Argentina is the second largest country in South America (land area of 2.8 million km²) and the eighth largest in the world. It has a population of 43.4 million, and Buenos Aires is the federal capital. The country has the third-largest economy in Latin America and it is a member of the G20. Argentina is classified as a high-income economy.

In recent years and after an increasing number of violent attacks against women and girls in the country, there were mass demonstrations throughout the country. Trade unionists joined women’s groups and other activists to call for decisive action to prevent violence against women and children. On July 26, 2016 Argentina’s National Plan of Action for the Prevention, Assistance and Eradication of Violence against Women was launched http://buenosairesherald.com/article/218790/plan-to-cut-violence-against-women-launched-. It is a three-year plan starting in 2017 with a budget of just over USD2.6 million. The initiative, which still is in a very early stage, incorporates over 200 measures and actions that include shelters for women, public awareness campaigns; electronic tagging of men with restraining orders to aid compliance; introduction of gender violence awareness in the national school curriculum; and the development by the health ministry of a national framework protocol for comprehensive care of women experiencing violence.

MILESTONES

- Moving 26,000 workers nationwide out of precarious work
- Nine formal negotiations at state level for collective bargaining agreements
■ Two national collective agreements for public employees
■ Formal actions on workplace violence at state level (Buenos Aires, Mendoza and Santa Fe)
■ Participation in joint commissions on safety and health in public employment in Buenos Aires and Santa Fe, using provincial laws

The legal framework on institutional violence includes:

■ Articles 14bis and 16 of the National Constitution
■ Contract law articles 17, 70, 72, 73, 81, 172 y 187

There is no national law on workplace violence. There is only provincial legislation.

■ Workplace violence - 13168/2008. Province of Buenos Aires

“Law 13.168 that was passed at the end of December 2003 by both legislative bodies of the province of Buenos Aires defines workplace violence as the actions of an official and/or public employee who, using his hierarchical position or circumstances linked to their functions, engages in conduct that violates the dignity, physical, sexual, psychological or social integrity of the worker by manifesting an abuse of power carried out through intimidation, threat, wage inequality, harassment, physical, psychological abuse.

This last point refers to the fact that physical, psychological and/or social abuse is aimed at causing physical harm or suffering to the worker in the form of continuous and repeated hostility through insults, psychological harassment, contempt or criticism.”


■ Santa Fe: law 12434/05 http://www.municipalesrosario.org.ar/site/?q=node/187 - Joint committees of health and safety in employment (public and private) law 12913/08

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**Law on participation of workers in health and safety in public employment**, promulgated on 22 December 2010, Province of Buenos Aires

■ Province of Jujuy: Act 5349 / 08
■ Province of Tucumán: law 7232/08
■ Province of Entre Ríos: 9671/05 law
■ CABA: law 1225 / 08 for managerial personnel and law 4330/13 that modifies the previous act making it applicable to all the staff, including temporary workers

**Law on comprehensive protection for women Nº 26.485/09** https://www.oas.org/dil/esp/Ley_de_Proteccion_Integral_de_Mujeres_Argentina.pdf

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**TRAINING AND ACTIONS UNDERTAKEN AT THE LEVEL OF FESPROSA**

CICOP-FESPROSA has conducted training sessions at various levels on gender equality and gender equity. These included:

■ Gender equity (Buenos Aires, Tucuman, Mendoza)
■ History of women in trade unionism and feminist activism in Argentina
■ Laws on gender
Comunicación N° 4
23 de agosto de 2016
Qué debe hacerse y qué no puede hacerse ante una mujer que consulta en situación de aborto
La consulta al sistema de salud de mujeres que se encuentran cursando un aborto –es decir, una interrupción espontánea o inducida del embarazo en cualquiera de sus variantes clínicas– es una situación frecuente y su atención forma parte de la práctica diaria de las/los integrantes de los equipos de salud.
En general, las mujeres que consultan se encuentran en una condición clínica estable, no crítica, pero algunas de ellas llegan a los servicios de salud en estado grave y necesitan atención inmediata. El tratamiento oportuno y adecuado puede evitar mayor morbilidad y en determinados casos, salvarles la vida.
¿Cuáles son las situaciones por las que puede concurrir una mujer en situación de aborto?
- Amenaza de aborto de un embarazo planificado o no
- Aborto espontáneo, ya sea que la mujer tenga o no

conocimiento de que estaba embarazada.
- Aborto inducido o provocado.
- Complicaciones debidas a una interrupción legal del embarazo por causa de peligro para su vida, peligro para su salud o en caso de violación (ya sea con tratamiento médico o quirúrgico, prestada anteriormente en el servicio al que consulta o en otro establecimiento de salud).
- Complicaciones producto de un aborto inseguro (autoinducido o inducido por una persona no calificada y/o en un ambiente inseguro).

Qué debe hacerse
Cada contacto de la mujer con los servicios de salud debe considerarse una oportunidad única, esto es, una oportunidad para realizar otras intervenciones del cuidado de la salud y de realizar la consejería en salud sexual y reproductiva, así como garantizar el acceso a métodos anticonceptivos.
La atención de las mujeres que cursan un aborto siempre debe enmarcarse en el respeto hacia las personas y sus derechos sexuales y reproductivos, como parte fundamental de los derechos humanos y como un deber de todo integrante de un equipo de salud.
The Legislature of Córdoba approved Wednesday the creation of leave for gender violence for agents of the Provincial State.

The period of leave will be up to 30 days per calendar year - continuous or discontinuous - renewable for the same period for those who suffer family or gender-based violence.

Teachers, Health personnel and members of the Public Administration can request the leave.

The authorities of each of the agencies must carry out, by means of regulation, the pertinent normative adjustments to incorporate leave in their work arrangements.

Physical, psychological and/or social is violence intended to cause physical harm or suffering to the worker in the form of continuous and repeated hostility through insult, psychological harassment, contempt or criticism.


CONDITIONS AND WORKING ENVIRONMENT

SIPRUS-FESPROSA in the province of Santa Fe is actively involved in the joint health and safety committees in the province. For example, it applied Convention 155 in the case of workplace harassment against workers at health centres. As a result, the Director was dismissed.

From 2011 CICOP participates, through its branches, in the joint committees on labour and environment conditions in each workplace.

In 2012 the Commission of violence was created in the Ministry of Health of the province of Buenos Aires. CICOP continues to be a central actor in this commission.

CICOP works on protocols to combat violence in the workplace and has established a “hospital caregiver” a worker who is a member the health team to replace outsourced security personnel operating in each hospital.

From 2014, CICOP started to maintain records of cases of violence in hospitals. The greatest difficulty/stumbling block in the implementation of the protocols was the Ministry of Security in the province of Buenos Aires.
In one case, a hospital director was dismissed for workplace violence and abuse. In another case, the ex-husband of a professional woman, who works in the same place, even though there were legal restrictions against him, he continued to harass her, in complicity with the hospital’s management. CICOP negotiated for them to work in separate workplaces and the female employee is now working in other hospital. In some cases, male first year residents who are guilty of violence and harassment are not promoted.

Hospital Garrahan: In 2010, the professional association started to work on the issue of workplace violence. The association observed between 18% and 25% absenteeism, as a result of increases in abuse at the workplace. There is wage discrimination among 400 professionals which is more than half the number of workers. Out of 4,500 workers, 500 are on contracts and without job security.

In 2013 a sub-committee on the prevention of ill-treatment was formed with workers giving their service three times a week. It currently works with the victims and focus/discussion groups in the workplace.

They are the 4 unions in the hospital representing workers in occupational health, the human resources department, nursing, health and the environment, maintenance, hygiene and safety. The President of the union was a victim of abuse and harassment at work.

Although laws and regulations are of great help, experience has shown CICOP-FESPROSA that collective action and the correlation of forces in union actions are the necessary engines to reverse and change the incidence and prevalence of violence in the workplace.

REFLECTIONS AND PROPOSALS

It would appear that there is a situation where violence in health facilities is now the norm. Injustice in the workplace is prevalent. One activist comments, “this is the case, there is no way to change it.” There are increasing attempts to silence workers and there is a sense of helplessness. “We are not listened to. We are not considered, when in fact we are the ones who can contribute more.”

CICOP-FESPROSA observes that violence and labour injustice are legitimised in the health sector. Even though workers can bring a lot to the discussions, unions are not heard, and are often silenced.

Co-worker violence is present in the way in which work is organised. There is discrimination between the various professions in health care, as well as between genders. There is also class discrimination which contributes to the culture of violence in the workplace – between patients and workers and between co-workers.

In primary care centres (clinics), violence manifests itself first from the outside in the forms of physical violence and theft. External violence is the type of violence that is most visible. But it is not statistically the most important. In such cases it is important to have a participatory approach to tackle workplace violence.
INSTITUTO DE FORMACIÓN, CAPACITACIÓN E INVESTIGACIÓN (IFCI)-FESPROSA (INSTITUTE OF TRAINING, CAPACITY BUILDING AND RESEARCH)

On December 21, 2016 the National Congress of FESPROSA approved the establishment of the Institute of Training, Capacity Building and Research with Sis Viviana Garcia as Director.

IFCI commenced activities in April 2017 and during the year FESPROSA conducted a number of training sessions and activities on violence and harassment in the world of work.

These included:

- An orientation manual on Violence and Harassment in the World of Work. PSI affiliates in Argentina are using the manual.
- A series of training sessions throughout the province of Buenos Aires
- Participation in the Argentine national campaign on workplace violence.
- The production of two educational videos on Violence and Harassment in the world of work.

[See appendix for a complete list of the training sessions and activities (in Spanish only)].

UNDERSTANDING WHAT IS VIOLENCE AND HARASSMENT IN THE WORLD OF WORK

IFCI has also prepared a questionnaire on Violence and Harassment in the World of Work to assist in gathering information on the experiences of healthcare workers.

The questionnaire will also be used by other PSI affiliates in Argentina.

"Es necesario intensificar los esfuerzos para tratar las diversas manifestaciones de violencia en el mundo del trabajo. Si bien la terminología puede variar entre los diversos países, el rubro de «violencia y acoso» incluye un continuo de comportamientos y prácticas inaceptables que probablemente se traduzcan en sufrimiento o daños físicos, psicológicos o sexuales. Es necesario prestar particular atención a la violencia de género. El uso indebido de la tecnología también se reconoce como una fuente de preocupación."