmission refers to transmission from a person while they are experiencing symptoms.⁷⁸

Testing⁷⁹

In most situations, a molecular test is used to detect SARS-CoV-2 and confirm infection. Polymerase chain reaction (PCR) is the most commonly used molecular test. Samples are collected from the nose and/or throat with a swab. Molecular tests detect virus in the sample by amplifying viral genetic material to detectable levels. For this reason, a molecular test is used to confirm an active infection, usually within a few days of exposure and around the time that symptoms may begin.

Rapid antigen tests (sometimes known as a rapid diagnostic test) detect viral proteins (known as antigens). Samples are collected from the nose and/or throat with a swab. These tests are cheaper than PCR and will offer results more quickly, although they are generally less accurate. These tests perform best when there is more virus circulating in the community and when sampled from an individual during the time that they are most infectious.

Transmission

The virus can spread from an infected person's mouth or nose in small liquid particles when they cough, sneeze, speak, sing or breathe. These particles range from larger respiratory droplets to smaller aerosols.

- Current evidence suggests that the virus spreads mainly between people who are in close contact with each other, typically within 1 metre (short-range). A person can be infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, nose, or mouth.
- The virus can also spread in poorly ventilated and/or crowded indoor settings, where people tend to spend longer periods of time. This is because aerosols remain suspended in the air or travel farther than 1 metre (long-range).

People may also become infected by touching surfaces that have been contaminated by the virus when touching their eyes, nose or mouth without cleaning their hands.⁸⁰

⁷⁷ Katella (7 April 2020).

⁷⁸ WHO, Coronavirus disease 2019 (COVID-19) Situation Report – 73, 2 April 2020.

⁷⁹ WHO (12 October 2020).

⁸⁰ WHO, Coronavirus disease (COVID-19): How is it transmitted?, 13 December 2020.

Vaccines for COVID-19

There are now several vaccines that are in use. Several different types of potential vaccines for COVID-19 are in development, including:

- *Inactivated or weakened virus vaccines*, which use a form of the virus that has been inactivated or weakened so it doesn't cause disease, but still generates an immune response.
- *Protein-based vaccines*, which use harmless fragments of proteins or protein shells that mimic the COVID-19 virus to safely generate an immune response.
- *Viral vector vaccines*, which use a safe virus that cannot cause disease but serves as a platform to produce coronavirus proteins to generate an immune response.
- *RNA and DNA vaccines*, a cutting-edge approach that uses genetically engineered RNA or DNA to generate a protein that itself safely prompts an immune response.⁸¹

Worker

Any person who performs work, either regularly or temporarily, for an employer.⁸²

Workplace

It is anything from an agricultural field, farmyard, construction site, small workshop, to a larger unit or a whole area in a warehouse.⁸³

⁸¹ WHO, Coronavirus disease (COVID-19): Vaccines, 28 October 2020.

⁸² Alli (2008).

⁸³ ILO, Training package on workplace risk assessment and management for small and medium-sized enterprises, 2013.



Annex II. SARS-CoV-2: Key Information

WHAT IS CORONAVIRUS AND COVID-19⁸⁴?

Coronaviruses are a large family of viruses that are common in animals and may cause illness in animals or humans. Occasionally, people get infected with these viruses which may then spread to other people. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The newly discovered coronavirus known as the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) causes the infectious disease – COVID-19.

HOW DOES COVID-19 SPREAD⁸⁵?

Current evidence suggests that the virus spreads mainly between people who are in close contact with each other, typically within one metre (short-range). A person can be infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, nose or mouth. The virus can also spread in poorly ventilated and/or crowded indoor settings, where people tend to spend longer periods of time. This is because aerosols remain suspended in the air or travel farther than one metre (longrange).

WHAT ARE THE SYMPTOMS OF COVID-19⁸⁶?

COVID-19 affects different people in different ways. Most infected people will develop mild to moderate illness and recover without hospitalization.

Most common symptoms: fever, cough, tiredness, loss of taste or smell.

Less common symptoms: sore throat, headache, aches and pains, diarrhoea, a rash on skin, or discolouration of fingers or toes, red or irritated eyes.

- 85 WHO, Coronavirus disease (COVID-19): How is it transmitted?
- 86 WHO, Coronavirus disease (COVID-19): Symptoms.

⁸⁴ ILO, In the face of the pandemic: Ensuring safety and health at work, 2020.

Annex III. Country responses to COVID-19

Bangladesh

- On 8th October 2020, the Ministry of Labour and Employment officially launched the Bangla version of the <u>COVID-19</u> <u>OSH Guidelines</u> complete with a Standard Operating Procedures and checklist in English. The guidelines were endorsed by the OSH National council in June. To protect workers, the government activated public health safeguards through lockdown measures i.e., stay home, intercity travel suspension and airport closures.
- The labour inspectorate developed and adopted the National OSH Guidelines for COVID-19.

Cambodia

- Since January 2020 the Ministry of Labour and Vocational Training (MLVT) has released a set of guidelines on COVID-19
 prevention measures for factories and enterprises.
- MLVT officials have provided information sessions on COVID-19 prevention and hygiene practice to around 700 workplaces covering more than 45,000 workers in Phnom Penh and provinces.
- The WHO Guide "Getting your workplace ready for COVID-19", ILO ACT/EMP "Guide on managing your workplace during the Covid-19" and Employer's Guide for Return to Work have been disseminated to employers and workers in the garment, tourism and construction sectors. In addition, an ILO action <u>checklist</u> on Prevention and Mitigation of COVID-19 at work and a guideline on discrimination and stigma related to COVID-19 were translated and distributed to workplaces.
- The Government has increased funding of healthcare and social protection, stockpiled PPEs, medical equipment and supplies for the health facilities, and provided OSH protection for health caregivers and additional allowances for frontline health workers.
- More than 2 million workers, public and private, including around 50,000 informal workers, who have been covered by health insurance with the National Social Security Fund continue to access health care free of charge.
- All suspected or confirmed cases of COVID-19 for all members of the public, both local and foreign, can access health care for counselling, testing and treatment. The medical costs of Cambodian nationals are borne by the Government/ Ministry of Health.

Ethiopia

- A guidance on measures to be taken against the COVID-19 pandemic threat was issued by the Ethiopian OSH Professionals Association. The guidelines included protective measures to be taken by employers, Safety Officers/ Safety Committee and employees.
- A tripartite COVID-19 Workplace Response Protocol is in place.
- Government has allocated a total budget of Ethiopian Birr (ETB) 5 billion for distribution of masks, soap, alcohol solutions and other items in critical locations, including for implementation of other COVID-19 mitigation measures.
- A guide for volunteers' engagement in COVID-19 prevention has been prepared with the support of WHO.
- Toll-free telephone numbers have been introduced for the public to be able to get access to more information on COVID-19 in 4 local languages (Amharic, Afaan Oromo, Tigrigna and Somaligna). Additional numbers have also been made operational by the Regional States.
- Government buses have been made available free of charge to help control crowding in public transport.
- Workers are to be allowed to take their unused annual leaves; for those who have exhausted their annual leaves, they will be allowed to take at least half of their annual leave from the following budgetary period.
- 134 and more public and private facilities have been identified for quarantine, isolation and treatment of COVID-19 related cases.
- COVID-19 vaccination: According to the Ethiopian Ministry of Health, preparations have been completed to mandate vaccines for employees who have a direct working relationship with many people in all regions and city administrations based on the nature of their work. The list can be found in the Press Release of the Department of Health in the context of the current state of COVID-19 outbreak and the COVID-19 Vaccine Programme currently underway, issued on 12 August 2021(COVID-19 vaccine programme).

Bangladesh

- The Ministry of Manpower (MoM) provided guidance on worker protection and business sustenance in the context
 of prevention and control of COVID-19 via the Minister of Manpower Circular No. M/3/HK.04/III/2020 concerning Worker
 Protection and Business Sustenance in the Context of Preventing and Control of COVID-19. The main idea of this is to: (1)
 make efforts to prevent the spread and handling of COVID-19 related cases at work (2) Implement wage protection for
 workers in relation to the COVID-19 pandemic.
- MOM provides online OSH services to provide information and consultation related to COVID-19. It opened an
 information web site concerning the outbreak, targeting employers and workers. The website provides information on
 how to generate a business sustainability plan, how to take preventive measures at workplaces and what are the rights
 of workers who contracted COVID-19. The website also functions as an online forum for consulting and submitting any
 complaints relating to OSH and COVID-19.

Lao PDR

- On 11 March 2020, the Lao Ministry of Labour and Social Welfare issued the Ministerial Notification No. 0709/MoLSW, calling all enterprises, employers, as well as workers working in Lao PDR to implement the measures against the outbreak. The Notification informs employers to provide free of charge PPE, particularly masks, soaps and washing liquid. Employers were also instructed to closely monitor the temperatures of workers.
- The Prime Minister's Decision instructed all public, private, and international organizations to temporary shutdown their workplace to allow staff to work from home from 1-19 April, and then extended until 17 May 2020.
- All the prevention and mitigation measures issued have been applied to all living and working in the country, including the influx of the Lao workers returning after the authorities in neighbouring countries imposed prevention measures including shutting down workplace, leaving the Lao workers jobless.
- On April 21st, the National Taskforce Committee for COVID-19 prevention and control issued another guideline on conditions and measures for businesses permitted to operate during COVID-19 outbreak.

Madagascar

 An <u>instruction note</u> concerning preventive health measures to be followed by enterprises was published by the Ministry of Labour, Employment, Public Service and Social Laws on March 27, 2020, following the proclamation of a state of health emergency by the President of the Republic. The labour inspectors are responsible for monitoring and controlling the application of all these provisions.

Vietnam

- Government adopted a resolution for support measures for those under quarantine.
- Ministry of Health promulgated Guidelines on prevention and control of COVID-19 for workers, employers and health
 professionals at workplace and in dormitories. In addition, it also developed a guideline on workplace disinfection, and
 one on prevention for high-risk workers.

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