

## EXPLORING THE GENDER DIMENSION OF TELEWORK: IMPLICATIONS FOR OCCUPATIONAL SAFETY AND HEALTH

### 1 Introduction

The massive shift to telework during the COVID-19 pandemic, and the extension of hybrid work arrangements (which combine telework and onsite work), in post-pandemic times has led to increasing interest in telework and its impact on workers' wellbeing and health. Overall, it seems that telework and more flexible work arrangements are becoming a more prominent and permanent feature for employers and employees.

While literature outlines the potential benefits of telework for both organisations and individuals in terms of flexibility, autonomy, performance and work–life balance, studies also point out potential drawbacks. Telework has traditionally been associated with psychosocial risks, mainly related to the pervasiveness of digital technologies and their impact on working time and work–life balance (extended availability, long work hours, blurring boundaries between work and private life, work conflict), isolation and other emerging risks related to the use of ICT.

Most studies highlight the relevance of gender when telework is analysed. Telework has the potential to improve work–life balance and improve women's situation in the labour market — but research shows that telework has a disproportionate negative impact on women in terms of work–life conflict, stress and health outcomes. This discussion paper explores the gender dimension of telework and occupational safety and health (OSH), based on a review of recent scientific publications and recent research by the European Agency for Safety and Health at Work (EU-OSHA) on legislative developments about telework, hybrid work and surveillance on remote work (EU-OSHA, 2023a, 2023b, 2023c).

The discussion paper starts with an introductory overview of the main concepts, telework and gender, while the next section provides an overview of recent trends and patterns of telework from a gender perspective. Following this, the paper presents the most recent data on OSH (2022 EU-OSHA OSH Pulse survey) and analyses gender differences in light of the literature review. The next sections focus on gender-related OSH legislative developments. The paper concludes with final remarks.

### 2 Concepts

In this discussion paper, **telework** is defined as a form of work organisation in which work that could also be performed at the employer's premises is carried out away from the employer's premises by using ICT. According to this definition, telework: only refers to employees; is a form of work arrangement (not a labour contract); is exclusively understood as digitally enabled mobile work (covers only those stationary jobs that could also be performed at the employer's premises); and can be carried out in any location (e.g. from home, while commuting or travelling, or from alternative workplaces such as co-working spaces). In this paper the focus is placed on working from home.

This definition is in line with that established in 2002 by the [EU Framework Agreement on Telework](#)<sup>1</sup> although with an important exception. The agreement refers only to regular telework (at least one day per week) while this paper encompasses all forms of telework, considering that occasional telework (less than 20% of working time and/or not following a regular pattern) has emerged as one of the prevailing types of telework.

Telework arrangements show a great variety not only in terms of intensity (time spent teleworking) and pattern (whether it is regular or ad hoc), but also in relation to other aspects (see Box 1). Telework is

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<sup>1</sup> Agreement of the European social partners ETUC, UNICE, UEAPME and CEEP of 16 July 2002 concerning telework. It defines telework as 'a form of organising and/or performing work, using information technology, in the context of an employment contract/relationship, where work, which could also be performed at the employers premises, is carried out away from those premises on a regular basis' (p. 2).

often linked to some kind of flexible working time arrangement (such as flexitime or self-determined work hours), but this is not always the case. In particular, telework in highly routinised jobs (e.g. call centres) in most cases, although not always, is organised under the same rigid work schedules as on-site work. Concerning formality, the regulation of telework differs widely among EU Member States (EU-OSHA, 2021b, 2023b; Eurofound, 2022c, 2022d). However, at the company level a sharp distinction can be made between telework carried out as an employee's informal practice (to supplement on-site work and resulting in unpaid overtime) and other types of telework that formally rely on the principle of voluntariness for both employers and workers, and are in principle expected to bring positive impacts for both organisations and individuals.

Despite huge differences in telework arrangements, the physical separation from the employer's premises and the intensive use of digital technologies are common features. For this reason, telework entails **crucial changes in the physical work environment and the organisation and management of work**, which are key aspects for addressing the impact of telework on working conditions, safety, health and wellbeing.

#### Box 1: Variation of telework arrangements

Telework arrangements vary in terms of:

- **Intensity** (share of working time spent teleworking).
- **Pattern** (whether it is carried out regularly or on an ad hoc basis).
- **Location** (whether it is predominantly home-based telework or it is mobile telework, carried out from multiple locations).
- **Working time** arrangement (degree of workers' autonomy to organise work schedules).
- **Formality** (degree to which telework is covered by statutory legislation and/or collective bargaining and implemented under an explicit telework agreement). At the company level, telework can be:
  - regulated through diverse ways (collective agreement, Human Resources Management policies or labour contract);
  - informally agreed with the employer; or
  - carried out as an employee's informal practice to supplement on-site work.

**Gender** is a constitutive element of social relationships based on perceived differences between the sexes and a primary way of signifying relationships of power (Scott, 1988). Gendered attributes, expectations, opportunities and power relationships are socially constructed, context-specific and changeable over time. As such, gender is part of the social, cultural and normative context that currently frames inequality and discrimination at work, including women's higher share of time devoted to care and household work, hierarchical gender segregation (overrepresentation of men in the formal hierarchy), horizontal segregation and devaluation of women-dominated jobs, and gender pay gap (Walby, 1989, 2013). Besides, organisations have implicit gender norms (Acker, 1990) that may mitigate or exacerbate gendered patterns at work. In this discussion paper, the gender dimension of telework and OSH is explored through a **systemic lens**, as gender is considered relevant at individual, organisational and societal levels. Furthermore, the paper adopts an **intersectional approach** (Crenshaw, 1989; Collins, 1990), acknowledging that gender is interwoven with other social divides such as class or socioeconomic status, race and ethnicity, or sexual orientation.

### 3 Telework and gender: main trends and patterns

The COVID-19 pandemic had a disruptive impact on ICT-enabled, pre-existing trends at work. Namely, a slow and fragmented trend towards de-location of work turned abruptly into a massive shift towards full-time and prolonged home-based work made possible by the use of digital technologies and software applications for virtual meetings (Sostero et al., 2020). This shift also accelerated the trend towards de-standardisation of working time, already extended before the pandemic (Schoukens and Barrio, 2017; Huws et al., 2018).

Several studies indicate a change in the views and preferences of both employers and workers towards telework after this experience (Barrero et al., 2021; Criscuolo et al., 2021; Aksoy et al., 2022). Among employers, fear of loss of productivity and prejudice against telework appear to have decreased.

Workers, and especially women and younger generations, demand higher autonomy over when and where to work.

This new situation has opened the use of telework to greater choice and deliberation, with more workers and employers willing to agree (individually and/or collectively) how telework should be used and regulated in the 'new normal', post-pandemic workplaces (Countouris et al., 2023). Hybrid work (a combination of telework and on-site work) is consolidating as the most common approach, though it is implemented in a largely decentralised, company-based way through a wide variety of collective and individual arrangements (Countouris et al., 2023). These arrangements differ as regards the frequency and pattern of telework, the degree of working time flexibility and the extent of workers' autonomy in managing this arrangement (Vidhyaa and Ravichandran, 2022; Hopkins and Bardoel, 2023; Smite et al., 2023). In this regard, hybrid work arrangements range from 'fully flexible' models in which workers have full autonomy to decide on where and when to work according to their preferences, to 'fixed' models in which the organisation sets in advance when office work is required. Intermediate models allow for some flexibility to choose the days of attendance at the office.

The extension of home-based work through hybrid work arrangements (Box 2) raises relevant issues in terms of gender and socioeconomic inequalities. Working from home entails crossing the physical boundaries between work and private life, risking reinforcement of traditional gender roles and increasing women's double burden of care and paid work as well as women's work-life conflict (Chung and van der Lippe, 2020; Arabadjieva and Franklin, 2023). Further, the lack of space at home for setting up a proper workstation exacerbates work-life conflict and is a significant obstacle for sustained work from home (Allen et al., 2021). As stated by Countouris et al. (2023, p. 8), 'the departure from a shared and standardised place of work into highly individualised locations with unequal potential and constraints can deepen existing inequalities as well as generate new ones'.

#### Box 2: Prevalence of working from home in the EU-27 before and after the pandemic, by gender

According to Labour Force Survey (LFS) data, the share of employees who spent at least part of their time working from home in the EU-27 rose from 11% in 2019 to 20% in 2022. Before the pandemic women were slightly more likely to work from home than men (11.6% of women vs 10.5% of men in 2019) and this gap increased somewhat between 2019 and 2022 (from 1.1 percentage points (p.p.) to 2.3 p.p.). Gender differences are in part related to the fact that more men than women work in non-teleworkable jobs, mainly in manufacturing and construction (European Institute for Gender Equality (EIGE), 2022). However, multivariate analysis of LFS data in 2019 and 2020 (Eurofound, 2022b) indicate that all things being equal, women had higher odds to work from home during the pandemic, an effect driven by women having a significantly higher probability (0.7%) of working from home most of the time. The gender effect is statistically significant though small. It may reflect a higher propensity of women to combine work with domestic and/or caregiving responsibilities, driven by traditional gender norms and related to the gender pay gap.

Differences in the prevalence of working from home across EU Member States were pronounced before the pandemic. In some countries, such as Bulgaria, Romania, Latvia, Lithuania and Italy, it was marginal or almost non-existent. By contrast, in Denmark, Finland, Luxembourg, Sweden and the Netherlands, around 25% of employees were teleworking. In all countries, the pandemic led to a significant increase of working from home for both women and men, although there is still wide variation between Member States (from less than 4% in Bulgaria to almost 50% in the Netherlands in 2022). In most countries, the prevalence of working from home increased slightly more for women than men in this period. In 2022, there were only three countries (Ireland, Germany and the Netherlands) in which men's share of working from home was higher than women's, though the gap was very small compared to the overall prevalence of this work arrangement.

Before the pandemic, working from home in the EU-27 was mostly concentrated in the group of managers and highly skilled professionals as an occasional work pattern. While working from home maintains a strong occupational gradient, there has been a substantial change in the composition of the working from home population: employees in low white-collar occupations (technicians and clerical support workers) represented in 2020 almost a third of this population (32%), compared to 24% in 2019.

The impact on gender inequalities is highly uncertain. So far, the main positive trend is that telework is offered to more diverse groups of workers, namely technicians and clerical workers, in both cases of which female-dominated occupations had little access to this work arrangement before the pandemic

(Box 2). Nevertheless, the gap between teleworkable jobs and teleworking is higher for women than for men, especially due to the gap among these occupations (EIGE, 2022).

Telework has the potential to increase access to employment and career opportunities for workers with caregiving responsibilities. Some studies demonstrate this potential in the case of mothers. The study by Chung and van der Horst (2018), based on data from the longitudinal United Kingdom (UK) household panel, shows that women who were able to work from home were significantly more likely to keep their working hours and not reduce them after childbirth. This is especially relevant because mothers reducing their working hours and moving into part-time jobs is one of the most important factors explaining the persistence of the gender pay gap in the UK (Costa Dias et al., 2020). Similar evidence is provided by Fuller and Hirsh (2018) based on data from Statistics Canada's Workplace and Employee Survey, or WES, a longitudinal dataset from 1999 to 2005. Their study shows that working from home reduces wage gaps for mothers, while flexible work hours also reduce mothers' disadvantages, especially for the university-educated.

However, research before the pandemic shows clear gendered patterns concerning the provision and uptake of telework — and it is uncertain whether this pattern will be counteracted. Chung (2022) shows that the provision of specific 'family-friendly' telework arrangements was mainly conceived as 'accommodations' for the individual and their work–life balance needs, resulting in stigma, discrimination and low uptake. Williams et al. (2013) define this flexibility stigma as the discrimination workers face when using flexible working arrangements for family responsibilities, rooted in traditional gender stereotypes and social class inequalities. Bias in telework and flexible time arrangements may happen through different ways: limiting wage and career progression of workers who are in these arrangements (Pabilonia and Vernon, 2022; Glass and Noonan, 2016); limiting access to such arrangements in women-dominated workplaces and occupations (Chung, 2020; Magnusson, 2021); and limiting the uptake of those arrangements due to women's fears of losing career opportunities (Lott and Abendroth, 2020).

## 4 Gender, telework, and occupational health and safety

Systematic reviews of research on telework and health outcomes before the pandemic show that the most prevalent health risks associated with this work arrangement are of a **psychosocial** nature (Charalampous et al., 2019; Oakman et al., 2020). Changes in telework have not altered this basic finding, though more recent reviews reflect the increasing diversification of both telework arrangements and individual characteristics of teleworkers. Beckel and Fisher (2022) reveal how telework effects on physical and mental health are highly dependent on company-level work arrangements and context, for example working schedules (part time or full time), flexibility or the duration of the telework arrangement. Lunde et al. (2022) stress difficulties in identifying health impacts stemming from different telework definitions and differences in the workers' individual context and characteristics, such as disability, gender and family situation. Yet, these reviews alongside EU-OSHA studies (2021c, 2021d, 2023a) confirm that before and during the pandemic, the most relevant psychosocial risks associated with telework were found in three areas: 1) work intensity, working time and work–life balance; 2) isolation; and 3) intensive use of digital technologies. In this literature, the gender dimension is mainly explored in relation to opportunities and drawbacks in terms of work–life balance and stress. Concerning health outcomes, both before and during the pandemic, European Working Conditions Survey (EWCS) data (Eurofound and International Labour Office, 2017; Eurofound, 2022a) indicate that teleworkers were more likely to suffer anxiety than other workers in similar occupations working on-site, although differences during the pandemic were rather small.

Research paid little attention to **physical** risks faced by teleworkers before the pandemic, when only a limited number of employees worked from home occasionally. The main risks identified were those associated with the intensive use of digital technologies, such as repetitive movements, static posture, and overuse or improper use of display screen equipment (Oakman et al., 2020). With the extension of telework through hybrid arrangements, it is now widely acknowledged that working from home entails higher physical risks than on-site work, because of poorer ergonomic conditions of the workstation, which is in addition worsened by the increased complexity of performing the risk assessment and the enforcement of OSH standards by the employer, the workers' representatives or state authorities in teleworkers' homes (EU-OSHA, 2021c, 2022). In this line, EU-OSHA (2023a) provides an extensive review of physical risks related to hybrid work and potential physical health issues. As regards physical health, EWCS data show that teleworkers face similar physical issues to other workers in similar occupations: musculoskeletal disorders (MSDs), eye strain and headaches.

Against this backdrop, the [Flash Eurobarometer – OSH Pulse](#) survey provides crucial evidence for analysing the gender dimension of telework and OSH after the pandemic. The survey was commissioned by EU-OSHA with the aim of gaining insights into the state of OSH in post-pandemic workplaces (the fieldwork was carried out in 2022). In the analysis below, teleworkers are defined as those employees who worked most of the time from home over the last 12 months. The tables below compare exposure to psychosocial risk factors and health issues between teleworkers and office workers, broken down by gender and showing the gender gap (difference in percentage points between the share of women and the share of men).

**Table 1: Exposure to psychosocial risks factors**

Would you say that the use of digital technologies in your workplace...? (% yes, by gender)

	Teleworkers				Office workers			
	Total	M	W	Gap	Total	M	W	Gap
Determine the speed or pace of your work	62	61	64	2.1	53	54	53	-1.4
Results in you working alone	57	56	58	1.8	41	41	42	0.8
Increase your workload	34	32	36	3.9	34	34	34	0.0
Increase surveillance of you at work	33	31	36	5.2	41	41	41	0.0
Reduce your autonomy at work	17	16	19	2.7	20	22	19	-2.9

Would you say that at work you are exposed to the following factors? (% yes, by gender)

	Teleworkers				Office workers			
	Total	M	W	Gap	Total	M	W	Gap
Severe time pressure or overload of work	48	42	54	11.8	46	42	49	6.1
Poor communication or cooperation within the organisation	24	24	25	1.3	30	29	30	1.9
Lack of autonomy, or lack of influence over the work pace or work processes	16	14	18	4.2	19	18	21	3.3
Violence or verbal abuse from customers, patients, pupils, etc.	8	6	9	2.5	18	13	22	9.6
Harassment or bullying	5	3	6	2.9	8	7	9	2.1
Something else that is causing me stress	24	22	25	2.4	28	27	30	2.8

Source: Authors' elaboration based on data from Flash Eurobarometer – OSH Pulse.

**Table 2: Experienced health problems**

In the last 12 months, have you experienced any of the following health problems caused or made worse by your work? (% yes, by gender)

	Teleworkers				Office workers			
	Total	M	W	Gap	Total	M	W	Gap
Headaches, eyestrain	40	34	46	12.3	34	29	39	9.3
Overall fatigue	32	28	37	9.1	38	34	41	7.3
Stress, depression or anxiety	28	25	30	5.0	27	24	29	5.3
Bone, joint or muscle problems or pain	28	22	33	10.9	29	25	33	8.1
Infectious diseases (including COVID-19)	15	13	18	5.1	22	19	25	5.6
Another health problem related to your work	5	4	5	0.8	6	5	6	0.7
Accident or injuries	2	2	3	0.2	5	5	5	-0.7
None	35	39	32	-6.8	33	37	29	-8.5

Source: Authors' elaboration based on data from Flash Eurobarometer – OSH Pulse.

## 4.1 Psychosocial and physical risks and health outcomes faced by teleworkers: explaining gender inequality

Data presented in Tables 1 and 2 in the previous section show significant differences in the exposure to psychosocial and physical risks based on sex/gender and work arrangement (telework vs office work) in relation to:

- *Workload*: The risks of increasing workload because of the use of technologies shows a gender gap in the context of telework (3.9 p.p.). For office workers there is no gender gap in relation to this variable.
- *Severe time pressure or overload*: Severe time pressure or overload of work is the risk factor most widespread among teleworkers. This risk is also more widespread among teleworkers than office workers (48% of teleworkers compared to 40% of office workers). It is also the risk factor with the highest gender gap when comparing men and women teleworkers (11.8 p.p.). There is also a gender gap between men and women office workers but it is substantially lower (6.1 p.p.).
- *Headaches and eyestrain*: The most prevalent physical health problem among teleworkers is headaches and eyestrain, which is also the problem that shows the highest gender gap among teleworkers (12.3 p.p.). There is also a gender gap between men and women office workers but it is lower (9.3 p.p.).
- *MSDs*: The gender gap between women and men teleworkers is also higher for MSDs (10.9 p.p.). This gender gap exists also among men and women office workers but it is lower (9.1 p.p.).

Drawing on the literature review conducted, we can explain the higher exposure of women teleworkers to those psychosocial and physical risks on the basis of the following factors.

### Work intensification, working long hours and being ‘always on’

One of the main OSH concerns about telework is the risk of work intensification, working long hours and being ‘always on’. This concern is in line with evidence from the EWCS before and during the pandemic, which shows that teleworkers were more likely to work longer hours and under more irregular schedules than other workers in similar occupations working on-site (Eurofound and International Labour Office, 2017; Eurofound, 2020, 2022d). Eurofound (2022d) also highlights that national studies across Europe indicate that the shift towards home-based work during the pandemic led to a significant increase in extended availability to work outside of working hours.

However, as indicated above, data from the EU-OSHA OSH Pulse survey suggest that there is a gender gap in terms of quality of working time among teleworkers, as women doing telework are more exposed to severe time pressure or work overload than men.

The gender dimension of quality of working time and health outcomes has been recently analysed by Franklin et al. (2022). Their study uses data from the EWCS (2015 wave) and LFS (2019 ad hoc module on work organisation and working time arrangement, and the 2020 module on accidents at work and other work-health-related problems). The multivariate analysis was first carried out on the EWCS dataset, which offers high-quality information on working time and health — and then adapted to the LFS, which has larger sample sizes, though less detailed information. The models control for age group, education, occupation, sector and country. The study confirms the impact of quality of working time on health and wellbeing and finds clear evidence that this impact is stronger for women than men. Concerning those dimensions of working time that are more related to telework, the main findings are:

- The impact of working long hours on self-reported health is negative for all workers, but long hours are more likely to cause serious health problems for women than for men.
- Gender differences are more marked when the negative impact of unsocial hours is analysed. Working during unsocial hours is associated with a higher exposure to physical and mental risk factors as well as more self-reported health problems, but these impacts are especially prominent for women.

The study by Yang et al. (2023) sheds further light on gender differences in the impact of working from home on wellbeing by exploring the impacts of two different practices: working from home to replace on-site work under regular work hours (*replacement*), and working from home after or beyond regular work hours to cope with excessive workload (*extension*). The study uses data from the German Linked Personnel Panel in 2014 and 2016. The analysis shows that *replacement* is associated with higher psychosocial wellbeing, as compared with those who do not work from home. By contrast, *extension* is

negatively associated with psychological wellbeing, and this negative effect is especially acute for women, who are also found to have a higher risk of depression.

### **Distribution of unpaid care work and gender norms**

Part of the gender differences identified above on severe time pressure, overload or physical health problems are explained because women continue to bear the bulk of care work (EIGE, 2022b) and this results in women's 'time poverty' and higher work–life conflict (European Parliament, 2022a). During the pandemic, a large bulk of studies, either cross-country or in different countries, show that gender inequalities in the distribution of care work among dual-earning couples with children were exacerbated due to lockdowns, the closure of schools and the massive shift to work from home, resulting in mothers' higher levels of work–life conflict and related stress (e.g. Blaskó et al., 2020; Eurofound, 2022a; Loezar-Hernández et al., 2023).

Studies also show that women's dual burden has implications for physical health. These findings can contribute to explaining the gender gap in terms of headaches and eyestrain and MSDs identified in the [Flash Eurobarometer – OSH Pulse](#) data discussed above. For instance, Graham et al. (2021) show that women who teleworked during the pandemic experienced greater frequency of MSDs and discomfort and rated their pain as more severe compared with men, and this effect remained after controlling for the presence of children. However, pain and discomfort were significantly reduced among women who were more satisfied with the division of household tasks. The authors argue that these differences are related to the inequal distribution of household work between women and men, as household work is a source of both physical work and mental burden.

Aside from differences in care work, women's higher risk of work–life conflict is also framed by cultural expectations, as traditional gender norms expect women to prioritise care work, namely when care demands are more acute (Chung and van der Lippe, 2020).

### **Working time organisation and work autonomy**

Research has long indicated strong links between working time organisation and workers' health. Main impacts of working long hours are stress, acute fatigue and chronic fatigue, which may lead to other long-term outcomes such as anxiety, depression and burnout (Tucker and Folkard, 2012). Negative health outcomes of work–life conflict are also well known, including poor self-reported health and poor physical and mental health. More specifically, time-based work–life conflict has been found to be strongly associated with burnout (Brauchli et al., 2011).

There is also evidence that workers' autonomy over their working time is associated with positive health outcomes. In particular, longitudinal studies have found that higher levels of autonomy are associated with lower levels of stress and fatigue, fewer depressive symptoms, and lower risk of serious MSDs and mental disorders (Albrecht et al., 2017; Vahtera et al., 2010; Takahashi et al., 2012). In the literature, autonomy is conceptualised as employees' control over length of daily work hours and starting and ending times of work, as well as control over taking time off from work — from daily breaks to scheduling vacations.

At the same time, research has provided extensive evidence of the 'autonomy paradox' (Mazmanian et al., 2016) in highly competitive and demanding professions, where the use of ICT combined with the internalisation of a particular work ethic leads workers with higher levels of autonomy to work long hours and be 'always on', with higher risk of work-related stress and exhaustion (Mauroux, 2018; Thulin et al., 2019; Chung, 2022). The extension of telework to less competitive professions may counteract this pattern. In this regard, Chung and Booker (2023) show that access to telework and other flexible time arrangements provides critical support to dual-earner couples when resources to meet childcare and household demands are limited — this applies to both women and men in low-paid occupations. However, working from home is always challenging because it implies having to reframe physical and temporal boundaries between work and private life, with implications for all household members (Wethal et al., 2022).

### **Prevailing work culture at organisational level**

The prevailing work culture in an organisation or company is also crucial for understanding the variation in the impact of telework on working time and explaining gender differences in wellbeing and health. Some companies may have a pronounced high-performance, 'ideal worker' culture (Williams et al., 2013) where workers are expected to prioritise work above all else by working long hours and remaining virtually available outside of working hours. Other companies may be more supportive of workers' autonomy and work–life balance. In this regard, there is evidence of huge differences in company

cultures within the same country (Eurofound, 2021). Research also shows that intensified economic pressures and downsizing are key drivers for the prevailing 'always on' culture in some companies and occupations (Blagoev and Schreyogg, 2019). Arabadjieva and Franklin (2023) place strong emphasis on the need to support companies to adopt a more equitable and gender-sensitive approach towards work–life balance in hybrid arrangements, based on workers' autonomy and trust.

### National institutional factors

There is fragmentary evidence that reduced flexibility stigma and extension of hybrid work arrangements to more diverse employees may lead to higher social acceptability of telework, as well as reduced gender disparities. For instance, Abendroth et al. (2022) indicate that the experience of the pandemic has led to more men opting for these arrangements for work–life balance purposes. In this regard, national context plays a crucial role in reducing stigma and supporting the extension of work–balance flexible work arrangements (Abendroth and Reiman, 2018; van der Lippe and Lippényi, 2020; Chung, 2022). National context refers to how telework is regulated and culturally framed, including cultural norms around work, work–life balance and gender roles, as well as welfare/family policies, the regulation of telework, working time and OSH. As argued by Arabadjieva and Franklin (2023), the extension of working from home has given more visibility to gendered inequalities in care work and related negative health outcomes. Recent initiatives to regulate the 'right to disconnect' in some EU countries (Eurofound, 2022d; EU-OSHA, 2023b) and at the EU level<sup>2</sup> indicate higher awareness of the negative effect of an 'always on' culture on workers' health, which is especially detrimental for mothers and other people with family responsibilities, who face higher time constraints, as well as workers in precarious, insecure jobs and low-paid jobs, who have little autonomy to manage these demands (see section 5 for further details). The European Commission, in the '2023 report on gender equality in the EU', highlights that beyond work–life friendly teleworking, care services and other social and employment policies are key structural conditions to address gender inequalities (European Commission, 2023).

## 4.2 Gender inequalities in psychosocial risks that need further research

The EU-OSHA OSH Pulse survey shows that exposure to negative behaviours is higher for office workers than for teleworkers. The incidence of violence or verbal abuse is 18% for office workers, compared to 8% for teleworkers, while the share of workers who experience harassment or bullying is respectively 8% and 5%. Working from home appears to protect workers, to some extent, from this type of negative behaviours. The data also show clearly that women are more exposed than men, either when working from home or at the employers' premises. Gender inequalities are especially marked in the case of violence and verbal abuse among office workers, which is almost double for women than for men. For teleworkers, the incidence of harassment or bullying is double for women (6% of women vs 3% of men) and 1.5 times higher in the case of violence or verbal abuse (9% of women vs 6% of men). There is an emerging line of research that focuses on *cyberbullying* in workplaces (e.g. Farley et al., 2015; Forssell, 2016; Gardner et al., 2016; D'Souza et al., 2020; Ikeda et al., 2022), but it does not address specifically telework or it is gender blind. This is an area that is in need of further research. This includes analysing online negative behaviours in a more general sense, including stalking, cyber discrimination and cyber sexual harassment, in order to address the multiple and gendered patterns of cyber abuse and to contribute to more effective responses (D'Souza et al., 2020).

Another research gap refers to the use of digital technologies for surveillance. The EU-OSHA OSH Pulse survey shows gender differences in the exposure to increase surveillance among teleworkers (36% of women vs 31% of men), while there is no gap among office workers. Recent studies on employee monitoring and surveillance by Eurofound (2020) and EU-OSHA (2023a) do not explore gender inequalities.

## 4.3 Initiatives to address stress and mental health in the workplace

Data from the EU-OSHA OSH Pulse survey indicate that initiatives to address stress and mental health in the workplace are on average more available for teleworkers than office workers (Table 3). This is in

<sup>2</sup> In January 2021, the European Parliament adopted a resolution, based on Article 225 of the Treaty on the Functioning of the European Union (TFEU). [P9\_TA (2021)0021 European Parliament resolution of 21 January 2021 with recommendations to the Commission on the right to disconnect (2019/2181(INL)]. The resolution called on the Commission, among other bodies, to present a legislative proposal on the right to disconnect and an EU legislative framework on telework. On 28 June 2022, European cross-sectoral social partners (ETUC, Business Europe, SGI Europe and SMEUnited) signed their Work Programme 2022-24, including a review and update of the 2002 Autonomous Agreement on Telework to be put forward for adoption as a legally binding agreement implemented via a directive.

particular the case of larger companies, in which telework is more widespread (Eurofound, 2022c) and are also those having more comprehensive OSH policies than SMEs (EU-OSHA, 2022). However, data show that among teleworkers, women have fewer opportunities than their male colleagues to benefit from these initiatives. Awareness-raising or other initiatives to provide information on OSH is the initiative most available to teleworkers, and is also the initiative with the highest gender gap (69% of women vs 76% of men). Gender differences are also high as regards information and training on wellbeing and coping with stress (60% of women vs 66% of men). The gender gap is around 3.3 p.p. in consultation of workers about stressful aspects of work (available to 59% of respondents), access to counselling or psychological support (55%), and other measures to address stress at work (39%). The literature review has shown that there is a research gap concerning gender and OSH policies in the field of telework, including the identification of good practices.

**Table 3: Initiatives to address stress and mental health issues in the workplace**

Are any of the following initiatives available in your workplace? (% yes, by gender)

	Office workers				Teleworkers			
	Total	M	W	Gap	Total	M	W	Gap
Awareness raising or other activities to provide information on health and safety	62	63	60	-3.3	73	76	69	-7.2
Information and training on well-being and coping with stress	43	43	43	-0.6	63	66	60	-6.6
Consultation of workers about stressful aspects of work	44	46	43	-2.9	59	60	57	-2.8
Access to counselling or psychological support	40	41	39	-1.8	55	57	54	-3.1
Other measures to address stress at work	26	27	24	-2.4	39	41	38	-3.0

Source: Authors' elaboration based on data from Flash Eurobarometer – OSH Pulse.

## 5 The gender dimension of legislation for telework and OSH risks prevention

This section examines the extent to which recent legislations for telework passed since the outbreak of the pandemic in the field of OSH have been designed in a gender-sensitive way. Empirical evidence presented in previous sections supports regulatory reforms that address the relationship between telework, gender equality and OSH (including wellbeing). Moreover, at EU level, the European Economic and Social Committee (2021) has addressed telework from the gender perspective stating that regulation should ensure that 'teleworking does not exacerbate the unequal distribution of unpaid care and domestic work between women and men and for it to be an engine for promoting gender equality'. However, previous research comparing the regulation of telework across European countries has concluded that no country's regulation has included aspects related to gender equality apart from the generic provisions with positive implications for work-life balance, which are expected to have a gender equality dimension (Eurofound, 2022c).

In this section we revisit those previous findings (Eurofound, 2022c) by examining some key dimensions of telework regulation that can have a positive impact on gender equality with a focus on OSH. A recent EU-OSHA report (EU-OSHA, 2023b) has shown that since the beginning of the COVID-19 pandemic, permanent legislative initiatives on telework have been passed in Belgium, Estonia, Ireland, Greece, Spain, Croatia, Latvia, the Netherlands, Austria, Poland, Portugal, Romania and Slovakia. Beyond the specific topic of OSH, the reforms developed in some of these countries have addressed at least two dimensions that are related to OSH risks prevention or can prevent gender inequalities in terms of discrimination or inequalities in the access to telework and the labour market, namely the right to disconnect and the right to request telework. Based on this information, the following sections examine the gender dimension of statutory provisions of telework in relation to OSH, the right to disconnect and the right to request.

### 5.1 The gender dimension of OSH provisions

New provisions developed in the field of OSH have addressed issues such as risk assessment and enforcement (Estonia, Spain, Croatia and Portugal), coverage of employers' accident insurance

(Austria), and new rules aiming to prevent psychosocial risks and other physical health problems such as eye strain (Greece, Spain and Portugal).

Those reforms have followed a gender-neutral or gender-blind design. Thus, they are not specifically aimed at either women or men and are assumed to affect both sexes equally. This means that they are not intended to promote substantive gender equality. For instance, in the case of Spain, some scholars have criticised that the new provisions aiming to prevent psychosocial risk in the context of telework neglect key issues such as the co-responsibility of domestic work (de la Puebla Pinilla, 2022).

## 5.2 The gender dimension of the right to disconnect

The right to disconnect aims to prevent the expansion of working hours and the intrusion of professional life into the private sphere, therefore addressing important psychosocial risk factors (Eurofound, 2022c). It has been argued that because the right to disconnect aims at protecting workers' OSH by favouring a better work-life balance, it has therefore an important gender equality dimension (European Law Institute, 2023).

Before the outbreak of the pandemic crisis there were only four countries that regulated the right to disconnect (Belgium, Spain, France and Italy). Since 2020, new legislation on the right to disconnect has been passed in Belgium, Ireland (Code of Practice), Greece, Croatia, Spain, Portugal and Slovakia (new regulation modified minor aspects compared to previously approved regulation) (EU-OSHA, 2023b).

Nevertheless, in most of the countries the right to disconnect does not make explicit references to the gender dimension. Indeed, only in France was this right to disconnect introduced with the explicit purpose of promoting gender equality. Article L.2242-17 of the Labour Code introduced the right to disconnect as one of the obligations containing measures for equality between men and women that need to be negotiated annually in companies of more than 50 workers (European Law Institute, 2023).

## 5.3 The gender dimension of the right to request telework

Debates about workers' rights to request and get access to telework have been at stake at the policy level and among scholars (Chung, 2022; Koslowski et al., 2021). These debates call into question previous regulatory approaches exclusively based on the voluntary principle recognised in the EU Framework Agreement.

The right to request, as initially conceived in some of the pioneer countries approving this right, such as the UK,<sup>3</sup> was aimed at enabling better labour market integration of mothers and reducing the gender wage gap by tackling flexibility stigma (Chung and van der Horst, 2020). As highlighted by some scholars, deficits in the UK welfare system (e.g. lack of well paid leave and public childcare) explain the enactment of this right. In this institutional context, the Labour government introduced the right to request to enhance women's employment rates without dealing with significant costs for the government (Chung and van der Horst, 2020).

At EU level, the EU Work-Life Balance Directive has recognised the right to request flexible working arrangements (see Box 3), incentivising legal reforms in several EU countries. According to a recent EU-OSHA report (EU-OSHA, 2023b), the following six EU countries have regulated the right to request since the outbreak of the pandemic crisis: Ireland, Greece, Croatia, the Netherlands, Poland and Portugal.

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<sup>3</sup> The right to request was approved in the United Kingdom in 2003 covering only parents of young children. It then was expanded to covering all parents by 2009, and all workers by 2014.

**Box 3: The right to request in the Work-Life Balance Directive**

The Work-Life Balance Directive lays down minimum requirements designed to achieve equality between men and women with regard to labour market opportunities and treatment at work, specifically by facilitating the reconciliation of work and family life for workers who are parents or caregivers.

The directive defines flexible working arrangements for workers as ‘the possibility for workers to adjust their working patterns, including through the use of remote working arrangements, flexible working schedules, or a reduction in working hours’.<sup>4</sup>

The directive recognises the right to request by establishing that employers should consider and respond to requests for flexible working arrangements within a reasonable period of time and provides that should an employer deny this request, they should provide the reasons for this decision (Article 9).

While the directive recognises a right to request flexible working arrangements for purposes of providing care, it does not oblige an employer to grant this request. In case of refusal of the request, the employer must provide reasons for that decision. Accordingly, some scholars have argued that can have a limited impact on supporting work–life balance for precarious workers who are unable to negotiate changes in their working patterns, because it does not create a strong and enforceable legal entitlement (D’Andrea, 2022; Chung, 2022).

Generally, it appears that the EU countries that have passed the right to request telework are following similar approaches. Main differences are related to the coverage of this right. In countries such as Croatia and Poland, the right to request is restricted to workers with care needs (e.g. pregnancy, personal care of a family member, or persons caring for an adult disabled person). In contrast, in Ireland and the Netherlands, the right is not restricted to workers with care needs. Attention must also be drawn to the case of Portugal. In this country, the right to request applies to all workers employed in a teleworkable job. However, regulation has also set up the right to telework (employers cannot reject the request), but it is only limited to workers with children up to eight years of age in specific situations.

**Box 4: The right to request and the flexibility stigma. The case of Ireland**

In Ireland, the regulatory impact assessment of the Right to Request Remote Work Bill devotes one specific heading to gender equality under the chapter of impacts. This chapter makes an implicit reference to the problem of the ‘flexibility stigma’ when arguing that ‘some concerns have been raised regarding how remote working can impact people differently, depending on gender, with care burdens and reduced visibility of remote workers having potentially higher levels of negative impacts for women in the workplace’ (Department of Enterprise, Trade and Employment, 2022, p. 10).

The report also links the right to request with the goal of increasing labour market participation of women and tackling segregation. It points out: ‘The adoption of remote working arrangements ... may present an opportunity to address some of the barriers to the full participation of women in the workforce and improve female representation at senior level’ (Department of Enterprise, Trade and Employment, 2022, p. 10).

## 6 Concluding remarks

The massive shift towards telework during the pandemic has created a new scenario where hybrid work is consolidating through a high diversity of hybrid work arrangements. While there is strong evidence that telework was biased in terms of gender and status before the pandemic, more diverse groups of workers now have access to telework through such work arrangements. This is especially the case of technicians and clerical workers, where the proportion of women is relatively high. This is in line with the preferences expressed by many workers, and especially women, who demand more autonomy over where and when to work.

Within this context, this discussion paper has examined gender inequality in the field of OSH and telework on the basis of the data from the [Flash Eurobarometer – OSH Pulse](#) survey and a literature review that has analysed the most relevant publications from scholars and EU agencies and institutions.

The latest available OSH data for teleworkers show that gender inequalities are marked with regard to exposure to OSH psychosocial risks, incidence of work-related health problems, and availability of OSH

<sup>4</sup> <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52017PC0253>

initiatives in the workplace to prevent or address stress and mental health problems. In all these aspects, women are at a disadvantage compared to men.

Existing literature has explained higher exposure of women teleworkers to OSH psychosocial risks and work-related health problems on the basis of four main factors that are interconnected:

- The unequal distribution of unpaid working time that results in women's 'time poverty' and higher work–life conflict; poor quality of working time (long working hours and unsocial hours) leads to worse health outcomes for women than for men.
- Inequalities in terms of working time company policies. In particular, the fact that women are less likely to enjoy a certain level of autonomy over their working time.
- Prevalence of work cultures at company level associated with the 'ideal worker' where workers are expected to prioritise work above all else by working long hours and remaining virtually available outside of working hours.
- National institutional factors related to welfare policies that result in a low defamiliarisation level, work–life balance policies and the regulation of telework.

The discussion paper has also identified several research gaps. Further research is needed to better understand the gender dimension of cyberbullying in the context of telework. This includes analysing online negative behaviours in a more general sense, including stalking, cyber discrimination and cyber sexual harassment. This is needed in order to address the multiple and gendered patterns of cyber abuse and to contribute to more effective responses. Another research gap refers to the use of digital technologies for surveillance. Despite evidence on gender differences in the exposure to increased surveillance among teleworkers, existing studies on employee monitoring and surveillance have not analysed gender inequalities. The literature review has also shown that there is a research gap concerning gender and OSH policies in the field of telework at company level, including the identification of good practices.

Finally, the paper has analysed the gender dimension of telework regulation with a particular focus on OSH. In line with previous research (Eurofound, 2022c), the paper has showed that gender aspects are not included in the regulation of telework focused on OSH. From a broader perspective, the paper has also identified the right to request telework as an important regulatory provision that can have positive implications for work–life balance and labour market integration of women (in particular mothers).

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