Cleaning in Times of Pandemic

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Cleaning services are a transversal activity that guarantees the proper functioning and conditions of safety, hygiene, and health across all economic sectors. The COVID-19 pandemic increased the need for clean, sanitary spaces, particularly in health services and other areas with a large number of people. The workers in these services were often placed on the frontline without any specific training or information.

cleaners cleaning services confinement Facility services

1. Introduction

Regardless of the industrial or service sector, whether public or private, all have some kind of cleaning activities in common. They guarantee basic hygiene and the quality of living and working conditions.

As an independent, specialised service, the cleaning sector began to grow at the end of the Second World War. However, the sector experienced significant expansion in the mid-1960s due to the abundant supply of labour and its low initial investment (Scandella 2010). Currently, according to the European Cleaning and Installation Services Industry (EFCI) Federation (EFCI 2020), the sector employs more than 4.2 million people in more than 297,000 companies in Europe (NACE code 81.2: "cleaning activities"). In Portugal, according to the INE (INE 2021), in 2020, this sector of activity housed 9393 companies, having experienced rapid growth; employed 90,103 workers; and had a turnover of more than 1.3 thousand million EUR. In Europe, the sector is dominated by companies with nine or fewer employees (EFCI 2020; INE 2021). However, this growth was accompanied by structural changes in the cleaning industry, such as increased competition, the disappearance of permanent jobs, privatisation, and segmentation, leading to different impacts on employers and workers in this sector (Ollus 2016).

The International Labor Organization (ILO) classifies these workers among the most vulnerable groups (ILO-Lisbon 2020). The COVID-19 pandemic aggravated this situation, increasing the cleaning workers' direct exposure to harmful agents (Sun et al. 2020). The awareness of their exposure to risks and the danger to their close relatives significantly added to their level of stress (Pfefferbaum and North 2020). This situation was further aggravated by the social disqualification of this activity (Rodrigues et al. 2013).

Given the cleaning sector's fast pace and excess workload, workers do not have time for adequate training (Suleiman and Svendsen 2015). In addition to low levels of schooling, this partly explains why there are so many work accidents and work-related illnesses in this sector (Parra-Tapia et al. 2019). Therefore, how little researchers know about the reality of cleaning workers is surprising, as well as the lack of academic interest in this professional category, which is largely neglected in scientific research (Luz et al. 2017).

In this sector, relations between workers and employers are more precarious than in most others. Outsourcing aggravates the precariousness of the cleaning companies concerning the enterprises for which they provide services. This means that the workers do not work on their employer's premises, further legitimising precarious forms of employment (Bondy 2018). At the same time, there has been increased pressure on working conditions, heightening the profession's socially disqualified image (<u>Brugière 2017</u>). A service that is provided before or after "regular" working hours, usually under subcontracting schemes, removes the "cleaning" factor from companies and makes hygiene and cleaning even more invisible (<u>De Gasparo et al. 2018</u>). Thus, if work is invisible, its value also becomes invisible from an economic point of view (<u>Hughes 1997</u>; <u>Lhuilier 2005</u>; <u>De Gasparo et al. 2018</u>).

In addition to chemical risks (Nan et al. 2021; Ruokolainen et al. 2022), these workers face other risks that cannot be ignored, particularly ergonomic risks (Naik and Khan 2020; Gonçalves and de Oliveira Sato 2020), health risks (Taş et al. 2021; Furuya et al. 2022), and psychosocial risks (Sooleong et al. 2021; Unge et al. 2007).

2. Perceptions of COVID-19 Risks among Workers in Facility Services

The facility services industry, in particular, cleaning services, was one of the economic sectors in high demand during the pandemic to cope with the sanitary requirements. Due to its labour-intensive characteristics, it employs a large number of workers, mainly women.

The facility services sector increasingly provides a diverse range of services. However, its main activities are largely associated with cleaning activities inside buildings, building maintenance, gardening, sanitation, and pest control.

In terms of its main characteristics, the service is performed at the client's premises; the allocated workforce has an employment contract associated with a workplace and not with an enterprise (Bondy 2018; Eurofund 2014). The workplace may be occasional, in which workers belong to different service teams, or it may be habitual, resulting in a fixed workplace at the customer's premises (Larsen et al. 2019). The complexity of the cleaning service provided varies, ranging from domestic households to hospital surgical blocks (EFCI 2020; Marconato et al. 2017).

However, there is no professional recognition of this sector's workers or their tasks' importance (Brugière 2017). The majority earn minimum wage, and the working hours are generally outside the company's business hours, which implies working at night and/or early morning, as well as maintaining services, even at minimal levels, on festive dates and holidays (Eurofund 2014; Larsen et al. 2019).

Labour dynamics and worker well-being have long raised the interest of the social sciences and other disciplinary areas, particularly occupational and public health. Facility services, more specifically, cleaning activities, are often addressed in studies dedicated to occupational diseases, i.e., diseases caused by work-related factors. These diseases are generally contracted when workers are exposed to chemical, physical, and biological agents above the legal limits without the appropriate protection (Castro et al. 2019; Gonçalves and de Oliveira Sato 2020; Taş et al. 2021).

Other risks arise from, for example, repetitive physical movements, extreme body postures, exposure to mechanical elements, intense work rhythms, physical violence, and moral harassment in the workplace (<u>Castro et al. 2019</u>), which also lead to occupational diseases and worsen the existing social vulnerabilities among cleaning workers (<u>Marconato et al. 2017</u>).

Despite a growing trend in studies focused on occupational diseases and surveys that measure the functional and psychosocial aspects of work (e.g., the Copenhagen Psychological Questionnaire—COPSOQ-II) (Gonçalves and de Oliveira Sato 2020), research on the cleaning sector raises other issues: the repercussions of outsourcing on working conditions, labour exploitation, and the workers' risk exposure (Toffolutti et al. 2021). For example, studies show that outsourcing cleaning services in hospitals lead to low hiring, poorer working conditions, and lower availability of

hygiene materials, which may increase the risk of contamination (Toffolutti et al. 2017). It also has the aggravating factor of exposing workers to living with pain, suffering, and death, even if they do not engage directly with patients. This contact with death is more frequent during pandemics (Marconato et al. 2017). In another sector, the agri-food industry, some authors even speak of corporate crime because poor regulatory oversight fosters the overuse of subcontractors as a form of outsourcing labour and social responsibilities (Davies and Ollus 2019; De Gasparo et al. 2018).

The literature review also shows that gender inequalities deeply mark the cleaning sector, reflecting the darkest dimensions of the social processes of disqualification and the precariousness of female labour. The sector emphasises how the domestic skills traditionally required of women are extended to the world of work, reproducing the segregation of social gender roles (<u>Lefrançois et al. 2017</u>; <u>Young 2010</u>; <u>Holley and Rainnie 2012</u>; <u>Campbell and Price 2016</u>).

Although a minority, men also work in this sector, sometimes in leadership positions, reflecting the rationale of male domination, and sometimes in cleaning activities that require strength and physical dexterity, thus reproducing biological determinism. In general, compared to men, women are more affected by precariousness, i.e., by greater insecurity and instability of employment, underemployment, lower wages, less social protection, and greater difficulties in reconciling work and family life, circumstances to which cleaning workers are particularly vulnerable. Consequently, substantial gender inequalities persist in this economic sector (Young 2010; McBride and Lucio 2021; Ollus 2016; Lefrançois et al. 2017). The workforce mainly involves lower-class women, ethnic minorities, migrants, low levels of schooling, part-time work, temporary work, and short-term contracts (Ollus 2016).

Recently, intersectional thinking has also gained prominence in labour and organisational studies. This approach was first used to analyse positions and experiences within the professional hierarchy and then to focus on the structural manifestations of workplace inequalities (Browne and Misra 2003). As a concept, intersectionality denotes the juxtaposition or meeting point of two or more social categories and axes or systems of power, domination or oppression (Crenshaw 2018). This framework offers theoretical explanations for how heterogeneous members of specific groups (such as cleaning women) may experience the workplace differently depending on their ethnicity, class, or other social locations (Browne and Misra 2003).

In the aftermath of the COVID-19 pandemic, little is known about how the workers in such a critical sector dealt with the extra demands associated with the pandemic and the risks they faced. Cleaning workers have remained practically invisible in the public debate about responding to the COVID-19 crisis. However, it is reasonable to assume that exposure to environments where people circulate and the risk of transmission is perceived as high would leave some marks on how workers feel about their job and their general well-being, especially their mental well-being. That was the starting hypothesis for the research presented in this entry (Roig et al. 2022; Casquilho-Martins and Belchior-Rocha 2022).

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