ith the adoption of Convention No. 183, the right to health protection for pregnant or nursing women was recognized for the first time in a maternity protection Convention. Workplaces have to be safe for all men and women workers, at all stages of their life cycle. ILO standards on occupational safety and health set out broad frameworks for fostering a preventative occupational safety and health culture, and extending effective protection to all workers, both women and men.1 A broad-based and gender-responsive approach to prevention and protection recognizes that promoting reproductive health and guaranteeing safe and healthy workplaces is relevant to both men and women. In fact, some reproductive hazards can lead to reduced fertility in both women and men and also affect their ability to generate healthy children. At the same time, such an approach attaches importance to the need for gender-specific interventions, such as health protection at work for pregnant and breastfeeding workers (ILO, 2012b). Most women work throughout their pregnancy and return to work after childbirth in good health. Generally speaking, working during pregnancy is not in itself a risk, except in certain circumstances immediately before and after childbirth. Indeed, the need to rest and recuperate around the time of childbirth is an important aspect of maternity protection, primarily addressed through maternity leave. However, another important aspect of maternity protection is to ensure that workers are not exposed to working conditions, work environments or substances at the workplace that might pose particular risks during maternity.

In its 2012 General Survey on the Fundamental Conventions, the CEACR has also considered that maternity requires differential treatment if genuine equality is to be achieved. It has also highlighted the fact that the major shift that has occurred over time has developed from being a purely protective approach to the employment of women to one based on promoting genuine equality between men and women and eliminating discriminatory law and practice. The CEACR has considered that a distinction has to be made between measures protecting maternity in the strict sense and those protective measures applicable to women's employment which are based on stereotypes regarding women's professional abilities and role in society, and which violate the principle of equality of

opportunity and treatment in employment and occupation (ILO, 2012d).

The first part of this section will consider legislation on the arrangement of working time as a means of health protection for pregnant or nursing women. The second part concerns the avoidance of dangerous and unhealthy work. Appendix VI provides a table of indicators by country for this chapter.

5.1 Arrangement of working time

An important issue for the health of all workers is length of working time. This is even more important during maternity. In Recommendation No. 191, this aspect is treated in relation to maternity protection. Several ILO member States have enacted provisions to protect pregnant and nursing women from the fatigue associated with night work and overtime work. Some countries also afford time off for medical examinations during pregnancy.

Night work

A pregnant or nursing woman should not be obliged to do night work if a medical certificate declares such work to be incompatible with her pregnancy or nursing.

Recommendation No. 191, Paragraph 6(4)

The adoption of Recommendation No. 191 of 2000 reflects the change in policy in terms of the protection of pregnant or nursing women with regard to night work. In fact, contrary to its predecessors,2 the more recent Convention respecting night work (No. 171 of 1990) no longer bans night work for women, but provides "measures of protection for all night workers including many of those aspects of special concern for women", such as "special measures of maternity protection and safety" (ILO, 2001).3 The most current guidance on night work and maternity comes from Recommendation No. 191, which specifies that a woman should not be obliged to perform night work if it is incompatible with her pregnancy or nursing, as determined by medical certification. In this way, the current Recommendation takes into account the needs of the individual to a greater extent.