men who sexually harass and taking deliberate goslows. They are protecting their dignity and respect. That is the bottom line.

Our health and dignity should not be compromised just because the person we work for wants to purchase a new Mercedes Benz. Occupational health is about human rights, meaning we all have the right to health and we all have the right to leave the work place in the same condition we entered it.

Occupational health is about social justice. It is how I can most clearly express my

own interest and belief in social justice. Beyond saying "Oh, isn't this terrible," I am actually able to do something to redress some of the imbalance."

BLURRED LINES

Women will work inside a factory and may get a very concentrated dose of a particular nasty sol-

Industrialization is not a theme park out of Disneyland. It hurts and injures people.

vent. At the end of the working day, they will go home to a community that is quite often next to the same or another factory. Usually, if a factory per-

> forms badly in occupational health terms, invariably, they are also poor in environmental protection. Women are therefore susceptible to the fallout from that factory and the pollution which enters the community's water supply. In this case, disease factors are very blurred and the environmental factors overlay those from the work place.

As far as I am concerned, there is no separation between

a worker's physical health and their occupational health. If you are ill, if you have parasites, if you are pregnant, if you have chest disease, you are going to be more susceptible to things at work. If you have asthma, you are going to be more susceptible to cotton dust or wood dust disease. If you have anaemia, you are going to be more suscepti-

Unemployment: An Occupational Health Problem

omen's participation in seasonal agriculture is wide spread. Their patience, dexterity and speed make them particularly competent for harvesting and packing export crops. In Latin America, employment in seasonal agriculture is one of the most common ways of making a wage.

But unemployment, referred to as "months of silence" in Central America and "blue months" in Chile, form the other side of the coin in seasonal farm work, especially in areas where few other job options exist. But joblessness is not seen as a factor affecting women's health.

Studies of unemployment demonstrate how being without work can damage health. Not only does unemployment bring economic consequences. It generates mental health problems as well. One reason for this is that the unemployed person loses her role in society. The jobless person is denied participation in public life.

Yet, unemployment and its consequences are considered a male problem, despite the fact that it also affects women. Studies on this topic focus on men who are still seen as principal providers for the family.

At the same time, although unemployment affects both men and women, it differs in significance. The roles assigned by society to each sex give different values to the unemployment of each sex. For men, employment or unemployment are viewed as the only possible alternatives. Women, in contrast, are given a third option—to stay at home as full-time "housewives," an occupation that draws a curtain over their need to be employed. Domestic work, which is largely invisible and socially undervalued, isolates women.

"When I am working, I feel relief, economically and in all other ways," says Patricia, a Chilean worker interviewed by Chile's Centro de Estudio de la Muher (CEM) researchers. "At home, I'm alone or with the children. With my husband, I talk about the children, money, problems. At work, it's different. You get the problems off your back."

CEM's investigation into the situation of seasonal workers on Chile's vineyards showed the extent of unemployment. Women ble to benzene. If you are a construction worker riding on a scaffold high up on a construction site, and you are weakened by severe diarrhea, your chances of falling off that scaffold are very high. I think the divisions that the technocrats make in the developed world are very false.

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Occupational health has a long tradition, some of it honourable, some of it not. The *founder* of occupational health is a 15th century Italian physician called Ramazini who first described illnesses related to occupations. Paracelsus

in the 16th century then put together the first detailed notes on the nature of poisons. He was in fact the world's first toxicologist. Since then, occupational health has always been dominated by men, mainly male doctors and engineers. It is only in the past 10 years that women have started to make their mark.

Because of male domination, occupational health information base has been biased towards

the male experience. Exposure standards were established based on the experience of healthy white males.

But as a woman, I am much more interested in what happens to women. Only recently has research

begun to look into the different experiences that women have of occupational injury and diseases. I couldn't believe my eyes when I was in Perth researching the technical literature for a book. When I looked up breast cancer on the CD ROM system, I found that 85 percent of the 20 or so recent references were about

breats cancer in males!

Occupational

health is about

social justice.

A WOMAN'S CONCERN

hen I first came into occupational health, I was usually the only woman in any technical consultative meeting.

But my father taught and gave me the technical confidence in a masculine world. My father was



To be a mother and unemployed is to be anguished.

workers were employed for an average of six to seven months a year doing various tasks. Half of the women interviewed were unemployed for the rest of the year although they had sought work. Only 14 percent of the women interviewed combined agricultural and other jobs to be employed all year round.

The perceptions of these women concerning their health varied significantly between the work season and the unemployed period. When working, the women feel exhausted, experience aches, pains and other work-related illnesses. They complain of bad relations with their bosses, long shifts and the additional burdens of domestic chores. They fear exposure to toxins and dismissal. Fifty-two percent of those interviewed said they felt poorly or bad while working.

However, the number of

women who judged their health to be poor rose to 65 percent during periods of unemployment. While complaints related to work conditions decreased, the women reported a drop in their moods. Bad humor, listlessness and feelings of depression increased with unemployment. Without jobs, the women complained of reduced income, isolation and loneliness.

Thus, despite the poor conditions that wage work

brings, women laborers value the social space and friendship that work offers. Having health has health benefits. It lessens stress and increasing feelings of self-sufficiency and self-esteem.

Source: Women's Health Journal 1-95, Latin American & Caribbean Women's Health Network