



Delivering occupational health to all workers

What are the opportunities?

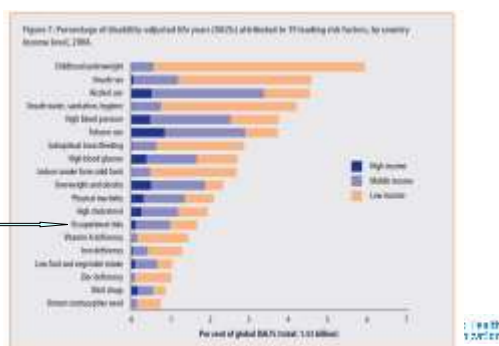
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Work – good or bad for health?

Occupational risks are among the leading risk factors for burden of disease



Good work is also good for health



- Working is associated with better general health and wellbeing and less psychological distress¹
- Unemployment is associated with high blood pressure, diabetes, heart disease, and depression²

¹ Australasian Faculty of Occupational & Environmental Medicine, 2010

² Harvard School of Public Health, 2009

Occupational ill-health has serious economic consequences

- Annual costs of occupational ill-health
 - Britain – 2.5 billion costs to employers
 - United States US\$ -52 billion workers' compensation
 - China - US\$37 billion – direct and indirect costs
- *Good occupational health can be an investment*
 - *Lower costs for medical care*
 - *Greater productivity*
 - *Social wellbeing*



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Is there political commitment?

60th World Health Assembly, 2007
Resolution 60.26 "Workers' Health: Global Plan of Action"



- Devise national plans of action on workers' health
- Work towards full coverage of all workers with essential interventions and basic services for prevention
- Strengthen core institutional and human resource capacities
- Incorporate workers' health in other national and sectoral policies
- Stimulate reintegration of sick and injured workers



On 16 September 2011 the UN General Assembly called upon the private sector



"to promote and create an enabling environment for healthy behaviours among workers, including by establishing tobacco-free workplaces and safe and healthy working environments through occupational safety and health measures, including, where appropriate, through good corporate practices, workplace wellness programmes and health insurance plans."*

Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, UN General Assembly, Sixty-sixth session, Agenda item 117, 16/09/2011



On 21 October 2011 in Rio de Janeiro
120 governments pledged

"To strengthen occupational health safety and health protection and their oversight and encourage the public and private sectors to offer healthy working conditions so as to contribute to promoting health for all."*



*Rio Political Declaration on Social Determinants of Health, World Conference on Social Determinants of Health, Rio de Janeiro, Brazil, 19-21 October 2011



33 years ago - Alma Ata Declaration



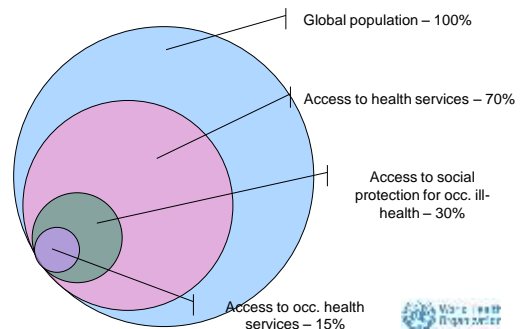
"It [Primary health care] is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work..."

What happened with primary health care at work?



Do we have capacity to deliver occupational health to all?

There are specialized Occup. Health Services but access remains low



There are effective interventions for prevention and control of occupational ill-health

- **Primary**
 - Legislation and incentives
 - Engineering controls
 - Personal protective equipment
 - Training
- **Secondary**
 - Medical surveillance
 - Screening
 - Recognition of occupational diseases
- **Tertiary**
 - Job modification
 - Return-to-work
 - Rehabilitation

Which interventions are the most effective?
Which interventions can be delivered at the primary care level?



What are the strategies?

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*There are human resources -
but are they sufficient?*

- Human resources for health
 - 9 million physicians
 - 19 million nurses/midwives
 - 307 thousand environmental health/public health workers (low and upper middle income countries only)
 - 1,5 million community health workers
- Human resources for safety
 - 120 thousand labour inspectors
 - XXX workplace actors (health and safety committees, safety agents, workers volunteers)



57 countries with critical shortage of health workforce



Option 1: Basic occupational health services for all

- Provide specialized basic service using occupational health methods
- Physician and nurse with 3 month training in occupational health
- 1 physician and 2 nurses required per 5,000 workers



- Human resource estimates 3 billion workers - 6% increase required
 - + 600,000 physicians
 - + 1.2 million nurses
- Current situation –global shortage 4.3 million of health workers

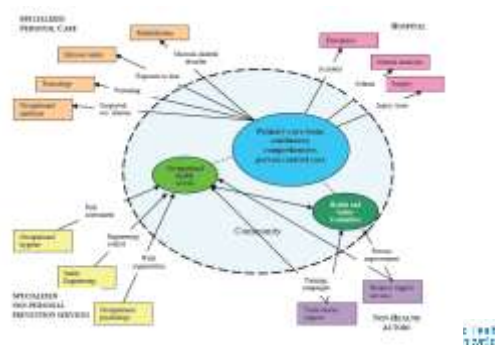


Option 2: Integrated primary health care for all workers

- **Enable primary care to address workers' health**
 - Provide preventive and curative care for workers as part of comprehensive primary care
 - Potential to reach out to 70% of working population
 - Enhance prevention in primary care
- **Scale up occupational health services**
 - Focus on quality, effectiveness, community outreach
 - Provide OH specialized support to primary care
- **Increase collaboration between occupational health services and primary care**
 - Ensure continuity of care
 - Avoid duplication



Occupational health in the integrated primary health care

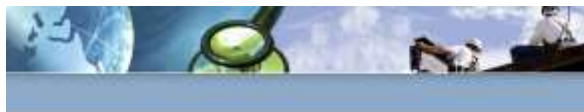


The Hague recommendations on occupational health and primary health care¹



WHO Global Conference
"Connecting Health and Labour"
The Hague, The Netherlands, 29 Nov – 1
Dec 2011

1. Workers' health is an integral part of general health and daily life
2. Health systems should facilitate local strategies to meet workers' health needs
3. In moving towards universal coverage, those at greatest risk or having greatest needs should be included first.
4. When developing policies about workers' health all relevant stakeholders should be involved.
5. Training in health and work should be part of all health care professional training
6. Empowerment of workers and the encouragement of decision-makers are critical for the promotion of the health and safety of workers



The next challenge



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WHO arguments for Rio+20

- **Universal health coverage –**
 - People who are healthy are better able to learn, to work and to contribute positively to the societies
- **Health and the green economy**
 - A healthy environment is a prerequisite for good health
- **Health as an outcome of all policies**
 - Measuring health integrates economic, environmental and social dimensions



Opportunities for occupational health in sustainable development

- **Green jobs**
 - healthy, safe and decent
- **Full cost pricing**
 - include social (occupational health) externalities in the price of energy and products
- **Green technologies**
 - prevention through design
- **Key sectors**
 - renewable energy, green construction, public transport, waste management
- **Sustainable production and consumption**
 - occupational health as a measure of business sustainability



A 'convenient truth'



Healthy workplaces and communities are more sustainable

Muchas gracias! Thank you! Merci beaucoup!



For further information workershealth@who.int

