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# **Pregnancy, breastfeeding and health and safety**

**A guide for workplace representatives**

## **Introduction**

There are very specific risks in the workplace for women who are or may be pregnant, or who have recently given birth. All these risks are preventable and there are clear regulations in place to protect new and expectant mothers. Unfortunately, many employers either do not know what they should be doing or ignore their legal responsibilities.

Pregnancy can be a stressful enough time for any woman without also having to worry about any dangers presented by her work which is why every workplace needs to have in place clear procedures that ensure that any risks to new or expectant mothers are properly controlled and that women feel that any concerns they have are properly addressed.

This guidance is intended to help trade union workplace representatives ensure that their employer has processes in place to protect and support women during and after pregnancy, and also how to support any members who have any problems or concerns.

It has been produced jointly by the Trades Union Congress and Maternity Action.

## **Health and safety issues**

Focusing on the health and safety issues related to pregnancy is not about trying to wrap all pregnant women in cotton wool. It is about accepting that, in some workplaces, there are very real and potentially serious risks that need to be assessed and controlled.

For most women who are at work when pregnant, the risks to themselves or their baby are relatively low and they can continue to work without any problems, but each pregnancy is different, as is every workplace. The most important thing is to ensure that the employer consider the risks and take any necessary action to control them and that the pregnant woman is involved in the process and any concerns are met.

There are a lot of potential risks that need to be considered that could affect the mother or the baby. These are a few that employers would need to consider. It is not intended to be a complete list and there may be others in your workplace.

### ***Lifting, twisting, turning, standing and sitting***

Moderate exercise during pregnancy can help promote a healthy pregnancy, but that is different from either heavy physical activity or repetitive activity, including squatting, stooping or lifting above the head. Pregnant women are at higher risk of an injury while lifting due to differences in posture, balance, and an inability to hold things close to the body because of her changing size. Pregnant women may also be more likely to be injured from lifting heavy objects because changes in hormones can

have an effect on ligaments and joints. This is to accommodate the developing baby

and also prepare for the birth. It is also true that falls are a major source of trauma during pregnancy and that is more likely to happen when carrying, rushing, or walking on an uneven or slippery surface. Prolonged standing or heavy lifting can cause an increased chance of miscarriage or preterm delivery (premature birth).

Even sitting can be problematic as workstations will have to be adjusted as the pregnancy develops. As her body changes, the mother will get further away from their desk and this can cause back and neck strain unless the position of the screen is adjusted. Often standard chairs are unsuitable because the curvature of the back can alter and posture will change. Many pregnant women also develop lower back pain which will mean they will need greater support.

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## ***Chemicals***

There are a lot of chemicals found in the workplace that could be hazardous when a woman is pregnant. In some cases, it is because the foetus might be more vulnerable to certain chemicals, particularly in early stages of pregnancy when the baby's organs are developing, or because changes in a pregnant woman's immune system or lung capacity could put her at greater risk. Heavy metals such as lead, cadmium, cobalt and mercury increase chances of miscarriage, stillbirth or a birth defect. These metals can also affect a baby's brain development. There are also specific risks from chemicals used in chemotherapy and from anaesthetic gases. Some solvents, epoxies, resins, pesticides, disinfectants and sterilising fluids increase the chances of having a miscarriage, stillbirth, preterm birth, a low birthweight baby, or a baby with a birth defect. Many solvents also pass into breast milk so should be avoided during breastfeeding.

Information on potential risks to pregnant or breastfeeding mothers should be contained in the Safety Data Sheets that the supplier has to provide the employer. There are legal requirements about what must go in these although, because of recent changes to the regulations, some older data sheets will have different wording. The kind of phrases that the employer should check for are:

- May cause genetic defects (route of exposure, if applicable)
- May damage fertility or the unborn child
- Suspected of damaging fertility or the unborn child
- May cause harm to breastfed children

- Suspected of causing genetic defects (route of exposure, if applicable)

Unfortunately, not all Safety Data Sheets are reliable and sometimes information is omitted, so the employer should have systems in place to ensure that they are aware of the potential risks from any chemicals or other hazards that could affect a pregnant woman or new mother.

## ***Heat***

There can be increased risks to women working in high temperatures, both inside and outside. This is because, during pregnancy, the body has to work harder to cool down both the woman's body and that of the unborn baby. This means a pregnant worker is more likely to get heat exhaustion or heat stroke sooner than a worker who isn't pregnant. Pregnant women are also more likely to become dehydrated.

## ***Infectious diseases***

Working with or exposure to certain bacteria, viruses, or other infectious agents could increase the chances of having a miscarriage, a baby with a birth defect, or reproductive problems. The risks of some, like rubella, are well known, but some other common infections, such as Cytomegalovirus, are also linked to birth defects, while several others, like chickenpox, seasonal influenza and pneumonia can be more severe if caught during pregnancy. This is a particular concern in some healthcare settings, people who work with children and anyone working with animals. Some infectious diseases are more likely to be dangerous in the very

early stages, such as rubella, where the greatest risk is in the first ten weeks of pregnancy. This means the employer has to consider the risks whenever there are women of child-bearing age who might be exposed.

### ***Ionizing radiation***

Healthcare workers and others who may be exposed to ionising radiation as part of their jobs face increased risks as it has been linked to birth defects.

### ***Noise***

This may be a problem for two reasons. Increased noise levels can cause stress which can cause changes in a pregnant woman's body that can affect her developing baby, but it is also generally accepted that sound can travel through the body and reach the womb. This means that very loud noises may be able to damage the baby's hearing. The levels likely to affect the hearing of a foetus are not known but the nature of the work means a pregnant woman may be at exposed to very high noise exposure that is normally controlled by hearing protection, then the risk should be considered and controlled.

### ***Working hours***

Both long hours and some shift work can increase health problems. Working irregular hours such as night shifts can change circadian rhythms. These regulate pregnancy hormones, so shift work and long working hours have been linked to miscarriages, and preterm births.

Women who work shifts, or who work long hours, often do not get enough sleep. This can adversely affect health, and has been

connected to hypertension and gestational diabetes. Blood flow to the foetus is at its peak during sleep, so when sleep is disrupted or reduced, the blood flow to the placenta may be reduced.

### ***Stress***

Some stress during pregnancy is normal, but if stress becomes constant, the effects can be damaging. Stress has been linked to poorer pregnancy health and possible developmental problems in babies. The nature of the job may be a source of stress but poor employer practices may also be a source of stress. For instance, pregnancy discrimination or the threat of redundancy may cause or exacerbate stress.

### ***Violence***

Both actual and threatened violence can pose a danger to a pregnant woman's health, including the risk of an early birth or miscarriage. In addition, pregnant women may be less able to remove themselves from danger. The threat of violence or abuse is also linked to the problems associated with stress.

### ***Travelling (for work and commuting)***

It is not just the travelling that can pose an additional risk (although travelling can be linked to stress and long hours), but the fact that the pregnant women can be away from the levels of care needed in the later stages of pregnancy. Women who are travelling, or working in transportation, could be a long distance away medical assistance in the event of difficulties or premature labour, also those working on ships or long-haul flights may have rapid turnarounds that allow no time for routine antenatal care.

Employers also have to take into account the likelihood that pregnant women may have an increased need for toilet facilities. This can be a concern for workers such as bus, freight and train drivers.

There can also be an increased risk of musculoskeletal problems such as back pain during pregnancy which can be made worse by either driving or sitting in a train, car or plane for long periods.

Employers and pregnant women also need to be aware that airlines have restrictions on pregnant women flying after a certain number of weeks. This varies depending on the airline and the stage of the pregnancy but employers must make sure that a pregnant member of staff is not stranded abroad when travelling for work.

Many of the hazards listed in this section can pose a risk at the early stage of pregnancy, often before the woman knows she is pregnant. This is why precautions have to be taken whenever there are women of child-bearing age in the workplace.

## ▣ PERSONAL PROTECTIVE EQUIPMENT

*Some PPE needs to be changed as the pregnancy develops as it may no longer fit. Also, not all PPE is available in appropriate sizes for a pregnant woman, meaning that the work must be reassessed as the pregnancy develops. Risk assessments also need to consider whether PPE is effective in managing any additional risk associated with pregnancy or to the foetus.*

*There is an important role for the H&S rep to play in talking to employers about providing suitable PPE for women, particularly pregnant women. For more information see the [TUC guide to PPE and women](#).*

# The Law and what employers should do

The Health and Safety at Work Act places a general duty of care on all employers, and this includes addressing the specific needs of new and expectant mothers.

The main regulations covering pregnant women at work, as well as new mothers, are the Management of Health and Safety at Work Regulations 1999. These require an employer to protect the health and safety of new and expectant mothers. The 2010 Equality Act also provides protection to pregnant women and those on maternity leave from discrimination. The Workplace (Health Safety and Welfare) Regulations require employers to provide suitable rest facilities for both pregnant women and nursing mothers.

In practice the main requirement is to do a risk assessment and then manage the risk. Many employers wait until the worker notifies them that they are pregnant before doing anything. This is wrong. Any employer who has women of childbearing age should ensure that their general risk assessment includes any risks to new and expectant mothers. This is because many women do not know they are expecting until relatively late in the pregnancy, and even if they do, there are many reasons why they may choose not to disclose their pregnancy to their employer until quite late in the pregnancy. If the general risk assessment reveals any risk, it must be removed or reduced "as far as is reasonably practical".

Research by the HSE found that "There was often no culture of ongoing, open discussion between managers and new/expectant mothers about risks." Once an employer is notified that a worker is pregnant, they should revisit the original risk assessment. This is recommended by

the HSE and European law is clear that employers must assess the risks of specific job roles and the risks relating to an individual woman's circumstances, recognising that these circumstances – both in terms of her health and her job role -

## ▣ CHALLENGE EMPLOYERS!

*Where an employer claims that there are risks that cannot be removed once they are told that a woman is pregnant and instead say they have to move or suspend the worker, unions should always be concerned. If the employer states that a woman is working in conditions which may be hazardous once she notifies them that she is pregnant, then the conditions were just as dangerous before the employer was notified. There are very few hazards which cannot be controlled to ensure that all pregnant women are safe, not just those who have notified their employer. For this reason, unions should seek to ensure that all potential risks are controlled for all women workers of childbearing age.*

may well change throughout the pregnancy. It is also good practice to speak to the women about any concerns and to ask if she has had any advice from a doctor or midwife that could affect the assessment. The risk assessment should also be reviewed

as the pregnancy progresses. As the pregnancy and postnatal periods are “dynamic”, with physiological, hormonal and psychological changes, the risk assessment must be reviewed by the manager and the new or expectant mother at least every couple of months, or sooner if necessary.

According to the HSE, if there are specific risks that cannot be removed then, once the employer is notified a worker is pregnant, they must temporarily adjust her working conditions and/or hours of work to remove the risk. If that is not possible, she should be offered suitable alternative employment at the same rate of pay if available. If that is not possible then the employee can be sent home on paid leave for as long as is necessary.

In those circumstances where the employer does send a pregnant woman home because they can't control the risk or adjust working conditions, unions must make sure that they are not expected or encouraged to take sick leave for this. Taking sick leave during pregnancy can have a negative impact on the woman's Statutory Maternity Pay entitlements and can lead to her missing out on Statutory Maternity Pay altogether.

## **Taking action – some practical measures**

There is no complete list of what the employer has to do to protect workers when they are pregnant, as every case will be different, but a few things that are common would be:

- Making adjustments to workstations such as desks, checkouts or benches to make them more comfortable and avoid unnecessary standing, or awkward sitting positions. These adjustments should be reviewed as the pregnancy develops.

- Changing the workload or the hours to reduce levels of stress. They can also vary starting and finishing times to make commuting easier.
- Agree an increase in breaks to ensure that the pregnant woman can visit the toilet more often and drink plenty of fluids.
- Giving the worker more control over the temperature of her workspace so she can make it cooler or warmer as she requires.
- Removing any exposures to any chemicals, noise or vibration, although ideally, if any of these are potentially harmful to a pregnant woman, the employer should be controlling these anyway.
- Provide suitable rest facilities for pregnant and breastfeeding mothers.
- If the woman is regularly in contact with children, people who are more likely to have an infectious or contagious disease, or animals the employer should ensure that any colleagues, clients, parents etc., are encouraged to notify them if they develop or carry any transmittable disease.

### **▣ THE REALITY FOR MANY WOMEN**

*Despite the legal requirements on employers, many women continue to face hazards in the workplace during pregnancy. A survey by the Equality and Human Rights Commission found that two in every five expectant mothers felt that there was a risk to, or impact on, their health or welfare at work. 4% left their jobs due to these risks not being fully tackled.*



## **Notifying the employer**

There is no legal requirement on the pregnant woman to notify the employer that she is pregnant for health and safety purposes, but women should be encouraged to notify the employer as soon as possible so that they can review the risk assessments. Most employers will accept a letter, but they can ask for confirmation from a doctor or midwife. The employer cannot demand that the proof should be a MATB1 certificate as this often isn't provided until after 20 weeks and the woman may need adjustments before this time.

Some women will be concerned about what their employer will do, especially if other workers have had problems when pregnant, but union representatives should generally encourage members to disclose as soon as possible and then support them if the employer treats them unfairly such as by changing their duties rather than first trying to control any risks.

Expectant mothers should also be encouraged to give early notice because it gives increased protection against unfair treatment or dismissal and means that she is entitled to get time off for antenatal appointments.

## **Return to work**

The employer's responsibility does not finish when a pregnant woman starts maternity leave. When the new mother returns, the employer also must make sure that there are no maternity-related risks on her return. Some chemicals can be passed on to the child through breast feeding, and it is the responsibility of the employer to make sure that they are aware of these risks

and take action to control any potential exposure.

If the new mother has been away from the workplace for several months, the employer should also make sure that she is offered refresher training, especially if there have been changes when she has been away.

On return to work, employers do not always consider the additional stress that a new mother may experience coming back to work with a new baby at home, specially if linked to anxiety and depression. Around one in every ten new mothers experience post-natal depression and this can be made worse by any workplace stress, or even just the worry of returning to work after the birth.

Employers should ensure that all new mothers are offered support through access to an Employee Assistance Programme or an occupational health provider. This should also be available when a woman returns early because they have a miscarriage, or the baby is stillborn. Often miscarriages will happen when the woman is still working. It is important that employers ensure that they liaise with the woman to offer the support they need, ideally allowing her time off to grieve and recover.

## **Breastfeeding and expressing milk**

Many women who return to work after pregnancy will be breastfeeding and the employer should be encouraged to provide a private, healthy and safe environment for nursing mothers to express milk. New mothers should not be expected to do this in a toilet or anywhere public.

Large employers may even put aside a "mother and baby" room, but others may allocate a spare office or the first aid room for this. They should also provide somewhere for breast milk to be stored, such as a small lockable fridge, along with facilities for washing, sterilising and storing receptacles.

Women do not have a statutory right to time off to breastfeed but it is good practice to allow this and this is something that the union can seek to negotiate.

If an employer refuses to make adjustments for a woman who is breastfeeding, this may be indirect sex discrimination so you may want to seek the advice of a regional officer or the union legal officer.

*"The employer's responsibility does not finish when a pregnant woman starts maternity leave."*

### **▣ BENEFITS OF BEING IN A UNION**

*According to the EHRC, expectant mothers in workplaces that did not recognise a trade union were more likely to leave their job due to risks not being tackled than in unionised workplaces.*

*In workplaces that recognised unions, employers were more aware of the employees' rights and had more transparent policies.*

## Safety representative's checklist

- Do not wait until you become aware that there is a pregnant woman in the workplace before checking that the correct procedures are in place. The employer should have a written policy outlining what they do to protect the health, safety and welfare of pregnant and new mothers. Ask to see it.
- Ask your employer to ensure that workers always have access to copies of risk assessments that cover their work. If a woman does not want to disclose her pregnancy yet but she is concerned about a particular workplace risk, she has no way of asking her employer about it without alerting them to the fact that she is pregnant. If the employer does not, then the union health and safety representative can ask for copies of them and ensure that workers have access to them.
- Review risk assessments to see that they cover all the potential risks to women who may be pregnant and that these risks have been controlled - not just once the employer knows that one of the workers is pregnant. (as a union health and safety representative you have the right to this information).
- Ensure that the employer makes a revised and specific risk assessment available once a woman notifies the employer they are pregnant, and that this is reviewed regularly during the pregnancy.
- Make sure that there are suitable rest facilities available as well as arrangements to allow for expressing and storing breast milk.
- Check what steps are taken to ensure a revised risk assessment/refresher training is available once a new mother returns to work.
- Has the employer procedures in place to support the mental health and wellbeing of new mothers, or those who have suffered a miscarriage or stillbirth?
- Consider ensuring that a union health and safety representative speaks to every member who becomes pregnant to make sure that they know their rights and to ask that they let the union know if they have any concerns about what the employer is doing to protect their health. They can also keep in touch with the woman as her pregnancy progresses to check whether she might need further adjustments or further support negotiating with the employer.

## Resources

New and Expectant mothers who work ([HSE guidance](#))

Health and Safety during pregnancy and on return to work ([Maternity Action](#))

Pregnancy and Maternity Related Discrimination and Disadvantage First findings:

Surveys of Employers and Mothers ([BIS Research paper](#))

ACAS guidance on [breastfeeding at work](#).

Maternity Action have an advice line on 0808 802 0029