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The role of social partners in preventing third-party violence and harassment at work

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Abbreviations

CBA	Collective Bargaining Agreement
CCOO	Confederación Sindical de Comisiones Obreras, Spain
CESI	European Confederation of independent Trade Unions
CEEP	Centre européen des employeurs et entreprises, now SGI Europe
CEMR	Council of European Municipalities and Regions
CFDT	Confédération française démocratique du travail, France
CGIL	Confederazione Generale Italiana del Lavoro, Italy
CISL	CISL Confederazione Italiana Sindacati Lavoratori, Italy
CISL	Confederazione Italiana Sindacati Lavoratori, Italy
CITUB	Bulgarian Confederation of Trade Unions
EESC	European Economic and Social Committee
EFEE	European Federation of Education Employers
ENSIA	EU Agency for Cybersecurity
EPSU	European Public Service Union
ETF	European Transport Workers Federation
ETI	Ethical Trading Initiative
ETNO	European Telecommunications Network Operators' Association.
ETUC	European Trade Union Confederation
ETUCE	European Trade Union Committee for Education
EU	European Union
EU-OSHA	European Union Occupational Safety and Health Authority
EUPAE	European Public Administration Employers
EWCS	European Working Conditions Survey
FH	Fagbevægelsens Hovedorganisation, Danish Trade Union Confederation
FISTEL CISL	Federazione sindacale che tutela i lavoratori dei settori dell'informazione, dello spettacolo e delle telecomunicazioni, Italy
FO	Force Ouvrière, France
FRA	Fundamental Rights Agency
FTTUB	Federation of transport trade unions in Bulgaria
GBV	Gender-based violence
GBVH	Gender-based violence and harassment
GSMA	Global System for Mobile Communications Association
ICTU	Irish Congress of Trade Unions
ILC	International Labour Conference
ILO	International Labour Organization
INMO	Irish Nurses and Midwives Organisation
ITF	International Transport Workers' Federation
ITUC	International Trade Union Confederation
LGBTI	Lesbian, gay, bisexual, transgender and intersex
NASUWT	National Association of Schoolmasters/Union of Women Teachers, UK
OECD	Organisation for Economic Cooperation and Development
OSH	Occupational Safety and Health
PSTD	Post-Traumatic Stress Disorder
SLC CGIL	Sindacato Lavoratori della Comunicazione, Italy
TPV	Third-party violence
TPVH	Third-party violence and harassment
TUC	Trades Union Congress, UK
TUNED	Trade Unions' National and European Administration Delegation
UGT	Unión General de Trabajadores, Spain
UIL	Unione Italiana del Lavoro, Italy
UILCOM UIL	Unione Italiana Lavoratori della Comunicazione, Italy
UITP	International association for public transport
VIDA	Union of transport and service industries, Austria

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Executive summary

Introduction

In 2010 the social partners in health, education, local and regional government, commerce and private security agreed Multi-Sectoral Guidelines on Tackling Third-Party Violence and harassment at work.

This report, part of a social partner project (2021-2023), reviews the effectiveness and implementation of the Guidelines and the scope for the Guidelines to be updated to reflect the changing world of work, related priorities of the social partners and legislative developments. Specifically, the project has focussed in the following six sectors and sub-sectors: local and regional government (front desk customer services), central government services (prisons and employment services), hospitals, secondary schools, urban public transport, and telecoms.

In doing this, the report explores data, evidence, the legal framework and challenges in preventing and tackling the growing problem of third-party violence and harassment (TPVH) at work, particularly in the context of COVID-19, digitalisation, and gender-based violence and harassment (GBVH), including domestic violence. It makes recommendations on how to improve the content and effective implementation of the Guidelines and includes over 40 examples of national social partners' policy initiatives and collective agreements on TPVH.

Data on third-party violence and harassment (TPVH)

The report reviews existing European and national data on TPVH and new evidence is presented from the project's multi-sectoral survey of national members of the project social partners.

Evidence from surveys and data in some of these sectors, particularly in hospitals, urban transport and prison services, reveals both a greater awareness of the effects and causes of TPVH and an increase in the levels and severity of TPVH, particularly during the COVID-19 pandemic. Data also show that younger workers and women workers are disproportionately affected by TPVH (Eurofound 2022a & 2022b, FH 2022), and that workers rarely report TPVH, many seeing the problem as being "part of the job" (ETF 2017). **In this context, working conditions and staffing levels are crucial in understanding rising rates of TPVH.**

Legal and policy framework

An evolving legal and policy framework on preventing and addressing TPVH exists at the European, international and national levels. In the European Union (EU) harassment and sexual harassment, as a form of discrimination, are already covered in relevant Directives on equal treatment and anti-discrimination, while the EU Framework Directive on safety and health at work (89/391/EEC) provides a key instrument which is relevant to the prevention of TPVH. While these Directives make no explicit reference to TPVH, they provide an important reference point for measures on TPVH in national laws.

The proposed Directive on violence against women and domestic violence (2022) is a further opportunity to bring domestic violence as a workplace issue and gender-related TPVH at work into an EU legal framework. The only European policy instruments that deal specifically with TPVH are the two non-legally binding social partner initiatives, notably the 2007 social partner European Framework Agreement on Violence and Harassment at Work, and the 2010 Guidelines on Third-Party Violence, the latter of which is the subject of this report.

Of relevance, at the international level, are the ILO Violence and Harassment Convention No.190 and accompanying Recommendation No.206 which go further in providing an integrated and comprehensive approach to violence and harassment. The Convention addresses both TPVH and domestic violence as world of work issues relevant for national legal frameworks in setting out obligations on employers to prevent and tackle all forms of violence and harassment. As more European countries prepare to ratify the Convention, it is likely that it will provide new legal precedents on TPVH and domestic violence as a workplace issue.

At the national level, there are various ways that legal and policy measures have addressed TPVH, notwithstanding the crucial role of an enabling legal framework for collective bargaining at workplace and sectoral levels. Laws have variously addressed TPVH as an OSH, gender equality/non-discrimination, labour law or criminal law issue. In practice, many of the laws addressing TPVH and domestic violence, require a strong implementing role for collective bargaining.

Summary of findings from the TPVH project survey

The project's TPVH survey, carried out between autumn 2021 and early 2022, had responses from 165 social partner organisations (59 unions, 87 employers, 19 European level or undisclosed). In summary, the findings from the survey validate existing European and national data, while providing a lens on sector-specific problems. The survey also provided valuable insights into the awareness of the Guidelines and their future role in tackling the problem of TPVH. These findings helped to provide evidence and a context for the project's thematic webinars, while also helping to inform the recommendations made in this report. In summary:

- 80% of respondents believe that TPVH is an extremely, very or fairly serious problem.
- 42% of respondents state that TPVH has had an extremely big or big impact on the quality of service delivery.
- Verbal harassment, followed by psychological harassment and physical violence are the primary forms of TPVH experienced by workers, with some differences between sectors.
- Around one-half of respondents report on initiatives to raise awareness or support staff, 40% report that TPVH is included in risk assessment and 33% that it is included in CBAs.

- The most common policy initiatives are derived from OSH; and a large number of policies address all forms of violence and harassment, covering both internal and external violence and harassment.
- Only 45% of respondents had policies or agreements addressing TPVH from a gender perspective, even though data suggests that women are disproportionately affected by TPVH. Most commonly cited is the implementation of support and safety measures for women victims of TPVH, with fewer numbers reporting policies on GBVH or integration of GBVH in risk assessments.
- There is low awareness of the Multi-Sectoral Guidelines, with 70% of respondents being unaware of the Guidelines or their content.
- Key recommendations that would help the social partners to improve their responses to TPVH include sharing of good practices, followed by information campaigns, better complaints mechanisms, guidance on GBVH, sector-specific guidelines and making the Guidelines legally binding.

Actions implemented by the social partners at national and European levels

An important part of the research (review of literature, project survey, interviews and discussions held at webinars) has been to document recent policy and social partner developments with the collection of over 40 good practices in tackling TPVH. These give a focus also to key areas relevant to the future implementation and updating of the Guidelines. Good practices include:

- Negotiations of workplace policies and CBAs that prevent and address TPVH.
- Prevention programmes, with gender-responsive risk assessment and risk mitigation, and security and safety measures.
- Complaints mechanisms that workers trust, including confidential advice and information.
- Training and awareness raising for employers, managers, workers and union members.
- Psychological and other practical support for workers affected by TPVH or domestic violence.
- Learning from cases, including data collection to review and record incidents of violence, while guaranteeing the confidentiality of victims/survivors.

Many of the examples show a general trend towards policies and agreements that combine both internal and external violence and harassment, which is the approach recommended in ILO Convention No.190 and Recommendation No.206.

Specific examples related to **gender-based TPVH** include gender-responsive actions and agreements that address risks in feminised sectors such as education and health and in male-dominated sectors such as in urban transport and prisons. These aim to address workplace culture, including institutional sexism and awareness about multiple and intersecting forms of discrimination. Examples – from Austria (transport, health, social services), Bulgaria (urban transport), Czech Republic (public administration), Denmark (local and regional government), France (transport and public sector), Germany (transport), Spain (public administration), UK (public sector) and three European-level examples – highlight the role of awareness raising and collective bargaining to address gender-based TPVH.

In relation to **domestic violence** as a workplace issue measures introduced to mitigate the impact of domestic violence and provide support for survivors include training and guidance for union negotiations (Austria and UK), inclusion of domestic violence support and paid leave in agreements on gender equality in the telecoms, transport and public sector (France), and paid leave of up to 3 months in collective agreements in the public sector and telecoms (Italy).

A recent issue is TPVH in the context of the increasingly **digitalised world of work**, where risks of cyber violence and harassment have grown significantly. Digitalisation poses new threats and impacts on workers' safety and health, especially young women workers disproportionately affected by digital forms of sexual harassment, threats and abuse. Many national policies and CBAs refer to the risks faced by cyber harassment and abuse, including during teleworking, and the right to "switch off". These are emerging new issues, and the four examples of European social partners' initiatives provide a context and framework for national actions and agreements:

- European cross-sectoral social partner framework on digitalisation (2020)
- In education, an action by the ETUCE executive board to address cyber harassment in the context of school-based violence and harassment (2020), and a Joint Statement by European Sectoral Social Dialogue Committee in Education 2021)
- A Joint Statement by the European social partners in the telecoms sector on TPVH
- European Framework Agreement on digitalisation in the government sector with a view to becoming legally binding (2022).

OSH policies, risk assessment and risk mitigation play an important role in the prevention of TPVH and in addressing wider psychosocial risks that lead to heightened levels of TPVH. These measures concern prevention at an **organisation level risks** such as having effective risk assessment, complaints, awareness and other policy measures to tackle TPVH and provide support for workers; prevention related to **working conditions** such as staffing shortages or lone working; and prevention of **customer/user related risks**, especially when working with vulnerable or anxious citizens and in the context of the increasing normalisation of aggression and TPVH. Several unions report on the negative impact of austerity in public services, which leads to the cutting of staffing and services and a decrease in their quality.

The vast bulk of initiatives and agreements on TPVH fall under OSH policies. The examples in the report show the value of joint approaches, worker consultation and risk assessment and safety measures tailored to different sectors such as healthcare, education, public administration, prisons and telecoms. In addition to the national examples, three European social partner initiatives with a focus on prevention in the context of OSH. They include the Joint Recommendations issued by the social partners in urban public transport (UITP-ETF); an online risk assessment tool, OiRA, (EU-OSHA with the social partners in education); and a European social partner framework of actions that addresses TPVH in the context of hospital recruitment and retention (EPSU-HOSPEEM).

A final theme concerns **protection, remedies and compensation** provisions in national laws concerning TPVH in Bulgaria, Finland and Italy, and in social partner initiatives. CBAs include support and remedies in the transport sector (Bulgaria), mobbing and stalking counters to provide support and information for victims/survivors (Italy), and the tripartite agreement on sexual harassment, which includes higher levels of compensation for victims (Denmark).

Summary of Recommendations

Drawing on the research carried out for the project, the collection of good practices and the discussions held amongst the social partners in project meetings and webinars, the following is a summary of the recommendations made in the report.

1. Updating of the Guidelines

Taking into account the specificities of TPVH and that TPVH became an even greater problem during COVID-19 there is consensus about the relevance of retaining dedicated guidelines on TPVH. There is, however, room for improvements by updating the Guidelines in relation to:

- The role and related risks of digitalisation in the changing world of work.
- The effects of GBVH, including domestic violence at work, and the need for a stronger focus to gender-responsive approaches to TPVH in line with ILO Convention 190 and Recommendation 206,
- The need to better enforcement of risk assessment as an important prevention tool and to promote the inclusion of psychosocial risks, insufficient staffing, security protocols, support for and compensation of victims .

2. Better implementation of the Guidelines

There is a crucial role for the better implementation of the Guidelines:

- In the short term, agree the revision of the Guidelines in Sectoral Social Dialogue Committees covered by the project.

- Consider whether the Guidelines, or a set of principles underpinning the Guidelines, should be binding in national collective agreements and/or EU sector specific agreements.
- Draw up a communications and dissemination plan, a high-level launch and support for the updated Guidelines, and a dedicated website, accessible materials and fact sheets.
- In the longer term, discuss the option to include the Guidelines in the renegotiation of a binding social partner agreement on all forms of violence and harassment (updating the 2007 social partner agreement on violence and harassment) to ensure alignment with ILO Convention 190 and national agreements that favour an integrated approach to violence and harassment (both internal and external).

Section 1: Introduction

1.1 Background and overview of this report

In 2010, the EU social partners in public and private services adopted Multi-Sectoral Guidelines on Tackling Third-Party Violence and Harassment at Work in response to growing levels of third-party violence. These were social partners for health care (EPSU and HOSPEEM), education (ETUCE and EFEE), local and regional government (EPSU and CEMR-Employers), commerce (UNI-Europa and Eurocommerce) and private security (UNI-EUROPA and CoESS). The Guidelines were adopted in 2018 by central government administrations social partners, EPSU-led TUNED and EUPAE.

With more than twelve years since the adoption of the Multi-Sectoral Guidelines, the European social partners commenced a two-year EU-funded project (2021-2022) with special emphasis on public services. The project involved social partners, signatories and non-signatories to the Guidelines, from six sectors in in local and regional government, central government services, hospitals, education and urban public transport, and one private sector employer partner (telecoms). These partners are for the employers, CEMR, HOSPEEM, EUPAE, UITP and ETNO, and for the trade unions EPSU, CESI, ETF and ETUCE.

The project has explored the effectiveness and implementation of the guidelines at the national level, current knowledge and good practices in ending TPVH, and whether the Multi-Sectoral Guidelines, agreed in 2010, need to be updated to reflect the changing world of work, and in the light of new knowledge and policy developments, including ILO Violence and Harassment Convention (No.190) and accompanying Recommendation No.206 (referred to herein as C190 and R206).

This report draws on evidence collected during the project's webinars, conference and specific research on third-party violence and harassment (TPVH) involving a multi-sectoral survey, interviews with and collection of examples from the social partners.¹

Overview of the report

The remainder of this section, gives a brief overview of the background to and the implementation of the European Multi-Sectoral Guidelines.

¹ Reports of the project's activities and webinars can be found at: <https://www.epsu.org/article/multi-sectoral-project-role-social-partners-preventing-third-party-violence-and-harassment>

Section 2: provides an overview of relevant international, European and national legal provisions pertinent to TPVH.

Section 3: presents relevant national and European data and findings of the project's cross-sectoral survey on TPVH carried out to inform the project, identify good practices and views of the social partners on the updating of the Multi-Sectoral Guidelines.

Section 4: discusses key themes that are relevant to the updating of the Guidelines, along with examples of good practices in initiatives, workplace policies and collective bargaining agreements (CBAs) by the social partners, unilaterally or jointly.

Section 5: draws together conclusions and recommendations for the further implementation and updating of the Multi-Sectoral Guidelines.

1.2 Background to the Multi-Sectoral Guidelines on Tackling Third-Party Violence and Harassment

The Multi-Sectoral Guidelines were drawn up to complement the cross-sectoral autonomous Framework Agreement on Harassment and Violence at Work of 2007, which states that violence and harassment can "be amongst colleagues, between superiors and subordinates or by third parties such as clients, customers, patients, pupils, etc." Following their adoption in 2010, the Multi-Sectoral Guidelines were translated into all EU languages and disseminated via workshops and a conference to raise awareness about the Guidelines and their implementation. During these workshops, key elements of good practice were identified across different sectors, notably, having a clear definition, preventative measures (managing client/customer expectations, designing safe workplaces, tools to safeguard employees), workplace design and work organisation, training and awareness raising, clear monitoring, support for victims, and procedures for policy evaluation and review (GHK 2011).

In 2018, the European Social Dialogue Committee for Central Government Administrations signed the Guidelines recognising the value of sectoral approach and evidence of an increase in verbal and physical violence against workers in central government administration, particularly in prisons, employment services, labour inspectorates and tax administrations, at a time of much greater awareness of the problem of gender-based violence and harassment (GBVH), as a result of the #MeToo movement and the global campaign to end GBVH for an ILO Convention (EPSU 2018).

Summary of the definitions and content of the Multi-Sectoral Guidelines

The Multi-Sectoral Guidelines define third-party violence and harassment (TPVH) as violence and harassment that occurs at the workplace, in the public space or in a private environment that is work related. TPVH involves physical, psychological, verbal and/or sexual forms of violence, that can be one-off incidents or more systematic patterns of behaviour, by an individual or group, ranging from cases of disrespect to more serious threats, sexual violence and physical assault, and cyber-harassment. The Guidelines fill a gap in knowledge and guidance on TPVH, which is “sufficiently distinct from the question of violence and harassment (among colleagues) in the workplace” and “sufficiently significant in terms of its impact on the health and safety of workers and its economic impact”.

The Guidelines call on the social partners to address TPVH through a multi-faceted approach covering prevention, risk assessment, complaints measures, partnerships with the public authorities, and support for victims/survivors. Employers are encouraged to establish a “clear policy framework for the prevention and management” of these phenomena, and with the involvement of the social partners policies should aim to have “a holistic approach, covering all aspects from awareness-raising about prevention and training to methods of reporting, support for victims and evaluation and ongoing improvement.” As the Guidelines are not legally binding, it is left to the national members of the EU sectoral social partners to implement them in their respective countries.

1.3 Implementation of the Multi-Sectoral Guidelines

A Joint Review of the Guidelines conducted in 2013 shows some positive developments in implementing the guidelines by the social partners, for example, through agreements, workplace policies, training projects, awareness raising, seminars and campaigns (EPSU et al. 2013). In the hospital and local government sectors the Guidelines were disseminated through communications channels such as newsletters, mailings or special publications, and information was disseminated through training, conferences and seminars (in Germany, France, the Czech Republic, the Netherlands, Latvia and the UK). The implementation of the Guidelines also helped to put TPV on the agenda of social partners in Bulgaria and the Czech Republic, helping to improve relations between social partners. However, no national social partners signed a multi-sectoral agreement reflecting the scope of the sectors at the European level. The joint review called for the further and ongoing implementation through agreements, awareness raising and information dissemination about the Guidelines by the social partners, and their implementation by their signatories' national members of the respective Social Dialogue Committees.

Despite the very limited formal adoption of the Multi-Sectoral Guidelines by the national social partners, the Guidelines have nonetheless contributed to much greater awareness about TPVH

at national, European and international levels, and particularly the critical role of the social partners in finding joint solutions to the problem.

The Guidelines have been widely referred to as an international good practice, for example, by the ILO in helping to inform the inclusion of TPVH in the content of and negotiations for ILO C190 and R206 (ILO 2016, 2018 & 2019) and as a good practice in international guidance on ending violence against women in the world of work (ILO & UN Women 2019).

The research and consultations with employers and unions in the sectors covered by the project highlight the importance of the Multi-Sectoral Guidelines in facilitating the adoption of sectoral specific guidelines at the European level, for example, in the transport sector and the education sector. Joint Recommendations of the European social partners in urban public transport on Combatting Violence and Insecurity in Urban Public Transport (UITP and ETF 2021) were signed in 2020, covering internal and external violence. In the education sector ETUCE raised awareness about schools-based TPVH perpetrated by students, parents and family members. Under a separate project aimed at raising awareness of the Guidelines for the education sector (ETUCE-EFFA 2013) recommendations on preventing and reducing TPVH covers six steps designed to prevent TPVH: taking stock, understanding the situation; cooperation to establish appropriate measures; promoting good practices, reporting incidents, initial and continuous training, and monitoring and follow-up.

More recently the Guidelines have been a reference for a joint project by social partners in local and regional government (EPSU & CEMR 2022) with a focus on three important areas: third-party violence and harassment at work, gender equality and migration. Similarly, TPVH is included in the Framework Agreement on Digitalisation agreed in 2022 by the Social Dialogue Committee for Central Government Administrations (TUNED & EUPAE) (see Section 4).

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Section 2: Data on prevalence and causes of TPVH

2.1 Introduction

This section starts by reviewing existing data and evidence about the incidence and effects of TPVH, including the effects of the COVID-19 pandemic. It draws on international, European, national data on TPVH and sectoral data relevant to the sectors covered in the project. The second part of this section summarises the findings of a cross-sectoral survey on TPVH carried out under the project.

Overall, survey data shows both the severity and level of TPVH in recent years (Eurofound 2015, 2022a & 2022b, EU-OSHA 2022a & 2022b, Hagedorn-Rasmussen et al. 2021, FP-CGIL 2022). Estimates of TPVH range from 2% to 23% of all workers, and up to 42% of workers who work in direct contact with the public (EU-OSHA 2010, Eurofound 2015). With the exception of male dominated prisons, women and younger workers, particularly younger women, are disproportionately affected by TPVH (TUC 2018, FRA 2014). According to the Danish trade union confederation, FH (2021), the greatest risks of sexual harassment were acts perpetrated by service users and customers (60%).

What does this mean for workers' health? TPVH can have significant impacts on physical and mental health and wellbeing, resulting in higher levels of sick leave, psychosocial stress, and poor retention of workers (Eurofound 2015, 2022b; EU-OSHA 2021, ETF 2017). Violence and harassment at work have other severe health consequences such as heightened risks of type 2 diabetes (Xu et al. 2018) and cardiovascular disease (Xu et al. 2019). The EWCTS (Eurofound 2022b) shows that working with customers exposes workers to higher levels of health and safety risk. This includes higher levels of emotional exhaustion compared to workers with no contact with customers (40% and 14% respectively), anxiety (53% and 27% respectively), risk of depression (38% and 20% respectively), complained that they never or rarely have energy (19% and 8% respectively) or their health and safety is at risk (61% and 30% respectively). Furthermore, the COVID-19 pandemic has had an unprecedented impact on workers' safety, security, health and wellbeing, with increasing levels of TPVH against front-line and essential workers and women working from home during the pandemic (UN 2020, ILO 2020 & 2021, OECD 2020, Eurofound 2022a & 2022b, European Commission 2021).

In predominantly female occupations, such as teaching and nursing, and in male-dominated sectors such as transport, women are disproportionately exposed to TPVH. Higher risks may occur in services where work carried out in isolated or mobile locations or during unsocial hours, which is often the case in transport, telecoms service work and health care (ILO 2016, ILO 2018). A lack of resources for equipment, infrastructure and staffing can contribute to violent and harassing behaviour, particularly where customers or service users may have complex needs that are not being met. Data from the French Working Conditions and Psychosocial Risks Survey (Beque & Mauroux 2017) found that 73% of workers were in contact with the public, and nearly half (46%) of these workers said they were in contact with

“people in distress” and often had to “calm people down”. These levels had increased since the previous survey in 2013.

While rising levels of TPVH may be a consequence of greater awareness of the problem and more effective reporting, there is a wider political and social context facing public services relating to austerity measures, staffing shortages, more lone working, and higher demands on managers, along with a lack of trust in state institutions (Eurofound 2021). These are factors that have become conduits for service user frustration and aggression against frontline workers and the normalisation of TPVH.

Data on TPVH form the European Working Conditions Surveys

The EWCS surveys (Eurofound 2010 and 2015) shows the prevalence of violence at work, the impact of violence at work, and the link between job quality, work organisation and violence at work. **A major change over time is the increase of work with angry customers, patients, service users, from 16% in 2010 to 22% in 2015.** EWCS (2015) data shows a significantly higher incidence of external violence and harassment from third-parties in all EU Member States, compared to internal violence from colleagues and managers. Five countries - Slovakia, Estonia, France, Denmark and the Netherlands - report a 25% prevalence of TPVH, compared to the EU average of 20%. In addition, women are disproportionately affected in jobs in public administration, health, education and transport. EWCS also identified issues related to job quality that impact on the social environment at work, work intensity, the quality of working time, and workers’ representation, amongst other areas, that increase risks of TPVH.

A 2021 special edition of the EWCS, the European Working Conditions Telephone Survey (Eurofound 2022a & 2022b) has focused on the impact of COVID-19 on workers, including in front-line and essential services. The survey was carried out by 70,000 telephone interviews in 36 countries, although it is not comparable to other EWCSs, because of the context of COVID-19 and the methodology.² It is interesting to note that 81% of all workers worked with customers, pupils or patients, while more than half of workers (53.3%) worked with them often or always.

Findings related to adverse social behaviour In the previous 12 months (Eurofound, 2022b):

- 15% of workers were subjected to adverse social behaviour, of which 9.3% of workers were exposed to verbal abuse and threats, 5.9% to bullying, harassment or violence and 1.8% unwanted sexual attention;
- Workers who provide services to customers experienced twice the level of violence and harassment as workers who do not work with customers (14% and 7% respectively); and seven times higher levels of unwanted sexual attention (0.3% and 2.1% respectively);

² The Eurofound data summarised below was presented to the final TPVH project conference in Madrid on 29 November 2022 based on a separate analysis of data by Vīginta Ivaskaite-Tamosiune, Research Officer, Eurofound. See Eurofound (2022b).

- How often a worker interacts with a customer is important; workers who work with customers rarely or sometimes reported an increase in adverse social behaviour by 20-30%, except for unwanted sexual attention, which increased 4 times; however, working with customers often or always doubled the share of workers experiencing adverse social behaviour compared to those who were working with customers less frequently.

The survey also underlines the importance of support from a manager, with nearly one-third of workers exposed to adverse social behaviour never or rarely received support from their managers. This is an important issue as the findings from the TPVH project across all six sectors show that many workers see TPVH “as part of the job” and rarely report TPVH.

EWCTS data from different sectors and occupations shows that:

- Workers from hospital activities and ‘other passenger land transport’ (which includes urban and suburban passenger land transport) reported experiencing verbal abuse or threats, and bullying, harassment and violence twice as often as the EU average.
- Workers in hospital activities reported receiving unwanted sexual attention at three times higher than the EU average;
- Workers from the employment activities sector reported double the verbal abuse or threats and unwanted sexual attention, but less bullying, harassment and violence than the EU average.
- The overall share of verbal abuse or threats in the education sector was below the EU average, it was higher in the secondary education activities.
- The lowest levels of any form of adverse social behaviour were reported in the telecommunications sector;
- In relation to occupations, more than 20% of protective services workers (which includes fire-fighters, police officers, prison guards and security guards) and health associate professional reported the highest levels of bullying, harassment and violence (2-3 times higher than the 5.9% EU average).
- Health professionals and health associate professionals reported up to 3 times higher levels of unwanted sexual attention compared to the EU average.

2.2 Data specific to the sectors covered in the project

Data and evidence exist on the causes of TPVH in prisons, education, transport and hospital sectors, but there is a very limited available sectoral data on TPVH in the telecoms sector, in front-desk/customer services in local and regional government and in employment services.

Central government services (employment services and prisons)

The project covered two services provided by central or federal-level governments: employment services and prisons. There is a gap in data on violence and harassment in employment services, while some of the most serious forms of TPVH are found in the prison sector.

The prison population presents increasingly high levels of complex mental health problems, for instance, in the UK one in four of prisoners has attention deficit hyperactivity disorder (Guardian, 1 June 2022), which prison staff are not sufficiently trained to deal with. A recent increase in TPVH in a number of EU Member States is connected to poor quality working conditions, overcrowding and understaffing, with limited resources to shift towards a reintegration and rehabilitation model (EPSU/Vereycken & Ramioul 2019). Incarceration and severe restrictions on autonomy are exacerbated by overcrowding, understaffing, lack of privacy, and inadequate access to education or other recreation facilities. In addition, prisoners experience structural violence, defined as “systemic, structural or institutional ways by which people are kept from accessing the resources needed to meet their basic needs and from achieving the quality of life that would otherwise be possible.” (Ludwig Boltzmann Institute 2021:20).

A poor working environment and a hostile workplace has led to a culture of intimidation, aggression and violence becoming a growing problem, which according to a report from the Dutch labour inspectorate resulted in 79% of prison institutions reporting these problems (EPSU 2013). Research in Denmark found that 34% of prison officers had experienced situations where their own life has been in danger, while more than half (52%) of prison officers had experienced physical violence (Østergaard Larsen et al. 2020).

The prevalence of work-related threats and violence can lead to Post Traumatic Stress Disorders (PTSD). In the prison system in Denmark 27.1% of prison officers, wardens and prison traffic officers had symptoms of either PTSD, depression, anxiety or stress, at levels which were higher than found in police or armed forces (Østergaard Larsen et al. 2020). In another study, PTSD is recorded as being much higher in prisons, compared to elderly care, psychiatry and special schools (Andersen et al. 2019). Although data shows that higher rates of stress and PTSD are reported by women generally, amongst the prison staff, there is a higher proportion of men experiencing PTSD symptoms, while a higher proportion of women experience stress (Østergaard Larsen et al. 2020). This may suggest that women have better coping and support structures inside and outside of work which helps to build resilience.

Gender, as well as ethnicity, personality, experience of support, personal attitudes to work, workplace culture, including a macho work culture, and an increase in women prisoners with mental health and addiction problems and experiences of domestic violence victimisation, are amongst risk factors that need to be taken into account. In a Danish study, 68% of women prison personnel had experienced unwanted sexual attention, compared to 20% of male personnel (Østergaard Larsen et al. 2020). Prisons often fail to take into account that many women prisoners have been victims of repeated violence and domestic violence and that this violence is reproduced as part of a continuum of violence (Natacha Chetcuti-Osorovitz 2021). Speaking at the EPSU seminar Natacha Chetcuti-Osorovitz argued that it is important

to recognise the vulnerabilities faced by women prisoners, many of who have been victims of violence themselves, and that women need tools to ensure that “as a victim of violence you do not have to act with violence.” In her recent book was based on interviews with 42 women inmates, 35 women had been victims of violence, some as a result of prostitution or economic violence (where their finances were controlled in order to sustain dependence on an abuser), and all had been in socially difficult situations, including experiencing racism, leading to low self-esteem and self-worth. Privatisation of the prison canteen system was found to have a disproportionately negative impact on women inmates.

Working conditions and staffing levels are crucial to understanding rising rates of TPVH.

Research on conditions of employment in prisons in Sweden, the UK, Italy and Greece, found working conditions had deteriorated significantly in recent years (EPSU/Vereycken & Ramioul 2019). The Dutch FNV (incorporating the former public service union, Abvakabo) notes that planned initiatives to tackle violence did not take place because of cuts in expenditure and staffing. According to the union’s hotline for staff working in prisons, these problems have worsened as a result of increased workloads and inadequate staffing. The situation worsened during COVID-19, which in a context of prisoner overcrowding, worsening detention conditions and isolation, posed greater risks of infection and illness from COVID-19 amongst prisoners and prison staff. Repeated calls have been made for prevention-focussed prison policies and training of staff; improved working conditions, pay and staffing levels; and reductions in the prison population through better prevention policies focussed on rehabilitation and reintegration, and investments in public services, including domestic violence services (EPSU 2021; EuroPris 2021; European Parliament 2017; EPSU/Vereycken & Ramioul 2019).

Front-desk / customer services in local and regional government

Compared to other sectors, there is a paucity of data on the extent of TPVH in local and regional government, although evidence collected by the social partners in local and regional government shows that levels of verbal, psychological and online violence and harassment have increased against workers who have contact with the public (EPSU & CEMR 2022). Anecdotal evidence shows substantially increased levels of aggression, impatience and frustration from the general public when accessing services in local and regional government.

In Italy, research carried out in 2018 revealed that nine out of ten municipal social workers had been victims of violence and aggression, few workers reported the problem and many saw it as “part of the job” (EPSU et al. 2022). With only 26% reported the TPVH to law enforcement and only 8% to the local administration, this shows a worrying trend of lack of security and protection for staff. In the 2018 Danish Work Environment and Health survey (Arbejdstilsynet 2018), 21% of employees in the regional government sector had experienced threats of violence and 14% physical violence at work in the past 12 months, with greater frequency of violence or threats in psychiatry and in social enterprises. Workers who carried out telework during lockdowns were affected by online harassment and domestic violence, while those continuing to provide front-line essential services in direct contact with the public faced increased risks from more aggressive, confrontational and frustrated service users.

Schools sector

In the schools sector, data shows high levels of TPVH, including verbal harassment, digital harassment and threats, with a negative impact of the working environment, student behaviour and teacher health and wellbeing (Andersen et al. 2021a and 2021b). A national study by the Danish Union of Teachers (DLF) and the National Research Center on Work Environment, 56% of teachers reported aggressive behaviour in pupils in the form of harassment, threats, and violence (Winding et al. 2021) resulting in higher levels of teacher burnout (Winding et al. 2022).

Other survey data shows that around 6.6% of workers in the education sector report having experienced bullying or harassment (against the EU27 average of 5%) (ETUCE 2010). An earlier study dating back to 2009 in Denmark, USA and Poland found that school violence had become an increasingly widespread phenomenon (Kowzan 2009). The Germany teachers union, VBE, found that school violence affects 1 in 4 of all schools (Pearson 2018). High levels of TPVH against teachers is found in Bulgaria. A national survey by the CITUB (2018) found evidence of widespread TPVH, which was found to be highest in feminised professions, such as teaching. The survey showed that although 40% of employers were concerned about violence and harassment, only 25% had implemented measures to prevent violence and harassment. Rising levels of TPVH documented in a survey carried out by the Bulgarian Union of Teachers found that 65% of teachers had suffered psychological violence and 2.5% physical violence. These acts of violence were perpetrated either by students, and/or parents or relatives of students (EPSU et al. 2022).

The COVID-19 pandemic had a further negative impact on female teachers, with increasing levels of online bullying and harassment (Education International 2021, ETUCE 2021). Women teachers faced added stress because they frequently had to assume responsibilities at home as well as on-line teaching, with increased workloads and without appropriate resources. A study of teachers and support staff carried out by the Northern Ireland Committee of the Irish Congress of Trade Unions Education Group (2018) found that education cuts have made the situation worse. Each year one in three education workers experiences physical abuse and 83% have been verbally abused by students or parents.

Urban public transport

Significant risks of violence from third parties are faced by workers in urban public transport, amongst bus and tram drivers, ticket collectors, conductors and front desk ticket sales/customer services, who often define TPVH as being “part of the job”. The effects of COVID-19 added further risks for transport workers, including how passengers’ refusal to follow protection measures to reduce virus transmission during the pandemic led to increased verbal and physical abuse, hostility, aggression and sexual harassment directed towards transport workers (ETF 2020, ITF 2020). In addition, prior to the pandemic a survey by the ETF revealed a worrying increase in physical, verbal and non-verbal sexual harassment, stalking and abuse (ETF 2017). The survey found that 63% of women workers in transport across Europe had experienced at least one recent act of violence; 26% of women workers in transport believe that harassment is part of the job and do not report the problem. Changes in urban public transport staffing levels and changes in work organisation, for example, had led to more lone working and/or

a lack of security back-up. Transport workers report health problems such as anxiety, stress, insomnia, depression and long-term physical ill health are caused by violence and harassment with "...devastating effects on women workers' physical and mental health and wellbeing, their capacity to work, and their relationships with family, friends and work colleagues" (ETF 2017:3). In addition, TPVH has significant implications for the safety of passengers (International Transport Forum 2018).

In the transport sector, a male dominated sector where just 22% of transport jobs are held by women, social norms reinforce stereotypes about women not "belonging" in the transport workforce. Violence and harassment is a major factor affecting the attraction and retention of women in transport jobs (ILO 2013), which is currently being addressed by the European Commission's EU Platform for change on women in transport. The European Social Partners (UITP and ETF 2014) joint recommendations to promote women's employment in the European urban public transport sector, set an ambitious target to increase the share of women employed from 17.5% in 2011, 25% by 2020, and 40% in 2035.

Telecoms sector

Telecoms workers are a group of workers facing rising levels of TPVH, particularly affecting workers involved in installation of infrastructure and repairs, in customer facing services in shops and telecom retail outlets, and provision of services online, through call centres and in customers' private homes. In addition, there are data gaps on workers' experiences of TPVH, compared to other sectors. A recent concern in the telecoms sector is the growth of conspiracy theories, which are linked to political extremism, state anger and justification for aggression particularly amongst people with heightened paranoia. This has led to 5G mobile conspiracy beliefs that the technology is a transmitter of COVID-19 (Jolley and Patterson 2020). In the UK, Ireland and the Netherlands, physical and verbal attacks have been perpetrated against telecom workers (ETNO, GSMA & ENI-Europa 2020), including threats of violence, death threats, verbal and physical violence, destruction of network installation equipment, 5G infrastructure and mobile phone masts (Guardian 7 May 2020). Monitoring of these incidents by ETNO and GSMA in 2020 revealed 120 attacks on mobile networks, including arson of critical telecoms infrastructure, in ten European countries, putting workers, the public and the attackers at risk of injury. Attacks on essential workers and vital infrastructure disrupt emergency services and endanger lives (Jolley and Patterson 2020). There have been widespread calls for this violence to end, including a Joint Statement issued by ETNO, GSMA and ENI-Europa (2020) to this effect.

Hospital sector

In recent years the proliferation of international, European and national surveys indicates a concern about the worrying increase in levels of TPVH in hospitals sector, particularly since the pandemic. Recent surveys, including the data from the EWCTS (Eurofound, 2022b) discussed above, point to a significant increase in violence and harassment against health care workers since the pandemic, and violence is generally viewed as being endemic, regardless of a country's level of development or security (ICN, ICRC, IHF & WMA 2022; Thornton 2022).

Health workers frequently report that aggression from service users, patients and family members has become commonplace (EU-OSHA 2022b, EPSU 2017, INMO 2021, Pillinger 2017). In a hospital emergency department a patient with dementia or mental health problems may have difficulty understanding a situation they are in (Hagedorn-Rasmussen et al. 2021). A lack of staffing can contribute to aggressive behaviour, particularly where service users and patients have complex needs that are not being met, and which be expressions of powerlessness, neglect and stress. In healthcare, burnout and stress has become a much greater problem since the pandemic.

Recent surveys include international and European data showing significant levels of TPVH (ICN et al. 2022, EMO 2022, Eurofound 2015, 2022), which is confirmed in national studies in Bulgaria (CITUB 2018), Czech Republic (Ombudsman et al. 2019; Euroeduca 2010); Denmark (Arbejdstilsynet 2018); Finland (Reknes et al. 2017, Finnish Institute of Occupational Health 2021); Germany (Schablon et al. 2012), Ireland (Irish Examiner 2022, INMO 2021), Italy (FP-CGIL 2022); and UK (British Medical Association 2022, ICS 2021, Guardian 1 June 2022, UNISON & Nursing Times 2021). In summarising the findings from these surveys, between 35% and 70% of health workers have experienced some form of TPVH. Some of the highest levels of violence and harassment are reported in accident and emergency departments, outpatients clinics and inpatient wards, particularly geriatric and mental health care.

There is also a lack of staff training in recognising and managing hostile and aggressive behaviour, including how acts of violence progress and how staff can interrupt and disrupt a sign, such as aggressive verbal gestures and expressions (FP-CGIL 2022, UNISON 2018). While surveys reveal that staff are seriously stressed by the violence experienced, the better the facility trained employees for dealing with aggressive and violent clients, the less risk employees ran of experiencing aggression. As in other sectors, a consistent finding is the “normalisation of TPVH” and low levels of reporting by health care workers. The biggest risks of TPVH are faced by nurses and health care assistants, as they are both in direct contact with patients and have to manage emotional vulnerabilities expressed by patients and the relatives.

High levels of demand, austerity measures leading to insufficient staffing and long waiting times have contributed to recent increased levels of TPVH (HOSPEEM-EPSU 2021). In addition, misinformation about vaccines has incited unprecedented violence, including fire bombings against vaccine centres in France and Poland, and threats to healthcare workers and trade union officials in some countries (EPSU & CEMR 2022). For example, in France, violence and aggressions against health workers led the government to adopt measures providing workers with security guards when they travelled to and from work (France info 2020). Furthermore, vulnerability and distress amongst patients with complex mental health and social problems has been a further risk factor, increasing levels of TPVH (Beque & Mauroux 2017). Reduced staffing levels and an increase in lone working add further risks when a single member of staff is in contact with a patient during visits, examinations, treatments or care management in isolated, geographically dispersed places. Security measures may also be inadequate, such as poor lighting inside hospitals and in parking areas.

2.3 TPVH Project Survey results

Overview

An important part of the TPVH project was to review of the implementation and updating of the Multi-Sectoral Guidelines. An online survey on TPVH was carried out between the autumn of 2021 and early 2022 covering the project's six sub-sectors. The survey was addressed to national social partner organisations in order to inform the project webinars and also the recommendations made in this report regarding the updating of the Multi-Sectoral Guidelines.³

There were a total of 165 full responses to the survey from 19 countries, including responses from European-level organisations. Of these responses, 59 are from a trade union, 87 from an employer organisation, while 19 did not identify as a trade union or an employer organisation. Table 1 illustrates the breakdown of the 165 responses by sector, and by trade union and employer backgrounds. Of the sectors covered in the project, the highest number of responses came from the prison sector, followed by the hospital sector and urban public transport. The highest responses from trade unions came from the hospital sector, while the highest number from employers were from the prison sector. Further analysis of the survey data was carried out to identify similarities and differences between sectors.

Table 1. Responses by trade union and employer backgrounds (165 responses)

Sector	Trade Union	Employer	Not identified	Total
Employment Services	4	2	0	6
Front desk: local & regional govt.	2	3	1	6
Hospitals	16	4	1	21
Prisons	7	44	9	60
Secondary schools	9	0	0	9
Telecoms	1	4	0	5
Urban public transport	7	11	1	19
Other	13	19	7	39
Total	59	87	19	165

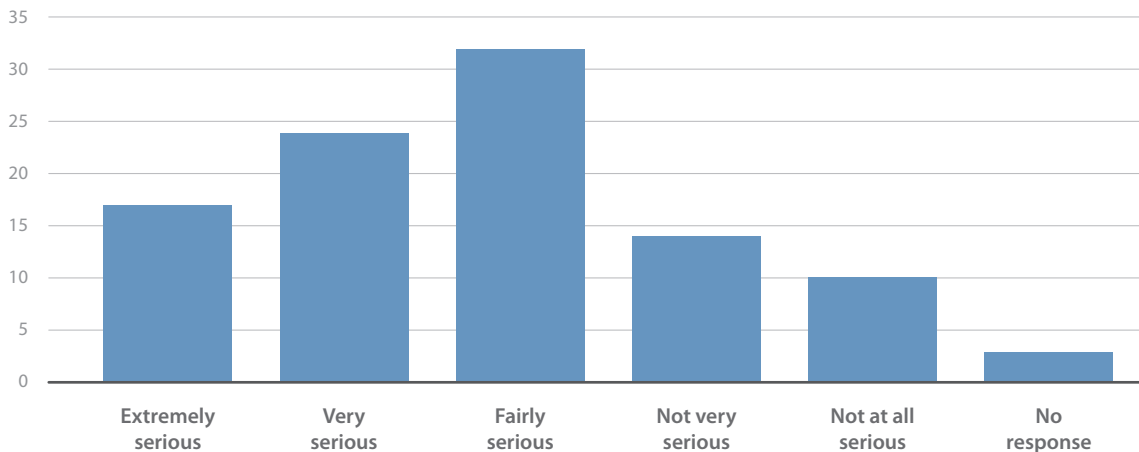
³The online survey, held between November 2021 and February 2022, aimed to gain a picture of perceptions about TPVH, the policy and other responses by the social partners to preventing and addressing TPVH, and views about the updating of the Multi-Sectoral Guidelines. The survey contained 24 questions (20 multiple choice and 4 open-ended). The survey was made available in 10 languages. Survey data was reviewed for data errors and duplication, and incomplete responses were removed from the analysis of the results.

Seriousness of TPVH and its impact on service provision

Overall, TPVH is defined by most respondents as being a serious problem (see Chart 1). Of the 165 respondents to the survey, 17% consider the TPVH to be extremely serious, 24% very serious, while 32% stated that it is fairly serious. Much smaller number believe that TPVH is not a serious problem.

There appears to be no great difference amongst countries and sectors as to the perception of the seriousness of the problem, although the problem is regarded as being the most serious in the prisons, hospital and on front desk roles in local and regional government. While unions and employers both view TPVH to be a serious problem, unions responding to the survey attach greater levels of seriousness to the TPVH (16% of unions, compared to 8% of employers, consider the problem to be extremely serious; 11% of trade unions compared to 25% of employers consider TPVH to be very serious; and 20% of unions consider it to be fairly serious, compared to 25% of employers).

Chart1. How serious is TPVH? (%)



Impact of TPVH on service delivery

As illustrated in Chart 2, one third (33%) of respondents reported that TPVH has had a big impact on service delivery and 9% that it has had an extremely big impact. A further 24% state that it has had a neutral impact and 19% minimal impact. There are some differences across sectors, with the biggest impact on the quality of services reported in the prison sector, the hospital sector and secondary schools, followed by urban transport, telecoms, employment services and front desk services in local and regional government.

The biggest impact appears to be on how services are provided, including the provision of less personalised services, reported by 40% of respondents, withdrawal of services reported by 17% of respondents, and being forced to shift services online for safety reasons, as reported by 5% of respondents. The majority of respondents stated that COVID-19 had an extremely big or big impact on TPVH, confirming research across Europe about recent increase in TPVH since the onset of the pandemic. Chart 3 shows that 19% of respondents indicated that there has been an extremely big impact, 32% a big impact, 22% a neutral impact, 17% a minimal impact, and 6% no impact.

Chart2. Impact of TPVH on services, all sectors (%)

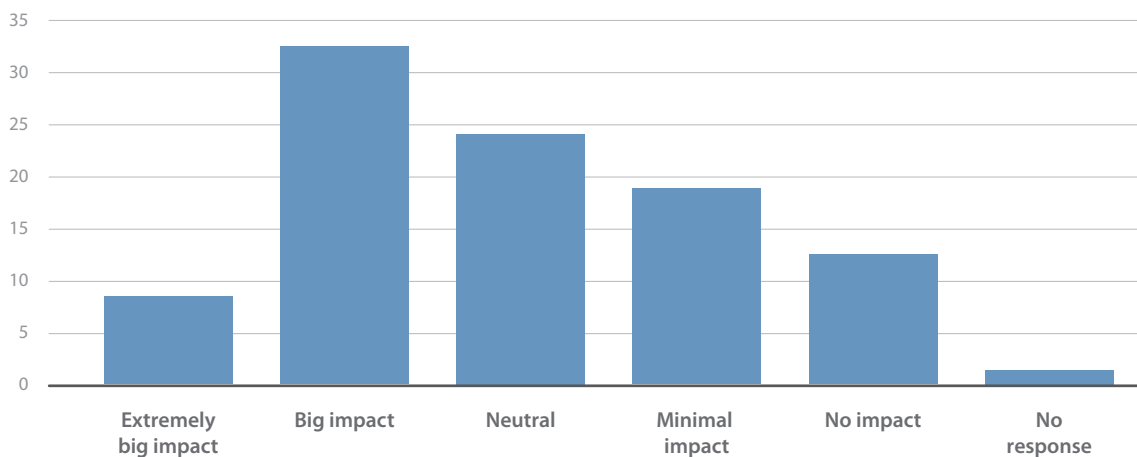
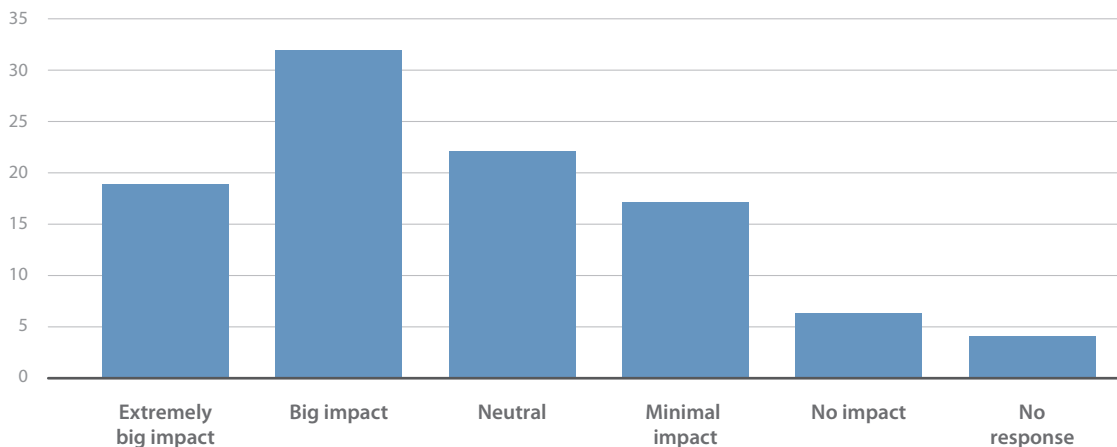


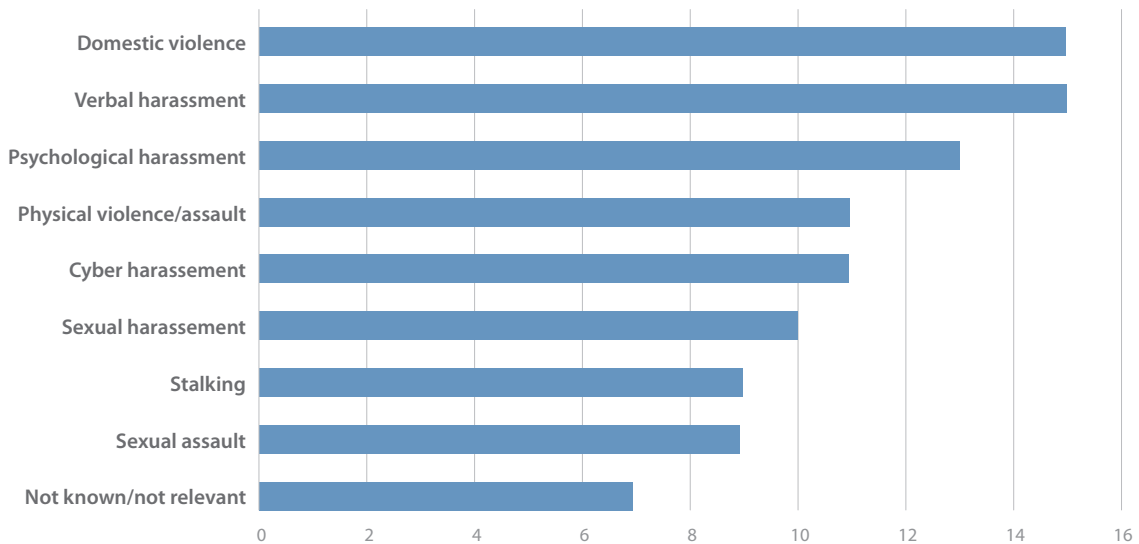
Chart3. Impact of COVID-19 in TPVH, all sectors (%)



Main types of TPVH experienced

Chart 4 illustrates the different types of TPVH across all sectors, showing that verbal harassment, followed by psychological harassment and physical violence/assault are the most common forms of TPHV. Of the total of violence and harassment reported, 15% were of verbal harassment, 15% of psychological harassment, 13% were of physical violence and assault, followed by cyber-harassment (11%), sexual harassment (11%), stalking (10%), domestic violence (10%). A further 7% did not know what were the main forms of TPVH in their sector.

Chart4. Main types of TPVH, all sectors (%)



Some differences are observed across sectors. Physical violence is ranked higher in prisons, hospital and transport sectors than other sectors, while verbal, psychological and sexual forms of harassment are ranked at similar levels across all sectors. In the telecoms sector physical violence and verbal harassment are ranked the highest, whereas in the transport sector verbal harassment, followed by physical violence, are ranked the highest. In secondary schools, employment services and front desk services the picture is slightly different with verbal harassment, followed by psychological harassment and physical violence being ranked the highest. In prisons verbal harassment is ranked the highest, followed by physical violence.

In terms of measures introduced to prevent and address TPVH many social partners have not implemented measures to respond to TPVH. Table 2 shows the most commonly reported measures by respondents from a trade union and an employer background (non-identified refers to respondents who did not identify that they were either from a union or employment organisation). Of the 165 responses to the survey, 21 organisations (7 unions, 12 employers, 2

non-identified), representing 13% of all respondents, reported that they were not aware of any measures introduced to end TPVH, while the remainder of respondents reported at least one measure had been introduced.

Table 2: Initiatives introduced on TPVH (n=165)

	Trade Union	Employer	Not identified	Total
Awareness raising / understanding of the problem	33	47	8	88 (53%)
Support for employees who are victims of TPVH	23	53	8	84 (51%)
Implementation of complaints procedures	16	52	7	75 (45%)
Monitoring of complaints and follow up	20	46	8	74 (44%)
Inclusion in risk assessment and prevention plans	25	35	5	65 (40%)
Collective bargaining agreements	26	23	6	55 (33%)
Sharing of good practices amongst social partners	22	25	4	51 (31%)
Policy framework to prevent and manage TPVH	14	31	6	51 (31%)
Integration into occupational safety and health	18	25	3	46 (28%)
Information campaigns directed at third-parties	16	10	1	27 (16%)
Lobbying/campaigning for new legislation	13	3	0	16 (10%)
Partnerships with NGOs/community associations	4	6	1	11 (7%)
Other	4	8	2	14 (8%)
No measures introduced	7	12	2	21 (13%)

The most prominent initiative reported in the survey is awareness raising, reported 53% of respondents, examples of which cover information and training and to promote better awareness amongst workers and managers about TPVH. This is followed by support for victims of TPVH who may have been harmed physically or psychologically by TPVH, reported as an action by 51% of respondents, including specific support services, for example, as part of company-based employee support and occupational health programmes. The establishment of reporting and complaints procedures is a further important area of activity, reported by 45% of respondents, as is the monitoring of complaints as reported by 44% of respondents. Although complaints procedures exist, unions add that workers on the whole do not report TPVH, either because of limited trust in the complaints mechanism or because TPVH is considered part of the job. Good practices include the development of online and confidential reporting mechanisms and awareness raising amongst workers to encourage reporting without retaliation.

An important finding from this research, and a relatively recent development, is the inclusion of TPVH in risk assessments and prevention plans, as reported by 40% of respondents. Related to this only 28% of respondents state that TPVH is only integrated into OSH policies. It is evident that unions and employers are only just beginning to develop OSH and risk assessment programmes to cover prevention of TPVH, and in some cases separate tailored risk assessments have been developed.

In terms of CBAs, just 33% of respondents report that CBAs contain clauses on TPVH, leading to better procedures, collective responses and better trust. However, ensuring the full implementation of CBAs is an enduring issue. A further 31% of respondents report that there is a policy framework to prevent and manage the problem of TPVH. A policy framework, along with CBAs, can play a key role in setting out Codes of Conduct, reporting and complaints mechanisms, prevention and risk assessment, and training and awareness raising, amongst other areas. The sharing of good practices amongst the social partners was reported 31% of respondents and targeted information campaigns directed at third-parties were reported by just 16% of respondents. Some organisations have been involved in specific campaigns for new legislation to include prevention and/or duties on employers to tackle TPVH, including national campaigns for the ratification of ILO Convention 190, reported by 10% of respondents. The least frequently reported measure relates to partnerships with NGOs and community associations for referrals for specialist counselling and/or domestic violence services and partnerships with organisations who can assist with awareness raising and training, as reported by just 13% of respondents. This indicates one of several areas where further guidance may be needed.

In addition, as shown in Table 3, the initiatives reported on are derived from a various policy frameworks, the most commonly report is a policy or agreement on the working environment or OSH, a policy or agreement on all forms of violence and harassment, and separate policy measures on TPVH. Overall, 60% of respondents stated that some measures were jointly agreed, 13% were jointly agreed, 7% by the employer only, 13% by the trade union only, while 7% reported that no measures had been agreed.

Table 3: Types of policy measures introduced

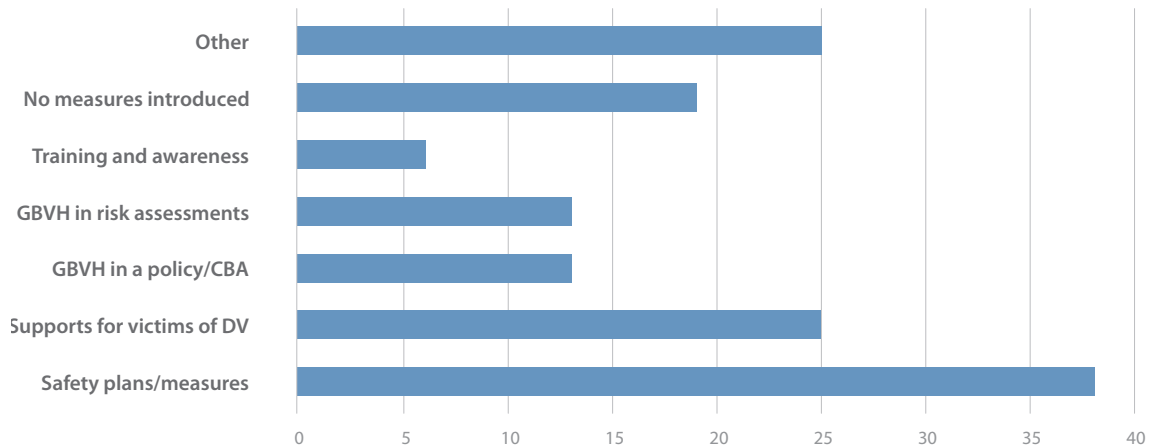
	Trade Union	Employer	Not identified	Total
Work environment/OSH	18	28	7	53
All forms of violence and harassment at work	11	27	5	43
Separate measures/policy on TPVH	9	10	1	20
No relevant policy measures introduced	10	14	5	29
Other	2	2	0	4
Not answered	9	6	1	16
Total	59	87	19	165

Gender-based violence and harassment (GBVH)

As defined in ILO Convention No.190 (discussed above), GBVH is a form of violence and harassment directed towards a person because of their sex or gender, and includes sexual harassment. GBVH exists because of unequal power relations and harmful social norms, which lead to gender inequalities at work, including the gender pay gap.

In the light of increasingly levels of reported GBVH, an important objective of the research was to identify gender-responsive policy responses and negotiations that can help to prevent and address GBVH. Only 45% of respondents reported that they had policies, agreements or other initiatives addressing TPVH from a gender perspective. As illustrated in Chart 5, 37% of respondents had introduced safety plans, 25% support for victims, 14% had a policy or CBA on GBVH, and 6% had introduced training and awareness raising. 19% reported no measures introduced on GBVH. These findings suggest that GBVH is an area where further guidance is needed to support the integration of GBVH into policies and procedures.

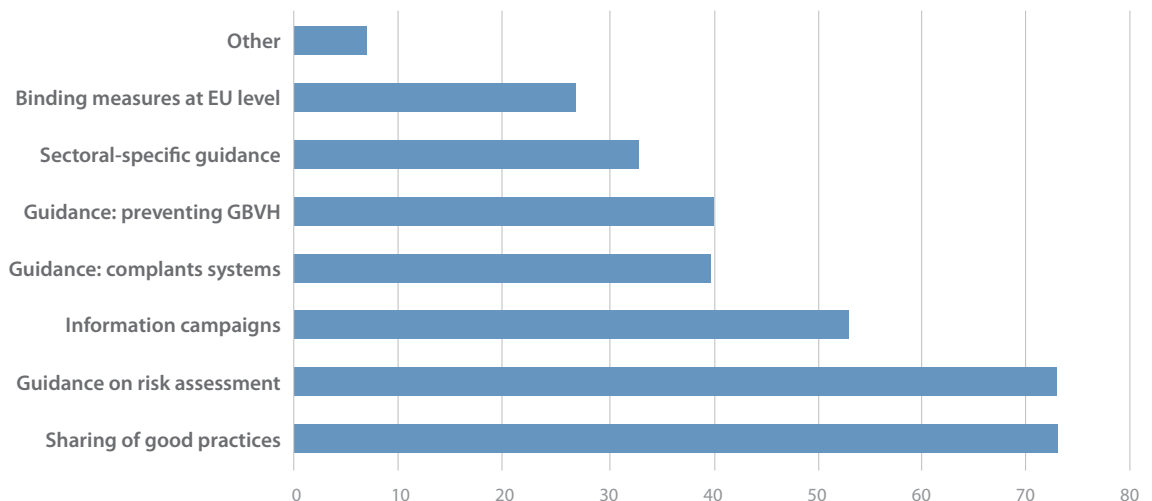
Chart 5. Measures to prevent and address third-party GBVH, all sectors (%)



Awareness of and updating of the Multi-Sectoral Guidelines

Respondents to the survey were asked to report on the measures that, in their view, could help the social partners to prevent and tackle TPVH. As illustrated in Chart 6, the most important measures suggested concern the sharing of good practices and guidance on risk assessment, followed by information campaigns for the third-parties, effective and trusted complaints systems, guidance on GBVH and more detailed sector-specific guidance on TPVH. In addition, 27% of respondents, mainly from trade unions, highlighted the need for binding measures on TPVH at the EU level.

Chart 6. Measures to help social partners end TPVH (%)



In relation to the Multi-Sectoral Guidelines, the survey shows a low level of awareness about the Guidelines. Overall, 70% of respondents indicated that they were not aware of the guidelines. There was better awareness amongst employers, compared to trade unions, and similarly low levels awareness across all sectors. The highest levels of awareness can be found in the education sector and lowest levels of awareness in the prisons sector. Slightly higher numbers of employers know about the Guidelines than trade unions, although it is anticipated that the project and the participation of unions and employers in the project's webinars will have helped to increase this awareness about the Guidelines, including their updating. The survey also asked for some information about how the Guidelines could be updated, and respondents highlighted the need for legally binding measures on TPVH, better follow-up of cases of TPVH, more sector-specific guidance, stronger provisions on GBVH and better integration of internal and external violence and harassment.

It's
not
part
of the
job

Section 3: Legal and policy framework on TPVH

This section gives an overview of relevant International, European and national legal and policy frameworks that are relevant to TPVH.

3.1 European Union (EU) legal and policy frameworks

The relevant EU legal framework includes Directives on equal treatment and non-discrimination and occupational safety and health (OSH), none of which make explicit reference to either internal or external violence and harassment at work. Although their application is relevant to situations where sexual harassment or harassment is perpetrated by third-parties, this remains an important EU policy gap. The only European policy measures that refers to TPVH are the non-binding European cross-sector agreement on violence and harassment between the social partners, agreed in 2007, and the 2010 Multisectoral Guidelines, on which this report is focusing.

European Framework Agreement on Violence and Harassment at Work (BusinessEurope et al. 2007). The Agreement signed by the European social partners, acknowledges that “different forms of harassment and violence...can be physical, psychological and/or sexual” and that violence and harassment can occur “amongst colleagues, between superiors and subordinates or by third parties such as clients, customers, patients [or] pupils.” Laws, national and sectoral agreements have been introduced to implement the agreement, including through national social partner agreements in France, Italy, Denmark and the Netherlands (Business Europe et al. 2011).

Harassment and sexual harassment are defined in anti-discrimination Directives related to labour law and with regards to access to and provision of goods and services. They include:

- Equal treatment between women and men as regards access to work, training, promotion and working conditions (Directive 2006/54/EC)
- Equal treatment between women and men in the access to and supply of goods and services (2004/113/EC)
- Equal treatment on the grounds of religion or belief, disability, age or sexual orientation in employment and occupation (Directive 2000/78/EC)

- Equal treatment between persons irrespective of racial or ethnic origin as regards access to work, training, working conditions, membership of a professional organisation (employers or trade unions), education, social security and healthcare, access to and provision of goods and services including housing (Directive 2000/43/EC)

The Directives lay the foundation for national laws to address harassment, sexual harassment and racial harassment as a form of discrimination at the national level.

In the case of Directive 2006/54/EC sexual harassment is defined as a form of sexual discrimination and is defined as "...any form of unwanted verbal, non-verbal or physical conduct of a sexual nature occurs, with the purpose or effect of violating the dignity of a person, in particular when creating an intimidating, hostile, degrading, humiliating or offensive environment". Reference is made to the role of employers who "...should be encouraged to take measures to combat all forms of sexual discrimination and, in particular, to take preventive measures against harassment and sexual harassment in the workplace, in accordance with national legislation and practice.

In Directives 2000/43 and 2004/113, harassment is defined in the same way as "...unwanted conduct...with the purpose or effect of violating the dignity of a person and of creating an intimidating, hostile, degrading, humiliating or offensive environment".

In practice, the social partners have sought to address TPVH as a safety and health (OSH) issue, as provided for in the OSH Framework Directive (89/391/EEC).

Directive 89/391/EEC on the introduction of measures to encourage improvements in the safety and health of workers at work sets out the framework for and principles on the prevention and protection of workers' related to occupational accidents and diseases, the protection of safety and health, and the prevention, assessment and elimination of risks and accident factors, with the participation of workers and their representatives, in order "...to encourage improvements in the safety and health of workers at work".

Although the Framework Directive does not define violence and harassment, it is inferred that violence and harassment, including TPVH, is a serious OSH risk and that psychosocial factors impact on physical and mental health and well-being. The Directive stipulates that the employer has a duty to carry out a risk assessment and take all reasonable measures to prevent identified threats. It also permits workers to leave their workstations in case of a "grave, imminent and unavoidable danger", but without specifying psychosocial risks or risks of TPVH. Proposals for a new Directive on psychosocial risks at work have been made by the ETUC (2018) and Eurocadres in the EndStress.eu platform,⁴ with backing from the European Parliament (2022).

⁴ <https://www.eurocadres.eu/news/the-endstress-eu-campaign-reaches-the-european-parliament/>

The **EU Strategic Framework on Occupational Safety and Health 2021-2027** (European Commission 2022) is the first OSH strategy to make specific reference to violence and harassment at work in the context of the Commission's proposed Council Decision authorising Member States to ratify, in the interest of the EU, ILO C190, and the forthcoming legislative proposal on preventing and combatting gender-based violence against women and domestic violence, as announced in the Gender Equality Strategy 2020-2025. The Strategic Framework also calls for "strengthening preparedness for potential future health crises" and "the need to imagine possible scenarios of the future of occupational health." A further important development is the recent agreement made with the European Commission (2022) for Member States, to recognise **COVID-19 as an occupational disease**.

Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, covers common minimum standards on the rights, support and protection of victims. The Directive strengthens the rights of victims of crime entitling victims to a minimum level of rights, protection, support, access to justice, whatever their nationality and wherever in the EU the crime takes place. The Directive provides for protection against retaliation and repeat victimisation, for example, if a worker reports a crime, or initiates court proceedings, which could also potentially impact on the workplace.

In March 2022 the European Commission published the **Proposed Directive on violence against women and domestic violence**, the first Directive of its kind in the EU. While aiming to implement the Istanbul Convention⁵ into EU law and assume Member States' responsibility to take coordinated actions to end violence against women, concerns were expressed by some social partners about the limited reference to the role of social partners and collective bargaining in agreeing measures to end violence against women in the world of work, and particularly to TPVH, prevention of GBVH,⁶ including paid leave to address the workplace effects of domestic violence. This would result in a policy gap for a comprehensive approach to addressing violence against women in the world of work, including domestic violence, digitalisation and cyber violence, and the vital role played by the social partners.

⁵ The Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention) sets measures to protect women against all forms of violence, and prevent, prosecute and eliminate violence against women and domestic violence. It refers to sexual harassment on the basis that "Parties shall take the necessary legislative or other measures to ensure that any form of unwanted verbal, non-verbal or physical conduct of a sexual nature with the purpose or effect of violating the dignity of a person, in particular when creating an intimidating, hostile, degrading, humiliating or offensive environment, is subject to criminal or other legal sanction." (Article 40). A call is made to employers, "...encouraging employers, including those in the private sector, to promote women's participation in the labour force and to adopt policies acknowledging that violence is an obstacle to women's employment." (Article 12)

⁶ Article 37 on training and information for professionals states that: "Persons with supervisory functions in the workplace, in both the public and private sectors, shall receive training on how to recognise, prevent and address sexual harassment at work, including on risk assessments concerning occupational safety and health risks, to provide support to victims affected thereby and respond in an adequate manner. Those persons and employers shall receive information about the effects of violence against women and domestic violence on work and the risk of third party violence." Article 21 address protection orders which "...prohibit the offender or suspect from entering the residence or to enter the victim's workplace or contacting the victim or their dependants in any way."

A Joint Statement submitted to the European Commission by some of the TPVH project's social partners (EPSU, CESI, ETUCE, CEMR 2021) calls for policy coherence and for the Directive to be firmly rooted in an OSH approach and aligned with ILO C190 and R206, along with measures to mitigate the effects of domestic violence in the world of work. Further issues have been raised about the centrality of social dialogue and collective bargaining, gender-responsive risk assessment and rights to paid leave and other work place supports for victims of domestic violence by the ETUC (2022) and the European Economic and Social Committee (EESC 2022).

3.2 International Labour Organisation

International Labour Organisation (ILO) Convention No.190 and accompanying Recommendation No.206 are the first international instruments to address violence and harassment, including TPVH, as part of a progressive, inclusive and comprehensive approach to ending all forms of violence and harassment in the world of work.

It is inclusive of all types of work and contractual arrangements, with standards set in the wider context of occupational safety and health, gender equality, non-discrimination and fundamental rights at work, including freedom of association and collective bargaining in eliminating violence and harassment. The Preamble to the Convention recognises "...the right of everyone to a world of work free from violence and harassment, including gender-based violence and harassment".

For the purposes of the Convention, violence and harassment are defined in Article 1 as follows:

(a) the term "violence and harassment" in the world of work refers to a range of unacceptable behaviours and practices, or threats thereof, whether a single occurrence or repeated, that aim at, result in, or are likely to result in physical, psychological, sexual or economic harm, and includes gender-based violence and harassment;

(b) the term "gender-based violence and harassment" means violence and harassment directed at persons because of their sex or gender, or affecting persons of a particular sex or gender disproportionately, and includes sexual harassment.

C190 address **violence and harassment by third-parties**, such as, clients, customers, students, pupils and the public, as part of an integrated definition of all forms of violence and harassment, rather than being treated as a separate phenomenon. The Convention states that laws and obligations on employers "should take into account violence and harassment involving third parties, where applicable". It is the first time that TPVH, along with domestic violence, have been included as part of a comprehensive definition of violence and harassment in an international Treaty. This goes beyond what currently exists in the EU legal framework, which currently does not define TPVH nor set out explicit duties on employers to prevent and tackle TPVH, including domestic violence and the effects of digitalisation.

Domestic violence is a further form of workplace violence and harassment covered by C190 and R206, recognising employer's responsibilities to mitigate the effects of domestic violence in the workplace.

Domestic violence: provisions in C190 and R206

ILO Convention No. 190:

"Noting that domestic violence can affect employment, productivity and health and safety, and that governments, employers' and workers' organizations and labour market institutions can help, as part of other measures, to recognize, respond to and address the impacts of domestic violence." (Preamble)

The Convention calls on governments to "...recognize the effects of domestic violence and, so far as practicable, mitigate its impact in the world of work." (Article 10f)

ILO Recommendation No.206:

Policies for mitigating risks of domestic violence can include:

- (a) leave for victims of domestic violence;
- (b) flexible work arrangements and protection for victims of domestic violence;
- (c) temporary protection against dismissal for victims of domestic violence, as appropriate.
- (d) the inclusion of domestic violence in workplace risk assessments;
- (e) a referral system to public mitigation measures for domestic violence, where they exist; and
- (f) awareness-raising about the effects of domestic violence.

As a result, both TPVH and GBVH are an integral part of a wide-ranging definition of violence and harassment, ensuring their inclusion in all relevant obligations on governments, employers and workers. In addition, C190 is grounded in an **intersectional approach** recognising that some groups of workers face multiple and intersecting forms of discrimination and may be at greater risk on grounds of gender, ethnic origin, social class, migration or refugee status, age sexual orientation, religion or disability. Convention No. 190 sets out **obligations on governments**, who are requested to put duties on employers in consultation with workers and trade unions to prevent violence and harassment, address risks of violence and harassment, protect workers, especially women and workers in vulnerable work situations, and provide remedies for workers affected by violence and harassment. amongst others, who are disproportionately affected by GBVH.

By the end of 2022, C190 had been ratified by 23 countries, including three EU countries (Greece, Italy, Spain) and two other European countries (Albania and the UK). A Council Decision for EU-ratification is still pending, but little progress has been made on this in the European Council.⁷ According to the ITUC (2022) up to 50 countries will have ratified the Convention by 2023, many of which are EU Member States.

ILO Discrimination (Employment and Occupation) Convention No. 111 (1958). Of relevance also, is ILO Convention No. 111, which according to the ILO Committee of Experts on the Application of Conventions and Recommendations (CEACR) defines sexual harassment as a form of sex discrimination (ILO 2003). Definitions of sexual harassment include both *quid pro quo* and *hostile environment*⁸ as elements of sexual harassment. In the meantime, C111 has been ratified by 175 countries across the world.

3.3 National laws that address TPVH

National laws that address TPVH, sometimes as part of an overall approach to violence and harassment, are found in anti-discrimination, OSH, labour and criminal laws. Examples from a selection of countries are given below to illustrate different legislative provisions.

TPVH in national safety and health laws

Prevention of TPVH is largely addressed in national OSH laws, examples of which can be found in Box 1. These laws often set out clear obligations relating to prevention of violence and harassment and risk assessment, and the management of psychosocial risks in the working environment, as is the case of Belgium, Denmark, Ireland, the Netherlands, Slovenia and Sweden (ETUI 2021; ETUC 2017).

In some countries the law specifies that the social partners jointly prevent violence and harassment, including of TPVH, through workplace OSH committees. In France, for example, the occupational safety and health committee, the Comité d'hygiène, de sécurité et des conditions de travail (CHSCT) are mandated in the law to detect and prevent violence. In Italy, unions and employers participate in the tripartite national committee on OSH, which is drawing up new regulations that will mandate employers to include violence and harassment in risk assessments. Currently the joint committees (Comitati Unici di Granazia, CUGs) oblige employers to implement initiatives on the prevention of violence or harassment in the workplace, for example, through victim support and information and awareness raising.

⁷ No decision was reached by the European Council on the Proposal for a Council Decision authorising Member States to ratify, in the interest of the European Union, Convention 190 (COM/2020/24 final). See union campaigns to support ratification in ITUC (2022).

⁸ **Quid pro quo** sexual harassment involves: any physical, verbal or non-verbal conduct of a sexual nature and other conduct based on sex affecting the dignity of women and men, which is unwelcome, unreasonable, and offensive to the recipient. A worker's rejection of, or submission to, such conduct is used explicitly or implicitly as a basis for a decision which affects that their job. This can occur if sexual harassment is conditional on making an appointment or promotion, salary increase or extending a contract. **Hostile work environment** sexual harassment involves conduct leads to a degrading, intimidating, or hostile work environment, such as telling jokes of a sexual nature, isolating a woman in the workplace, making comments which interrupts with a person's ability to work, resulting in a hostile and humiliating working environment.

Criminal and labour laws covering violence and harassment, sexual harassment and TPVH

Sexual harassment and TPVH have been addressed in recent amendments to criminal and labour laws, examples of which are found in France, Italy and Spain (see Box 2 below).

Laws on domestic violence as a workplace issue

As mentioned above, **domestic violence** is recognised internationally as a form of GBVH at work, by virtue of ILO C190 and R206. There are a growing number of laws addressing this issue, led by progressive developments and the provision of paid domestic violence leave in the law in Australia, Canada and New Zealand (ILO/Pillinger 2022, forthcoming; Pillinger et al. 2022; ETUC 2017). Examples of laws addressing domestic violence can be found in Box 3.

Box 1: Examples of TPVH in national OSH laws

Belgium: violence and harassment at work, including TPVH, is addressed in regulations on wellbeing at work. Royal Decree on Prevention of Psychosocial Risks at Work (2014) makes specific reference to psychosocial risks, such as stress, burnout and interpersonal conflicts.

Ireland: TPVH is addressed under the Safety, Health and Welfare at Work Act. An updated OSH Code on the prevention and resolution of workplace bullying was published in 2021 by the Health and Safety Authority and the Workplace Relations Commission, following consultations with social partners.

Netherlands: the prevention of TPVH and obligations on employers to prevent TPVH are included in the Working Conditions Act. Employers have to introduce a policy to reduce work pressure and work-related psychosocial (WSP), including factors such as sexual harassment, aggression and violence, bullying and workload issues, and a protocol relating to undesirable behaviours, including from third parties. These issues are addressed through a mandatory Risk Assessment and Evaluation tool (RAE, in Dutch the RI&E), and a role is established for a 'person of confidence' who provides confidential advice and support in the workplace.

Denmark: the Occupational Health and Safety Act puts responsibilities on employers to prevent and respond to harassment at work, including by a third-party, and includes psychosocial risks at work that contribute to violence and harassment. The 2020 Executive Order on psychosocial working environment covers offensive behaviour, bullying and sexual harassment. TPVH is defined as "the situation where persons who are not employees or employers of the company, including citizens and customers, use violence against employees or employers" (S.25), and account has to be taken of work-related violence outside of working hours and solitary work.

Box 2: Examples of recent labour and criminal in Bulgaria Italy, France and Spain addressing TPVH

Bulgaria: the Bulgarian penal code was amended in 2013 criminalising violence and harassment against public servants, such as teachers and civil servants. The resulting Article 131(2) of penal code provides for the conviction of perpetrators of violence against public servants, where bodily injury has taken place in the course of or in relation to carrying out his/her duties or functions. This could be from a pupil, student or family member. The law was amended after a campaign by the teachers union, leading to a significant reduction in levels of TPVH.

Italy: criminal law 113/2020⁹ was adopted to address violence against health and social work professionals, covering health workers in hospital and community settings and workers providing social work services in local government and social services associations. In addition, prison sentences were extended from 4 to 16 years in cases of serious or very serious injuries to health personnel and increased the administrative penalty from €500 to €5000 for acts of violence, abuse, offence, or harassment towards health care workers. A National Observatory on the Safety of the Health and Social Work Professions has been established, with representation for national and regional government, professional bodies and unions, to carry out research and data collection to reduce risks of violence and harassment faced by health professionals, to monitor safety measures, promote training and share of best practices. A National Day of Education and Prevention of Violence against Health Personnel (March 12) was created to raise awareness about violence and harassment, with the participation of employers and unions. As reported by CGIL in the project webinar on risk assessment, held on 25 October 2021: "For the first time workers in this sector were given a safety net."

France: new obligations on French employers came into force on 1 January 2021 on provision of information in the workplace in making civil and criminal litigation claims on sexual harassment and sexist behaviour, and the contact details of the competent authorities, such as the labour inspector or occupational health doctor. As part of the law on bargaining, specific clauses have been negotiated in Collective Bargaining Agreements (CBAs) and action plans on professional equality, including TPVH, with companies with over 250 employees. In smaller companies, the employer must designate a named equality or human resources person who is responsible for informing and supporting employees. In the civil service, for example, compulsory measures are included in professional equality action plans, with obligations for employers to establish a system for reporting, dealing with and monitoring GBVH.

2016 the French government amended the 1983 civil service law to introduce a duty on employers to provide for "functional protection" of workers, through comprehensive protection, legal support, psychological and practical support for workers from TPVH. It also

⁹ <https://www.gazzettaufficiale.it/eli/id/2020/09/09/20G00131/sg>

allows a public authority to become a civil party in judicial proceedings against a perpetrator. Functional protection was supplemented by a decree in March 2018 which made prior mediation compulsory (Médiation Préalable Obligatoire) in all litigation concerning the local and regional civil service.

Spain: requires that employers introduce policies to end violence and harassment, including through workplace protocols on harassment and sexual harassment. Protocols on sexual harassment and harassment, and provisions on domestic violence as a workplace issue, have been agreed in company equality plans. Separate Protocols exist on TPVH as an OSH issue, resulting in a separation of internal and external violence and harassment. The law mandates the social partners to agree Equality Plans, including provisions on gender-based violence, in companies with over 50 employees, which are provided for under Organic law 3/2007, of 22 March 2007, amended in 2021 to be applicable for companies with over 50 employees.

Box 3: Laws on domestic violence as a workplace issue

Italy: the Jobs Act (2016) provides for a protection programme for victims of domestic violence and paid domestic violence leave for up to 3 months, based on the same principles as maternity leave. Workers can change from full-time to part-time work or take the leave on a flexible basis. Entitlements have to be negotiated in collective agreements.

Spain: Organic Law 1/2004 on protection against domestic violence provides for domestic violence leave and other workplace supports, and CBAs have extended these provisions, including paid leave and financial support, in mandatory company Equality Plans for companies with over 50 employees. Victims of domestic violence also have the right to support and protection at the workplace and rights of public sector workers are established under Article 82 of Law 7/2007 of 12 April, providing for the Basic Statute of the Public Employee.

Ireland: the Work Life Balance and Miscellaneous Provisions Bill 2022 provides 5 days paid domestic violence leave, protection from unfair dismissal and support for victims of domestic violence in the workplace. The Bill followed a campaign by trade unions to ensure the law is fully compliant with Ireland's forthcoming ratification of C190. The Bill is due to be enacted into law in 2022. Leave can be taken to access medical or other support services, counselling, home relocation and legal assistance. The law due to be enacted in 2022 will be reviewed in two years to determine if paid domestic leave can be extended to 10 days.

UK: no provisions exist in the law on workplace supports on domestic violence, however, the Domestic Abuse Act was amended in 2021 to include the introduction of workplace protection orders, following a successful campaign from the public service union, UNISON.

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part
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job

Section 4: Actions implemented by the social partners

4.1 Introduction

This section discusses actions implemented by the social partners to prevent and address the TPVH. **This section summarises over 40 examples of joint union-employer initiatives ranging from workplaces policies, collective agreements and awareness raising, and several specific union and or employer initiatives that address the prevention and prohibition of TPVH.** These examples have helped in identifying good practices and new approaches to addressing TPVH.

On the basis of these examples, along with the project's research findings, discussions amongst the social partners and a better understanding of the triggers, causes and impacts of TPVH, some key issues that were discussed during the project relate to:

- The importance of changing workplace culture so that TPVH is not seen as being “part of the job” but a critically important form of workplace violence and harassment, impacting on both the quality of services provided and the quality of working life of the workers providing those services.
- The importance of senior and managerial awareness, competences and commitment in preventing TPVH, handling and tackling complaints seriously, and providing support for workers affected by TPVH.
- Instilling a culture of prevention through risk assessment, including taking into account psychosocial risks that occur because of the organisation of work, staffing levels, inadequate mechanisms to address TPVH and resource constraints. This means bringing prevention of TPVH to the centre of sectoral and workplace policies related to OSH, anti-discrimination and gender equality.
- TPVH is variously linked to the promotion of a positive working environment where issues of the quality of services and risks of TPVH are taken seriously, and where recognition is given to the tackling root causes and triggers of TPVH, linked to decent working conditions, ensuring adequate staffing levels and resources to provide good quality services. In this regard, duties on and incentives for employers were frequently highlighted by project partners as being critical to preventing TPVH.
- Recognition and better understanding of the risks of TPVH related to discrimination, including multiple and intersecting forms of discrimination, and the role of gendered power inequalities. On the one hand, greater risks arise because women predominantly work in sectors where they are regularly in contact with customers, clients etc., while on the other hand, added vulnerabilities exist because of gender inequalities in the labour market and gendered power inequalities.

A further factor is the responsibility of employers to prevent TPVH. An interesting development is the recognition of institutional causal factors, and particularly institutional violence and harassment. In this context the role and responsibility of institutions such as police, justice systems and employers/workplaces in preventing TPVH is paramount. Although a relatively new issue, this understanding has the potential to invoke responsibilities on organisations to address the structural causes of TPVH (EESC 2022). In France, for example, the failure to recognise burnout as an occupational disease and a judgment of 20 December 2019 against France Télécom, recognised the criminal responsibility of France Télécom for a general company policy to address “institutional moral harassment” (Lerouge 2021). This is a significant departure from former legal approaches to moral harassment that had been linked to interpersonal relationships and/or management methods. The judgement is important because of the legal responsibility it puts employers to end institutional violence and harassment. Closely linked to this is the importance of measures to tackle institutional sexism and related gender-based discrimination which is deeply embedded in workplace practices and cultural norms, leading to a power inequalities that restrict women’s access to economic, social and political power. Addressing institutional sexism, including multiple forms of discrimination, in laws, policies, norms and culture is essential in building a culture of gender equality and ending GBVH.

Many of the examples show that there is a general trend towards policies and agreements combining internal and external violence and harassment, which is the approach recommended in ILO C190 and R206. This allows for integrated systems that address the interconnections between different forms of violence and harassment, while also drawing out the specificities related to TPVH and domestic violence. Several of the recent agreements on GBVH in France and Italy, for example, take this approach, addressing internal and external harassment, sexual harassment and domestic violence in one agreement (see below).

Actions implemented by the social partners are explored under the following headings that are relevant to the updating of the Multi-Sectoral Guidelines:

- Gender-based violence and harassment
- OSH, prevention and risk assessment
- Security measures and threat management
- Digitalisation
- Remedies, protection and compensation

4.2 Gender-based third-party violence and harassment

Preventing and addressing the consequence of TPVH requires the adoption of a gender-responsive approach, particularly in feminised sectors such as health and education where women are disproportionately affected by TPVH. This means taking into account the persistence of gender power inequalities and institutional sexism in the workplace, which has the effect of

normalising sexual harassment from third-parties and low reporting. As a result, government authorities, employers, public service providers have an important role to play in helping to shift the responsibility from an individual to that of an institution or organisation in ending sexual harassment in the context of TPVH.

Equally important is recognition of multiple forms of discrimination and the intersection of different grounds of discrimination, such as gender, race, social class or disability. Black and minority ethnic women may experience harassment because they are women, but also because of their race or ethnicity and/or migrant status, and consequently may face greater vulnerabilities in the workplace, leading to racialised and sexualised forms of violence and harassment (ILO & UN Women 2019; Pillinger et al. 2022; EIGE 2020 & 2021). Risks of religious discrimination in the workplace are also relevant to understanding heightened experiences of TPVH amongst some groups of workers (Eurofound 2017).

During the pandemic there was an unprecedented increase in GBVH both reinforcing and widening structural gender inequalities and unequal power relations (ILO 2020; European Commission 2020a; Pillinger et al. 2022). In the light of growing levels of TPVH in user-facing services, social partners recognise the importance of social dialogue in managing change and addressing the consequences of the pandemic on women workers. In this respect the social partners in local and regional government (EPSU & CEMR) signed a Joint Statement on COVID-19 on 23 June 2020, recognising the need for gender-sensitive policy responses to the pandemic in areas such as work organisation, working-life balance and teleworking. Eleven examples of measures taken by the social partners to address GBVH can be found in Box 4.

Box 4: Good practice examples: Gender-based violence and harassment

Austria Transport

The Austrian trade union, VIDA, has a long-standing strategy and priority to address violence and harassment in the world of work, particularly GBVH. Actions include a trade union campaign¹⁰ for the ratification of C190; union education and training on GBVH; and lobbying for stronger legislation with penalties against perpetrators of assaults on staff in public transport (2017) and in the health sector (2020). Sector-specific actions in the railway sector, public transport and in health, social services and the social sector include protection and security of women and LGBTI workers.

Bulgaria Transport

The Bulgarian transport union FTTUB has negotiated a suite of CBAs containing provisions on victim support and compensation in the municipal urban transport sector in the capital and other large cities. Agreements have also been signed with many companies in different transport sectors, including the 2014 sectoral

¹⁰ www.tatortarbeitsplatz.at

agreement in urban transport which contains a chapter on violence at work and gender equality, along with measures to manage psychosocial risks, at work as part of a zero tolerance approach to all forms of violence at work. The employer has to implement procedures on violence and harassment at work, including an immediate internal investigation, disciplinary measures, victim support and provision of mental health support, and payment of compensation for victims, and measures to prevent all forms of violence and harassment at work. Provisions on protection and support for victims of TPVH are now included in most of the agreements in the transport sector. In order to get recognition of the problem, the union carried out surveys, campaigns, information sessions and roundtables and in order to raise awareness about the problem and to break the silence around violence against women.

**Czech
Republic
Health**

A Handbook for the Prevention of Sexual Harassment in Public Administration¹¹ gives guidance and tools to help public authorities, civil service and local authorities and other public sector employers, to prevent sexual harassment in the workplace and when it occurs to address it sensitively and effectively.

**Denmark
Cross-sectoral**

On 4 March 2022, the Danish Trade Union Confederation (FH), the Confederation of Danish Employers and the Minister for Gender Equality concluded a groundbreaking national Tripartite Agreement on Initiatives to End Sexual Harassment in the Workplace, addressing both internal and external forms of sexual harassment, with measures that will be implemented in the law (FH et al. 2022). The agreement marks an important step forward in terms of better protection, prevention and a culture change in the workplace. There are a comprehensive range of binding measures and strengthened obligations on employers and employees, including higher penalties for employers. Along with the Danish Working Environment Authority's APV (risk assessment) checklists, the five industry committees¹² on the Working Environment (BFAs) are encouraged to increase their focus on sexual harassment and include in risk assessment process. In addition, the Danish Working Environment Authority must prepare annual statements about the number of decisions and Guidelines on sexual harassment and bullying from internal and external sexual harassment.

**France
SNCF**

An agreement signed by Groupe SNCF and unions (CGT, UNSA-Ferrovie, SUD-Rail and CFTD) in 2021, builds on agreements dating back to 2006. Chapter 4 of the agreement includes new provisions on gender-based and sexual violence, including TPVH, as well as support for victims of domestic violence, prevention

¹¹ Ombudsman et al. (2019) Prevence Sexuálního Obtěžování Ve Státní Správě. Czech Republic. <https://www.mdcrcz/MDCR/media/Dokumenty/Prevence-sexualniho-obtezovani-ve-statni-sprave.pdf>

¹² Five industry committees with representatives of the social partners provide information and guidance about the working environment: welfare and public administration; construction; industry; trade, finance and office; transport, services, tourism and land to table.

with a focus on groups most at risk such as trainees, and to extend the current “barometer” on perceptions of sexism within SNCF to cover sexual violence. Within three months of the agreement coming into force Group HRD will propose a process for handling cases and a guide on handling sexual harassment and sexist behaviour. Emphasis is given to training managers and workplace sexual harassment representatives appointed in each company. In terms of security, SNCF, has made the fight against GBVH a priority in the Transportation Code (2016 - article L2251-1), which has resulted in SNCF having trained security guards and collaboration with the police department in order to prevent sexual harassment and assault against transport workers and users.

France
Public sector

The French public sector adopted the first CBA on gender equality in the workplace on 8 March 2013. In Chapter 4 there is obligation on the employer to prevent all kinds of gender-based violence at the workplace, as well as domestic violence detected at the workplace. It sets out definitions, legal obligations and sanctions, and foresees training sessions on health and security at work related to gender-based violence for all new civil servants and management hired in the public sector. It underlines the importance role of prevention, including of TPVH, in the workplace OSH committees (Comité d'hygiène, de sécurité et des conditions de travail, CHSCT) which are mandated in the law to detect and prevent violence.

Germany
Transport

Deutsche Bahn AG company agreement of January 2016 'on equal treatment and protection against (sexual) harassment and discrimination. It includes the legal obligations of the ADG (appeal procedure, sanctions), training sessions for managers and employees, external help-lines for staff, measures to empower and training female employees, including training on self defence against physical and sexual violence perpetrated by clients.

Italy
Prisons

A committee established in the Prison Administration Department in 2008 aims to address gender inequalities and GBVH, with representation from unions and the administration. Guidelines were drawn up to tackle GBVH, which were disseminated to all Italian prisons. One of the innovatory elements of the guidelines is the establishment of trusted consultants who provide confidential advice and support for workers suffering all forms of violence and harassment. Trusted consultants are being appointed in each Italian Provveditorato (the prisons located in each prison region or in several smaller regions), playing a critical role in raising awareness and implementation of the guidelines in each region.

Spain
Public administration

In the public sector, the third Gender Equality Plan in Central Public Administration, agreed in 2020, contains a pillar on gender violence, including violence from third-parties. Under the plan, the Protocol of the Public Administration contains measures to protect women public employees' who are victims of sexual harassment and domestic violence as part of a zero tolerance approach. These initiatives are rooted in the framework of specific protocols for the General State Administration

agreed in 2011 with the trade unions in the General Negotiating Committee of the General State Administration covering sexual harassment and harassment on the grounds of sex in the General State Administration (Ministerio De Política Territorial Y Administración Pública 2011a) and harassment at work in the General State Administration (Ministerio De Política Territorial Y Administración Pública 2011b). These Protocols had to be adopted, within two months, by different Departments and public bodies of the General State Administration, which includes establishing a Unit responsible for receiving and processing complaints. The Protocol has to be integrated into the Occupational Risk Prevention Management System of the General State Administration. An example of this is the separate Protocol has been drawn up for the prison service (see below).

UK
Public sector

The public service union, UNISON, issued guidance in 2020 on sexual harassment,¹³ including a model workplace policy to tackle sexual harassment, covering both internal and external violence. Although there is no legal liability on employers under the Equality Act, the guidance states that "...action to protect employees and deter potential sexual harassment by third parties is still to be expected of employers and should be considered in any workplace policy, not least to cover any health and safety responsibilities. Employees can still bring claims under existing legislation, largely based on the employer's inaction, so employers will still need to take reasonable steps to prevent sexual harassment carried out by a third party." Further guidance is given regarding the integration of sexual harassment into risk assessment and to improve reporting procedures.

ETF
Transport

The "Get me home safely" campaign in the transport sector recognises that travel to and from work is a significant risk for workers travelling late at night or during unsocial times, for example, as faced by shift workers in hospitals and urban public transport. An ETF Congress Resolution in 2017, called on the ETF and affiliated unions to actively support and promote the campaign, putting a responsibility on employers to ensure shift workers have safe travel home at night. Assaults during the pandemic increased significantly and ETF has called for more trained staff and stronger enforcement of laws against sexual assault and harassment on public transport, and to explicitly extend employers' duty of care to include safe transport home policies for all workers.

European
Transport

ETF Guidance (2020) for transport unions on violence and harassment against women, include guidance on drawing up comprehensive workplace policy and a step-by-step guide to carrying out gender-responsive risk assessment. The guidance is aimed at supporting union negotiations on violence and harassment. The ETF guidance, which was also tailored to specific challenges arising from the pandemic, drew on many years of campaigning, advocacy and negotiations by transport unions nationally, at the European level and globally.

¹³ <https://www.unison.org.uk/content/uploads/2020/02/25965-1.pdf>

CER & ETF Transport

The CER & ETF Women in Rail Agreement was signed by the European social partners, the Community of European Railway and Infrastructure Companies (CER) and the ETF on 5 November 2021 (ETF & CER 2921). The agreement recommends a range of measures to improve women's employment in the rail sector, including that measures to improve safety in the working environment, employers' responsibility to conduct health and safety risk assessments from a gender perspective. Specific measures to ensure the safety of onboard and driving staff are identified: mixed teams in night shifts or in geographical areas that are particularly risky; install reserved parking lots for women and pregnant women working night shifts; map workplaces and verify the risks regarding TPV; make a survey among women on the risks occurred; adopt measures to grant well-lit parking areas, near to the workplace; provide security training for the employees, particularly women; and take actions to raise awareness among employees and also the general public to the topic of safety of railway employees on trains and stations.

An EU project on TPVH in the rail sector collected evidence, data and examples of good practices from rail sector unions and employers, resulting in a specific joint agreement on "Promoting security and the feeling of security vis-à-vis third-party violence in the European railway sector..

Summary of key points on GBVH relevant to the updating of the Guidelines:

- Ensure the integration of a gender perspective and participation of women trade union and employer representatives in negotiations for sectoral and workplace CBAs that address violence and harassment.
- Adopt a gender-responsive approach to TPVH, ensuring the integration of gender into policies, prevention programmes and related security measures.
- Build awareness about institutional sexism and ways to address the structural causes of GBVH.
- Take account of the pervasiveness of gendered power inequalities, and build awareness about multiple and intersecting forms of discrimination.
- Develop effective gender-sensitive complaints mechanisms and build trust in these mechanisms to encourage workers to report sexual harassment perpetrated by third-parties.
- Involve women workers and women trade union representatives in the development and design of workplace policies, prevention programmes and safety measures.

- Implement gender-responsive risk assessment and mitigation measures, ensuring a gender-responsive approach to assessing psychosocial risks (see also under OSH below).
- Ensure safe spaces for women to report on and have support following incidents of gender-based TPVH.
- Negotiate and develop safe transport to and from work, taking account of risks faced by women workers travelling at night and/or following after late shifts.

4.3 Domestic violence

Domestic violence, a form of GBVH, is a further important dimension of workplace violence and harassment. Domestic violence is defined in the Council of Europe's Istanbul Convention as: "all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim." (Council of Europe, 2014, Art.3b) Domestic violence predominantly affects women, and as the European Commission highlights:

Domestic violence is a form of violence against women as it disproportionately affects women...Women are disproportionately represented as victims of both forms of violence due to the underlying patterns of coercion, power and/or control. However, anyone can be a potential victim of such violence, regardless of their sex or gender. In the case of domestic violence, in particular, it can affect any person, including men, younger or older people, children and LGBTIQ persons. (European Commission 2022, p.1)

Domestic violence results from unequal power relations in current or former intimate relationships. It can take the form of physical violence, sexual abuse and violence, psychological and emotional abuse and threats, financial/economic abuse, stalking and cyber-harassment and abuse and threats. It also involves coercive control, a systematic pattern of behaviour used to undermine a survivor, create fear through threats, humiliation and intimidation.

In the European Union (EU), 1 in 3 women have been victims of violence against women or domestic violence, and as many as 1 in 5 women have suffered domestic violence (FRA, 2014). Many survivors of domestic violence are of working age and in employment, making it an issue of safety and health at work. Employee surveys indicate that around 1 in 3 working women has experienced at least one form of domestic violence during their working lives (ILO/UN Women 2019; Pillinger/EU-OSHA 2023).

Domestic violence can have a negative impact on the working life, participation in work, career progression and health and wellbeing of survivors. A growing number of employers, often in consultation with workers and unions, have implemented policies to ensure safety and

support survivors for domestic violence, enabling them to remain in their jobs and progress in their careers.

COVID-19 led to a dramatic increase in domestic violence as many women were confined with abusers at home, cut off from their workplaces or other forms social support. Many women faced added stress in combining telework and childcare (UN Women 2020, European Commission 2021). Cases of women seeking help more than doubled in many European countries and with the closure of schools, childcare and services for elderly people, women's burden of care work also increased significantly. In addition, increased levels of female homicides in the private sphere were principally perpetrated by family members and intimate partners (UN Women 2022). This increase in domestic violence led to calls for gender-sensitive responses to the pandemic and a transformative agenda aimed at tackling the root causes of violence and harassment at work (European Commission 2020 & 2021, ILO 2019 & 2020a, ILO 2022). Some countries introduced new laws and regulations to address the gendered effects of the crisis, as was the case in Spain for mandatory Equality Plans in the public and private sectors with over fifty employees and an obligation on employers to address GBVH in negotiations with unions.

Domestic violence can have a negative impact on the working life, participation in work, career progression and health and wellbeing of survivors. The workplace impacts of domestic violence include lower productivity at work, difficulties staying in the job, risks of accidents at work, as well as risks arising from stalking and harassment, including abusive calls or emails, and in some cases physical assault and femicide in the workplace perpetrated by a partner or ex-partner (TUC 2014, ICTU, 2014, Pillinger et al. 2019, Pillinger et al. 2022, Vodafone 2021). Domestic violence can seriously disrupt women's employment and a survivor's career development, training and other opportunities, impacting on the gender pay gap.

A growing number of workplaces have implemented policies to ensure safety and support survivors for domestic violence, enabling them to remain in their jobs and progress in their careers. **Examples of measures taken by the social partners to address domestic violence as a workplace issue, including agreements providing for paid leave and workplace supports, can be found in Box 5.**

Box 5: Examples of measures taken by the social partners to address domestic violence

Austria Transport, health

VIDA has engaged in extensive awareness raising about domestic violence as part of its commitment to gender equality, for example, in railways, urban public transport, health and social sectors. During the pandemic the union engaged in further awareness raising amongst union representatives and shop stewards about domestic violence and violence enabled through the Internet. The union has worked together with women's shelters and the White Ribbon campaign. A model company agreement has been drawn up to support negotiators and union representatives in their bargaining with companies.

France Telecoms

On 22 December 2021, Orange and unions (CGT-KAPT, CFDT F3C, CFE-CGC ORANGE, CGT FAPT, FO-COM, SUD-PTT) signed the «Agreement on professional equality between women and men and the balance between private and professional life within Orange SA 2022-2024». On domestic and family violence, confidential support is provided by the company social worker, who can guide and support the employee through external procedures or towards the specialized psychological, legal, medical or emergency assistance, financial assistance, including support from associations for victims of domestic violence. Paid leave of five days, which can be divided into half days, may be granted, and emergency housing can be provided. An information brochure sets out measures taken by Orange to support employees who are victims of domestic and violence. Since 2009, employees can receive confidential telephone and face-to-face support from external clinical psychologist. In addition, the agreement implements the framework of the Grenelle against domestic violence, decree n°2020-683 of June 4, 2020 which created a new fund for victims of domestic violence.

France Transport

The agreement on professional equality signed by Groupe SNCF and unions (CGT, UNSA-Ferrovie, SUD-Rail and CFDT) in 2021, addresses support for victims of domestic violence, Victims of gender-based or sexist violence can be granted three days exceptional leave of absence to attend a court summons, meetings with a lawyer or support from a specialist association, as well as support from company social and health services.

Italy Public sector

National agreements on domestic violence in the public sector were instrumental in setting a model for agreements in other sectors, and exist by virtue of Art. 24 of Legislative Decree no. 80/2015. Leave can be taken flexibly and a worker is entitled to move to part-time work and to revert back to full-time work. These provisions, including leave for victims of violence, were included for the first time in national agreements in the public sector (2016-2018). They include National Collective Agreement for education and research (Article 18), National Collective Agreement for central government central functions Triennio (Article 36); National Collective

Agreement for local authorities (Article 34) and the National Collective Agreement in health (Article 39). Unions in Italy believe that the provisions on domestic violence on C190 and R206 will help to further strengthen bargaining on this issue, and help fulfil the union strategy to ensure that every collective agreement at every level includes clauses on violence and harassment, including on domestic violence, in line with C190.

Italy
Telecoms

The 2020 CBA between the national and territorial trade unions (SLC CGIL, FISTEL CISL and UILCOM UIL) and Vodafone Italy is an example of a new generation of CBAs that integrates domestic violence into smart working and agreed protocols on remote working. Domestic violence is included as a special case (along with workers with a disability, single parents with dependent children, parents with a child with a disability and new parents) where measures may be implemented to enable employees to work reduced hours and have additional leave. The agreement increased paid domestic violence leave from 10 days (as provided for under the Vodafone Italy policy) to 15 days to cover medical and psychological advice and counselling, and security support in reporting to the police and assistance in contacting domestic violence organisations; and help is given to change the victim's company telephone number and email.

Spain
Public admin.

On the basis of a Resolution of 25 November 2015, the Secretary of State for Public Administrations established a procedure, supplementing the Basic Statute for workers in public administration, for social assistance and mobility of female public employees who are victims of domestic violence to enable them to change their job location. Special attention is given to protecting the privacy and dignity of public employees, including their personal data, those of their family members and those of any person under their guardianship, custody or guardianship.

UK
Education

In March 2021, the teachers union, NASUWT, issued Domestic Abuse Toolkit and Policy Guidance for workplace representatives. The guidance acknowledges that domestic abuse can affect anyone, it is still predominantly women and children who suffer at the hands of male perpetrators. The guidance includes definitions of forms of domestic abuse and sets out the expectations and Guidelines that employers should follow to provide support for domestic abuse survivors. Workplace support can include staff training on the issue and for the employer, include flexible working, agreed paid leave and time-off for counselling and medical appointments, a safe space and an agreed person to provide additional support. It also includes an appendix on management guidance for informal discussions and a list of possible workplace mitigation measures.

UK
Public sector

UNISON in the UK drew up guidance and a model workplace agreement and policy on domestic violence in 2017, updated in 2022¹⁴ to take account of new ways of working since the COVID-19 pandemic and the need to address domestic violence as an OSH issue. The guidance covers training for managers and workers, named HR staff, special paid leave and the possibility of an advance in pay, temporary or permanent changes in working time and work roles and redeployment or relocation, as well as measures to create a safe working environment; access to counselling and support services in paid working time. UNISON's 2022 Conference called for better integration of workplace measures on sexual harassment and domestic violence into OSH. In 2021, UNISON led a successful cross-party campaign to ensure that changes were made to the Domestic Abuse Bill to extend abuse protection orders to a victim's workplace and to ensure that victims stay safe at work. UNISON's model policy for employers on domestic abuse is also recommended to employers in the statutory guidance framework which supports the Domestic Abuse Act 2021.

During the pandemic unions and employers across Europe jointly agreed additional measures to address the problem and crisis measures were put in place in many countries, including crisis services available to victims of domestic violence. In the case of Spain the Ministry of Equality's contingency plan declared assistance to victims of gender-based violence an essential service, in accordance with Art. 2a of Law 8/2011, of 28 April. In France, the CGT (2020) was amongst unions calling for measures in the law to strengthen bargaining to protect victims of domestic working hours or posts; access to medical, social and psychological care of victims, and for the mandatory company Single Risk Assessment Document to address sexist and sexual violence and domestic violence. Companies in the French "OneInThreeWomen" company network pooled resources to provide resources for domestic violence services and nation-wide publicity about the services.

Summary of key points on domestic violence as a workplace issue relevant to the updating of the Guidelines:

- Paid domestic violence leave ranging from 3-5 days paid leave in France, 5-20 days and in some cases indefinite leave in Spain, and three months paid leave in Italy.
- Workplace supports such as temporarily taking flexible work, the reorganisation of and reduction in work tasks, and support to change work location in order to safely continue to work.

¹⁴ https://www.unison.org.uk/content/uploads/2022/11/27064_domestic_violence_v3.pdf

- Financial and housing support for victims of economic and domestic abuse.
- Training of workplace managers and union representatives in providing confidential support and information in the workplace.
- Inclusion of domestic violence in risk assessments, including dedicated risk assessments and safety planning in partnership with the victim/survivor.
- Specific and additional guidance and measures on how to communicate with and support survivors during remote working, teleworking and hybrid working.
- Referrals to specialist domestic violence counselling, legal and accommodation services, including partnerships with domestic violence organisations to support policy development and training.
- Holding perpetrators accountable, including effective ways to communicate with perpetrators, sanctions when workplace resources are used to perpetuate abuse, security measures for victims when the perpetrator works in the same workplace, and the provision of information about external counselling and perpetrator treatment programmes.

4.4 Digitalisation and risks of cyber violence and harassment

Digitalisation and new technologies have created a dramatically changed world of work, new ways of working through remote and digital labour platforms enabled through mobile devices, decentralised information networks and big data analytics. Large number of workers today are based in remote non-office based digitalised and platform work. In these work settings there may be greater risks of cyber violence, including cyber stalking, trolling, cyber harassment and bullying, hate speech online and image-based sexual abuse / non-consensual pornography (European Parliament 2018 and 2021).

Despite many of the opportunities derived from digitalisation, there are significant risks, including psychosocial and physical risks that lead to violence and harassment (De Stefano et al. 2020; ILO 2018a, 2018b; ILO 2020a, 2020b; ETUI IPWS 2022).

However, there is limited data on cyber violence and harassment in the workplace. In one survey covering 10 countries, 9% of respondents had experienced intimidating on-line behaviour from a colleague (Loh and Snyman 2020). National studies reveal incidents of cyber violence affecting 14% - 20% of university employees (UK), 22% of teachers (Czech Republic), 22% of journalists (Sweden), and 72% of public servants (Australia); with data from these countries showing that women are disproportionately affected (De Stefano et al. 2020). According to a global study by the UN Generation Equality Action Coalition on Technology and Innovation (2021), 38% of women reported personal experiences with online violence, resulting in a call for policies and solutions against tech-facilitated gender-based violence and discrimination.

Cyber violence, including gender-based cyber violence and digital sexual abuse, are a worrying threat, impacting on workers' career prospects and capacity to continue working. Generally action taken to address the problem has been inadequate (Malan et al. 2020; Capuano 2020). In addition, ILO C190 and R206 put an important policy lens on and obligations for governments to address violence and harassment enabled through digitalisation and new technologies, including in workplace policies and risk assessment. In addition to labour laws and OSH regulations, general data protection laws, along with companies' internal policies and collective bargaining, are important tools to reduce risks of cyber violence and harassment (De Stefano et al. 2020). In some countries laws have require host providers to delete harassing messages that have been posted by third-parties, as is the case for example under the German Network Enforcement Act (NetzDG) (2017) (ILO 2021a). In addition, cybersecurity measures have become critically important, which include the development of European cybersecurity protections (ENISA 2020).

Legislative and non-legislative actions are needed to address gender-based cyber violence (European Parliament 2021). Joint social partner initiatives are emerging to address the heightened health and safety risks of digitalisation and cyber-violence and harassment, including digital abuse such as posting a photo or message online, which may be one-off, but with effects that can be long-lasting (ILO 2022, De Stefano et al. 2020; ETUI IPWS 2022). In promoting the role of social dialogue in managing the social impact of digitalisation, the social partners have called for new measures to address these risks, while the ILO calls for new measures to “respond to emerging health and safety risks associated with digitalisation, such as violence and harassment, psychosocial and ergonomic risks, and inappropriate use of data and surveillance systems, guided by international labour standards.” (ILO 2022: 3)

Related to digitalisation are agreements on remote/teleworking which have included clauses on violence and harassment, for example, addressed in the framework of OSH and wellbeing at work, psychosocial risks and inclusion of workers who fall into vulnerable groups. Some examples specifically refer to domestic violence, as is the case with the agreement on wellbeing at work between Italian unions and Vodafone Italy, referred to above. Guidance and position papers on telework proliferated during the pandemic and many of these documents addressed increasing risks for workers of online violence and harassment and domestic violence (ILO 2021, 2020a & 2020b, TUC (UK) 2019 & 2020, CCOO (Spain) 2021). Negotiations for CBAs have address ways to protect teleworkers, and proposals for legal frameworks on the right to request remote working, as is the case in Ireland in 2022. A good example is the law introduced in Spain (Royal Decree of 28/2020) with provisions addressing remote work and teleworking and the design and implementation of measures against sexual harassment, harassment on grounds of sex, harassment for discriminatory reasons and harassment at work (Article 4). In this context, victims of GBVH are entitled to protection, social assistance, changes to working time and working hours, and to have the right to request office or remote based working (Article 8). **Examples of social partner responses to cyber violence and harassment, including teleworking, can be found in Box 6.**

Box 6: Examples of good practice on digitalisation

European Cross-sectoral A cross-sectoral **European social partner framework agreement on Digitalisation** (ETUC, Business Europe, SME United and CEEP) agreed in 2020, includes a pillar on respect, human dignity and surveillance. As well as recognising the importance of the effective integration of digital technologies at the workplace, the agreement provides a framework for employers and unions to introduce digital transformation strategies in partnership in a human oriented approach at national, sectoral, company and workplace levels. This also covers measures to ensure safety such as when connecting and disconnecting and respect of working time rules and appropriate measures to ensure compliance. Specifically the agreement refers to relations with clients and other third parties and takes into account the “quality of the relations (collaboration, integration, contact moments and possibilities, communication, work atmosphere), the management style, the occurrence of violence or harassment, conflict management, support procedures and mechanisms.” The ETUC has made digitalisation and cyber-harassment a priority area for action under the ETUC work programme (2022-2024).

European Education The launch of a sectoral social dialogue project on digitalisation in education, adopted on 15 December 2021, included a **joint statement by ETUCE and EFEE on TPVH and digitalisation**. Paragraph 7 sets out the aim to: «Support education institutions, school leaders, teachers and other education personnel in addressing the health and safety issues stemming from digital education (e.g. work-related stress, screen fatigue, cyber harassment, social exclusion, data privacy, increasing workload, internet addiction, and right to disconnect)...and enhance social partner cooperation to embed the digitalisation dimension in the assessment tools (e.g. OiRA), while promoting a continuous monitoring of their efficacy.» It highlights the importance of risk assessment tools that take account of rapidly changing digital technologies. In addition, the right to disconnect for teachers is increasingly important in the light of 24-hour contact between students and teachers.

European Telecoms European social partners in the telecoms sector addressed the consequences of COVID-19 in the telecoms sector in a Joint Statement of UNI-Europa and employers in the ICTS and the Telecom Industry (ETNO and GSMA), “Attacks Against Telecom Employees.” It was issued as a response to the escalation of misinformation related to 5G and mobile technology across social media platforms, including an increase in harassment linked to false claims that telecom antennas are dangerous for health and that 5G is linked to the spread of coronavirus. The statement makes it clear that every worker has the right to a safe working environment and calls on the EU and governments to protect the safety of telecom workers across Europe. In 2022, UNI-Europa and ETNO began a programme of exchanges in support of the ratification and implementation of C190 and in promoting the right of everyone to a world of work free from violence and harassment, including TPVH. A Joint

agreement on prevention of violence and harassment, including GBVH will be issued at the end of 2022.

**European
Central
government**

In the government sector, a binding sectoral social dialogue Framework Agreement on Digitalisation was agreed in 2022 by the Social Dialogue Committee for Central Government Administrations made up of the Trade Unions' National and European Administration Delegation (TUNED) for the trade unions and the European Public Administration Employers (EUPAE) for the employers.¹⁵ Cyber harassment and domestic violence are identified as risks associated with digitalisation in the world of work and the increase in telework across the state sector during the Covid-19 pandemic. The agreement calls for measures on the prevention and consequences of domestic violence. The agreement reaffirms the duty of employers to provide a safe working environment, and that the social partners address prevention, risk assessment and psychosocial risks such as inadequate staffing levels to provide safe services. It also reaffirms the duty of the employers to conduct health risk assessments on a regular basis in consultation with trade unions, taking into account staffing levels and risks of harassment and violence amongst. If the European Commission agrees to a legislative implementation, it will provide some 8 million workers and civil servants with stronger protections on telework, the right to disconnect, training, health and safety, personal data, outsourcing and human-in command artificial intelligence.

Teleworking

**Spain
Various**

Guidance on teleworking has been produced by the CCOO Industria confederation, under the campaign #NoTodoTeletrabajoVale (#NotAllTeleworkIsOK).¹⁶ The Negotiators' Guide takes into account the new Law on Teleworking¹⁷ which puts the responsibility on employers to assess workplace risks and take prevention measures, including addressing psychosocial risks. The guide stresses the importance of companies taking into account the particularities of remote working, especially teleworking, in the design and implementation of measures against sexual harassment, gender-based harassment, discriminatory harassment and harassment at work.

¹⁵ <https://www.epsu.org/article/eu-social-partners-adopt-agreement-digitalisation-central-and-federal-government>

¹⁶ Teletrabajo, Guía para su negociación e implementación tras la aprobación de la ley del teletrabajo, #NoTodoTeletrabajoVale, CCOO Industria, Spain, 2020.

¹⁷ Spain Royal Decree - Real Decreto-ley 28/2020, (September 2020)

UK
Various

In the UK UNITE has drawn up a template for a framework agreement on homeworking.¹⁸ This states that “The parties agree that all employers must ensure the health, safety and welfare of all their workers, including those based at home. Furthermore, there are specific risks associated with homeworking that must be taken into consideration. In amongst other areas, the model policy states that the employer agrees that it will make every reasonable effort to ensure that homeworkers: “Are protected from psychosocial hazards connected to home working; such as increased potential for occupational stress and domestic violence”.

Summary of key points concerning digitalisation relevant to the updating of the Guidelines:

The following are key points of learning for sectoral specific as well as cross-sectoral actions and agreements at the national level, including in the updating of the Guidelines:

- Social dialogue, including collective bargaining to prevent and address cyber harassment.
- The inclusion of protections and revisions in both labour law and criminal law.
- Safety and health protections emanating from work with a digital content, ensure risks of cyber violence and harassment in risk assessments and risk mitigation measures the prevent their occurrence or reoccurrence.
- Gender-responsive responses to address digital sexual harassment from third-parties or digital domestic abuse perpetrated by current and ex-intimate partners.
- Confidential data, including records held of employees and ensure that workers are aware of their rights in relation to data protection.
- Support for victims of cyber-violence and harassment, including assisting victims on removal of offensive online materials, photos and harassing messages.
- Jointly agreed measures to reduce stress and psychosocial risks, including those related to monitoring and surveillance of workers' performance and the 'right to disconnect'.
- Telework and hybrid models of teleworking are voluntary, and that there are measures in place to assess and address psychosocial risks leading to violence and harassment from third-parties when carrying out telework.

¹⁸ <https://www.unitetheunion.org/media/3369/wvp-template-homeworking-agreement.pdf>

4.5 OSH, prevention and risk assessment

The role of OSH in preventing TPVH has received greater international attention in policy discourses, including featuring as central provision in ILO Convention No. 190 and Recommendation No. 206, adding further weight to the role that social partners can play in preventing TPVH. Article 12 of C190 specifies that violence and harassment can be prevented by “extending or adapting existing occupational safety and health measures to cover violence and harassment and developing specific measures where necessary.” In assessing risks, R206 recommends that the workplace risk assessment take into account factors that increase the likelihood of violence and harassment, including psychosocial hazards and risks, giving attention to hazards and risks that:

- arise from working conditions and arrangements, work organization and human resource management, as appropriate;
- involve third parties such as clients, customers, service providers, users, patients and members of the public; and
- arise from discrimination, abuse of power relations, and gender, cultural and social norms that support violence and harassment.

Furthermore, the 2022 International Labour Conference (ILC) designated OSH a fundamental right at work. At the EU level, in May 2022, the EU Advisory Committee on Safety and Health at Work (ACSH) reached an agreement on the need to recognise COVID-19 as an occupational disease in health and social care and in sectors where there is an outbreak in activities with proven risk of infection. In an OSH context, it is a major breakthrough for COVID-19 to be designated an OSH risk.

There are a range of individual, social and organizational factors that contribute to risks of TPVH. In addition, psychosocial risks relating to work design and the management of work, and its social and organisational contexts (EU-OSHA 2010, Clark et al. 2017) are of particular relevance to TPVH. Harassment is most likely to occur in stressful working environments, where workers are exposed to high levels of interpersonal conflict, a toxic working environment and noxious leadership (Hauge, Skogstad, and Einarsen 2007, ILO 2020d, EU-OSHA 2022). Heightened risks exist when working with people in distress, working in resource-constrained settings such as inadequately equipped facilities or insufficient staffing leading to long waits and frustration, unsocial working hours, working alone or in relative isolation or in remote locations, or in jobs where there is a lack of control over the pace and type of work carried out (ILO 2016, EU-OSHA 2010). Power inequalities are also an important factor. Guidance drawn up by the UK Equality and Human Rights Commission (2020) calls on employers to reflect on power imbalances and recommends introducing a sexual harassment risk assessment into existing OSH risk management frameworks, taking into account risks such as job insecurity and lone working.

According to the 2015 European Working Conditions Survey (Eurofound 2015) when workers in health care are exposed to psychosocial risks such as adverse social behaviour workers, they are much more likely to hide their feelings than workers in other sectors. In the human

health and social work sector, psychosocial risks, including adverse social behaviour, time pressures, job insecurity and TPVH, are high (EU-OSHA 2022a & 2022b). The health and social work sector, as one of the sectors most exposed to a wide range of OSH-related risks during the COVID-19 pandemic, led EU-OSHA (2022a) to recommend measures to address staffing shortages, improve pay and conditions of employment, and to implement better systems to protect the workforce from violence and harassment. A shortage of health care professionals, such as doctors, nurses and health care assistants, reported in most EU Member States, has increased levels of work pressure and stress, which add to risks of violence and harassment (European Commission 2020; EPSU 2022).

As mentioned in Section 2, although there is no obligation under the OSH Framework Directive (Directive 89/391/EEC) to address psychosocial risks, including risks associated with TPVH, some countries already address psychosocial risks linked to violence and harassment in their national laws. The absence of an EU OSH framework for psychosocial risks has led the ETUC, amongst other organisations, to call for a new Directive addressing stress and psychosocial risks at work (ETUC 2018, 2021; Yarmolyuk-Kröck 2022). In the context of violence and harassment it will be important to address the risk factors in the psychosocial work environment (Cefaliello 2021) such as staffing levels and excessive workloads, which are relevant prevention of TPVH. In countries in central and eastern Europe, where there is low awareness of psychosocial risks, these risks remain high because of long working hours, low pay, job insecurity, low job satisfaction, high work intensity and work pressure, unhealthy working conditions, discrimination and a gender wage gap, and poor work-life balance (Yarmolyuk-Kröck 2022).

Along with the added risks of TPVH during the COVID-19 pandemic, new and emerging OSH risks are caused by new work processes, new technologies and social or organisational change. These risks have led to a greater incidence of mental health problems, with more workers reporting problems at work associated with depression, concentration and sleep disorders and job burnout (Eurofound 2021, EU-EU-OSHA 2021 & 2022a). New issues also need to be factored in risk assessment, for example, in preventing online abuse and trolling, such as online harassment of healthcare staff by groups opposing vaccination, which result in additional stress for health care staff. In addition, in the health sector heavy workloads, staffing shortages, burnout and TPVH, has led many health workers to leave or consider leaving their jobs (Lancet 2022, UNISON 2021). The urgency of this is reflected in a Joint Statement of international health and medical NGOs, including global union for the public services, Public Services International (PSI), issued during the WHO Regional Committee for Europe in 2020, calling on governments to:

“...provide all healthcare staff and healthcare students with a safe working environment and adequate mechanisms to prevent any type of violence so as to decrease the risk of exhaustion and burnout for all healthcare professionals, and to deploy all necessary means to protect the physical and psychological integrity of our colleagues during this pandemic and beyond. The health sector should be, and must remain, a safe and attractive place to work.” (WHO Regional Committee for Europe, 2022:1)

OSH measures and risk assessment has become an important tool for the prevention of violence and harassment, including prevention of TPVH and the implementation of a gender-responsive

approach to OSH. Good practices on risk assessment suggest that risks of TPVH needs to be assessed in a tailored approach, with actions to mitigate the risks and their ongoing monitoring and review of risks, in consultation with workers and their representatives (EU-OSHA 2022a, ETUI 2021).

In some cases, prevention initiatives are a response to emergency measures following serious incidents of TPVH. For example, following a violent attack on a prison officer in Sweden, new measures were introduced to prevent such violence occurring again, for example, through better security measures and staff choosing whether they undertook rehabilitation or surveillance roles. While these are progressive developments, unions continue to report that job insecurity and inadequate staffing levels have made it difficult to engage in wider prevention (EPSU/Vereycken & Ramioul 2019).

Box 7 provides an indicative list of preventative measures that can be put in place to tackle risks, including psychosocial risk factors that are linked to the organisation, working conditions and the customer/client profile. It shows that there are a range of prevention measures that can be implement as part of risk assessment, covering organisation risks, risks resulting from working conditions, and risk related to specific client groups.

Box 7: Illustrative measures of prevention measures to address risks, including psychosocial risk factors leading to TPVH

1) Prevention of organisational risks

- A workplace policy on TPVH, including risk assessment and prevention plans.
- Effective complaints mechanisms, incidents logs and monitoring complaints.
- Mechanisms are in place to identify workers most at risk.
- Staff training and guidance on de-escalation and in recognising and managing aggressive behaviour from patients, family members visitors etc.
- Sufficient numbers of trained security personnel and security alert systems.
- Reduced waiting times for customer service, in emergency departments or clinics, including preventing overcrowding in waiting areas.
- A culture of reporting cases to line managers and reporting to police.

- Attention to workplace environmental design so that an employees' vision is not blocked or escape routes from a potentially violent incident.
- Promotion of an inclusive culture and working environment, worker participation, good interpersonal relationships, leadership and management.
- Central role for social dialogue / consultations with workers.

2) Prevention of risks from working conditions

- Implementation of wellbeing initiatives, workforce planning and adequate staffing levels.
- Staffing are linked to quality of the services provided and to ensure sufficient staff at all times, including busy times such as visiting hours (hospitals), rush hour (urban transport) or during night or early shifts.
- No worker faces risks working in isolation e.g. effective systems for working in pairs or provision of security backup when working isolation.
- Workers have opportunities to participate in decisions over their job content, workload and work pace, as well as initiatives that can prevent TPVH.
- Prevention of a culture of presenteeism and long working hours; giving workers greater choices over their working time.
- Address the greater vulnerabilities faced by women, including stalking, when working alone or travelling after work, including provision of safe transport.

3) Prevention of customer/client related risks

- Support for workers, including proper staffing levels, to ensure effective services when working with patients and family members with complex mental health problems, or who have a history of violence, abuse or addiction.
- Commitment to creating safe spaces to report TPVH and ending a culture where there is the normalisation of aggressive and abusive behaviour.
- Customers, clients, patients etc. are aware that there is a zero-tolerance to violence and harassment, sending messages about dignity and appropriate behaviour in the workplace and through the media. Source: various and collected from good practices in the research

Source: various and collected from good practices in the research

A greater emphasis is given to addressing TPVH in OSH committees and policies on prevention and psychosocial risks. For example, in Spain the Protocols on sexual harassment and harassment in the General State Administration have to be integrated into the Occupational Risk Prevention Management System of the General State Administration. In the prison service, a separate Protocol has been drawn on preventing assaults within an OSH framework. In some countries, such as Denmark and Ireland, resources and guidance are provided to assist the social partners at the in the municipal and state sectors in implementing programmes on prevention of TPVH. Good practices show the importance of joint approaches, worker consultations, gender-responsive approaches, as well as prevention through risk assessment and security measures tailored to different workplaces. In relation to risk assessment there are a variety of programmes and checklists, risk assessment tools, and new methods to ensure tailored responses, such as through threat management approach. **Box 8 gives a summary of examples of initiatives and agreements to address TPVH in OSH.**

Box 8: Examples of good practice: national initiatives and agreements to address TPVH in OSH

Belgium Prisons

In the prison sector in Belgium, the Federal Department of Justice has developed two new initiatives on TPVH in order to support the implementation of the existing Conflict and Aggression policy, which originated in an initiative 20 years ago. In 2021, the minister decided to introduce a new initiative consists of two pillars; one initiative is focused on personnel and the institution itself, the other initiative is focused on prisoners. An institutional analysis of every prison involves a questionnaire and focus groups with prison personnel. The aim is to develop specific innovative actions and measures that are tailored to different prison settings, along with general actions for all prisons. Building on the current policy and guidance and training provided to prison personnel on handling conflict and aggression, the project aims to evolve towards a change in prison culture at all levels, including management, and to stimulate a positive prison climate. Initial findings suggest that staff underline the problem of staffing shortages and prison overcrowding, and the project aims to isolate the issues that the ministry can have some control over. One element is to look at what is expected of personnel. A new way of operating is to have two types of prison officer: the first is assigned to communicate and positive dialogue to build trust, a second type of prison officer takes the role to intervene and address problems. A further issue is to invest in and ensure tools to enable build relationships trust and restore relationships, for example, through mediation. Important issues are raised about how mediation can be used as a tool to address conflict and aggression. Although trade unions are involved in the consultations during the project, trade unions are not directly involved in the development of new policy measures. Further issues are raised about the need for much greater investment in daily activities, although unions are concerned about the implementation of measures without additional staffing measures. The project is raising important issues about the expectations from the ministry to recruit staff based on these new expectations. Pillar on prisoners, aims to include courses for prisoners on how to manage emotions, which will be piloted by the end of November in 8 prisons where pilots are running (total 35 prisons), then extend after to all prisons.

Bulgaria Health

Health care unions in Bulgaria have addressed psychosocial risks and violence and harassment at work in agreements dating back to 2013, when the first clauses on psychosocial risks and violence and stress at the workplace were included in the health sectoral collective agreement since 2013, including TPVH. Despite some progress in implementing policies and procedures to prevent TPVH in collective bargaining, unions report that there have been higher levels of violence and harassment. A high-profile national campaign amongst unions and civil society organisations has called for the ratification of C190, including stronger laws and obligations on employers.

A sectoral CBA between the Bulgarian national health insurance fund, the Union of Civil Servants and the Federation of Health Care Unions, 14 May 2015, states that the employer shall protect the dignity and honour of the employee during the performance of their duties within the labour contract (Art. 12, para. 5). The employer shall undertake all measures provided by law – inclusive of providing legal protection against moral or physical violation against the employee during the time of performing labour duties as per the labour contract (Art. 6). During the pandemic Bulgarian Federation of Health Services successfully concluded an agreement for a CBA entitling workers to holidays and treatment in a sanatorium after illness. Unions have recommended that the renewal of the 2015 agreement should include new clauses on prevention and psychosocial risks, in response to the worsened conditions faced by health workers and rising levels of TPVH, exhaustion and burnout during the pandemic.

Denmark
Local &
regional
government

In 2015, the social partners in the municipal and regional sector (KTO & KL, 2015) concluded an agreement on the working environment, which puts a strong emphasis on the psychological working environment, one aspect of which is the prevention of TPVH. The agreement has been renewed twice since 2015. Under the agreement, in the municipal sector, the organisation representing employers in Danish municipalities (KL) and the Association of Local Government Employees' Organizations (KTO) union, established a support system named the "SPARK" (Samarbejde om Psykisk ARbejdsMiljø i Kommunerne, Cooperation on Psychological Working Environment in Municipalities) project, which is a collaboration to provide help and support to municipal workplaces to achieve a better psychological working environment, covering in amongst other areas, TPVH and working alone and in isolation. The focus is on the strengthening the capacity of local actors in municipal workplace (managers, union and work environment representatives) through joint actions and cooperation between management and locally elected union representatives. Trained consultants provide free services to municipalities and help them to identify, manage and prevent the psychological work environment problems in the workplace. Resources and guidance are made available to municipalities in six main areas: change and transition; improved cooperation between employees/managers; risk of violence and threats; content, scope and performance of work; working in shifts, and harassment, including bullying and sexual harassment.¹⁹

In the regional sector, the social partners established the "Ekspertrådgivning" (expert advice) programme,²⁰ to provide help and support to the workplaces regarding organisational and professional change, third-party violence, and

¹⁹ For further information see: <https://vpt.dk/psykisk-arbejdsmiljo/baggrunden-spark>

²⁰ For further information see: <https://www.foa.dk/forbund/temaer/a-i/gratis-hjaelp-bedre-psyk-arbmiljo/det-regionale-omraade>

workplace culture and bullying. Under the project practical expert advice, along with tools, meetings and workshops, are provided by the National Research Centre for the Working Environment, NIRAS Joblife and RUC, Roskilde University. Furthermore, prevention materials and tools about TPVH has been drawn up jointly by the unions with the employers in local and regional government.

Denmark
State sector

In the State sector, in an Agreement on Cooperation and Joint Consultation Committees in State Sector Enterprises and Institutions, agreed in 2008 and still in force in 2022, the parties (State Employer's Authority and the Confederation of Danish State Employees Organizations) added a new clause on harassment and violence: 'The Cooperation Committee shall lay down Guidelines that ensure a working environment where employees are not exposed to mobbing, (sexual) harassment or violence from colleagues, management or a third-party. The Cooperation Committee must continuously oversee that the Guidelines fulfil their purpose.' (Article 5, 10). Under the agreement the majority of workplace co-determination committees had, by 2022, prepared plans to prevent violence and harassment, including TPVH. Guidance and tools are also provided by the Danish Working Environment Authority on ending TPVH.

Denmark
Cross-sectoral

In 2019, the Danish social partners and the Labour Inspectorate drew up a 10-point plan for "A Good Psychological Working Environment: Ending Sexual Harassment". The Danish Working Environment Authority also collaborated with unions and employers' organisations in the launch of the awareness raising campaign "Hvor går grænsen?" ("Where do we draw the line?"). The second part of the campaign, "Din grænse". («Your Limit»), was launched in 2022, with the aim to motivate managers and health and safety committees to engage in dialogue on how to prevent sexual harassment in the workplace, including from third-parties, to promote a joint approach to creating a safe working environment.

Denmark
Education

The Danish Teachers Association (DLK) published a pamphlet for members on violence, threats and use of force to encourage better prevention of and reporting on the problem (DLK 2020), on the basis of the 2015 agreement on well-being and health in the workplace where the social partners agreed on guidelines for the prevention of violence. DLK's guidelines are the "foundation of good prevention because it initiates dialogue about possible risks and the measures that can be taken to avoid violence and threats in the school." The pamphlet was prepared for schools' health and safety group, employees in the districts and union representatives in the Danish Teachers' Association. It covers three themes: identification, prevention and management. An important part of this is for every school to have a policy addressing the three themes mentioned. A policy makes it visible that the workplace does not tolerate violence and threats and sends a signal that it is a shared challenge to address risk prevention and create a sense of security because everyone is clear about their role and responsibilities before, during and after an episode of violence.

France
Local &
regional
government

Statutory OSH committees play a role in prevention and workplace culture, and a consultative role on TPVH. Unions in France are looking at ways of strengthening the role of the committees to ensure that their opinions carry more weight and to ensure that employers implement their responsibilities regarding functional protection. Good practice examples presented to an EPSU & CEMR seminar “**Local Solutions Briefing for the Seminar on Third-Party Violence in France**” in tackling rising levels of TPVH in local and regional government were collected as part of a sectoral social dialogue project in local and regional government. They include a pilot including 40 French departments on Compulsory Prior Mediation, and the implementation of prevention initiatives in several small municipalities establishing clear protocols for what to do if a worker is threatened in person or over the phone. In the Occitanie regional administration a policy on TPVH sets out clear processes for protecting workers, reporting TPVH and ensuring effective responses and support for workers. Information about the process been disseminated to employees, which includes a dedicated reporting mechanism and a specially trained ‘cellule de signalement’ (reporting unit) which is responsible for addressing complaints and supporting victims (EPSU & CEMR 2022). The seminar recommended that there is a need for better understanding of the role and impact of European agreements, including the Multi-Sectoral Guidelines, and of programmes in local and regional government to prevent TPVH.

Finland
Local
government

The **risk prediction model**²¹ in development for the municipal sector, is being drawn up by the Finnish Institute for Occupational Health. The tool collects data from surveys and risk registers in order to identify causal factors that can be tackled in order to reduce TPVH. Factors to be taken into account include, in amongst other areas, work and safety culture and supervisory practices. This tool aims to support employers in implementing their statutory duty to intervene and ensure safe working conditions.

Germany
Telecoms

Deutsche Telekom AG was the first company in Europe to develop an **innovative threat management process** to prevent serious violence and threatening behaviour, based on three main elements: identify, assess and defuse. Its origins are in the project “Preventing Violence in the Workplace” (Prävention gegen Gewalt am Arbeitsplatz), which entitles each employee to have a workplace free of physical and psychological violence, and freedom from fear, along with the training of dedicated “harassment managers” who give advice, orientation and support to employees. Since 2014, the prevention of serious violence and threats against employees became a high-level priority, leading to a dedicated Physical & Personnel Security Department in Telekom Security. Two professionally trained

²¹ <https://www.ttl.fi/en/research/projects/local-government-employers-influence-workplace-bullying-and-client-violence-risk-prediction-model>

and certified²² Threat Managers handle incidents of violence, threats and stalking involving employees and or customers. It also covers domestic violence, such as safety, threats and stalking from an ex-partner in the workplace, as well as responses to the recent increase in sexual harassment threats and verbal abuse from callers to Deutsche Telekom's service centres. Responses are evidence-based and incidents are recorded and categorised. An immediate assessment of the risk ensures that serious risks are dealt with urgently. Each case is dealt with individually, providing tailored support and prevention. Individualised support is given, including assistance to create boundaries and de-escalation techniques, and support is available from the occupational health service. Where applicable, systems are in place to involve criminal lawyers and the police.

Overall, Deutsche Telekom's threat management policy aims to protect employees, promote respect and tolerance, eliminate uncertainties and misunderstandings, create fear- and violence-free workplaces and keep employee absences to a minimum, boost the company's image and ensure its success, and protect against organisational malpractice. Critical success factors include senior-level commitment, teamwork, coordination, an internal interdisciplinary network across all company departments and an external network of security and support services and experts, and regular dialogue with unions. Reports are made directly to the Board of Management for Data Privacy, Legal Affairs and Compliance (DRC). Sharing experiences and good practices with companies in Germany takes place through a Threat Management Forum.²³

Practical guidance «Dealing with precarious situations in field service» is available for field staff who work with customers in their private residences, with information about how they should react to, behave and deal with situations getting out of control. This includes accusations, abuse or threats of violence directed at the employee. But it may also involve situations where employees come across - and where under safeguarding laws they have a legal responsibility to report to the authorities - people needing urgent help because of drugs or alcohol, signs of extremism or terrorism and where domestic violence and child abuse or neglect is occurring. Support is given to employees through specifically designed processes and dedicated points of contact. There are three reporting channels covering incidents where a worker is directly affected, indirectly affected or where there are signs of extremism/terrorism. All incidents are logged in the incident management system under the Competency Centre Security, Data Protection and Compliance service.

²² Accreditation is through the Association of European Threat Assessment Professionals (AETAP). Deutsche Telekom was the first international Group to fulfil the strict requirements for corporate certification.

²³ <https://forum-bedrohungsmanagement.de/>

Ireland Health

The Health Services Executive (HSE) and the unions in the health sector have jointly agreed a range of initiatives on the prevention of violence and harassment at work, including TPVH. TPVH has become more serious in recent years and although data is limited, reported incidents to OSH National Incident Management System show that more than half (55%) of the incidents reports in 2020 were behavioural hazards, which include violence and harassment. The initiative dates back to the National Strategy on the Prevention and Management of Work-Related Aggression and Violence (2008), drawn up in response to increasing levels of TPVH in the Irish health service, drawn up by a Working Group involving experts and unions representing all groups of health workers (SIPTU, PNA, INO, IMO) in line with the 2005 Safety, Health and Welfare at Work Act.

On the basis of the national strategy, a policy and risk assessment tool on lone working (2007) and a detailed policy and guidance (HSE 'Policy on the Prevention and Management of Work-Related Aggression & Violence, 2018')²⁴ were drawn up. The 2018 HSE policy, which involved consultations with unions through the National Joint Council, provides detailed guidance for the HSE, managers and employees on how to manage work-related aggression and violence with a focus on prevention and risk assessment and management. Managers received guidance and training about their obligations under the policy and their roles in carrying out a risk assessment in clinical and non-clinical settings to identify work-related aggression and violence hazards, and to put in place control measures to eliminate or control the risks. In addition, managers have to ensure that employees most at risk are given training and provide support to victims, including access to support services, such as occupational health and confidential counselling services provided by the HSE's employee assistance programme. The policy includes practical resources, including an audit tool and a sample risk assessment tool. All incidents have to be reported and are managed in accordance with the HSE Incident Management Framework, which forms a part of the HSE Integrated Risk Management Policy. In addition, further guidance was produced on risk assessment for training on the prevention of work-related aggression and violence during the COVID-19 pandemic, in the form of a risk assessment prompt sheet, issued in June 2021.²⁵ Additional information has been drawn up by the National Health and Safety Authority on preventing TPVH in the health sector.

Employees are given responsibilities to attend training and report risks, concerns and incidents to their managers. In clinical settings clinical risk assessment are included in the organisation's risk management framework and this includes the

²⁴ https://assets.hse.ie/media/documents/Policy_on_the_prevention_and_management_of_work_related_aggression_and_violence_2018.pdf

²⁵ https://assets.hse.ie/media/documents/Covid_19_prevention_and_management_of_work_related_aggression_and_violence_pro_AwETDIq.pdf

assessment of risks of aggression and violence and the provision of a care plan and risk assessment on service users posing a risk of violence. This should be reviewed regularly as part of the care planning process. Non-clinical risk assessments are carried out by managers in consultation with staff and take account of work tasks, interaction of the health care work with the service user, the organisation of work and the working environment and the training and experience of health workers.

Obligations are also put on managers to ensure that on-site security staff are aware of the risks and control measures to manage aggression and violence, and service level agreements with security firms must include local aggression and violence procedures. Specific guidance is also given to managing aggressive phone calls in helping staff to understand that service users may be stressed, while finding a balance between the rights of the health worker and the rights of the service user. In the event of an abusive call, specific guidance is given, for example, with guidance on ways to manage aggression, such as keeping calm, not taking what the caller says personally and letting them have their say, if aggression persists by informing the caller that their language is offensive and you the call will be ended if it does not stop, making a note of the call and reporting incidents to immediate managers.

Ireland **Health**

The Irish Nurses and Midwives Organisation has called for new measures to address the problem of heightened levels of TPVH against health care staff, including improved security, inspection and employers' responsibilities for worker safety. In 2022, the national Health and Safety Authority (HSA) agreed to establish a new occupational health division with responsibility to address workplace violence and harassment. The INMO (2021) reports that in the last year, 90% of their members reported being mentally exhausted during or after work, and that violence and harassment and inadequate safety protections add to the burnout.

Italy **Cross-sectorial**

Including violence and harassment in OSH laws is currently being discussed in Italy by the tripartite national advisory committee on occupational safety and health, which unions believe should include an explicit obligation on employers to include violence and harassment, including TPVH, in risk assessments. Some progress has been achieved in the public sector, through under the Joint Consultative Committees (Comitati Unici di Granazia (CUGs) (under Directive No. 2 of 26/06/2019 and the Protocol of 18/11/2020),²⁶ where employers are obliged to implement all appropriate initiatives for the prevention of violence or harassment in the workplace, for example, through joint actions

²⁶ https://portalecug.gov.it/sites/default/files/attachments/2020-11/Protocollo%20di%20intesa%20Min.%20Dadone%20_Min%20Bonetti_CUG-signed.pdf

and agreements, as well as victim support and information and awareness raising. Better coordination of OSH and gender equality functions is one way to ensure this integration, for example, training for OSH safety representative has been organised jointly by CISL's women department and safety and health department and training handbooks produced by CISL address psychosocial risks and violence and harassment.

Ireland Health

In 2022 CGIL²⁷ issued practical guidance for health workers "Stop attacks on health personnel. Let us take care of those who care for us" (stop aggressioni al personale sanitario. Prendiamoci cura di chi ci cura). It sets out what a worker must do where there is a risk of aggression and behaviours that should be implemented in a situation of potential risk. This covers how to maintain a conduct that promotes de-escalation of the aggressive behaviour, and how to respond and reduce the potential for injury when there is aggressive conduct such as being grabbed by the wrist, hair or neck or if there is biting. It also gives practice guidance on what to expect of employers and include in negotiations. These range from requiring the health organisation to identify the risk factors that impact on staff safety and to commit to implementing violence prevention interventions. These include actions such as monitoring episodes of violence and of events that lead to acts of violence or threats against health workers; promoting organisational wellbeing and psychosocial health of health workers and psychological support for workers and teams affected by TPVH; address and analyse risk factors and measures to reduce these risks; and monitoring and implementation of prevention and protection measures to monitor the implementation of prevention and protection measures to guarantee safety levels in the workplace also by promoting video surveillance tools.

The guidance also addresses measures to promote the dissemination of good safety practices, including teamwork; holding training courses for healthcare personnel aimed at preventing and managing conflict situations and improving the quality of communication with users; concluding operational protocols with the police forces; setting up a dedicated register of accidents; formally reporting the incident of violence to the judicial authorities; compensating days of absence due to illness or injury of the assaulted personnel; ensuring that interventions for the promotion of safety and the prevention of violent behaviour are defined within the corporate risk management programme plan; and raising public awareness by explaining that aggression against health personnel is not the solution to citizens' health problems.

²⁷ <https://www.fpcgil.it/2022/03/12/stop-aggressioni-personale-sanitario-vademecum/>

Spain
Public admin.

Violence and harassment are included in the OSH framework governing Spanish government public administration. The Technical Commission for the Prevention of Occupational Risks covers civil servants and employees in the general state administration, including prison services (see Protocol for prison services below), and has a responsibility to draw up prevention plans and procedures to control occupational risks, including violence and harassment, with the participation of trade unions. Data is collected on complaints, which shows that between 2016 and 2019 a reduction in complaints made about TPVH. Many of these complaints come from prisons, including in 2019, 197 cases of physical violence. The reduction in complaints on TPVH can partly be explained by the reduction in direct and in-person contacts with citizens, while those that have been made have been through prior appointment.

Italy
Health and social work

CBA in Italian municipalities have addressed rising levels of TPVH, particularly against staff working with vulnerable clients, the first of which was signed in Genoa in 2020. A Memorandum of Understanding on combating TPVH, including GBVH, was signed by unions and the government on 18 November 2020, on the basis of Law 113/2020 on Provisions on safety for health and social work professions in the exercise of their functions. This has helped to strengthen negotiations in local authority social services, leading to collective agreements that set out a framework for the prevention of risks of TPV.

With research dating back to 2018, revealing that nine out of ten social workers had been victims of violence and aggression, and that few workers experiencing TPVH reported the problem as many saw it as part of the job. With only 26% reported the violence to law enforcement and only 8% to the local administration or the hospital, a worrying trend of lack of security and protection for staff. The first agreement was signed in the municipality of Genoa and this model has since been replicated across Italy. The Genoa agreement aims to address the risks of TPVH to protect the safety and health workers and covers the assessment of risks, introduction of prevention initiatives with national agencies and local crime enforcement authorities, and implementation of actions that can be taken before and after the aggression. Amongst these are concrete measures to ensure that staff do not work alone and in isolation, practical tools are given to ensure a worker can escape from a situation where there is aggression, and the design of work areas and workstations in open-plan and well-lit areas has help to avoid potential aggression. Protection measures cover online, video-based, or in-person aggression. Staff have received training on the criminal and judicial aspects of TPVH, whistleblowing, how to identify potential aggression and how to encourage a culture of reporting. Overall, this has been a successful initiative that is grounded in social dialogue between local authorities and trade unions, and it is hoped in the future will be extended to all municipalities in Italy.

Netherlands Hospitals

The Safe Healthcare initiative²⁸ is an innovative and coordinated model to address violence and harassment in the health sector, leading to collective agreements in the hospital sector and an approach that helps employers and employees to reduce aggression and violence in the workplace. It arose from a concern about rising levels of aggression from third-parties in hospital settings. The project is run by Foundation for the Labour Market in Hospitals (StAZ), which works on the basis of joint approaches amongst hospital employers' and trade unions.²⁹ Safe Healthcare has introduced standards on Safe Healthcare training,³⁰ the introduction of registers so that workers can make reports confidentially, as well as effective ways to respond to victims and perpetrators, and support and aftercare. Safe Healthcare is based on a methodology that can be customized to different hospital settings. Social dialogue between the project and unions at the national level and between employers and unions at hospital level has been critical to the success of Safe healthcare.

Safe Healthcare has worked closely with the police and public prosecution service, dating back to an initiative in one hospital in 2001 in cooperation with the North Holland North police, where tools were developed to prevent violence and aggression towards staff and address the problem that many hospital staff saw TPVH "as part of the job". Based on the success of the project a national pilot was implemented in fourteen hospitals, and by 2016 nearly all Dutch hospitals had adopted the Safe Healthcare model. The first step is to draw up agreements between the institution and the police, municipalities and the Public Prosecution Service; when someone does not comply, they receive a warning and, if necessary, an access ban. In addition, an important pillar of the Safe Healthcare is the bottom-up approach, whereby employees are involved in analysing the problems, indicating priorities, devising suitable measures and establishing rules of conduct and standards. Employee involvement has been a very positive part of the project on the basis that they can contribute their expertise to finding solutions. Other factor leading to the success of the initiative has been the engagement from and support of line managers, management and the Board of Directors, and along with resources and an internal project leader.

A regional approach has, since 2020, provided permanent follow-up and all regions will continue to meet twice a year to keep momentum, continue discussion and taking up of actions including establishing agreements with police departments. It is anticipated the consultations will be completed in all ten police regions by 2022. Activities include the organisation of workshops, Guidelines via the website

²⁸ For further information in Dutch: <https://www.staz.nl/onderwerpen/veiligezorg/>

²⁹ The StAZ includes the employers' organisation NVZ Association of Hospitals and the employees' organisations ABVAKABO FNV, CNV Publieke Zaak, FBZ, NU'91 and De Unie Zorg en Welzijn.

³⁰ Further information can be found at Safe Healthcare's website (in Dutch), including the training handbook "Handboek Veiligezorg": <https://www.staz.nl/veiligezorg/>

and sharing good practices in areas such as dealing with medical confidentiality. A training programme, including a Safe Healthcare Training handbook, provides a step-by-step guide and tools for hospitals to take a systematic approach to reduce aggression and to create an environment where staff, patients, clients and visitors can work and stay safely. It includes a model for agreements with, among others, the police and the Public Prosecution Service, along with rules of conduct setting out behaviours that are unacceptable and what can happen if a patient, client or visitor breaks the rules. A Safe Healthcare handbook (summary available in English) covers steps to prevent aggression, what someone can do when faced with aggression, after and aggressive incident, and best practices.

Netherlands
Local
government

The 2010 agreement of the Association of Netherlands Municipalities (VNG) and municipal trade unions contained a new section on policies to reduce harassment and violence, with a focus on prevention and risk assessment, the appointment in municipalities of a harassment and violence coordinator, 'persons of confidence', the adoption of best practices and procedures, and an incident reporting system.

Netherlands
Hospitals

In the hospital sector, the CBA for Hospitals 2009-2011 recommended a number of measures to prevent violence including risk inventory that gives special attention to 'tackling work pressure, aggression, physical strain and violence'. In the health sector unions have highlighted the need to do more to tackle sexual harassment by third-parties (clients and patients).

Spain
Prisons

In 2017 a landmark **Protocol on Action Against Assault in prisons and social integration centres** was agreed by the unions, CSI-F and UGT, and the Prison Administration (Ministry for Internal Affairs/ General Secretariat of Penitentiary Institutions 2017).³¹ It reflects the important priority given to the participation of trade unions, including OSH representatives, under the Law 31/95 on the Prevention of Occupational Risks. The Protocol acknowledges that while the prison environment and the higher prevalence of aggressive and antisocial behaviors, mental disorders and addictive behaviors amongst prison inmates can result in aggression against a worker, it is important to focus on prevention, to implement the principle of zero tolerance of violence, and to guarantee the safety and security of prison employees. The Protocol defines aggression to include "any violent conduct" including, at the request of trade unions, a wide definition to include verbal aggression, threats and coercion. The Protocol puts a focus on preventative strategies, risk assessment, structures for reporting and monitoring violence at work, and a Specific Registry of Aggressions whose data will allow, in the medium term, root cause analysis and follow-up preventive measures. This will be carried out by existing Multidisciplinary Teams who ensure better identification of risks, patterns of aggression, problem areas and improvement measures.

³¹ https://www.ugt-sp.es/files/PRISIONES/SALUD%20LABORAL/PROTOCOLO%20VIOLENCIA%202017/12_Protocolo_definitivo.pdf. Amendments submitted by unions can be found at: CSI-F & UGT (2017) CSI F y UGT-Prisiones Firman El Protocolo De Actuación Frente A Las Agresiones En Los Centros Penitenciarios Y Cis. <https://1library.co/document/yewvj70y-csi-f-y-ugt-prisiones-firman-el-protocolo-de-actuacion-frente-a-las-agresiones-en-los-centros-penitenciarios-y-cis.html>

The Protocol also provides for disciplinary penalties where violent acts occur, psychological and legal support for workers affected by serious aggression, training in prevention and responses to aggressive behaviour, and regular information on safety procedures. The aim is to anticipate and prevent attacks, particularly the situations where they are likely occur, such as during search activities, searches and transfers of inmates. This means understanding risk factors, for example, when working with people who are admitted to a center against their will, or working with prisoners facing social exclusion, with mental problems or with the use of toxic substances, people with poor social skills, low tolerance for frustration, low level of education, etc. Enhanced therapeutic and treatment programmes for inmates are provided for, including the development of a Violent Behavior Intervention Program (PICOVI) for inmates who are serving sentences for violent crimes and for those who while in prison show violent behaviors, which aims to help inmates change their behaviour through the acquisition of cognitive, emotional and behavioral skills. The Protocol is an important step towards more effective prevention and protection of prison workers, an outcome that benefitted from the participation of unions and management.

UK
Ambulance
staff

NHS violence reduction programme aims to hold perpetrators accountable with quick and effective responses, along with more severe penalties and the doubling of sentences for assaults on emergency workers. The #Work Without Fear campaign for NHS ambulance staff, led by the Association of Ambulance Chief Executives and supported by NHS England, aims to ensure that ambulance staff are protected from assaults and violence. During the early stages of the pandemic in 2020 assaults against ambulance staff increased by 23%, and in the last five years there has been a 60% increase in verbal abuse against control room staff. The effects have been the greatest on Black Asian and minority ethnic staff, LGBTQ+ staff and other workers with protected characteristics under the Equality Act. Legislation was also introduced with tougher penalties under the Assaults on Emergency Workers Offences Act 2018.

UK
Nursing

The Royal College of Nursing (RCN), a UK nursing and midwifery union in the UK, drew up guidance and participated in Government consultations to increase employers' responsibility for tackling third-party sexual harassment against nursing staff (RCN 2020). It calls for TPVH to be treated as any other OSH issue in the workplace. The guidance sets out key principles that employers follow and implement, including clear policies on third-party sexual harassment, raising awareness amongst managers, actively encouraging staff to report incidents, and providing practical and emotional support to staff who are exposed to sexual harassment. The guidance also outlines how each RCN rep can play a role in embedding the principles within an organisation. In addition, RCN published separate guidance for members on third-party sexual harassment.

In addition to the national initiatives summarised above there have been several European initiatives that address the prevention of TPVH as an OSH issue (see Box 9). They include the UITP and ETF guidelines on combating violence and insecurity in urban public transport, the development of the OiRA risk assessment tools for the education sector and on TPVH and an agreement between EPSU and HOSPEEM in the hospital sector.

Box 9: European social partner OSH initiatives

European Urban public transport

Joint Recommendations of the European Social Partners in urban public transport (UITP and ETF) on Combatting Violence and Insecurity in Urban Public Transport were signed on 29 January 2020, updating a previous agreement dating back to 2003. The Recommendations are aligned with the joint global agreement on ending violence and harassment in urban transport in the transport sector agreed between ITF and UITP in 2015. The 2020 agreement was issued in response to the increase in aggression and threats from TPV in urban public transport. The social partners note that there has been a worsening climate of non-respect for the public good, including violence, aggression and anti-social behaviour directed at transport workers by passengers or the general public, includes acts of sexist or racially targeted aggression, harassment and violence: "This adversely affects their working conditions and at the same time creates an atmosphere of insecurity for customers. This in turn decreases the attractiveness of employment within the sector, preventing new workers from joining in, most particularly women, who are already underrepresented." The Recommendations take into account additional risks of violence and harassment in relation to Covid-19 and makes reference to ILO C190, noting the definitions of violence and harassment and its application to TPVH. Emphasis is given to employers' responsibility to protect the safety and health of workers, including the risk of violence and harassment. It is recommended that transport employers and unions sign CBAs that establish reporting procedures that are simple, efficient, acceptable and trusted.

European EU-OSHA OiRA risk assessment tool

A good example of a risk assessment tool is the EU-OSHA online risk assessment tool, OiRA, an anonymous open-source tool developed by the EU social partners for specific sectors who are the owners of the content of their tools. The tools are designed to help employers to fulfil their legal obligation under the EU OSH Directive 89/391. The OiRA tools facilitate the risk assessment process and the implementation of preventive measures. OiRA process, To date, 326 OiRA tools are published and a further 75 are in development. In total, more than 157 800 users are registered, and more than 261 300 risk assessments have been carried out.

Two tools have been developed in the education sector and a further OiRA tool development for the higher education sector will start in 2023. The development

of the OiRA tools in education, drawn up as part of the European social dialogue in the education sector, is a good example of a joint approach dating back to a 2015 Joint Declaration setting out a commitment by the social partners in education to work together on safety and health. In 2018, ETUCE and EFEE launched a project to develop the OiRA tools for the early childhood education and secondary education. With the support of EU-OSHA, a list of occupational risks was drawn up for the two sectors, including on well-being and TPV. The section on TPVH includes a definition, and as with other sections in the tool, it can generate an action plan with for the implementation of preventive measures, such as consultations with stakeholders, communications and information, organisational and technical issues, and support and counselling measures. The project has been very successful and based on this experience the education social partners aim to extend the tool to other education sectors, including the higher education and vocational training sectors.

EPSU and HOSPEEM Hospitals

EPSU and HOSPEEM (2022) signed a new and updated framework agreement on hospital recruitment and retention, aimed to further reinforce social partners' commitment to strengthen the attractiveness of the sector, support a rights-based approach for recruiting migrant workers, promote diversity and gender equality, and address staffing levels and enhance the role of social partners in workforce planning (worker's needs, skills needs and skills mix). Related to this is the commitment to jointly tackle the growing problem of TPVH, including to support the role of national social partners in adopting and sharing good practices to end TPVH, including the implementing the Multi-Sectoral Guidelines on TPVH, and urging Member States to ratify and implement ILO C190. Health care unions across Europe have reported higher levels of TPVH and dissatisfaction with the severe impact of staffing shortages on the quality of services, leading to strike action and negotiations to address burnout, staffing shortages and pay.

Summary of key points on OSH and risk assessment relevant to the updating of the Guidelines:

The following summarises some of the key learning from the examples and good practices on OSH, prevention and risk assessment.

- Assessment of psychosocial risk factors that impact on the working environment e.g. staffing levels, procedures in place to identify and mitigate risks, addressing telephone and online harassment and abuse, along with provision of support for victims.
- Effective liaison with the criminal justice system and implementation of effective security.

- A planned approach, with context-specific and evidence-based solutions, social dialogue and worker involvement, continuing staff feedback, and regular liaising with external bodies.
- Indicators on TPVH included in workplace risk assessments, involving worker consultation with all relevant staff, and taking into account all relevant data, such as incident and near-miss reporting, reviews of OSH-related illness, risk registers and injury records and police records/crime data.
- Dedicated risk assessments TPVH in response to a serious incident, an increase in cases or reported concerns from workers, and in case where a victim of domestic violence and co-workers face threats of violence and harassment from a partner or ex-partner in the workplace.
- Online OiRA risk assessment tools in education, with social partner involvement, is a further innovative way to assessing risks across a sector.
- Gender-responsive risk assessment measurements relating to third-parties can be adapted from evidence-based methodologies that address sexual harassment, harassment, physical threats or assaults, unwanted sexual attention and sexual coercion from third-parties.³²
- New evidence-based methodologies, such as “threat management” have become an increasingly important in promoting integrated method to address serious forms of violence and harassment, as seen in the good practice of this approach is led by Deutsche Telekom, where emphasis is given to prevention, supporting victims and resolving cases in an integrated and tailored way.
- Labour Inspectors also play an important role in detecting and preventing TPVH, as provided for under ILO C190,³³ **and provided for in various tools (European Commission, 2018) to include in the remit of labour inspectors in the prevention of psychosocial risks, and violence and harassment.**

³² There are various evidence-based methods that can be applied to TPVH e.g. methods for measuring sexual harassment, see for example Fitzgerald et al. 2010, Astrapi 2022 and ETF 2020).

³³ Article 10 (h), Article 12 and Article 13(1) of ILO C190 provide for an explicit role for labour inspectors in detecting and preventing violence and harassment, including TPVH. R206 recommends that labour inspectors are trained on psychosocial risks and gender-responsive labour inspection, amongst other practical measures to address violence and harassment.

4.6 Protection, remedies and compensation

Provisions related to protection and compensation for victims and for holding perpetrators of TPVH accountable vary across Europe, and are provided for under EU directives on equal treatment, non-discrimination and victims' rights (see Section 2). Provisions on protection, compensation and sanctions can be found in ILO C190 and R206.³⁴ Furthermore, protecting complainants from retaliatory actions is a fundamental part of safe and effective reporting, complaint procedures and dispute resolution mechanisms. At the national level, protections and provision of compensation for victims can be found in labour and criminal laws. For example:

- In January 2021 the Italian Constitutional Court ruled that victims of gender-based violence and harassment are entitled to free legal aid and assistance (ILO 2021a).
- In Finland, compensation is extended to aggressions committed by third parties, where appropriate steps were not taken by the employer to mitigate risks (Eurofound, 2015:38).
- In some cases incentives have played a role. For example, in Italy, the National Institute for Accidents at Work has established incentives on the prevention of TPV for companies, resulting in reduced insurance costs.

As several examples in this report have shown, there are better levels of cooperation with police forces, including information sharing about potential risks of violence. However, it has not always been easy to implement quick responses from the police and justice system, which is a concern when fast intervention is often critical in sanctioning offenders and showing that TPVH is unacceptable. Workplace design and security planning are also critical elements of security in the workplace. However, barriers may exist for workers (because of victim blaming, lack of information and absence of effective procedures in the workplace) in taking up support and provisions that exist for compensation. In Italy, for example, survivors of domestic violence face many barriers in taking up support because of a culture of silence and fear, but also because there is a need for certified proof such as a report from a doctor, protection/barring order or bail conditions, as required under the legislation. An important part of protection and remedies for victims of violence and harassment is the provision of safe spaces for victims to seek recourse to advice, information and justice, reflected in many of the examples contained in previous sections. **Examples can be found in Box 10.**

³⁴ C190 gives protection against any forms of victimization or retaliation against complainants, victims, witnesses and whistle-blowers (Art. 10(b)(iv)).

Box 10: Examples of how the social partners have addressed protection, remedies and compensation

Bulgaria **Education**

Bulgarian teachers have been involved in successful lobbying to change the criminal law and in implementing prevention measures in the school sector in Bulgaria, resulting in a positive impact in reducing TPVH against teachers. The Trade union of Bulgarian Teachers has been a driver for reforms in education through cooperation in the Ministry of Education's Tripartite Council for Social Dialogue on improving the quality education in Bulgaria. In 2013 the Bulgarian Union of Teachers commenced a campaign aimed at amending the Bulgarian penal code, which resulted in a change in the law in 2013 criminalising violence and harassment against teachers. The resulting Article 131(2) of penal code provides for the conviction of perpetrators of violence against teachers, amongst other professions, where bodily injury has taken place in the course of or in relation to carrying out his/her duties or functions.

The union has carried out a range of actions to raise awareness and in calling for training in managing and reacting to cases of TPVH. Campaigns include "No to Violence", which led to a petition being presented to government, and the "For Kindness in the education" campaign, aimed at raising awareness about TPVH. In addition, the Ministry of Education has introduced various measures to reduce school-based TPVH, including the training of 11 000 teachers on how to prevent aggression and to respond appropriately to acts of TPVH, implementation of long-term prevention initiatives, such as, increasing extra-curricular activities in order to engage students' energy out of school, and training for teachers in social and emotional skills.

Italy **Cross-sectoral**

In Italy, the UIL confederation provides innovative services through a network of "listening centres" (Centri di Ascolto UIL Mobbing e Stalking), established across cities and towns in Italy to provide support to victims of violence and harassment. The services are provided to anyone regardless of union affiliation and whether they are working or not. The listening centres provide confidential legal and psychological support, and a safe space to victims to report and seek help. A process is followed involving an interview, assessment and a plan with supports. Throughout this process communications aim to build trust and a non-judgemental and welcoming approach. This is important as many victims are unaware of their rights and there is a lot of shame and silence about the issue. Efforts are made to seek evidence of harassment in order for the centres to report cases. The listening centres work closely with support services for victims in the community. Data shows that 66% of victims seeking help from the centres are women and 44% are men, with the largest number of cases in the 41 to 60 year age groups. During the pandemic, cases of domestic violence increased significantly and there was a small increase in femicides, which have been at a consistently high

level since data was first collected in 2017. Although women are now entitled to paid leave, UIL has requested that the government simplify the process to make it more accessible to victims of domestic violence.

Denmark
Cross-sectoral

The Tripartite agreement on sexual harassment agreed by the Danish social partners in 2022, has amongst measures related to ending internal and external harassment and sexual harassment, higher levels of compensation for victims of sexual harassment, including compensation from offenders who are third parties committing acts of sexual harassment. Along with tougher obligations on employers to prevent sexual harassment, the new measures on compensation send a clear message about the seriousness attached to ending sexual harassment. Amendments will be made to the Equal Treatment Act and the Work Environment Act to provide for the increase in the level of compensation for sexual harassment.

European
Urban public
transport

The Joint Recommendations on Combating Violence and Insecurity on Urban Public Transport (ETF & UITP 2020) updates the 2003 Recommendations addressing insecurity in urban public transport between the European social partners in transport (ETF & UITP 2003). With recent increased levels of threats, anti-social behaviour, incivility and aggression associated with TPVH, including a worrying increase of TPVH during the Covid crisis, new action-oriented Recommendations were signed by ETF and UITP in 2020, with a focus on implementation through company OSH policies and measures to protect transport workers and transport users. The Recommendations address both internal and external violence and are aligned with ILO C190. They also adopt the global Recommendations for Combatting Violence and Insecurity on Urban Public Transport (UITP & ITF, 2015). Specific recommendations cover the recovery of victims, include provision of professional counselling, psychological, legal and other support systems, management and union support, phased return to work, and protection of earnings.

A comprehensive range of tools are recommended for prevention through awareness raising such as communication campaigns for passengers, training on deescalating skills for workers, collaboration with police and justice institutions to ensure early intervention, and sanctions against offenders. Engagement in civil dialogue with users, NGOs, media and schools aims to help prevent aggressive behaviours. Recommendations are made for strategies and investments in technology and people to combat the problem, complaint procedures, collection of data and information about cases, and reporting procedures that are accessible and simple to use. Recognition is given to ensuring a balance between technological devices such as CCTV and people, and the importance of investment in people, and to ensure the physical presence of people in patrolling public areas.

Summary of key points on protection and remedies relevant to the updating of the Guidelines:

- The importance of effective and multifaceted support for victims, ranging from information, health and wellbeing support, counselling, paid leave etc.
- Ensure effective workplace design and security measures to reduce the risks of TPVH.
- The need to ensure that perpetrators of TPVH are held accountable, including payment of compensation to victims.
- Adequate levels of financial compensation, at different levels according to severity of TPVH, to ensure that aggressors understand that the issue is dealt with seriously.

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Section 5: Conclusions and recommendations

5.1 Conclusions

As this report has shown, significant changes in the world of work, better awareness of and data giving evidence of the causes of TPVH, including GBVH, the consequences of vulnerabilities for some groups of users, the growth of digitalisation leading to cyber violence and harassment, and new policies frameworks arising from ILO C190 and R206, are amongst recent developments that are relevant to the updating of the Multi-Sectoral Guidelines. Good practices referred to in this report (summaries of which can be found in Appendix 1) show evidence of new knowledge and methodologies in addressing and preventing TPVH, the beneficial role of social partners in putting greater attention on prevention and addressing root causes and psychosocial risks, effective organisational change, alongside better media and political sensitization of the problem.

5.2 Recommendations

All partners and stakeholders participating in the project agree that the Multi-Sectoral Guidelines provide both awareness about the problem of TPVH and valuable guidance about how to tackle the problem. A wide majority of partners also agree that while the Guidelines remain highly relevant they need updating and refreshing. Updating the Guidelines could help to reinvigorate the debate at the European and national levels about the benefits of social partner initiatives to tackle TPVH and put the issue firmly onto collective bargaining agendas. Based on the expert presentations and discussions at the project's five webinars, research findings, interviews and collection of good practices, a background discussion document was prepared in advance of Webinar 5, inviting participants to share their views on the types of improvements that could be made to the Guidelines.³⁵

a) Recommendations on themes and issues for the updating of the Guidelines

The project's research and consultations have identified some specific themes and issues for the updating of the Guidelines, taking into account new understandings about TPVH, its integration with other forms of violence and harassment, the importance of GVBH and domestic violence, of risk assessment and prevention, and digitalisation, against a context of reduced human and financial resources in many public services. Furthermore, changes in the world of work, the COVID-19 pandemic, an increase in teleworking and digital forms of communication, are all relevant to the updating of the Guidelines.

³⁵ See report of Webinar 5, 13 June 2022, "Brainstorming on how to improve the social partner Multi-Sectoral Guidelines on third-party violence and harassment?": <https://www.epsu.org/article/2022-13-june>

Taking into account the specificities of TPVH and also that TPVH became an even greater problem during the COVID-19 pandemic, there is consensus about the relevance of retaining dedicated guidelines on TPVH. **Dedicated Guidelines could be accessed from or be linked to European, national, sectoral or workplace CBAs and workplace policies on all forms of violence and harassment.**

In addition, updating the Guidelines in line with ILO C190 and R206 would mark an important step forward and facilitate the progressive implementation of an integrated and coordinated approach to violence and harassment in the world of work, an issue on which employers and unions concur.

Good practices collected in this study and discussed in the project's webinars suggests that an integrated approach works well, taking into account the specificities of TPVH in different sectors and the interconnections with other forms of violence and harassment.

In summary the good practices point to the importance of:

- Collective bargaining between trade unions and employers on the design and implementation of sectoral and workplace agreements, supported by practical strategies to prevent end TPVH.
- Effective systems for prevention and risk assessment, including psychosocial risks relevant to different sectors, in consultation with workers and trade unions, ensuring that there is an understanding of the root causes of TPVH;
- Improved systems for complaints and complaints handling, including clear formal and informal reporting procedures, enabled through written and verbal reports to line managers/supervisors, and systems for confidential and anonymous reporting;
- Effective security systems and responses, quick response security back-up, security protocols with the police, training in de-escalation and managing threats and aggression;
- Support for victims, witnesses and whistle-blowers, including protection from retaliation;
- Systems for collecting and recording data on incidents, reviewing and learning from incidents of TPVH and building this into organisational changes and improvements in working conditions;
- Victim/survivor support in the workplace, including paid leave and external support/counselling.
- Advisors or advocates in the workplace providing confidential information and practical strategies for victims of TPVH, including safe spaces to receive support and report their concerns.

There is consensus amongst the social partners that workers should not have to navigate different information or complaints channels for different forms of violence and harassment. As a result, employers should develop one easy single point of access to facilitate workers who are seeking to raise concerns, make complaints and have support and remedy from all forms of violence and harassment. This could also help to facilitate tailored responses to each worker's situation.

In addition, some of the definitions and language may also need to be refreshed and updated. The definition of third-party violence should be updated to include harassment, so that it is aligned to ILO C190. In addition, the concept of "sufficiently" should be removed in relation to TPVH being "sufficiently distinct from the question of violence and harassment" (para. 5). Other key areas of updating identified in the project and in documenting best practices are described below. They address emerging themes, key priorities identified from project partners and from the project's research, and the different definitions and types of TPVH.

Third-party gender-based violence and harassment

The current guidelines do not spell TPVH from a gender perspective. Overall, there is strong consensus from the project's social partners about the need for stronger emphasis to be given to GBVH, to gender-responsive approaches and solutions to prevention, complaints handling and improved security and safety for women and other groups facing discrimination, including multiple and intersecting forms of discrimination.

Recommendations on GBVH

- Spell out detailed definitions of GBVH, aligned with C190, the forms that it takes, and workers who are disproportionately affected by GBVH (including different groups of women and men, LGBTIQ+ workers and taking into account multiple and intersecting discriminations).
- Raise awareness about the gendered nature of TPVH and mechanisms to ensure that GBVH is integrated into workplace policies and OSH measures and gender-responsive risk assessments, effective complaints mechanisms, as part of joint strategies on gender equality in the workplace.
- Training and awareness raising about gender power inequalities and stereotypes and victim blaming, and building safe spaces for workers to speak about their concerns or experiences.
- The importance of employers and public authorities working together to ensure safe public transport when commuting to and from work, including the responsibility for employers to provide and pay for safe transport for workers commuting at night following a late shift or where public transport is not available.

Domestic violence as a workplace issue

There is unequivocal support for the updating of the Guidelines to address domestic violence as a workplace issue, that is both aligned with C190 and R206, but also draws on best practices in implementing measures to prevent domestic violence in the workplace and support victims/survivors to stay in their employment.

Recommendations on domestic violence

- Draw up clear guidance, based on best practices, for workplace policies and CBAs on domestic violence as a workplace issue, addressing all forms of domestic violence and abuse (physical, sexual, psychological and verbal abuses; coercive control; economic abuse etc.).
- Implement workplace supports for victims/survivors of domestic violence, including flexible and tailored support that can include paid leave (a minimum of 10 days paid leave), options to reduce or change work tasks for an agreed period of time, domestic violence risk assessment, financial support in cases of financial abuse, safeguards and protocols on confidentiality, personalized risk assessment and safety plans, and support from external domestic violence support organisations.
- Provide training and awareness raising for employers, trade unions, managers and workers (what is domestic violence and abuse, who is affected, what kind of support should be expected).
- Develop a workplace advocate / champions programme, established jointly between the employer and unions, to ensure workers have access to confidential advice and support from trained advocates in the workplace.
- Implement guidance on holding perpetrators who are employees accountable, for example, through perpetrator treatment and counselling programmes and support for perpetrators wishing to change their behaviours, while also implementing appropriate sanctions and referrals to criminal justice.

Digitalisation

As this research has shown, digitalisation and digital forms of TPVH have grown significantly in recent years, and they represent new forms of TPVH that impact on workers' wellbeing and safety. As a result it is crucial that the updated Guidelines take account of these realities the health and safety risks associated with digitalisation, and the value of joint social partner initiatives and agreements that address risks of digitalisation, data protection and security, and cyber violence and harassment in the world of work.

Recommendations on digitalisation

- Align the updated Guidelines with recent European level cross-sectoral and sectoral agreements in education and central government, referred to in Section 4, with good practices on combating cyber violence and harassment in workplace policies and risk assessment and prevention, in alignment with ILO C190 and R206.
- Draw up specific guidance on addressing cyber violence and harassment, including joint agreements and policies that spell out in detail the employers' duty of care for workers experiencing cyber violence and harassment, data protection and security issues, awareness of and responses to gender-based cyber violence and discrimination, and support for affected workers.

The role of occupational safety and health: risk assessment and prevention

The research, consultations and webinars carried out during the project have highlighted the critical importance of prevention and risk assessment, including the need for more sophisticated understandings about the structural and root causes of TPVH, including lack of adequate human and financial resources in many public services, along with new thinking on psychosocial risks that contribute to TPVH.

Recommendations on OSH, prevention and risk assessment

- Spell out employers' obligations on prevention and risk assessment on TPVH, including the role of joint OSH committees and risk assessment.
- Provide guidance TPVH in risk assessment (integration into existing risk assessments and in dedicated risk assessments), including psychosocial risk factors that contribute to TPVH.
- Draw up a list of psychosocial risks that are relevant to prevention of TPVH, including the context (gender inequalities, organisation of work and industrial relations) and the content (working conditions, work insecurity, job content, staffing levels, organisational policies and processes, and workplace design, taking account of the greater incidence of workers working in isolation or dealing with people with mental health difficulties and who present complex needs and problems, and to deal with these risks through better training and responses.
- Continue the ongoing cooperation with EU-OSHA in the development of an online risk assessment EU OiRA tool on TPVH, specifically the development and use of the OiRA tool on TPVH, which can be a reference point for different sectors and national partners to be adapted and integrated into EU sectoral or national OiRA tools. It is an ideal opportunity for the updated Guidelines to contribute to the OiRA framework.
- Implement security protocols and procedures, including sufficient security staff and security contact points, security equipment, training and protocols with local police

and judicial services, in order to ensure quick and effective responses to TPVH.

- Training in techniques for de-escalation, including safety intervention, break-away and disengagement skills to keep staff safe from physical assault and attacks.
- Carry out consultations with workers and experts to provide for safe workplace design, office and reception layout, in order to prevent security and safety issues arising.

Support, protection and compensation

Support, protection and compensation, including protection from effective forms of security in the workplace for workers affected by TPVH are crucial elements of the Guidelines. Specific provisions on support, protection and compensation are provided for in the EU victims' rights directive and in ILO C190 and R206. It is an area that the social partners have identified as being relevant to the updating of the Guidelines.

Recommendations on protection, support and compensation

- Provide information about compensation mechanisms (monetary and non-monetary) for victims/survivors, including the level of monetary compensation, in line with insurance and regulatory provisions.
- It is critical that compensation not only takes account physical violence caused by TPVH, but that it recognising the serious harm arising from TPVH which can lead to physical ill health, anxiety, stress, mental health and PTSD, amongst other physical and psychosocial impacts.
- Put in place workplace support for victims/survivors, such as paid leave, temporary reassignment of work roles or work location, support with reintegration back into the job following leave or reassignment, and mechanisms to prevent the repetition of offences and hold perpetrators accountable. Provide professional counselling, legal support and other specialist support, paid for by the employer.
- Make a clear statement of principle about non-retaliation against complainants, witnesses or whistleblowers.

Improved data and resources to track TPVH and learning from cases

Better systems for collective data to track cases of TPVH, learn from them to address and prevent risks, are critical if TPVH is to be prevented in the longer-term.

Recommendations on data

- Establish national sectoral observatories / sectoral data collection on TPVH, including common indicators in the workplace for measuring and monitoring cases of TPVH, to

enable the social partners to identify root causes of TPVH and address problems and risks associated with TPVH.

- Collect data disaggregated by gender, age, disability, race/ethnicity, sector worked in, employment status and job content (e.g. lone working, night working, working with people with complex mental health problems). Data should cover formal complaints and their outcomes, anonymous complaints and issues/concerns raised by witnesses and whistleblowers.
- Learn from complaints, through multidisciplinary assessments and “look back reviews” of incidents, and with participation of workers, unions and managers to formulate recommendations to prevent the reoccurrence of an incident.

b) Recommendations on the implementation and dissemination of the Multi-Sectoral Guidelines

Towards a binding agreement?

Decisions about the final content and the binding/non-binding form of the Guidelines will rest with the Sectoral Social Dialogue Committee signatories to the Guidelines. Some partners, mainly from trade union organisations, support the development of a binding agreement on TPVH, or at least some binding elements, as this would allow for effective, consistent and coherent implementation and monitoring of TPVH across the EU. The options are:

- Updated Multi-Sectoral Guidelines in a binding agreement and/or agree separate European sectoral legally binding agreements in some of the signatory sectors.
- TPVH and the main principles contained in the updated Guidelines becoming binding via national sectoral or multisectoral agreements at national level. This would however require lots of resources to ensure that this is being done in the EU 27 Member States.
- Principles in the updated Guidelines are integrated into relevant future legislative measures.
- To revise and update the 2007 cross-sector agreement on violence and harassment integrating key principles in the updated Guidelines.

Partners supporting a binding agreement suggest setting out the principles relating to both the prevention of and responses to TPVH, obligations on employers and unions to address the problem of TPVH, and what role social partners signing the agreement will hold in relation to their obligations and along with the European Commission, their role in monitoring the agreement.

Recommendations for Sectoral Social Dialogue Committees

- Hold further discussions in the Sectoral Social Dialogue Committees covered by the project about the updating and revision of the Guidelines, including the possibility for making them, or at least its key principles, binding. This could be part of a separate agreement or sectoral agreements on TPVH, or part of a broader agreement on violence and harassment in the context of possible revisions to the 2007 cross-sector agreement.
- Consider promoting the updating and renegotiation of the 2007 autonomous social partner Framework Agreement on violence and harassment into a binding agreement with specific obligations related to TPVH, digitalisation and domestic violence as a workplace issue, reflecting the integrated approach to violence and harassment ILO C190 and R206.
- Discuss supplementing the updated Guidelines with sector-specific guidance. This is relevant when workers are dealing with the different situations, for example, prison staff in a context of incarceration, hospital workers facing aggression from patients or family members because of delays, waiting times or problems in service provision, compared to transport workers working alone on buses at night or telecom workers visiting customers private homes.

Communications and dissemination of the Multi-Sectoral Guidelines

An important issue highlighted in the research and in the project webinars, is the importance of communications and dissemination of the updated Multi-Sectoral Guidelines. The project's survey and interviews with unions and employers, found limited awareness amongst participants of the Guidelines and their content.

Recommendations on the dissemination of the Multi-Sectoral Guidelines

- Agree a dissemination and communications plan to ensure that the Guidelines become a dynamic tool, with an ongoing flow of clear and simple information and guidance on implementation, including a plan for the future financing of these future dissemination activities.
- Carry out a high-level launch of the updated Guidelines, and in parallel institute a new Europe-wide campaign to disseminate the Guidelines.
- Develop a dedicated website, fact sheets, posters and other visual tools to display in the workplace, a greater presence on social media, and a multi-lingual practical toolkit were practical suggestions made by the social partners to ensure that the Guidelines gain wider reach and impact.
- Agree measures to ensure high-level support for the implementation of the Guidelines.

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