Recognition of Medical Profession as an ARDUOUS JOB

European Commission's Reply

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Question for written answer to the Commission

Rule 144

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Subject: Working conditions of doctors in Europe

In a report published in 2016, the European Commission defined arduous work as follows:

"Occupations involving the exposure of the worker over a period of time to one or several factors leading to professional situations susceptible to leave long-lasting and irreversible effects on his/her health; these factors are related to physical constraints, psychosocial risks, an aggressive physical environment, working organisation and working rhythms, including shift work."

*According to a recent study conducted by the European Federation of Salaried Doctors (**FEMS**), the working conditions of doctors meet all these criteria, particularly in the more demanding medical specialisations. Furthermore, the current shortage of doctors has further deteriorated their working conditions, increasing the physical and psychological demands of their profession.*

In light of the above:

1 Does the European Commission intend to promote a European initiative to define common criteria for fair remuneration, safe working hours, and the recognition of the physical and psychological risks faced by doctors as arduous or hazardous work?

2 Does the European Commission plan to initiate a dialogue with Member States and social partners with a view to harmonising the implementation of national legislative standards on this issue?

EN E-002607/2025
Answer given by Executive Vice-President Mînzatu on behalf of the European Commission (14.8.2025)

*1. **Directive 2003/88/EC1** limits weekly working time and sets minimum daily and weekly rest and paid annual leave. It covers all workers in the EU including doctors in an employment relationship (i.e. not those who are self-employed). Concerning safety and health at work, **Council Directive 89/391/EEC2** lays down obligations on the employer, including assessment of all risks to which workers are or can be exposed and resulting preventive and protective measures. The Directive covers physical and psychosocial risks and applies to all sectors, both public and private, including doctors. The Commission does not intend to define common criteria for the recognition of such risks faced by workers, including doctors, as hazardous work.*

***Article 153(5) of the Treaty on the Functioning of the European Union (TFEU)** excludes pay from the areas in which the EU can adopt legislation, thereby preventing the EU from directly setting or regulating remuneration, including for professions such as doctors.*

*2. **Article 153(2)(a) of the TFEU** prohibits the EU from any harmonisation of the laws and regulations of the Member States, so harmonisation of national legislative standards on doctors' working conditions is not possible.*

The Commission supports Member States addressing health workforce challenges. A forthcoming survey of health professionals under EU4Health led by World Health Organisation (WHO) Europe, will provide feedback on national policies on factors influencing mental health and wellbeing in the workplace. Working conditions for nurses are addressed through an EU4Health funded Nursing Action4 led by WHO Europe in partnership with European nursing associations and social partners. The Commission also supports social dialogue at EU level in the hospitals and healthcare sector.

WHAT IS THE UNDERLYING MEANING IN THIS DOCUMENT?

*The general impression is that the document may have been prepared by someone **not** fully **familiar** with the topic or has **no intention** of addressing it*

1. ***Directive 2003/88/EC1:*** *is not a safeguard guarantee since EWTD is not fully implemented or adopted (as proved by the current and foreseen workforce shortage)*
2. ***Council Directive 89/391/EEC2*** *lays down obligations on the employer. It is the responsibility of another party*
3. ***The Commission does not intend*** *to define common criteria for the recognition of such risks faced by workers, including doctors, as **hazardous** work. → Arduous is not Hazarduous (not familiar with the topic)*

4. Article 153(2)(a) of the TFEU *it falls under the responsibilities and jurisdiction of the Member States **BUT** the EU Legislation could develop and implement national provisions taking into account different regulations and experiences of Member States.*

*5. **WHO survey on mental health** No consideration is given to the impact on the physical health of operators*

6. Working conditions for nurses *it gives the impression that greater attention is given to nurses*

WHY?

- More than 3,000,000 nurses in Europe versus 1,800,000 doctors
- *Lobbying Activity*
- *Currently, a lower–paid profession*
- *Shorter educational path*

Proposals for NEXT STEPS

10-11 October FEMS General Assembly

- *Presentation and Discussion of FEMS Policy Paper on the recognition of medical work as an arduous occupation*

Launch and dissemination of the document with dedicated events

European Parliament – JANUARY 2026

- Raise awareness and share information on the issue
- Explore the feasibility of a national action as a pilot case

Engagement with other stakeholders

- European Public Service Union – EPSU
- EU-OSHA
- MEPs
- Support from EMOs – common statement and lobbying activity

Alliance with the European Federation of Nurses - EFN

- Detailed evalution of pros vs cons



FEMS General Assembly – POINTS FOR DEBATE

1- How can FEMS raise awareness and share information on this issue at national and European level?
2- Pilot case: Is any country interested?
3- EP Conference on Medical Profession as an arduous job – Ideas for discussion Topics and Presenters
4- Support from EMOs – common statement and lobbying activity

Alliance with the European Federation of Nurses - EFN

- Detailed evalution of pros vs cons – **roundtable discussion**

- **Any other comment?**

