

'ErgoHair'



Call for proposals
- Support for Social Dialogue -

Development and promotion of a healthy and safe working environment through the design of ergonomic workplaces and work processes in the hairdressing sector (ErgoHair)

SD – Working group meeting
17 May 2016

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Short description:

“This project will in particular address ergonomic risk factors at work and their impact on musculoskeletal health and related consequences on the employment of hairdressers.

The social partners are adamant to obtain a set of recommendations to be better placed to communicate to hairdressers the need for ergonomic equipment acquisition, furnishing, work station and work organisation as well as health-promoting behavior”.

Steering committee meeting on 24. Febr. 2016

UNI global union Hair & Beauty

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Project partner

Lead applicant:

UBK/UCB vzw-asbl

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Associate organisation:

UNI Europa Hair & Beauty

(Francois Laurent, Dimitris Theodorakis)

Co-applicant

University Medical Center Hamburg-Eppendorf

(Prof. Albert Nienhaus, Agnessa Kozak)

Background

1. Profile of the sector:

- 1 Mio. active workers, make up 0.5% of total employment in the Member States
- dominated by SMEs
- tertiary sector is accountable for economic growth, incl. the hairdressing sector
- in some countries there is prevalence of migrant workers active in the sector

Background

2. Profile of the salons:

- work at high pace
- frequent direct customer contact
- lack of awareness about taking safety and prevention measures
 - partly insufficient attention to the ergonomic design of hairdressing salons;
 - partly insufficient focus on layout, design and choice of ergonomic materials (e.g. light dryer)



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Background

3. Profile of the hairdresser:

- workforce is characterised by young professionals
- predominantly females
- high incidence of part-time employment
- high staff turnover (i.a. health complaints; limited development prospects)

Background – short overview of the evidence I

Problems related to profession I:

- hairdressers spent 9-13% of total work time (~30min) with arms elevated at $>60^\circ$ (Veiersted et al. 2008; Wahlstrom et al. 2010);
- perform frequent repetitive movements: work with high force exertion and wrist velocity (Chen et al. 2010; Kitzig 2014);
- hairdresser students report higher levels of workload compared to other students (Hanvold et al. 2014);
- report on average poorer physical environment (e.g. tiring and painful positions); lower working time quality and lower quality as regards possibilities to develop skills; lower level of discretion in fulfilling their tasks (Eurofound, EWCS survey, 2013);

Background – short overview of the evidence II

Problems related to profession II:

- health complaints are the main reason for leaving the profession (Leino et al. 1999)
 - Top 1: skin diseases
 - Top 2: repetitive strain syndrome of the wrist and elbow; diseases of the neck and shoulders;
- back pain attributed to work activities is more prevalent in hairdressing than in other sectors (Schneider et al. 2006; Guo et al. 1995);
- prevalence studies among hairdressers report high 12-months MSD prevalence's in the lower back (49 - 70 %), neck (41 - 70 %), shoulder (28 - 61 %) elbow/wrist (13 - 53 %) (Amodeo et al. 2004; De Smet et al. 2009; Kitzig et al. 2016; Mussi & Gouveia, 2008; Schneider et al. 2006; Tsigonia et al. 2009; Veiersted et al. 2008);

Occupational diseases and work accidents may result in...

... diminished work capacity

- affected working performance
- frequent doctor visits / sick leaves
- reduced working hours
- lower work satisfaction / lower quality of life

... high staff turnover due to early job exit

- not being able to carry out the work due to recurrent MSD symptoms
- risk of being forced to leave the sector (e.g. early retirement, re-education)
- loss of income

... increasing direct and indirect costs for social security

- A Dutch survey calculated the cost of absenteeism due to occupational diseases in the sector: approximately €13,500 per year / per employee
- Health insurance associated costs (e.g. diagnosis, treatment, rehabilitation)

Previous actions

1. **Safe Hair 1.0** – *Common Health and Safety Development in Professional Hairdressing in Europe, 2010*
2. **Safe Hair 2.0** – *Systematic development and validation of a modular target specific instrument for the design of teaching-learning arrangements for the prevention of occupational skin diseases in professional hairdressing, 2012*
3. **Safe Hair Website** (www.safehair.eu)
4. **EU-OSHA** – *Development of the Online Interactive Risk Assessment tool (OiRA) for Hairdressers, 2011*
5. **A close shave** – *UBK/UCB vzw-asbl Transnational ESF Project, 2014*

Background

Several countries have already made significant efforts by developing and providing ...

- information, aids, participative and interactive initiatives,
- risk assessment tools
- awareness-generating campaigns

... to reduce or prevent MSD in hairdressing

 *However, so far no common, comprehensive, evidence and consensus-based strategy to embank MSD burden in the hairdressing exist*

Overall objectives

- (1) To encourage **awareness-raising** on the European **framework agreement** on the protection of occupational health and safety in the hairdressing sector at local, national and European levels with a **strong emphasis on ergonomics**;
- (2) To strengthen **synergy effects** and encourage a **structured exchange of information** and **experience** at national and European level and to inform national and European authorities and social partner organisations about the **importance of health and safety at work** in the hairdressing sector; this project will focus in particular on musculoskeletal disorders and **devise recommendations for different target audiences** in preventing musculoskeletal disorders.

- Duration of the action: 24 months (Start Dec, 2016)
- 2-days-workshops which will be held in
 1. Hamburg
 2. Paris
 3. Brussels



I Preparatory phase (e.g. literature review, data collection, experts acquisition)

II Organisation phase of the three workshops

III Dissemination phase

IV Development of social partner declaration

Planned actions

- Summary of current evidence: a literature review on
 - (1) work-related risk factors and health conditions of hairdressers
 - (2) work-related ergonomic implementation strategies (i.a. scientific studies and good practice projects on OSH instructions/trainings in the Member States)
- Data collection on sick leaves, occupational diseases and injuries from national partners
- Exchange of information on country-specific insurance regulations and responsibilities with respect to the hairdressing sector
- Perspective of employers and employees on their work environment:
qualitative in-depth interviews of employees and employers about their knowledge on health and safety at work (e.g. OiRA use), implementation barriers, requests for support, accessibility (e.g. how to reach them), etc.

Planned actions

- Legal principles of the risk-assessment and risk-management process in the Member States
 - Does the OiRA tool meets the needs and expectations of potential users?
 - How often is it used in hairdressing (data available)?
 - What are the chances and obstacles in using the OiRA tool?
- Data collection on ergonomic requirements from the industry and ergonomic studies
- Development of common standards for ergonomic workplace redesign and equipment

Dissemination phase

- Development of a dissemination strategy by identifying pathways for sharing target-group specific set of recommendations – discussion with marketing specialists and health promotion experts
- Preparation and discussion of the joint target-group specific guidelines (employers, employees)
- Preparation of a joint social partner declaration

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Thank you for your attention

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questions and suggestion are welcome