

production of reference materials for inorganic acids and metal oxides:

- the piezoelectric microdispensing of nonvolatile inorganic acids on quartz fibre filters and
- the generation of nanoscale metal oxides and their introduction into a dust channel followed by sampling on cellulose nitrate filters.

Starting in June 2018, the IFA offers for a fee a [reference material for sulphuric acid and phosphoric acid](#) (H<sub>2</sub>SO<sub>4</sub> and H<sub>3</sub>PO<sub>4</sub>) on quartz fibre filters.



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More information: [www.dguv.de/ifa](http://www.dguv.de/ifa)

## MATERNITY PROTECTION AT WORK: PRACTICES, BARRIERS AND RESOURCES

**IST**  
Institute for Work  
and Health

In order to protect the health of pregnant workers and their unborn children from workplace exposure, maternity protection legislations (MPL) have been introduced in most industrialized countries. International literature indicates that despite their crucial importance to perinatal health MPL are only weakly implemented.

The Institute for Work and Health (IST) in collaboration with the School of Health Sciences (HESAV, HES-SO) is conducting a study, which aims to analyse to what extent companies and health professionals implement the law, and highlight factors influencing its implementation identified by different stakeholders. Mixed methods are used: questionnaires to gynaecologists, midwives and companies, qualitative case studies in 6 companies.

First results demonstrate that several aspects of the implementation of MPL could be improved. Only 28% of the companies in the survey declare having a risk assessment, less than one third of which were conducted by an appointed specialist -occupational physician or hygienist. When consulting with a patient whose job poses a risk to her pregnancy, gynaecologist estimated receiving a risk assessment from the employer in only 5% of the cases. The absence of risk analyses represents a failure of companies to apply MPL and it hinders gynaecologist to determinate the ability of the pregnant



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women to work. Consequently, a number of women continue to work in dangerous workplaces or a sick leave is prescribed.

About half of the employers claim that they adjust the workplace of a pregnant employee when an occupational risk is identified, but only 22% make these adaptations following the evaluation of an appointed specialist.

Finally, while training seems to have a positive impact on the implementation of MPL, only 23% of the respondents in the companies and

51% of the interviewed gynaecologist have undergone a specific training on MPL.

More research is required to evaluate the degree of implementation of MPL in Swiss workplaces. Qualitative interviews with other relevant stakeholders will be useful in order to more accurately understand the barriers to MPL implementation and establish ways to overcome them.



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More information:  
[Project details](#) [Study protocol](#) [Literature review](#)