Basic information

1999/2151(COS) COS - Procedure on a strategy paper (historic)	Procedure completed
Health and safety at work: pregnant women, recently given birth or breastfeeding women (direct. 92/85/EEC). Report **Subject** 4.15.15 Health and safety at work, occupational medicine	

Key players

European Parliament	**Committee responsible**	**Rapporteur**	**Appointed**
	EMPL Employment and Social Affairs	DAMIÃO Elisa Maria (PSE)	14/10/1999
	Committee for opinion	**Rapporteur for opinion**	**Appointed**
	FEMM Women's Rights and Equal Opportunities	MÜLLER Emilia Franziska (PPE-DE)	02/09/1999
Council of the European Union			

Key events

Date	Event	Reference	Summary
15/03/1999	Non-legislative basic document published	COM(1999)0100	Summary
04/10/1999	Committee referral announced in Parliament		
23/05/2000	Vote in committee		Summary
23/05/2000	Committee report tabled for plenary	A5-0155/2000	
06/07/2000	Decision by Parliament	T5-0346/2000	Summary
06/07/2000	Debate in Parliament		
06/07/2000	End of procedure in Parliament		
24/04/2001	Final act published in Official Journal		

Technical information

Procedure reference	1999/2151(COS)
Procedure type	COS - Procedure on a strategy paper (historic)

Procedure subtype	Commission strategy paper
Legal basis	Rules of Procedure EP 148 Rules of Procedure EP 050
Stage reached in procedure	Procedure completed
Committee dossier	EMPL/4/10841

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Committee report tabled for plenary, single reading		A5-0155/2000 OJ C 067 01.03.2001, p. 0010	23/05/2000	
Text adopted by Parliament, single reading		T5-0346/2000 OJ C 121 24.04.2001, p. 0182-0473	06/07/2000	Summary

European Commission

Document type	Reference	Date	Summary
Non-legislative basic document	COM(1999)0100	15/03/1999	Summary
Follow-up document	COM(2000)0466	05/10/2000	Summary

Health and safety at work: pregnant women, recently given birth or breastfeeding women (direct. 92/85/EEC). Report

1999/2151(COS) - 15/03/1999 - Non-legislative basic document

PURPOSE : to implement Council Directive 92/85/EEC on the introduction of measures to encourage improvements in the health and safety at work of pregnant workers and workers who have recently given birth or are breastfeeding. CONTENT : the Directive applies to all pregnant workers, and the Member States have ensured that the public and private sectors are covered, as well as women on both indefinite and fixed term contracts. The definitions in the Directive of breastfeeding worker and worker who has recently given birth refer to national law and therefore vary between the Member States, as does the requirement to formally notify the employer. These differences may lead to the differing levels of protection for breastfeeding workers and workers who have recently given birth, which is a matter of concern. In addition, the Directive provides that an assessment must be made of the work place and the job of pregnant or breastfeeding women and women who have recently given birth . Should the assessment reveal a risk to health and safety, all reasonable steps must be taken to ensure that the risk is avoided. All the Member States have some legal provisions on the health and safety of pregnant workers, and the implementation of the Directive has, on the whole, supplemented the existing provisions. However, it has given clear legal status to aspects of health and safety protection, such as the right to paid leave if it is impossible to alter a woman's job or working conditions so as to to avoid any identified risk to health and safety, and the right to paid time off for ante-natal examinations. Pregnant or breastfeeding women, or those who have recently given birth may not be obliged to work nights if doing so poses a risk to health and safety. Most Member States now provide for women covered by the Directive to have the possibility to transfer to day-time work if a risk is identified in working at night. The Directive prohibits the dismissal of a pregnant woman or a woman on maternity leave, unless it is for reasons for any dismissal of a woman during pregnancy or maternity leave strengthens the protection afforded to pregnant women and women on maternity leave. The maximum length of maternity leave permitted under the Directive is 14 weeks. Maternity leave, not including any sort of paternity or parental leave, varies from 14 weeks in the UK to 28 weeks in Denmark. The combination of lengthy compulsory maternity leave with unpaid leave may need to be re-examined. The amount of women on maternity leave who are paid, and the period for which they are paid, also vary widely. In Austria and the Netherlands, women are entitled to 100% of their previous wage throughout their maternity leave; in the UK, Greece and Belgium a percentage of the woman's previous wage is paid for part of the maternity leave. In other Member States, varying amounts of social security benefits are paid during maternity leave. All the Member States subject entitlement to renumeration during maternity leave to conditions linked to length of service, residence or insurance. The Directive has, in general, been well implemented by the Member States. Infringement procedures have been launchedagainst a number of Member States for the incorrect implementation of certain provisions of the Directive. Furthermore, the Member States were required to submit to the

Commission within 4 years of the adoption of the Directive a report on its practical implementation, indicating the views of both sides of the industry. In September 1996, the Commission sent to the Member States a detailed questionnaire on the implementation of the Directive. The replies of the Member States to the questionnaire should be considered as the reports required under Article 14(4) of the Directive. However, it should be noted that the views of the social partners were specifically noted only in the reports from Austria, Ireland, Portugal and the Netherlands. This report is based upon the implementing measures notified to the Commission by the Member States and their replies, sent in 1996 and 1997, to the questionnaire. However, the Member States gave differing degrees of detail in their responses to the questionnaire and this is to some extent reflected in the report. It should, furthermore, be noted that the Greek and Dutch authorities did not reply to the questionnaire and, in the case of the Netherlands, did not supply the text of the national legislation, making it difficult to assess their implementation of the Directive.

Health and safety at work: pregnant women, recently given birth or breastfeeding women (direct. 92/85/EEC). Report

1999/2151(COS) - 06/07/2000 - Text adopted by Parliament, single reading

The European Parliament adopted the report drafted by Mrs Elisa Maria DAMIÃO (PES, P) on the European Parliament resolution on the Commission report on the implementation of Council Directive 92/85/EEC on the introduction of measures to encourage improvements in the health and safety at work of pregnant workers or workers who have recently given birth or are breastfeeding. The European Parliament considers the Commission report inadequate, as it deals only with legal and technical aspects of the implementation of the Directive. The Commission is called upon to submit a proposal for amending the directive by the end of 2000, taking into account the numerous shortcomings in its implementation. The new proposal should contain the following improvements, among others: - an increase in maternity leave entitlement to 20 weeks including a mandatory eight-week post-natal recovery period; - a clearer definition of adequate allowance during maternity leave which should be at least 80% of the previous salary and be taken into account for the purposes of acquiring pension entitlements; - a strict prohibition on dismissal during pregnancy and maternity leave and the requirement to reinstate a women in her job or an equivalent job at the end of her maternity leave; - pregnancy or maternity leave must not result in discrimination with regard to promotion or to improvemnts in working conditions; - specific additional protection for self-employed women workers, especially as regards entitlement to a period of paid leave. Furthermore, the European Parliament demands that more precise and binding provisions concerning breastfeeding during working hours and night work by pregnant women. In addition, it calls for detailed studies to be undertaken in order to determine the benefits of breastfeeding for health and immune defences. The Parliament also calls on the Commission and the social partners, in discussing future legislation covering atypical work, in particular telework and homeworking, to pay special attention to the additional risks faced in those sectors by pregnant women and women who hae already given birth. The Parliament also calls on the Commission and the Member States to consider possible action to reduce workplace risks which may cause sterility or infertility in both women and men as well as miscarriages and premature births. In conclusion, the special needs of small and medium sized enterprises should be taken into account in applying legislation on health and safety.

Health and safety at work: pregnant women, recently given birth or breastfeeding women (direct. 92/85/EEC). Report

1999/2151(COS) - 05/10/2000 - Follow-up document

On 19 October 1992 the Council adopted a Directive (92/85/EEC) on the implementation of measures to encourage improvements in the safety and health at work of pregnant workers who have recently given birth or are breastfeeding. Article 3(1) of this Directive provides that in consultation with the Member States and assisted by the Advisory Committee on Safety, Hygiene and Health Protection at Work, the Commission shall draw up guidelines on the assessment of the chemical, physical and biological agents and industrial processes considered to be hazardous for the safety or health of workers. The Commission has prepared the Guidelines and these are set out in the communication. The Commission attaches great importance to all measures designed to protect the health and safety of workers, and notably certain groups of particularly vulnerable workers such as is the case of pregnant workers and workers who have recently given birth or are breastfeeding - all the more so because the risks to which they may be exposed are liable to damage not only their own health but also that of their unborn children, given that there is a very close physiological and indeed emotional link between mother and child. Hence, the Commission considers that this communication constitutes an effective and eminently practical tool which can serve as guidance in assessing the risk to the health and safety of this category of women. On the basis of this assessment it will be possible to take more effective measures.