



Gard Crew Claims Report

2025



Behind every data point
covered in this report,
there is a story of a
seafarer and their family.

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1 About this report

The Crew Claims Report 2025 is the second of its kind; the first one was published in 2024.

This report is based on a comprehensive review of all crew claims registered under Gard's P&I Mutual portfolio during the 2024 calendar year, drawing comparisons from previous years' data to identify key trends and variations.

The analysis focuses on claim frequency, cause, and distribution across different claims categories.

Importantly, and for the sake of consistency, we have chosen to exclude all Covid-19 related claims, as their inclusion would create significant anomalies in the data for the relevant years.¹ We have also excluded one specific incident from the 2024 data, as it is still subject to ongoing investigations.

To complement the claims data, insights have also been drawn from Gard's Crew Wellbeing Survey from 2024, which includes responses from over 6,000 seafarers across 46 nationalities, exploring factors such as physical health, mental wellbeing, rest, and social support. Additionally, structured case reviews

were conducted by Gard's global claims handlers to examine the context of crew fatalities in greater depth.

Report authors

The Gard Crew Claims Report 2025 has been produced with contributions from across Gard's offices, its global claims organisation as well as experts from our Analytics and Communications teams. The final compilation and analysis have been conducted by Kunal Pathak, Siri Skjørestad, Gillian Woodroffe and Lene-Camilla Nordlie. We thank our colleagues for their contributions to this report.



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¹ For further insights relating to Covid-19 and its impacts on crew, there are other publications and sources available, including [this 2022 study](#) commissioned by the ICS.

2 Executive summary

This report explores what the year 2024 looked like for seafarers across the world, as seen through the lens of claims data from Gard.

Between 2020 and 2024, Gard handled over 30,000 claims under our P&I mutual portfolio. Nearly half of these were related to people. In 2024 alone, over 6,000 claims were registered—again, with close to 50% involving people. Of these, crew claims accounted for close to 90%, making crew the natural focus for this report.

So, what does the claims data tell us about the health, safety and wellbeing of seafarers in 2024? On the one hand, the numbers suggest a relatively stable picture compared to previous years. On the other hand, the apparent stability may not be as reassuring as it seems – could it mask persistent underlying risks? What illnesses and injuries are we consistently seeing, and what, if any, are the risk factors that continue to go unaddressed?

Injuries accounted for 37% of our crew claims registered in 2024, with finger and back injuries being the most frequently reported. The leading causes of injuries included cuts, crush incidents, slips and falls.

Illness claims made up 60% of the crew claims, with the most common issues being abdominal, heart conditions and back pain. While these health problems are similar to those seen in the general population,

they are often far more challenging to prevent or treat at sea due to the demanding working environment and limited access to medical care. And as this report shows, many of the most frequent illnesses are also caused or aggravated by stress—a clear reminder of the importance of wellbeing and psychological support for crew at sea.

Importantly, Gard also registered more than 90 incidents resulting in crew deaths in 2024. The majority of these were related to illness, and many of the fatalities occurred early in a seafarer's contract. There were seven incidents leading to fatal injuries - most of these stemmed from falls and man overboard (MOB) incidents.

Incidents of suicide recorded in 2024 remain concerning and notably, they exceeded the number of fatal accidents. Most cases involved officers and occurred early in their contracts. These findings underscore the importance of early intervention, having a trust-based culture onboard, and not least, having an even stronger focus on mental wellbeing at sea.

The aim of this report is not to prescribe solutions. Our goal is primarily to articulate the challenges as we see them from the insurance side, so that shipowners and operators can explore practical and concrete measures tailored to their own operations.

We invite readers to reflect: Are the industry's current health and wellbeing solutions for seafarers sufficient, or might critical risks be overlooked? What more can

be done to identify and address the less visible risks, the ones that may not be captured through traditional surveys?

We hope this report provides insight, raises the right questions, and above all, helps drive meaningful conversations and inspire action where needed — because behind every single data point covered in this report, there is a story of a seafarer and their family.

Key findings

Stable but preventable:

Illnesses and injuries among seafarers remain fairly stable – and many are preventable

Illness is the leading cause of death:

Illness accounts for 83% of all crew fatalities

Stress is a key factor:

8 of the 10 most common illnesses can be caused or aggravated by stress

Suicide rates remain concerning:

Seafarers' psychological distress can easily go unrecognised

3 Introduction

If seafarers were asked to summarise their experience in 2024, we would likely get responses ranging from the good to the bad to the ugly.

The good would perhaps be the increased industry focus on crew wellbeing, as substantiated by the amendments to the MLC, 2006, covering areas related to recruitment, repatriation and the living conditions on board vessels. We have also received encouraging feedback about more timely signoffs and increased focus on work and rest hours.

The bad – despite growing efforts to improve seafarer wellbeing, industry surveys indicated a decline in the overall seafarer wellbeing with persistent challenges related to workload, connectivity and mental health. Seafarers whose work takes them through international waters are also exposed to increased geopolitical instability, sometimes resulting in tragic outcomes such as abductions or even fatalities. Added to this are the dangers posed by adverse weather conditions during long ocean passages coupled with very tight port stays and limited opportunities for shore leave – all of which place additional strain on crew members.

The ugly? 2024 was a record-breaking year for seafarer abandonment – a stark reminder of the shipping industry's systemic failures to protect the

most basic human rights of its workforce. Equally troubling is the growing issue of criminalization of seafarers in relation to incidents at sea or in ports. If you ask a master, criminalisation is one of the most daunting occupational hazards related to the job.

In Gard, we understand the day-to-day challenges of seafaring. The profession comes with its own unique challenges, and we are committed to supporting our Members with the very best claims services we can offer. The intention of the Gard Crew Claims Reports is to raise awareness and help prevent illness and accidents where possible. We believe that by clearly articulating the issues as we see them as P&I insurers, we can prompt the industry to focus on practical, workable solutions.

Key terminology and abbreviations

- PEME = Pre-Employment Medical Examination
- Frequency = Number of incidents registered during 2024 per number of vessel years.
- IBNR = Incurred but not reported
- MLC = Maritime Labour Convention
- MMG = Mariners Medico Guide
- MOB = Man overboard

4 The numbers and trends

Between 2020 and 2024, Gard registered over 30,000 claims in the P&I Mutual portfolio, with nearly 50% related to people.

These claims, representing approximately one-third of the total claims paid out in 2024, include incidents involving crew, passengers, stevedores, stowaways and other persons on board, including people rescued from the sea. However, 91% of the claims are related to crew, with a frequency of 0.35 for 2024, making this the primary focus of this report.

Figure 1: Number of claims by category (2024)

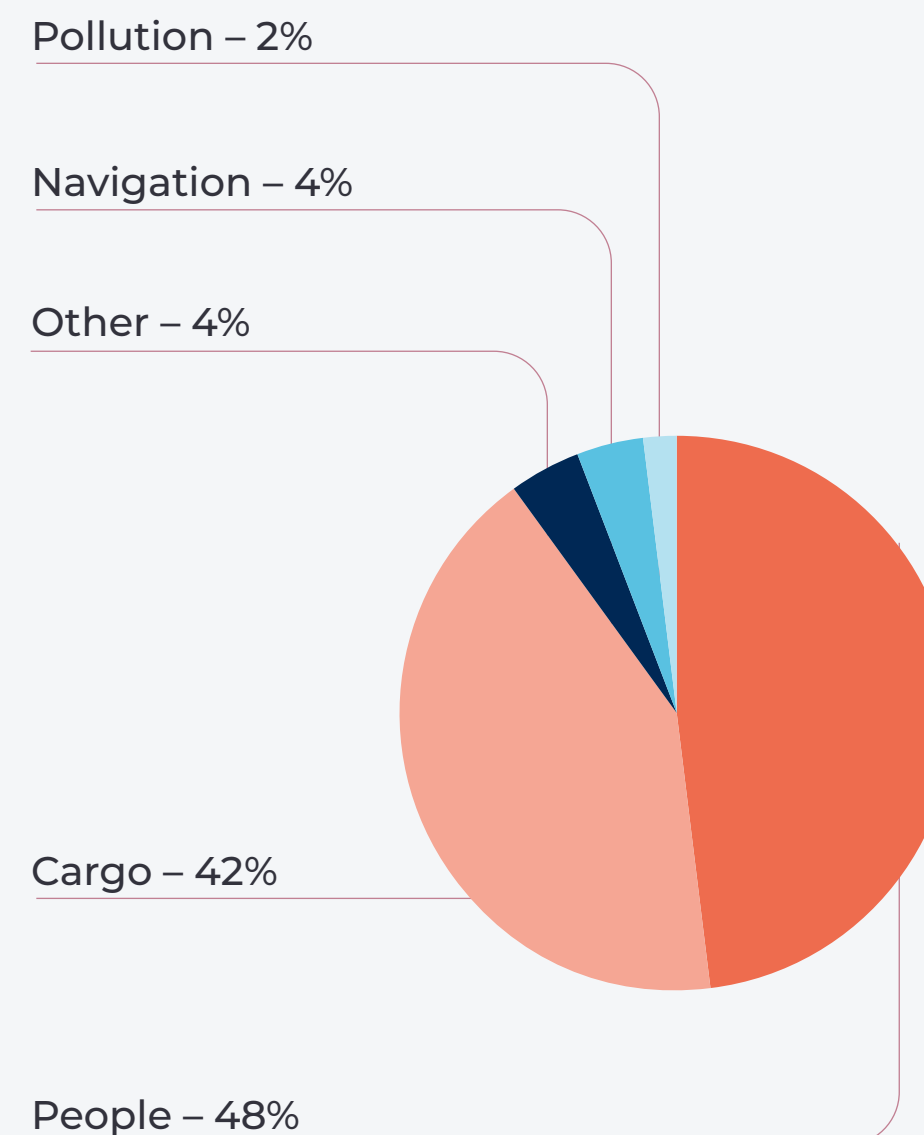
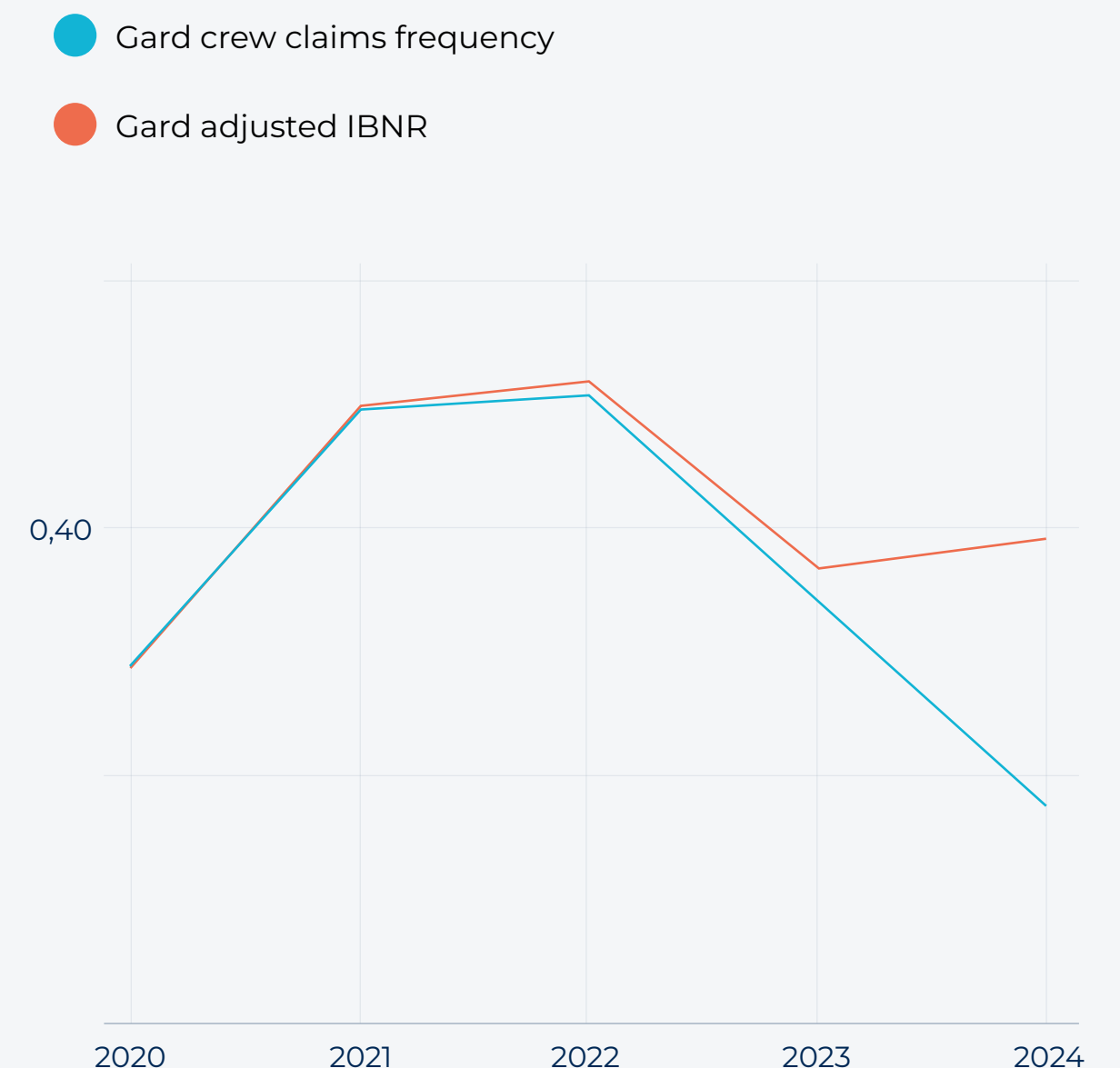


Figure 2: Frequency of Gard crew claims (injury, illness and death), excluding Covid-19 claims (2024)



4.1 Crew illnesses

Nearly 60% of the recorded crew claims in 2024 related to illness, in line with previous years.

Over time, the frequency of illness claims appears fairly stable at 0.22 for 2024, with no significant changes since 2020. The average frequency also remains consistent with what we observed in the three years preceding the Covid period.

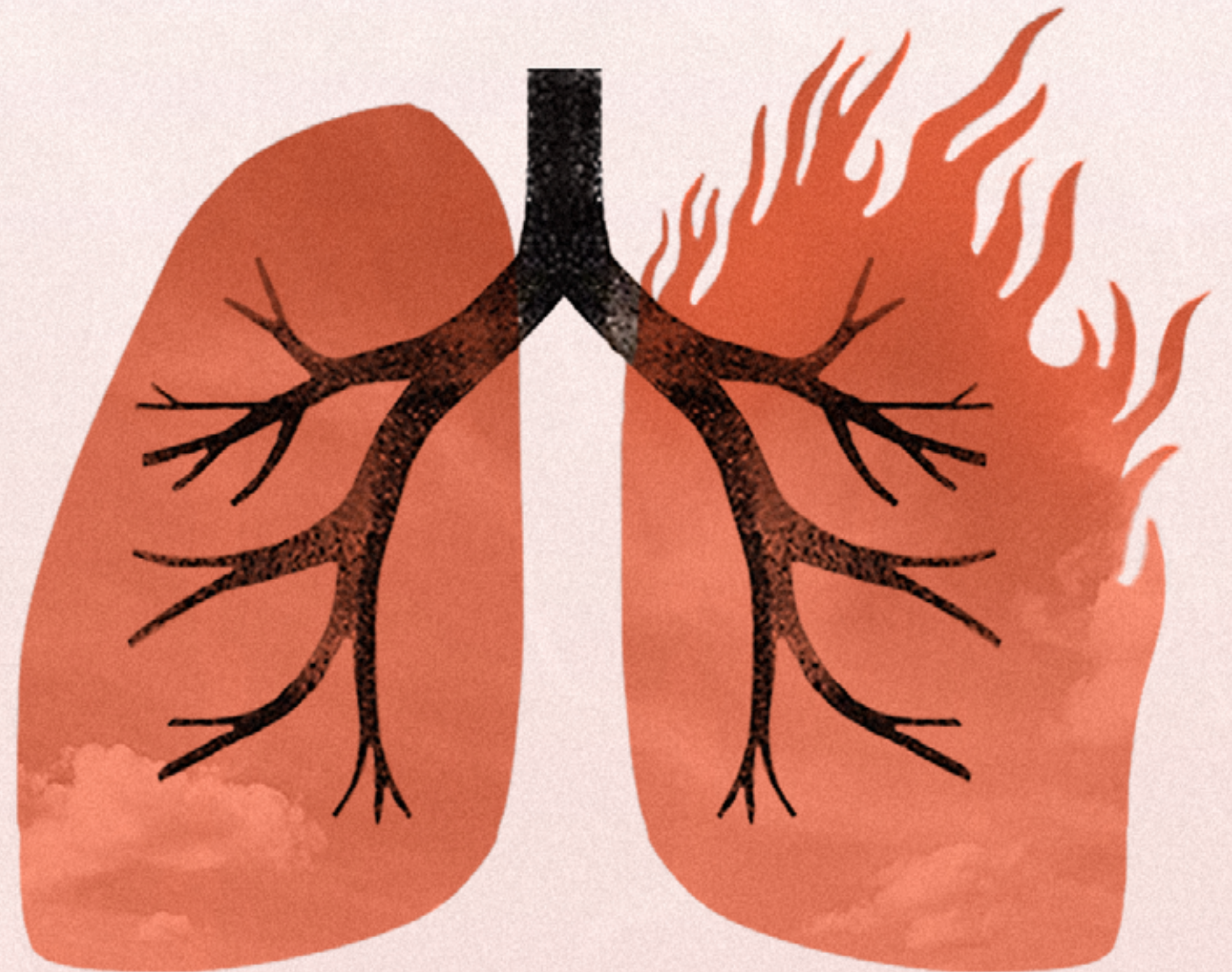


Figure 3: Number of crew claims by category in (2024)

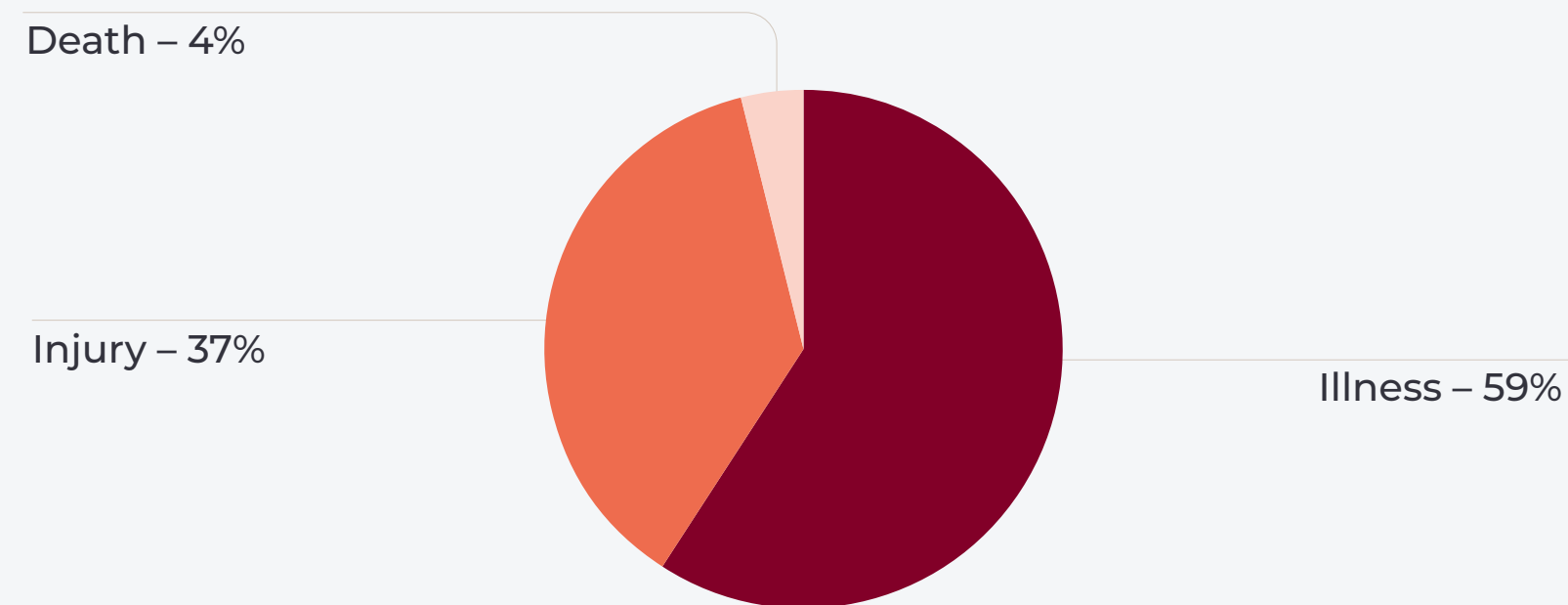
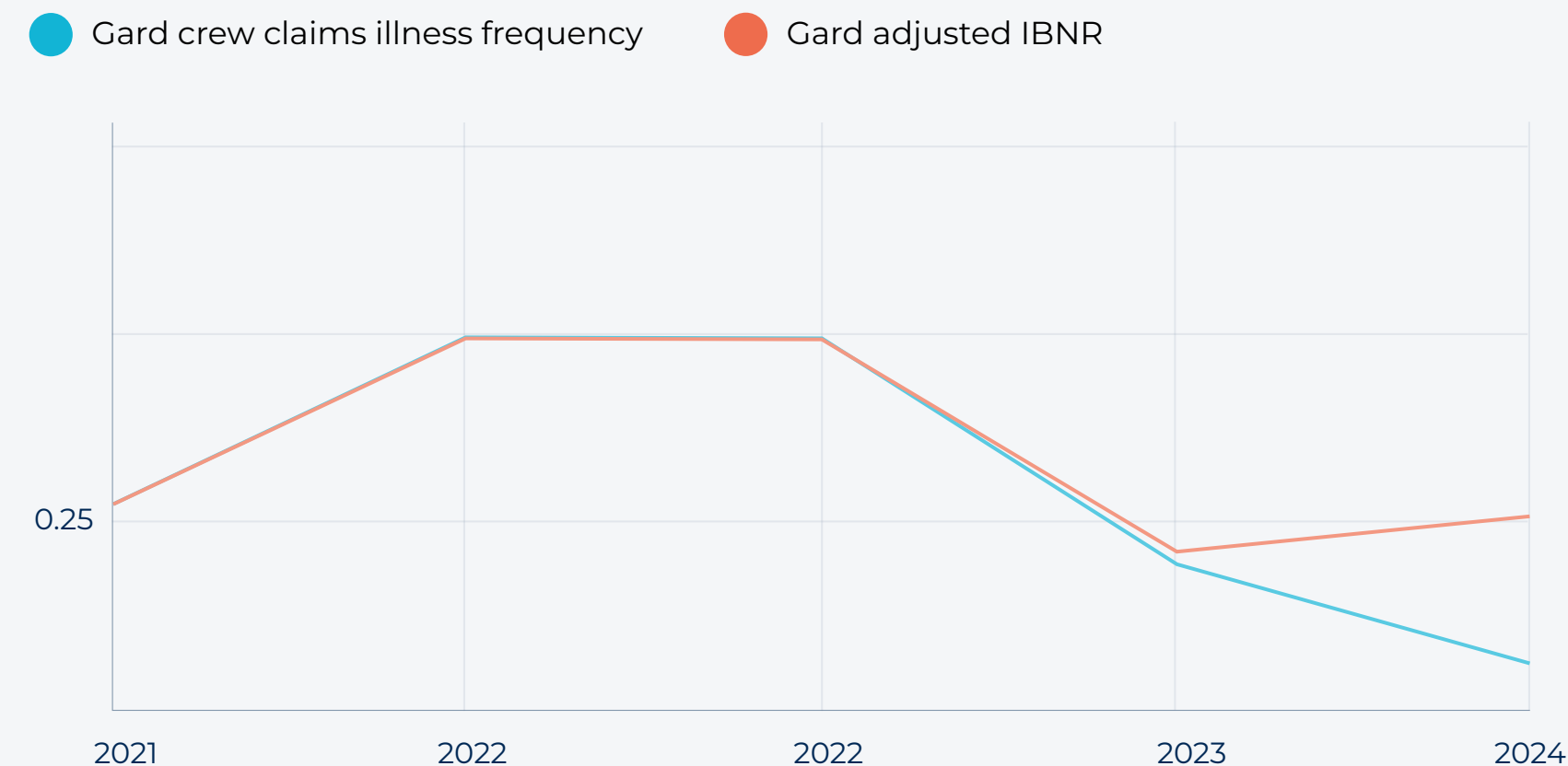


Figure 4: Frequency of crew illness claims (2021-2024)

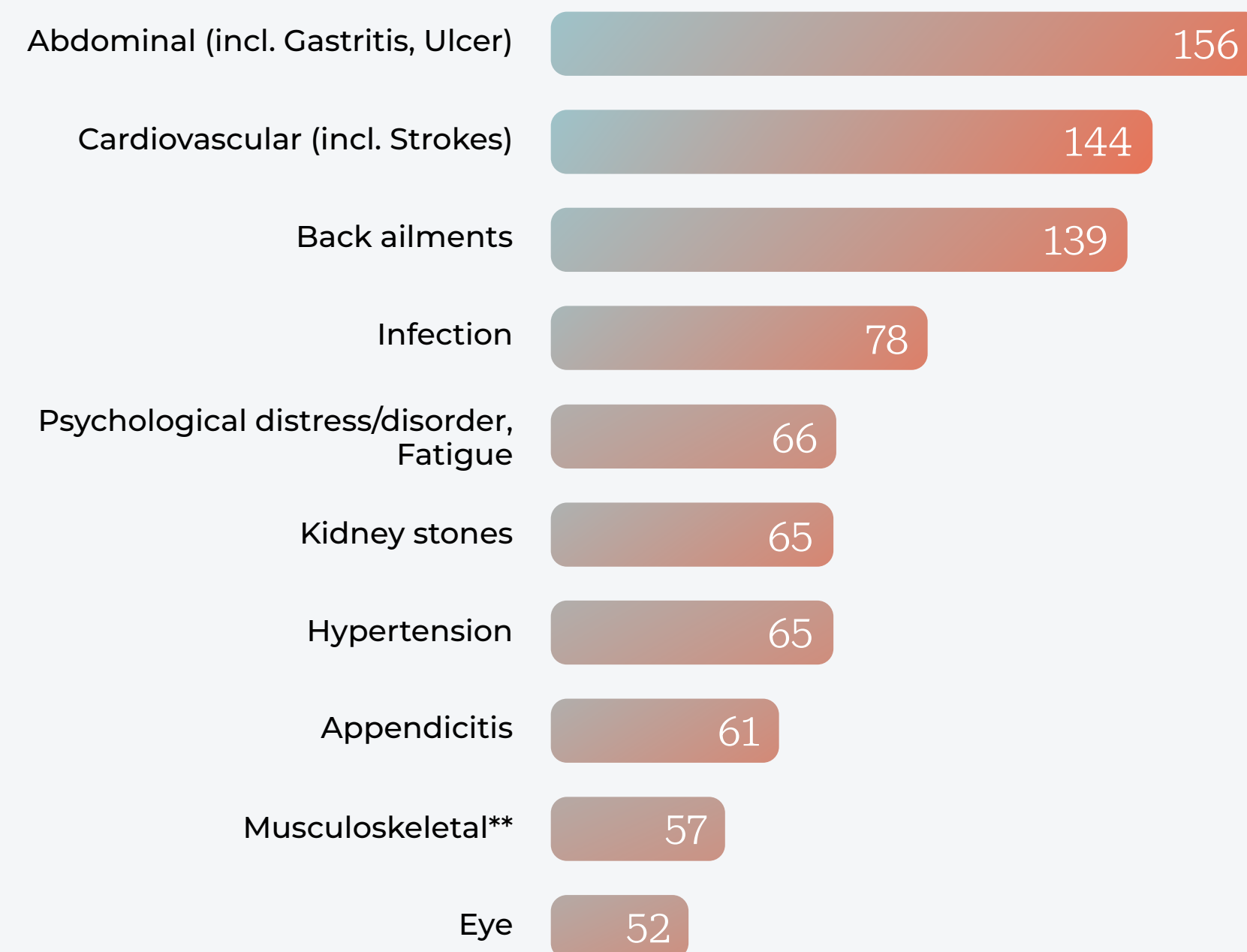


Most frequent illnesses

Overall, the types of illnesses we see among seafarers closely resemble those in the [general public](#). The crucial difference, however, lies in the access to qualified medical assistance, which is far more challenging at sea. In the case of a heart attack, for instance, response time can be the difference between life and death. Also less critical conditions, such as kidney stones, are typically treated quite quickly on land, whereas at sea, they may require vessel diversion, emergency evacuation, treatment ashore and usually repatriation.

The most common causes of illness among crew include abdominal issues, cardiovascular conditions and back problems. Infections, psychological distress/disorder and kidney stones have also remained among the top 10 causes of illnesses for many years. Most illnesses do not have a lasting impact on the seafarer's health or ability to work, but may still lead to significant costs, particularly when emergency evacuation or repatriation is needed.

Figure 5: Top ten illnesses among crew, by number of incidents (2024)*



*Comparing with our 2024 report, we have made some adjustments to our illness categories to ensure better data capture and consistency with the international classification of diseases (ICD). However, when cases are first reported, we usually only receive information about symptoms rather than a confirmed diagnosis. Because of this, our categories are broader than the final diagnosis might be.

**Most of the illnesses we see are related to the musculoskeletal system, but in our claims, we register back problems separately.

Good to know

The importance of healthy seafarers



Healthy seafarers are key to the safety of maritime operations. To reduce risks and avoid claims, we offer extended pre-employment medical examinations (extended PEMEs) for seafarers joining ships insured by Gard.

Many of our Members participate in our extended PEME program in the Philippines, and with around 10,000 examinations conducted annually, this remains a key initiative in our work to ensure seafarer health.

The extended PEME program helps identify and treat medical issues before seafarers go to sea. Common reasons for failing the medical examination include kidney stones,

gallstones, hypertension, diabetes, and cardiovascular diseases - often linked to lifestyle factors like obesity and smoking.

Our doctors highlight the importance of lifestyle education and medication compliance to prevent onboard illness and fatalities. However, some conditions - such as back pain - are rarely detected during these assessments, despite appearing in illness-related claims. This is partially because these conditions develop during the stay on board and are more acute in nature. But there are also indicators that more can be done to make sure the PEMEs are even more efficient.

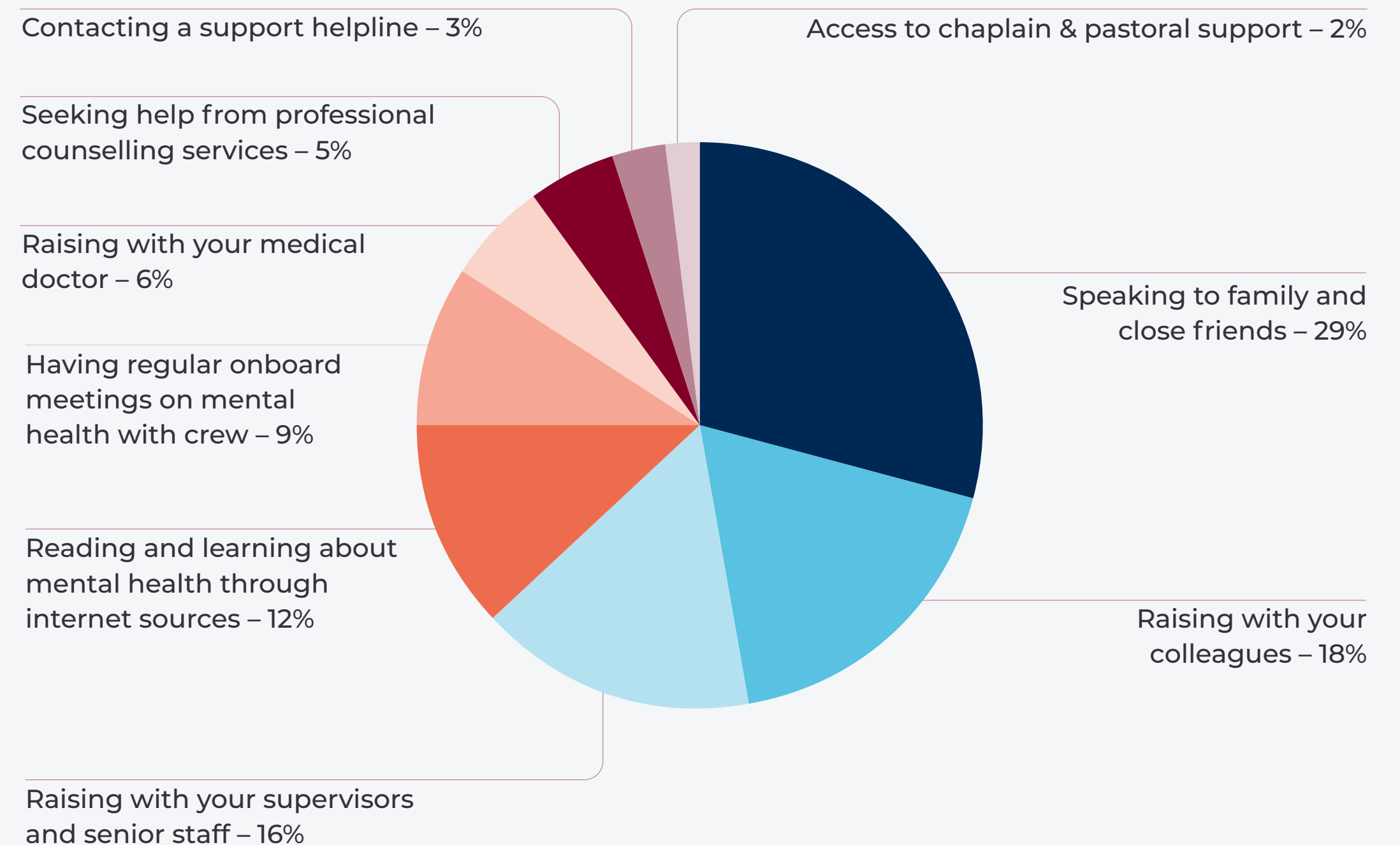
Managing stress onboard

Interestingly, six of the ten most common illnesses among seafarers – such as cardiovascular problems, abdominal pain, hypertension, musculoskeletal issues (including back pain) and psychological distress – will often occur together and they can have the same [underlying cause: stress](#).

Insights from our crew wellbeing surveys reveal that connectivity with family is clearly the preferred coping mechanism, followed by mutual support among crew members. For any seafarer, the ship functions as a social ecosystem, where reliance on one another is key to coping with stress.

Supporting seafarers' mental health is essential to their overall wellbeing at sea. We believe that improved training for seafarers in managing psychological challenges and work-related stress will contribute significantly to their overall wellbeing on board. That is why we are happy to see increased focus and industry collaboration on mental wellbeing, not least within the International Group of P&I Clubs (IG). At Gard, we have actively promoted [Mental Health First Aid](#) training for crew, and we have also contributed to the development of the international [Mariners Medico Guide](#) – a freely available app that offers practical guidance, including support for identifying and managing psychological symptoms. For further details on Gard's loss prevention initiatives, see section 5.

Figure 6: Seafarers' preferred coping mechanism when dealing with stress
(Source: Gard Crew Wellbeing Survey 2024)



4.2 Crew injuries

Gard registered over 800 crew injuries in 2024
– 37% of the total crew claims registered.

We saw a rising frequency throughout the year, but in the end, 2024 turned out better than expected with a slight drop in frequency to 0.13. We see a slight drop in average frequency if we compare the last three years against the three years preceding 2020. Going forward, we hope to see a continued reduction in injuries, in parallel with the industry's ongoing commitment to loss prevention.



Figure 7: Frequency of crew injury claims (2020-2024)

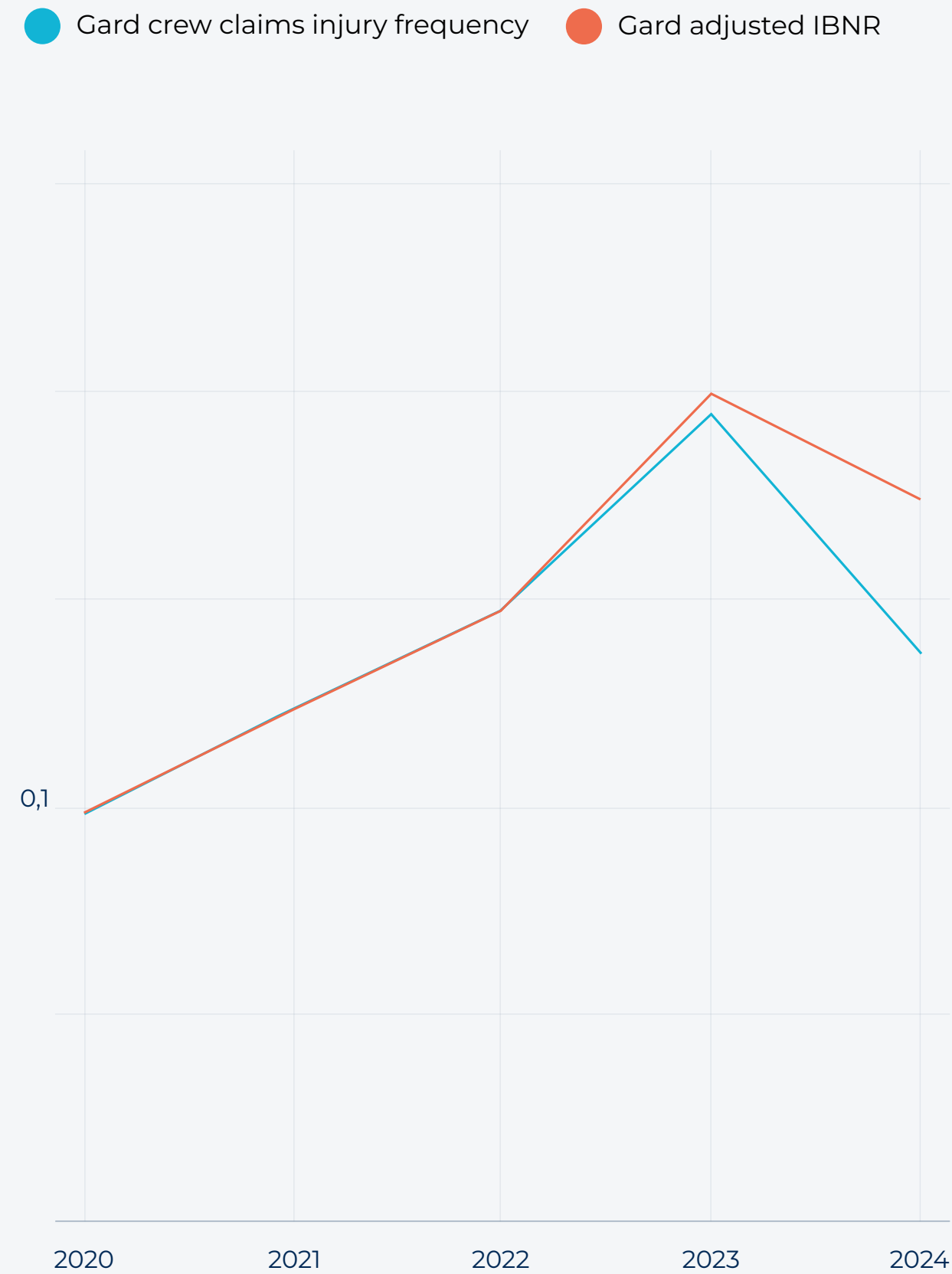
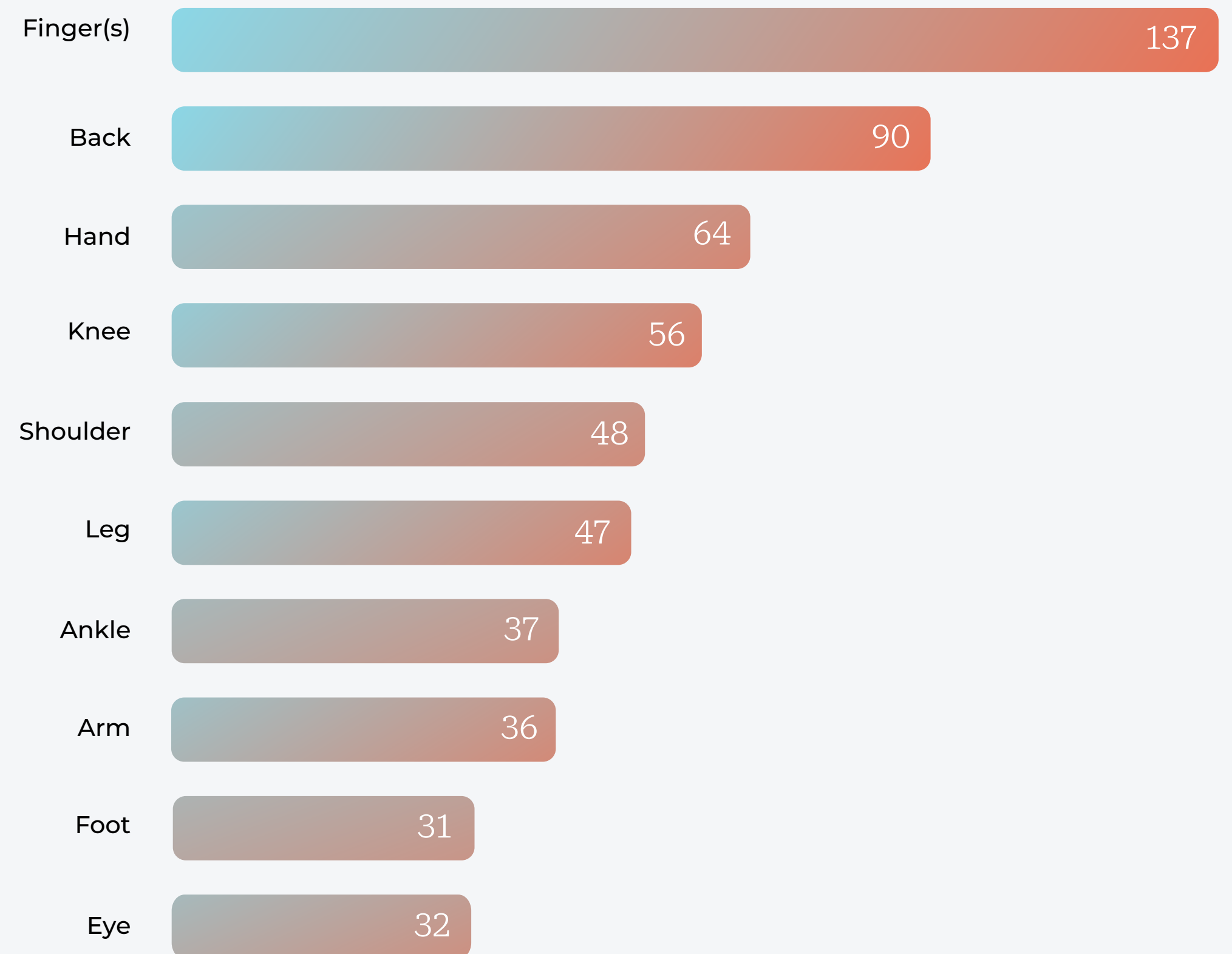


Figure 8: Most common body part injured (2024)



Most frequent injuries

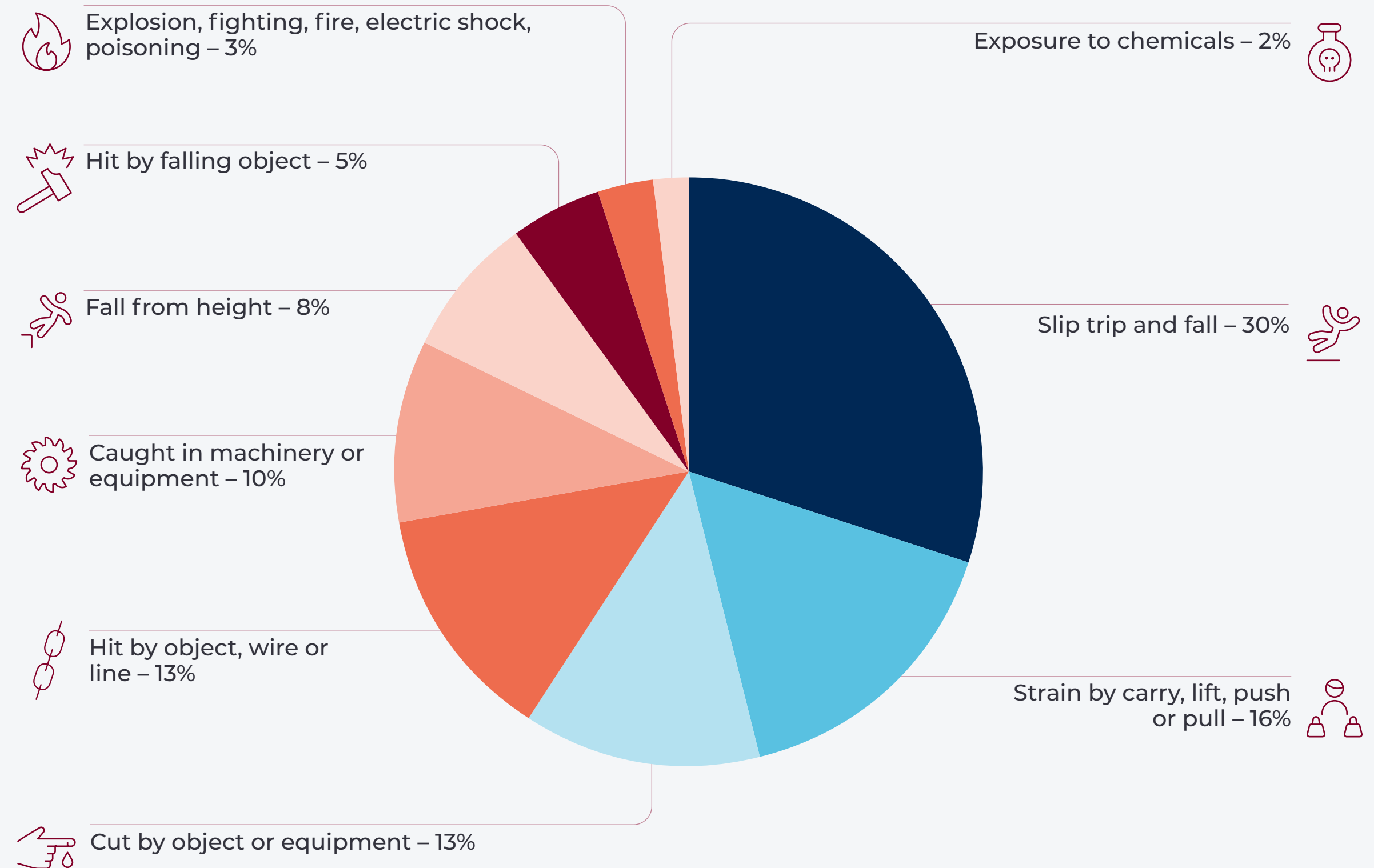
Figure 8 shows the body parts most commonly injured among crew, and the rankings are very similar to previous years. Fingers remain the most frequently injured body part, and we continue to see a high number of crush injuries, often caused by fingers getting caught in machinery, hatch covers, and similar equipment.

Most common causes

The overall pattern of injury causes among crew has also remained relatively stable over the years. However, in 2024, there was a notable increase in registered injuries that were caused by cuts from objects or equipment, a category that had ranked much lower in previous years. This change may be due to improved data quality or simply year-to-year variation. Other prevalent causes of injuries include slips, trips, and falls, followed by strain from carrying or lifting.

It is also important to recognise that there is wide variation in injury severity. For the most severe accidents, there can be a fine line between injury and death. This makes it crucial to examine the potential human and organisational factors behind these incidents. Falls from heights account for 8% of injuries, and as you will see in section 4.3, several of the fatal incidents are also related to falls from heights.

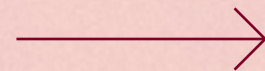
Figure 9: Most frequently reported causes of crew injuries (2024)



4.3 Crew fatalities

Gard registered over 90 incidents leading to crew fatalities in 2024, representing 4% of the total crew claims registered for our P&I mutual portfolio.

The frequency was consistent with the previous year, but if we look at the development over time, comparing the average frequency of death claims for the three years after Covid (2022 to 2024) with the preceding three years, we see a 25% increase (see Figure 10).² We will monitor whether this development continues in the years ahead.



² IBNR cases may impact this increase further, although we believe this is unlikely, since Gard's assistance in connection with a fatality on board will generally take place immediately after the incident.

Figure 10: Frequency of crew death claims (2017-2024)

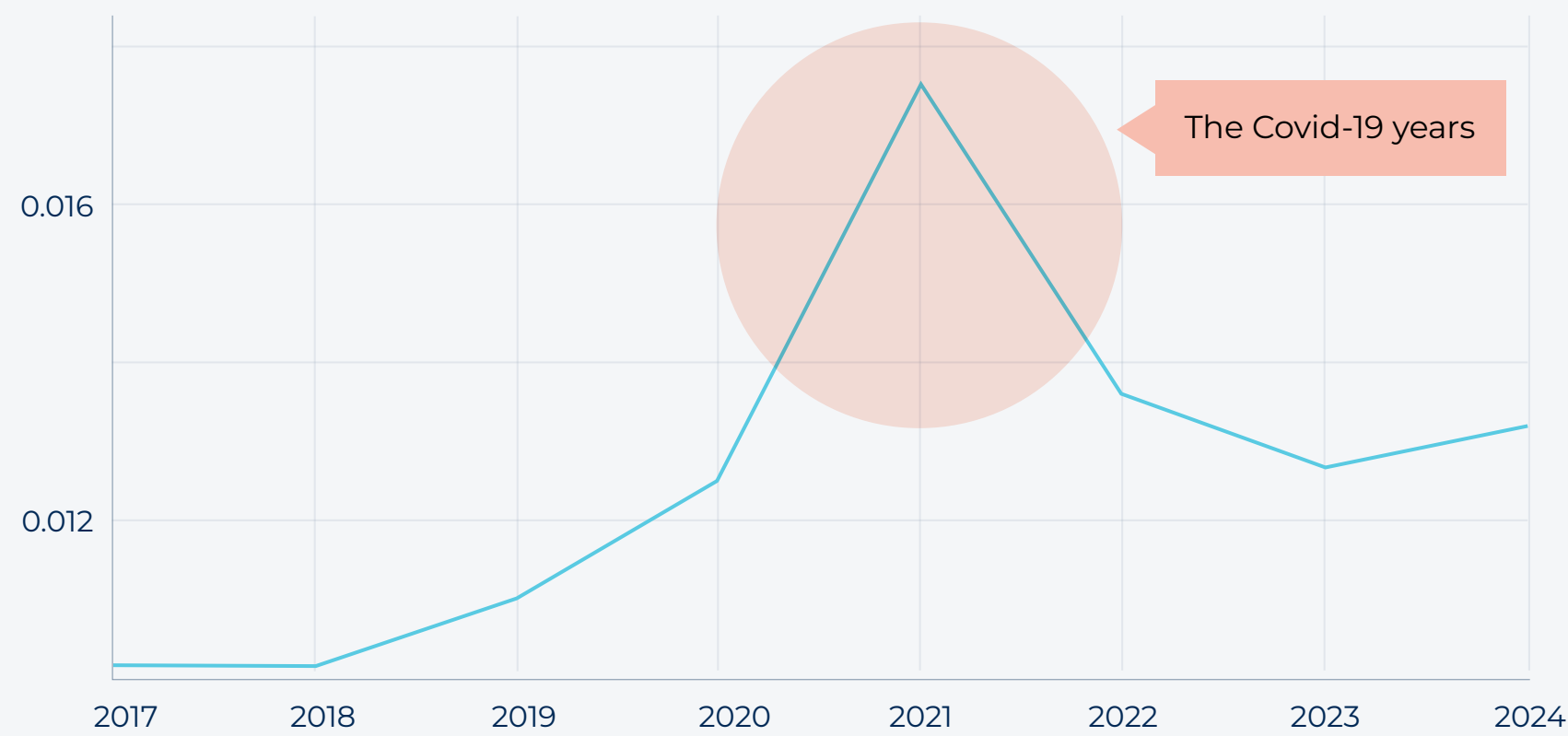
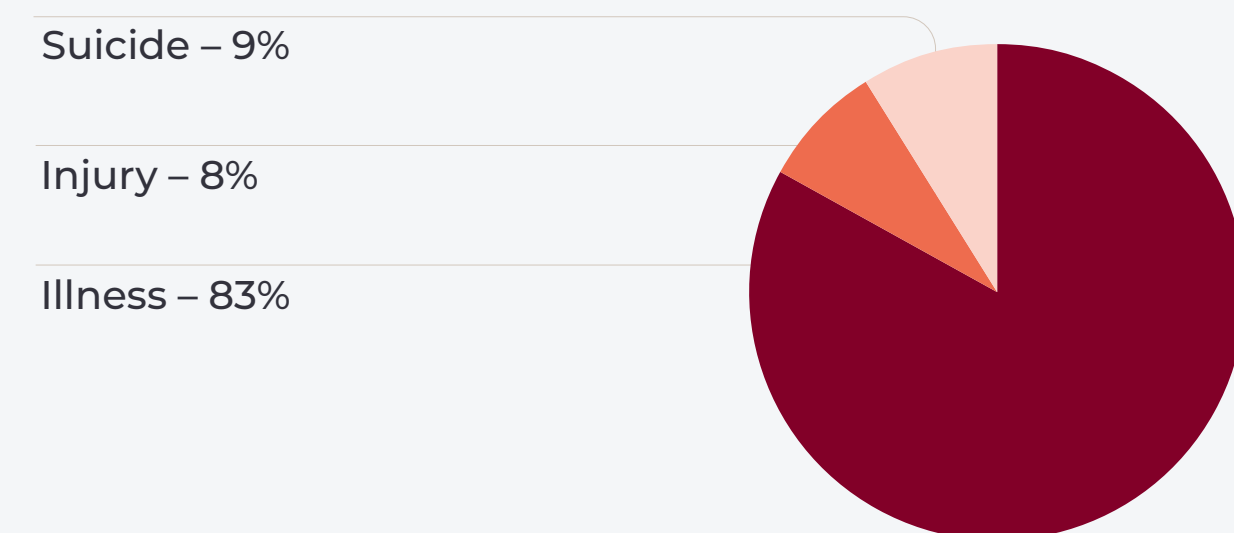


Figure 11: Causes of crew fatalities (2024)



³ As mentioned in Section 1, one specific incident has been excluded from the 2024 data, as this incident is still subject to ongoing investigations.

Fatalities in 2024

To understand the circumstances surrounding the reported fatalities on board, we conducted a detailed review of each incident. As shown in Figure 11, the main cause of crew deaths registered in 2024 was illness. It is noteworthy that the number of suicides was slightly higher than the number of incidents leading to fatal injuries on board. ³

We now take a closer look at the main factors behind the fatalities within each category.

Deaths due to injuries

Of all the reported incidents resulting in crew fatalities in 2024, seven were caused by accidents. Six of these were related to individual injuries – most of them involving falls – while one major casualty incident tragically resulted in 13 fatal injuries.

Due to the relatively limited number of cases, we could not identify any significant patterns in relation to age, rank, or time spent on board. Still, some important observations stand out, which hopefully could help prevent similar incidents in the future:

- In all but one of the individual fatal accidents the deceased crew were performing their duties and human error appears to have played a role.
- Four of the six fatalities involved falls from heights.
- Three of those falls were from the vessel into the sea. In each of these cases, the established safety procedures or instructions were not followed precisely. All were witnessed and “man overboard” (MOB) procedures were instigated immediately.

- In two of these cases, the seafarers fell while using ladders. One was not wearing a lifejacket; the other was not wearing a safety harness. Both appeared to remain conscious after falling, but sea conditions may have affected their chances of survival.
- Both these incidents involved senior officers, which may have made it more difficult for crew to challenge or correct unsafe practices.
- The remaining three cases involved different types of trauma situations. One involved a fall from a height in an [enclosed space](#), one was a fatal crush injury, and the last case resulted from electrocution.

In each of these tragic cases, we believe the emergency responses were prompt and appropriate. The crew seemed to understand their roles and responded quickly to try to rescue or revive the injured person. Unfortunately, given the severity or speed of each incident, these efforts were not successful.

In addition to the fatalities listed above, fatal incidents such as enclosed space entries, engine room fires, and mooring accidents also remain common and pose significant risks to seafarers. While such accidents did not result in any reported fatalities in 2024, they continue to be a critical area of concern.

Evaluations of the circumstances leading to accidents nearly always provide helpful information – whether

specific or general. We have seen that in at least five of the six cases, even minor misuse of equipment or failure to properly follow prescribed procedures may have had a material impact on the outcome. While the deviations from the procedures appeared to be relatively minor at the time (and possibly even routine “short-cut practices”), it should be considered whether these practices contributed to the outcome. In this respect, we note that an individual’s convenience or comfort can play a role in accident situations. The importance of familiarity with correct procedures and the reasons behind them, as well as a culture of embedding the procedures cannot be understated.

We recognise that accidents happen, often through no fault of the casualty. Respecting safety procedures and wearing standard safety equipment does not guarantee a hazard-free environment – but as we have seen from each of these cases, the importance of each step taken to minimise risk and reduce additional rescue problems could make a significant difference in reducing the severity of the outcome.



Deaths due to illness

Seafarers experience a lot of job-related risk factors that make them susceptible to illness. For instance, we know that seafarers face a [heightened risk of cardiovascular disease](#) due to factors such as stress, poor nutrition, and limited physical activity aboard ships.

lose to 60% of our crew deaths in 2024 were heart-related.⁴ This resonates with the findings in the BIMCO ICS Seafarer Workforce Report, which was published in 2021, stating that heart attacks are the most common cause of

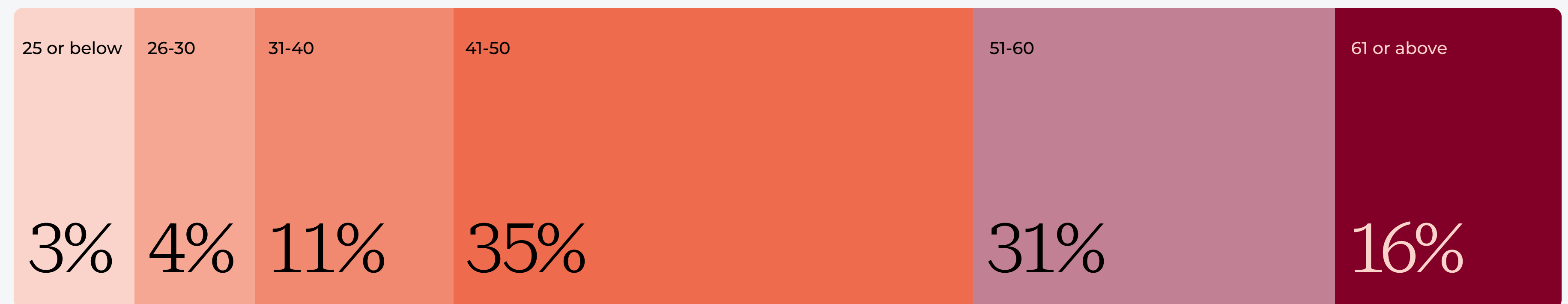
death on board vessels. Other causes of death we identified were infections, lung embolism and cancer. Notably, lung embolism affected mostly younger people, with most cases involving people under the age of 25.

Is the age or rank of the crew member also relevant when it comes to the risk of illness-related deaths? From our case review we see that most of the deaths related to illness fall within the 40-60 age range (see Figure 12). When looking at ranks, we see that a higher proportion of deaths occurs in deck crew than among their engine counterparts. The highest number of

illness-related fatalities is among able-bodied seamen (ABs), followed by fitters and masters. However, taking into account that most vessels have more ABs onboard than masters and fitters, the two latter show a higher frequency of death due to illness than others onboard.

In addition to ranks and the age brackets, we also looked at the time spent on board the vessel prior to the incident. Almost 70% of illness-related deaths occur in the first 3 months of the contract.

Figure 12: Age group distribution of illness-related deaths (2024)



⁴ The number could potentially be higher – in some cases information which would determine the cause of death was missing.

Figure 13: Deaths due to illness by rank (2024)

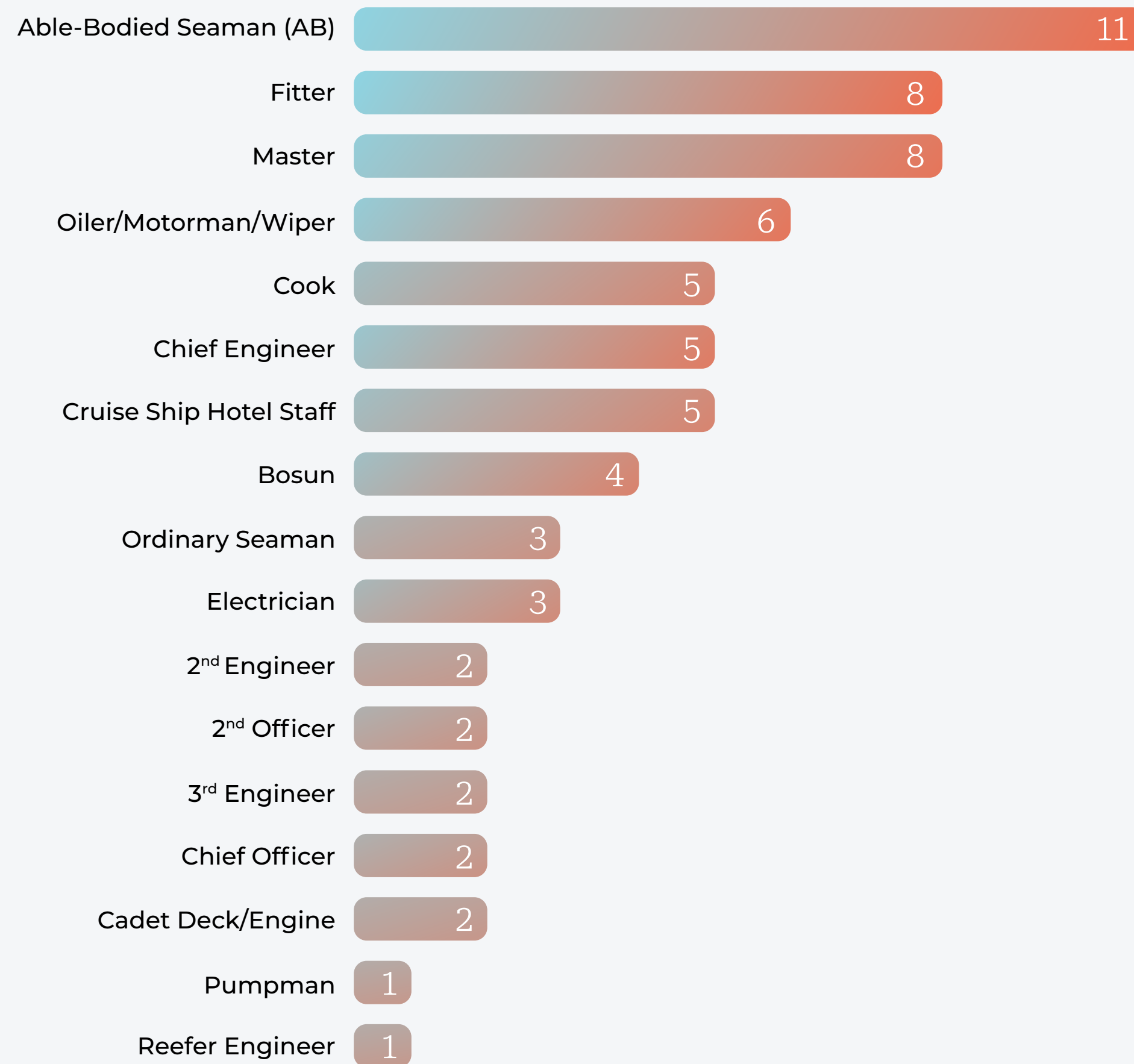
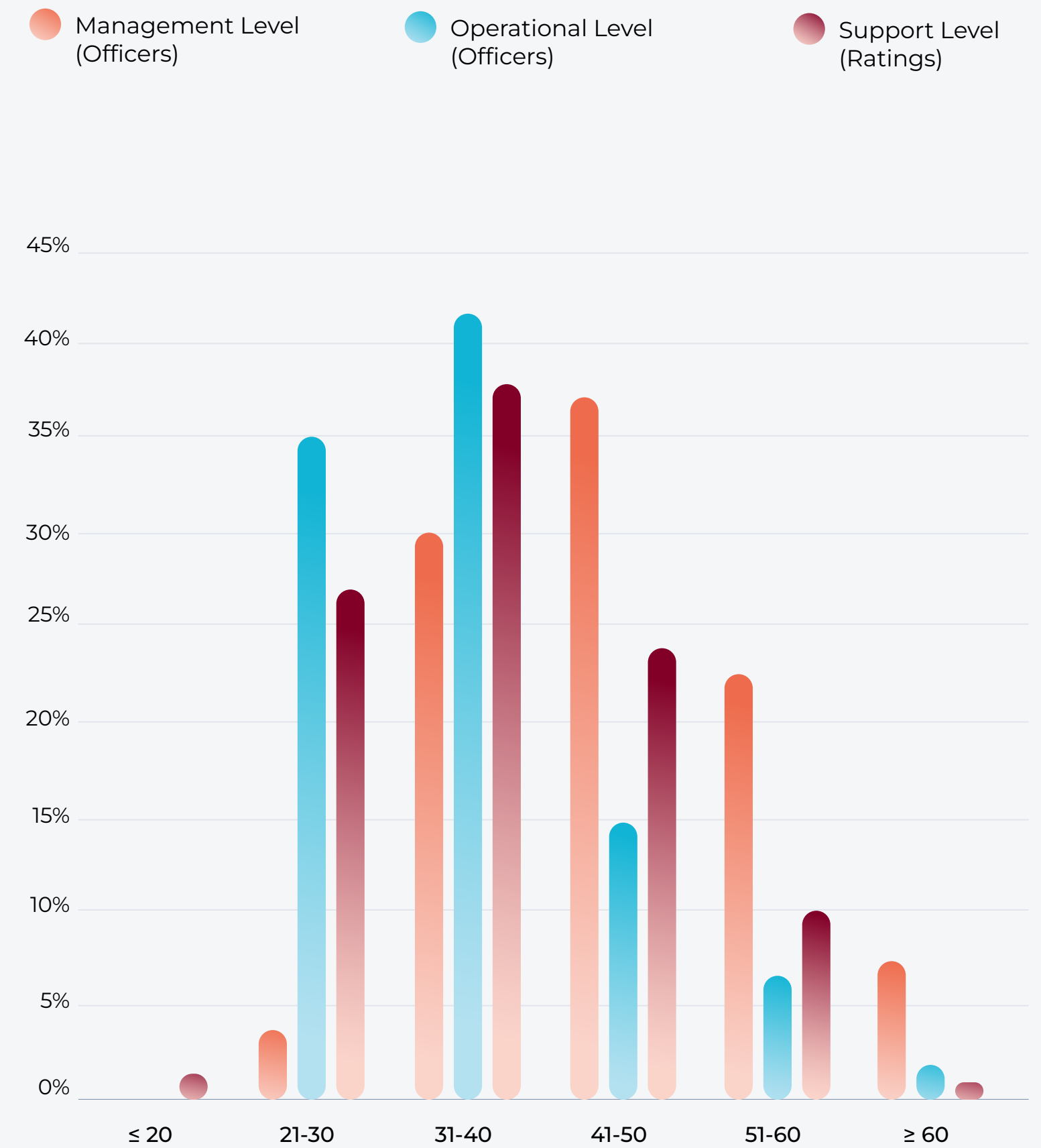


Figure 14: Seafarer rank across age groups
(Source: The BIMCO ICS Seafarer Workforce Report 2021)

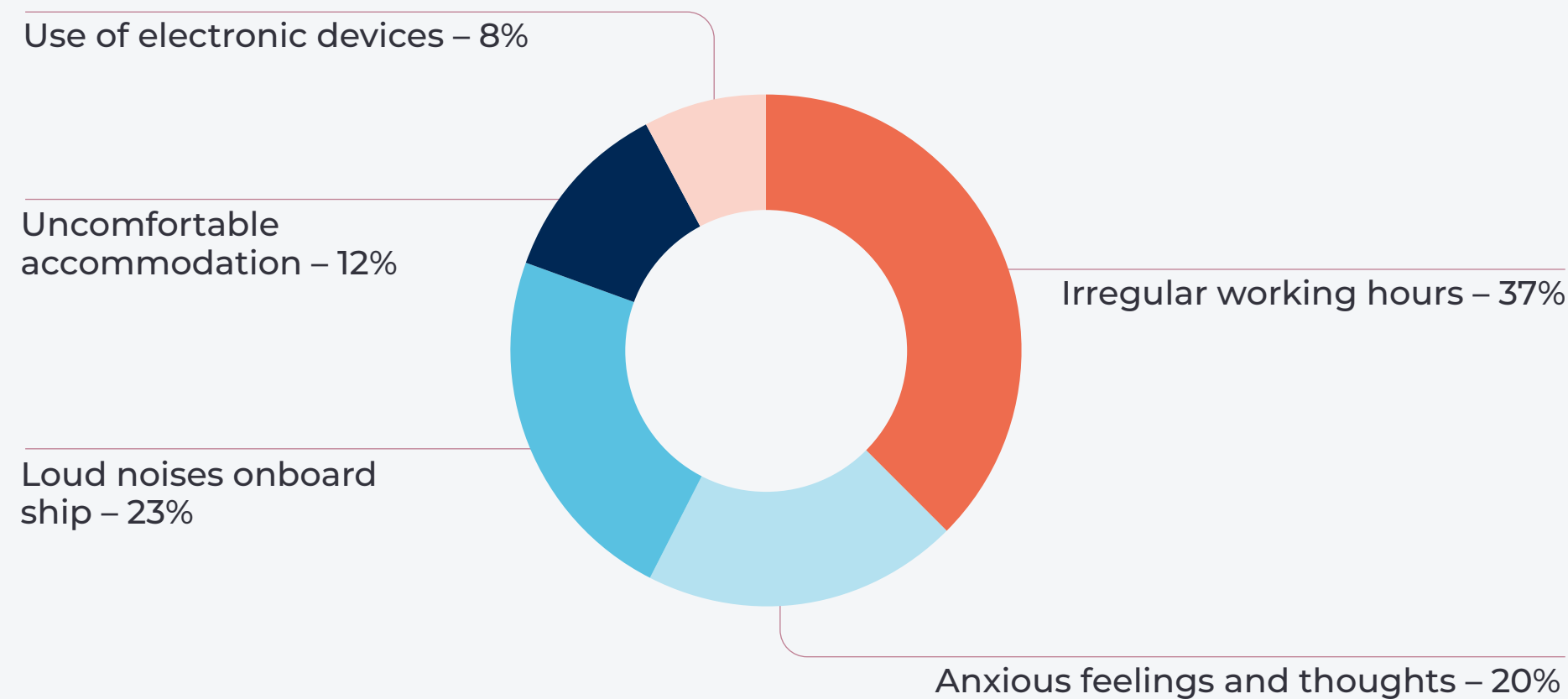


The impact of fatigue

Fatigue and insufficient rest are well-known challenges in our industry. We also know from our wellbeing survey that 37% of respondents cited “irregular working hours” as the main cause of disrupted sleep. While irregular working hours are almost inevitable

in the shipping industry, they still have severe consequences. Several studies⁵ have shown a strong link between long working hours and the risk of heart attack, which perhaps explains the high number of cardiac-related deaths in our records and also the increased risk we see among watchkeeping officers.

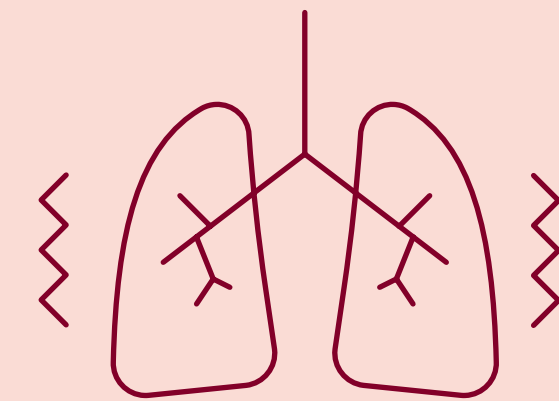
Figure 15: Factors affecting sleep quality on board vessels
(Source: Gard’s Crew Wellbeing Survey 2024)



⁵ See for example [this 2024 PhD study from WMU](#) and [Global, regional, and national burdens of ischemic heart disease and stroke attributable to exposure to long working hours for 194 countries, 2000–2016: A systematic analysis from the WHOILO Joint Estimates of the Work-related Burden of Disease and Injury - ScienceDirect](#)

Good to know

Know the symptoms



Chest pain and breathing difficulties can be signs of serious medical conditions. Any doubt about the underlying cause should therefore be treated as a potential medical emergency.

Please seek medical advice and refer to the Mariners Medico Guide.

Although unusual, we have seen cases where seafarers chose to rest in their cabin instead of seeking medical help, which has sadly led to fatalities. This underscores the importance of knowing the symptoms related to cardiovascular diseases and other potentially serious conditions.

Deaths due to suicide

All fatalities are of course distressing, but suicide on board can have a particularly profound and shocking impact. While relatively rare, suicide cases still accounted for more deaths on board vessels insured by Gard for P&I in 2024 than fatal injury incidents.⁶

In the cases we reviewed, we found some potential similarities to reflect on:



Accident or suicide?

In some cases, it can be difficult to determine whether a fall overboard was accidental or intentional.

For this report, we have carefully reviewed each incident, and while we cannot exclude the possibility of accidents completely, we take a careful and conservative approach to how we categorise these sad cases and are satisfied that the cases reported as suicides in 2024 were not accidents. On the contrary, we fear that suicides at sea may be underreported.

⁶ This excludes the casualty referred to in Section 1

- Most suicide cases involved officers, both senior and junior.

- In 75% of the cases, the seafarers were below the age of 41 – a younger profile than other deaths on board.

- Suicide appears more likely to happen in the first three months on board than later in the contract.

- Most deaths from suicide resulted from hanging or drowning. The cases of suicide due to hanging happened overnight and so were private and behind locked doors. Deaths due to drowning (man overboard) happened in daytime and were sometimes even witnessed by other crew.

- None of the seafarers involved appeared to attract negative attention in relation to their work, nor were they reported to have sought psychological help or counselling prior to the suicide. All were described as quiet or reserved, and none seemed to have a close friend onboard.

- Few seafarers left behind any written explanation of their state of mind. In most cases (7 out of 8), death by suicide was excluded from contractual compensation.

When analysing each suicide case, several observations from Gard's wellbeing survey emerged as particularly relevant.

- Seafarers seem to be at their happiest during the first month of their contract, before they start to drop. The happiness quotient, which is measured from 0 to 10, peaked at 7.85 during the first month of the contract but dropped to its lowest (7.46) during the 3–5-month period.
- On average, seafarers above the age of 46 reported higher happiness levels (7.82) than their younger counterparts, with the lowest scores (7.50) found in the 31–35 age group.
- Importantly, seafarers who were aware of mental health resources and helplines scored higher on happiness (7.7) compared to those who were not (7.0).
- Those who felt comfortable seeking support also had higher happiness scores (7.7), while those who were not comfortable scored significantly lower (6.6). Barriers to seeking support included social stigma, lack of trust in the organisation, and concerns about privacy.
- Rest hours also had a marked impact on happiness. Seafarers with only 5–6 hours of rest per day scored 6.2 on the happiness index, while those with more than 8 hours of rest reported significantly higher scores at 7.9.

The impact of rest hours on happiness is also clearly [supported by research](#). Working hours not only affect the physical and cardiovascular health but also mental health. Facilitating opportunities for the crew to get enough quality rest during the day and the week might be a solution to many of the challenges that has been mentioned throughout this report.

Ultimately, the importance of cultivating a supportive and inclusive onboard culture cannot be overstated. Leadership plays a pivotal role here, and can help set the tone for openness, empathy, and psychological safety onboard. Even small gestures can go a long way and have a positive impact on mental wellbeing, helping to foster a culture where asking for help is met with understanding, and where every crew member feels seen and valued.

Key findings

- Happiness drops after just a few months onboard.
- Seafarers who feel comfortable seeking support report higher happiness than those who don't.
- Rest has a significant impact on happiness.

Good to know

Seeking help can be a lifesaver



There are training programmes to help seafarers recognise warning signs of mental distress and how to talk to colleagues about mental health and suicide. However, it is important to ensure that these programs are provided by qualified trainers with the right experience and expertise.

For more information on suicidal thoughts, warning signs and how to offer mental health first aid, please refer to the [Mariners Medico Guide](#), which is available for free to everyone. You can also find useful guidance in [this ICS publication](#).

If you struggle yourself, please reach out to your doctor or someone else you trust. Things can get better!

5 Taking care, staying safe

In Gard, we firmly believe that prevention is better than cure. That is why we share knowledge and insights not only with our Members and clients but also with the wider maritime industry.

In essence, this is also the driving force behind this report. Alongside our wide-ranging loss prevention initiatives, we hope it can help to raise awareness, prevent accidents, and help advance operational standards across the industry.

A shared responsibility

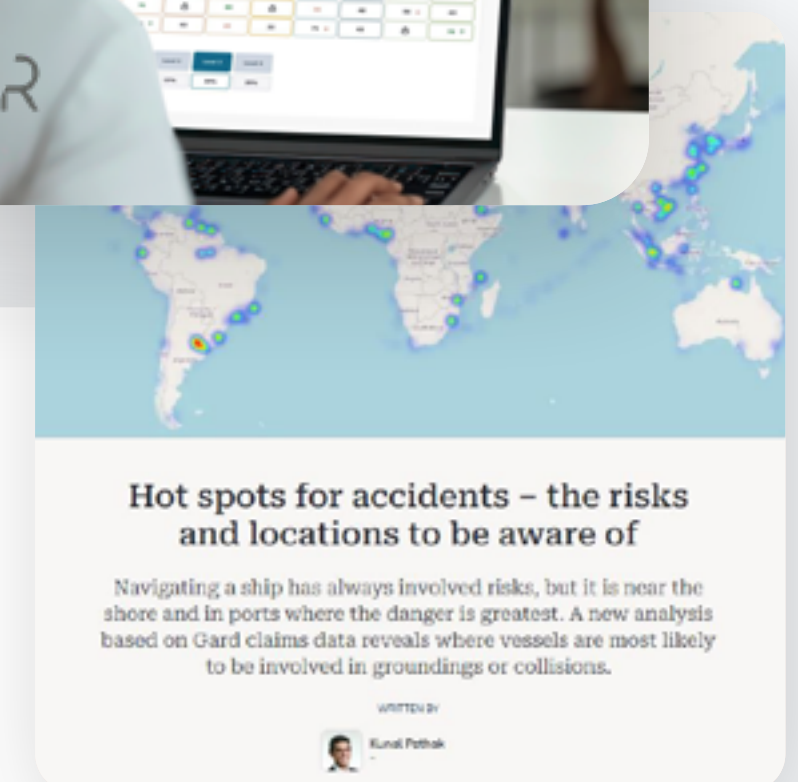
Of course, some of the challenges highlighted in this report can potentially be addressed by seafarers themselves. Ensuring personal health and wellbeing by maintaining a varied diet and regular exercise is good advice for all of us. For seafarers who spend long periods of time at sea, often under tough working conditions, it is perhaps even more important.

Safer with Gard

That said, several of the risks identified in this report could also be tied to organisational issues or the working culture onboard. We know from experience that a strong safety culture is important for safe operations at sea, and that those who excel in this area also report fewer incidents and casualties.

That is why Gard has recently partnered with SAYFR, a company specializing in enhancing safety culture in the maritime industry. As part of this collaboration, Gard now offers access to SafeMind, a tool designed to measure safety behaviours and assess risks, both at sea and ashore. Our hope is that over time, this tool can help close gaps and increase knowledge about the importance of a strong safety culture.

Other issues highlighted in this report are perhaps more systemic and require all stakeholders – crew, shipowners, insurers and other industry bodies – to come together and look for potential solutions. The relatively high number of fatalities and suicides – not just in Gard’s claims data, but seemingly across the industry – is one clear example that more remains to be done. The record-high number of seafarer abandonment cases across the industry in 2024 is yet another. We hope this report will help put a spotlight on key issues and trigger discussions that can help make a difference, so that more seafarers will stay safe and sound in the future.



6 Conclusion

This report has been prepared with the intention of shedding light on the challenges faced by seafarers as observed from a P&I club's perspective.

Our role is not to prescribe solutions, but to present the data and insights that emerge from handling thousands of people-related claims every year.

In our view, these insights offer a window into the realities of life at sea for seafarers, highlighting the most common illnesses and injuries as well as the most tragic outcomes, including fatalities due to illness, accidents and suicide.

By highlighting the trends and sharing what we see in our claims data, we aim to bring greater clarity to the issues affecting crew wellbeing and safety. We hope that by framing the challenges clearly, shipowners, managers, and crewing agents can better identify areas for intervention and implement practical, workable solutions.

At Gard, we believe that meaningful change begins with awareness. Our goal is to contribute to that awareness in a way that supports our Members and the wider industry in safeguarding the health and dignity of seafarers who are at the heart of global shipping. Seafarers are finally recognised as key workers. They operate in an increasingly complex environment, shaped by an ageing global fleet, rapid technological developments, and rising demands on skill and adaptability. To ensure we have a resilient and future-ready workforce, we must make life at sea both safer, healthier, and more appealing – not just for today's seafarers, but also for the next generation.

Want to know more?

Gard has a wide range of loss prevention materials freely available for everyone to use. Learn more about our services at www.gard.no or contact our experts at lp@gard.no