



# Coronavirus-Related Opportunities for Promoting Occupational Health and Safety

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## Dear Editor,

Gudi and Tiwari (1) have recently outlined the challenges of the current SARS-CoV-2 coronavirus pandemic, suggesting that it is “forcing the entire world to lockdown” (p.108). Yes, there are ‘stay at home’ policies to protect populations; however, many employees must continue to work during the coronavirus pandemic (2). Many jobs cannot be shut down, particularly for those who work at the hospitals, the care sectors, utility companies, and food transportation. Important manufacturing industries continue to operate, many of which, in addition to coronavirus, pose risks that still need to be managed. It is understandable that the governments have made a determined effort to support people with Covid-19 and those who attempt to treat them; nevertheless, it is also the case that other work is necessary, and the business of risk assessment in those industries is important. There have always been harmful occupational factors in the workplace, such as noise, dust, vapors, and chemicals. Therefore, we suggest that coronavirus should be seen as another harmful factor that can enable work if controlled. For those in work now, and those who must return to work soon, we must seek a preventative and control solution for the virus. This is a real priority because the economic sequelae of the lockdown are now inflicting intolerable and irrecoverable harm (3), indicating the need for resuming various industries before the coronavirus is controlled.

Pandemics and epidemics are not just medical phenomena, they have social, economic, and behavioral consequences that require knowledge and insight from other scientists. Here, we are arguing for the need for input from occupational health and safety (OHS) scientists, for whom the risk assessment is the primary methodology of prac-

tice. In this journal, we see that Sadati et al. (4) have proposed that Risk Society has left us “vulnerable in facing hazards” if their concern were based on managing escalating social anxiety when recommending pouring money into studying risk perception and communication. We suggest the spread of Covid-19 has only made us vulnerable as a consequence of Health & Safety laws and guidance, assuming the status of a hassle, rather than a benefit, in society and even in some high hazard workplaces over recent years. It is particularly evident in low levels of adherence to personal protective equipment (PPE) standards (5, 6), and we know that employees are significantly less willing to use PPE unless they have experience of an accident (7).

As we recognize that there are jobs that need to be done and that there are people who want to return to work - safely, it should be acknowledged that there are opportunities for all stakeholders to improve OHS and particularly risk assessment procedures *towards a safer future for all*.

*Governments* have the opportunity to recognize the progress made since the introduction of OHS procedures and uphold these standards in workplaces. This may be through the enforcement of existing laws; there is evidence that improving education on risk, OHS, and PPE (5) is equally important. There has been a great development in online education for schools and colleges as a necessity in the lockdown. Similarly, there is now an opportunity to develop e-OHS education courses to bring in the latest threats of infections into the frame. There are also opportunities to use big data to improve supply chains and distribution networks for OHS goods and services. There is a strong business case for all of this; the health of nations is the wealth of nations.

Employers have opportunities to change existing

Health & Safety management procedures that are now unsuitable or insufficient. The Coronavirus pandemic may bring changes in employment practices, not least to limit opportunities for prolonging this pandemic and protect employees' health. There may be a need to consider "social distancing" where the employees have previously worked very closely. They have the opportunity to consider the merits of providing OHS education and training for their workforce that includes the control and management of viral agents. There is a good reason for doing this in terms of demonstrating Corporate Social Responsibility behaviors for both employee and organization health.

Employees can use opportunities to keep themselves safe and healthy by adhering to their employers' OHS risk measures, including wearing PPE and attending education and training programs. Where there are shortcomings, there remains an opportunity for them to refer to OHS laws, and policies to prevent harmful incidents.

The outbreak of the Coronavirus pandemic has created special possibilities to improve OHS across all occupational communities. Although the world was unprepared for a pandemic, OHS professionals are a part of the response. As the world seeks to resume work, there are great opportunities for OHS to give an important direction. The prevalence of Coronavirus has indeed spread across the world; however, it can be stopped with preventive measures. Unless the OHS department has the opportunity to offer its expertise to use effective risk assessment to improve Coronavirus risks in the workplace, this closure is likely to be prolonged.

#### Footnotes

**Authors' Contribution:** Rosanna Cousins and Mehdi Jahangiri supervised all stages of the work, reviewed and cor-

rected the article. Also Rosanna Cousins was from native English language. In the preparation of this article Vahid Gharibi was responsible from concept development.

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#### References

1. Gudi SK, Tiwari KK. Preparedness and Lessons Learned from the Novel Coronavirus Disease. *Int J Occup Environ Med.* 2020;**11**(2):108-12. doi: [10.34172/ijocem.2020.1977](https://doi.org/10.34172/ijocem.2020.1977). [PubMed: [32218558](https://pubmed.ncbi.nlm.nih.gov/32218558/)]. [PubMed Central: [PMC7205510](https://pubmed.ncbi.nlm.nih.gov/PMC7205510/)].
2. CDC. *Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)*. [cited 29.04.2020]. Available from: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>.
3. Oswald AJ, Powdthavee N. *The case for release of young people from lockdown: a briefing paper for policymakers*. Institute of Labor Economics IZA DP; 2020.
4. Sadati AK, B Lankarani MH, Bagheri Lankarani K. Risk Society, Global Vulnerability and Fragile Resilience; Sociological View on the Coronavirus Outbreak. *Shiraz E-Medical Journal.* 2020;**In Press**(In Press). doi: [10.5812/semj.102263](https://doi.org/10.5812/semj.102263).
5. Morioka S, Tajima T, Sugiki Y, Hayakawa K, Ohmagari N. Adherence to personal protective equipment use among nurses in Japanese tertiary care hospitals: what determines variability? *J Hosp Infect.* 2020;**104**(3):344-9. doi: [10.1016/j.jhin.2019.11.019](https://doi.org/10.1016/j.jhin.2019.11.019). [PubMed: [31790746](https://pubmed.ncbi.nlm.nih.gov/31790746/)].
6. Honda H, Iwata K. Personal protective equipment and improving compliance among healthcare workers in high-risk settings. *Curr Opin Infect Dis.* 2016;**29**(4):400-6. doi: [10.1097/QCO.0000000000000280](https://doi.org/10.1097/QCO.0000000000000280). [PubMed: [27257793](https://pubmed.ncbi.nlm.nih.gov/27257793/)].
7. Gharibi V, Barkhordari A, Jahangiri M, Eyvazlou M, Dehghani F. Semi-Quantitative Risk Assessment of Occupational Exposure to Hazardous Chemicals in Health Center Laboratories (Case Study). *Shiraz E-Medical Journal.* 2019;**20**(10). doi: [10.5812/semj.86764](https://doi.org/10.5812/semj.86764).