Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.
Materials and Methods: Workers and employers in small manufacturing enterprises, home-based workplaces, electronic waste (e-waste) dismantling workplaces, small construction sites and tea farms were reached in India, Nepal, Pakistan, and Sri Lanka. Participatory training methodologies known as WISE (Work Improvements in Small Enterprises) were applied. Training contents comprised an action-checklist exercise with workplace walk-through, presentations of photos and illustrations showing local good practices, and group discussions. Many training activities were conducted in workers' own workplaces.

Results: The participating workers and employers identified practical points for improving their safety and health. Home-based workers in Nepal identified placing materials in good order and clean drinking water in the workplace as their priorities. Workers in the tea farm in Sri Lanka proposed a better basket for collecting tea leaves, clear passageways, and regular short breaks. Local tripartite trainers were trained, and they disseminated the participatory training activities. During the COVID-19 pandemic period, webinars were carried out for promoting workplace preventive measures using the established networks.

Conclusions: The participatory approaches effectively assisted workers and employers in small and informal economy workplaces in identifying practical solutions. Photos and illustrations showing local good practices played a key role.

Sp19-3

Challenges Towards OSH Growth and Workplace Improvement Implementation in Africa

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Introduction: Occupational Safety & Health (OSH) experts in Africa have long advocated for OSH development & recognition across country & enterprise levels but this has been difficult to realise for many reasons, e.g., inadequate OSH legislation & poor OSH knowledge & competencies across the continent. Accidents & occupational illnesses are on the rise in African workplaces because of OSH inadequacies.

Materials & Methods: To address these gaps, OSHAfrica set up two scientific committees: OSH Legislation & Policy Improvement, & OSH Education & Competency Improvement, which, respectively, have reviewed existing OSH legislation across 54 countries in Africa (75% completed) & solicited for partnerships across the world in support towards OSH education in Africa.

Results: The African Union Development Agency (AU-DA) has collaborated with OSHAfrica in getting the African Union to review the final work on OSH Legislation & Policy Improvement & adopting it as the ‘African Union Protocol on OSH’. The OSH Education & Competency Improvement endeavours include various virtual webinars at regional & country levels. Since inception, the OSHversity TDC has offered free online OSH training across LMICs, & OSHAfrica-focused training on African OSH for labour inspectors. OSHversity has trained more than 150 people across 17 countries, by focussing on a 'learn-&-apply' approach to improve workplaces.

Conclusions: Across the continent, we need more leadership discussion, commitment & action to improve OSH legislation, education & enforcement. Support is urgently needed towards sustaining existing OSH efforts to make a difference in Africa.

Sp19-4

Compassion Fatigue: The Other Pandemic. Situation in healthcare workers in Latin America

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Introduction: By the end of the COVID-19 pandemic, the prevalence of mental and emotional disorders among health professionals will double. With the exception of palliative care units, health professionals have been prepared to heal but may still lack of personal tools for managing their own emotions when the therapeutic objective must focus on caring, instead of “fighting” against a disease, with the patient being the battlefield.

Materials and Methods: The COVID-19 pandemic imposed health teams to make hard decisions between the duty of care and self-protection. Exposure to patients in situations of trauma, suffering an emotional distress demanding help can represent an emotional fracture that is difficult for healthcare personnel to manage. This situation, known as compassion fatigue or empathy burnout, is a secondary form of stress occurring when the health worker's emotional capacity to cope with the empathic commitment to the suffering of the patient is overwhelmed.

Results: Compassion fatigue syndrome affects health workers on the “front line” of care, who have more human contact with patients who suffer or fear for their life due to a disease. The health system, strained beyond its limits by the pandemic, has had to put aside caring for health professionals themselves.

Conclusions: We will review risk factors and conditions triggering compassion fatigue and affecting lifestyles and resilience of health professionals in Latin America and we will analyse how occupational health can help develop prevention strategies and propose recommendations that can contribute to improving and managing workers' health.

Special Session 20 The other pandemic: Mental Health Issues facing HWs during the Covid-19 crisis

Chair: Igor Bello

Session introduction

This is a joint session developed between the Women, Health and Work SC and the Occupational Health for health workers SC. In this session we address the problem of the health of workers in the health sector, within the context of the COVID-19 pandemic from a gender perspective.

In particular, we focus on aspects related to the mental health, one of the most relevant problems suffered by workers in the post-pandemic, through a vision of ergonomic and psychosocial risks.

Sp20-1

Gender Ergonomics in Healthcare: Preventing disparities by promoting inclusive designs

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Introduction: Healthcare is a feminized sector where approx. 80% of the global workforce and 83% of the 11.5 million low skilled migrant workers performing health domestic service 4D jobs difficult,