

Workplace Health and Well-being

Reproductive Health - Pregnancy in the Workplace

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Is pregnancy an occupational concern?

Yes and no. Most individuals can continue to work safely throughout their pregnancy.

The effects of pregnancy should be considered in a hazard identification and risk assessment process. A pregnant person's body goes through many changes that may make them more likely to experience adverse health effects from exposure to hazards. Some changes as they relate to occupational exposure include:

- Faster absorption of chemicals (such as metals) than in a non-pregnant person.
- Greater demand for oxygen increases total air breathed into and out of the lungs, potentially increasing exposure.
- Softer ligaments, tendons, and other connective tissue may increase the risk of injury, especially in tasks that stretch joints.
- The fit of personal protective equipment (e.g., coveralls, respirators, lab coats, boots, etc.).
- Increased strain on the back.

- Decrease in blood flow to the legs.

Changes in the immune system, lung capacity, and ligaments can increase the risk of injury or illness in a pregnant worker, and chemicals may affect the fetus, particularly in the early stages of pregnancy when its organs are developing quickly.

Some job tasks and occupational exposures may increase the risks to the pregnant worker and fetus. Certain exposures or situations have been associated with reproductive toxicity, such as [lead](#), [mercury](#), [shiftwork](#), and others.

Do I need to tell my employer I'm pregnant?

There are certain situations where you will need to inform your employer that you are pregnant.

If you are planning to take a leave (maternity, paternity, parental, etc.), you will need to provide notice to your employer. Generally, employment standards require that you give written notice before you leave. The notice period will depend on your jurisdiction, but usually ranges from two weeks to six weeks. Always verify the notice period required for your workplace.

In certain situations, [protective reassignment](#) may be necessary.

Disclosing your pregnancy is your choice; however, from an occupational health and safety consideration, informing your employer depends on the type of work and the potential hazards in your industry. As soon as you find out you are pregnant, speak with your healthcare provider about your job and the tasks you do. You have the right to know about the hazards in your workplace, and some hazards may pose an increased risk when pregnant. For example, workers exposed to radiation as part of their job (e.g., x-ray equipment, nuclear industry, etc.) have lower radiation dose limits that may apply once the worker informs their employer of the pregnancy.

If you or your partner is pregnant or trying to become pregnant, it is important to tell your healthcare provider what kind of work you do and the hazards present, including work with chemicals, noise, shiftwork, hot environments, manual material handling, etc. With this information, your healthcare provider will be better able to understand your job and recommend any parts that may be a concern throughout the pregnancy.

What health and safety laws are associated with pregnancy?

Some jurisdictions require organizations to develop and implement policies and procedures appropriate to the risk of reproductive hazards in the workplace. This protection of certain workers applies to limiting exposure to chemical and biological substances in the workplace. Be aware that current [occupational exposure limits](#) are set for healthy, non-pregnant adults working a 40-hour work week, which may not be appropriate for pregnant workers.

Most legislation requires that once a worker declares their pregnancy, the effective dose of ionizing radiation for the remainder of the pregnancy must be limited by the employer to 4 mSv, or the dose limit specified for pregnant workers under the [Nuclear Safety and Control Act](#). Always verify the legislative requirements for your jurisdiction.

What are examples of workplace hazards that can affect a pregnant worker?

Certain workplace hazards can be a greater concern to pregnant workers. Hazard identification and risk assessment should be conducted in the workplace to determine if there are any hazards a pregnant worker is likely to be exposed to or may be exposed to during the course of their pregnancy that may harm a developing fetus or the pregnant worker. Appropriate controls should be implemented.

The following list outlines some hazards that should be considered for pregnant workers, where their risk of adverse health effects may be higher than their risk if they were not pregnant. These hazards may have negative health effects on both the pregnant person and the fetus. Note that **this list is not exhaustive**, and there may be additional hazards present in the workplace. Hazard identification and risk assessment, in addition to guidance from a medical practitioner, will provide a better understanding of workplace hazards.

- [Heat stress](#) – extreme heat increases the risk of dehydration and heat exhaustion and can negatively impact the fetus if the core body temperature increases above 38°C.
- [Ionizing radiation](#) – may lead to miscarriage early in pregnancy or developmental problems throughout the pregnancy, including the incidence of malformations and risk of cancer. There may also be an increased risk of leukemia for the pregnant worker. Once the pregnancy is declared, the maximum occupational dose of radiation is 4 mSv/year according to the Canadian Nuclear Safety Commission. This limit is 20% of the recommended annual average dose over 5 years (100 mSv over 5 years, or 20 mSv per year on average) for non-pregnant workers.
- [Noise](#) – continuous noise greater than 85 dBA for more than 8 hours should be avoided as it may lead to hearing impairment, low birth weight, or preterm delivery. There may also be an increased risk of hypertension for the pregnant worker.
- [Vibration](#) – may lead to miscarriage or preterm delivery as there may be a reduction in uterine blood flow and an increase in the risk of preeclampsia. There may also be an increase in stress and strain on the spine. Whole-body vibrations should be kept to a minimum.
- [Lifting, pushing, pulling, and bending](#) – changes in the pregnant worker's body shape may make work tasks more difficult and put additional strain on the back, increase fatigue, and increase the risk of slipping. Effects on the fetus may include miscarriage, low birth weight, and pre-term delivery.

- **Prolonged standing**– may lead to stillbirth or pre-term delivery. The pregnant worker may experience dizziness, hypertension, placental abruption, and back pain. Standing for longer than 6 hours per shift after 24 weeks of gestation and more than 30 minutes at a time after 32 weeks should be avoided.
- **Scheduling**– Shiftwork, shift length, and working nights may result in miscarriage, low birth weight, or pre-term delivery. Limiting work shifts to less than 10 hours a day and 46 hours a week, while not working between 12 a.m. and 6 a.m., may be necessary. Increasing the number and length of breaks may also be beneficial.
- **Harassment and discrimination** – pregnant workers may feel discrimination based on gender and family status. These feelings and actions may lead to undue stress, anxiety, and depression. There may be a lack of personal boundaries that a pregnant worker experiences through intrusive questions and unwelcome physical contact.
- **Stress** – both work-related and non-work-related stresses can have negative impacts on the pregnant worker and fetus, including miscarriage, low birth weight, and pre-term delivery. Occupational stresses may include job security, exposure to hazards, deadlines, workload, etc.
- **Ill-fitting personal protective equipment (PPE)** - changes in the pregnant worker's body shape could lead to other hazards, including decreased protection. For example, a respirator that is too tight to fit comfortably on the face could result in discomfort, a compromised seal, and the need to adjust the respirator. Ill-fitting personal protective equipment can also lead to pain and discomfort, such as footwear that is too small due to swelling.

As many of these contaminants do not have data for 'safe' levels for pregnant workers, it is recommended to keep exposure as low as possible for the duration of the pregnancy.

How can these hazards be controlled?

In many cases, minor modifications to the work environment and schedule, with the use of personal protective equipment, are required to protect the health and safety of the worker and fetus.

Once an employer is aware that a worker is pregnant, the employer should assess the specific hazards associated with the worker's tasks to ensure they are not at an increased risk of exposure. During this time, it is also important to have open discussions with the pregnant worker and seek advice from medical professionals if required.

Some additional control measures may include the following:

- **Eliminate radiation exposure** – remove the pregnant worker from any radiation exposure as soon as possible.

- **Avoid [extreme heat](#)** – consider completing tasks earlier in the day or in a location that will not increase internal body temperature. Follow work-rest cycles and make sure to consume a lot of water.
- **Ensure adequate ventilation** – check to make sure dilution and exhaust ventilation are installed properly and functioning.
- **Good personal hygiene** – avoid exposure to chemicals by [washing hands](#) thoroughly before eating and drinking. Do not bring home any clothing that may be contaminated with hazardous products.
- **Take breaks often** – avoid prolonged standing or sitting. Change positions regularly.
- **Scheduling** – if possible, try to maintain regular daytime hours with adequate time for breaks. Offer flexibility with mealtimes.
- **Follow health and safety procedures** – follow each step for proper lifting, material handling, handling and storing hazardous products, etc. Always check the Safety Data Sheet (SDS) and label for the product that you are working with to ensure that you know what is being used and all the hazards and precautions associated with the product. Ask questions if you are not sure.
- **Use properly maintained and fitted personal protective equipment** – wear all PPE required by the employer. Respiratory protection may require an updated fit test as the body and face change. Coveralls, lab coats, or other protective clothing may need to be resized as well. Use all PPE consistently and correctly. Wear hearing protection as directed, but remember that hearing protection will not protect the hearing of the fetus. For more information, please see our OSH Answer [Personal Protective Equipment - Body Type and Gender Considerations](#).

If there is any doubt or uncertainty about the safety of a task, the supervisor, safety professional, or medical practitioner should be consulted for assistance.

Workplace accommodations should be reviewed regularly as circumstances change. For example, early in the first trimester, the pregnant worker may be feeling nauseous or have strong aversions to food or scents, but as they progress through to the second trimester, they may have more energy and begin to experience more noticeable changes to the body, and by the third trimester, there may be more physical discomfort, fatigue, and limited range of motion. Adapting the work environment to fit the changing needs of a pregnant worker will benefit not only the worker but also the organization.

What human rights considerations are associated with pregnancy?

Under human rights laws in Canada, a person cannot be discriminated against or harassed because of protected grounds. Some of these protected grounds, as they relate to pregnancy, may include age, sex, sexual orientation, marital status, and family status. Family status rights cover issues such as parental or family leave, adoption leave, or other childcare-related needs.

An employer cannot terminate a worker's employment or change the condition of employment without written consent because they are pregnant or because they are on parental leave. As soon as the leave ends, the employer must return the worker to the position they held before their leave, or in a comparable position.

Similarly, an employer cannot refuse to hire or promote someone because they are pregnant, plans to become pregnant, or have recently given birth. Creating policies that negatively impact a worker because of pregnancy-related conditions is also considered a discriminatory practice.

A worker has the responsibility to request accommodation and communicate their needs in a clear and timely manner. This request should include enough information for the employer to make an informed decision regarding the accommodation request. Employers must provide reasonable accommodation for a worker who is pregnant, trying to become pregnant, or has recently given birth.

Employers are required to make every reasonable effort, short of undue hardship, to accommodate a worker. This statement means that there is a reasonable limit to how far an employer needs to go to accommodate. If accommodation is not possible due to a health and safety risk or if costs are unreasonable, the employer can claim undue hardship. An employer would need to provide sufficient evidence that an accommodation would cause undue hardship. This hardship would be evaluated on a case-by-case basis.

What is a miscarriage, and what can a workplace do to support the worker?

A miscarriage is the spontaneous loss of a pregnancy before the 20th week of gestation.

The risk of a miscarriage is highest in the first trimester, before the 12th week of pregnancy. The Mayo Clinic estimates that 10-20% of all pregnancies end in miscarriage; however, this number may be even greater, as some pregnancies may end before the person knows they are pregnant. While miscarriages are fairly common, it does not make it easier.

A supportive workplace should aim to protect the psychological health and safety of its workers and know how to provide support when needed.

Some important considerations to keep in mind when supporting a worker who has experienced a miscarriage include:

- Grief is subjective and dependent on many variables. Avoid comparing levels of loss. Do not assume to know what the worker is experiencing.
- Allow the worker to grieve in the way they need to. If they want to talk about their experience, allow them the space to speak about it. Some individuals feel better when people in their support system open the door by offering to be there if they need someone to talk to.
- Their body is still changing. Even when a pregnancy ends, there continue to be hormonal and physical changes.
- Avoid phrases such as “everything happens for a reason,” “you can always try again,” or “it’s probably for the best.” These phrases may invalidate the individual’s experience and do not provide comfort.
- Refer the worker to a mental health professional, provide community resources, or refer them to the employee assistance program.

Organizations can also review their bereavement or other leave policies currently in place to include leave due to miscarriage. The policy should cover both the pregnant worker and their partner. By providing support through policy changes, the workplace can reduce the stigma associated with miscarriage and allow workers to share their experiences.

How can an organization support pregnant workers?

Employers and workers should work together to address any concerns. Have a hazard control program in place that identifies workplace hazards that may impact pregnant workers, such as stress, work schedules, radiation, job design, eliminating [second-hand smoke](#), and noise, to name a few. Workers have the right to know the hazards in their workplace. Employers must provide information and training to protect the health and safety of their workers.

There are many psychosocial hazards associated with pregnancy, and there may be additional stressors outside of work that should be considered. Providing a supportive workplace will increase the likelihood of returning to work after childbirth, which reduces the loss of skilled and trained workers. Implementing policies that assist with accommodation, such as providing additional time off for medical appointments, modified work, and a gradual return to work after childbirth, will assist in promoting an inclusive workplace.

In addition, organizations may:

- Educate and train all workers to speak openly about pregnancy and miscarriage without stigma (to self or others), understand how miscarriage affects the individual’s physical and mental health, how to address it sensitively and fairly, etc.
- Provide awareness and education about pregnancy, especially in industries where hazardous exposure may occur.

- Create or review policies for diversity and inclusion, for example, on sex and gender reassignment. Pregnancy may occur in persons who are trans, non-binary, or intersex.
- Consider pregnancy when developing policies regarding absences, sick leave, or flexible work.
- Provide [flexible working hours](#), such as allowing time off to attend medical appointments.
- Include the impact of [fatigue](#) on working hours, [shiftwork](#) or [extended workday](#) arrangements, etc.
- Develop or review safe work procedures, including appropriate [lifting](#) techniques and methods to increase control over posture and balance.
- Allow some control over the temperature and ventilation of the work area, where possible.
- When uniforms are required, allow for variation in material and fit to allow for changing bodies and to increase comfort.
- Provide regular access to toilet facilities.
- Provide access to cool drinking water, a quiet room, or a rest area, as needed.
- Promote opportunities for [active living](#), [healthy eating](#), [stress](#) management, and positive [mental health](#).
- Provide access to support programs, such as [employee assistance programs](#), workplace support, or community support groups, where available.

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