Dr Julietta Rodriguez-Guzman (Rodriguezj@paho.org), **Regional Office for the Americas (AMRO) (www.paho.org/)**, Pan American Health Organization (PAHO); Washington DC, USA *Email: rodriguezj@paho.org*



Biography

Coming from Colombia, she received an MD degree from Pontific Xaveriana University, a Specialty Degree in Occupational Health from El Bosque University and a MSc Applied degree in Occupational Health Sciences at McGill University in Canada. Holding several Diplomas in Social Security, Occupational Epidemiology, Distance Education and, Labor Medicine and Rehabilitation, she was awarded with a research policy fellow at the McGill University Institute of Health and Social Policy. During the past 24 years her work she focused on formulating and assessing occupational health and worker's compensation systems, policies and programs; supporting the development of worker's health

promotion; and studying different working conditions in Colombia and other Latin American countries (heavy metals, violence at work, occupational cancer, respiratory diseases, ethics in OH practice, rural workers and gender mainstreaming). She also continued her academic appointment at El Bosque University becoming Associate Professor in Occupational Health.

Her work-life interests aim to helping understand and guide social policies, processes and institutions to improve working and living conditions for working people, with particular emphasis on vulnerable populations, mainly in Colombia and Latin America. Her long lasting contributions to the Workers' Health Program at PAHO, WHO, ILO, OAS, NSC, IADB, WB and other international organizations, granted her the credentials and the experience to be appointed as Regional Advisor in Workers' Health for the Americas. She is committed to continue her efforts to focusing on the improvement of working and living conditions that can lead to protecting health and life of millions of workers that live in the region.

Dr Mohd Nasir Hassan (hassanm@wpro.who.int), Regional Office for the Western Pacific (WPRO) (www.wpro.who.int/), Manila, Philippines

Connecting Health and Labour: Bringing together occupational health and primary care to improve the health of working people

Ivan D. Ivanov, WHO Headquarters, Geneva (ivanovi@who.int)
Peter Buijs, TNO Work and Health, The Netherlands (peter.buijs@tno.nl)



"It is with great respect that I say that YOUR daily challenge is to keep people healthy and working and to find ways to meet these challenges."

Leon van Halder, Director General, Dutch Ministry of Health, Welfare and Sports

The global conference "Connecting Health and Labour: What Role for Occupational health in Primary Health Care?" took place in The Hague from 29 November to 1 December 2011. The conference was organized by WHO in collaboration with TNO Work and Health and the Dutch government and with support from the International Commission on Occupational Health (ICOH) and the World Federation of Family Physicians (Wonca). The purpose was to identify strategic direction for scaling up access to essential interventions for occupational health in the context of



integrated primary health care. In plenary sessions, round tables and panels, 115 participants from 36 countries across all WHO regions discussed in plenary sessions, panels and round tables what are the implications of the policy directions for primary health care given by WHO for future action on workers' health. The conference recommendations paved a new road for working across disciplines, settings and sectors to protect and promote health of working people, and to strengthen health systems and primary health care.

In sum the conference agreed that work-related health aspects are and should continue to be considered an integral part of comprehensive primary care. Specialized occupational health services, including the basic ones, should be further expanded and strengthened with more focus on primary prevention of occupational hazards. Close collaboration should be established between occupational health services and primary care teams under local networks for primary health care.

Moving to universal coverage with essential interventions and basic services for occupational health requires integration of financing for their delivery into public schemes for health financing. The supply of health services providing such interventions should be increased by building capacities for their delivery at the primary care level, by extending specialized basic and multidisciplinary occupational health services and by using modern technologies, such as telecare. Particularly emphasizes were the role and the responsibilities of primary care providers for all health-related aspects of peoples' life, including early recognition of occupational and work-related ill-health, as well as preserving and restoring working capacity of individuals. Hence, training on the relationship between health and work should become part of all health care professional training in all countries.

In the context of primary health care focused on people, the conference recommended building further the capacities of primary care centers to respond effectively to general and specific health needs and expectations of working populations in the catchment area. This would include training of general practitioners, nurses, technicians and community health workers in basic occupational health, providing them with supportive tools for interventions, information and access to specialized expertise and creating enabling regulatory frameworks. Occupational health services and primary care centers should be better connected under local primary health care networks, including joint training, referral systems and other mechanisms for collaboration and continuity of care. Particular attention was placed on empowering working communities and work settings to partner and promote the health and safety of workers, so that certain health problems could be solved without unnecessarily relying on specialized health expertise.

The conference also stressed that occupational health is an integral part of national and local health systems. This requires an integrated response by all components of health systems to the health needs of workers. Health care reforms should account for the health needs of working populations and address the health needs of people working in the informal sector, small enterprises migrant and self-employer workers. A new, participatory health leadership should involve all government and nongovernment stakeholders, such as employers, trade unions, civil society, and the private sector in the debates about health care reforms and the development

Key messages:

- 1. Workers' health is integral part of general health and daily life.
- 2. Health systems should facilitate local strategies to meet workers' health needs.
- 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.
- Training in health and work should be part of all health care professional training.
- Empower workers, and encourage those in authority, to partner and promote the health and safety of workers.

of national and local health strategies and plans.

The health of workers should be taken into account in designing and implementing policies in all sectors. This requires identification of workers' health impacts and co-benefits of national policies and strategies in the area of labour, environment, education, agriculture, economic development, trade etc. Capitalization of health benefits and risks, identification of non-health benefits from action on workers' health would provide a level playing field for dialogue across sectors to enable healthy public policies and whole-of-society health initiatives. The development of national plans and programmes on workers' health should allow for input from and involvement of primary care in the development and implementation of national and local plan and programmes for occupational health and safety. Particular attention is needed to address the health needs of workers and hazardous working conditions in policies dealing with the informal economy, rural development, and labour migration, including the provision of health services to such populations.

The conference was a major milestone in the global process to improve coverage of and access to occupational health services as requested by the 60th World Health Assembly in 2007 and contributes to the debate that many Member States and WHO are now engaged on strengthening health systems and primary health care.

As follow up of the conference, WHO and its networks of Collaborating Centres for occupational health and primary care will collaborate with ILO, the professional associations, such as International Commission on Occupational Health (ICOH) and the World Federation of Family Physicians (Wonca) and other international stakeholders, such as the World Bank and the International Social Security Association, in the following areas:

Developing policy options, methodologies and case studies and integrated financing



"WHO is committed to work with partners to bring occupational health to all workers and healthier workers to the world economy"

Maria Neira, WHO Director, Public Health and Environment

- mechanisms, including costing of the delivery of essential interventions for occupational health at the primary care level and supporting implementation in countries.
- Creating and disseminating training materials and information tools for building human resource capacities for basic occupational health among primary care teams - doctors, nurses, technicians and community health workers, for including occupational health into under- and postgraduate training and education in medicine, nursing and allied health, and for training of experts for basic and multidisciplinary occupational health services;
- Collecting, evaluating and disseminating case studies and examples of delivery of

essential interventions and basic services for occupational health in the context of integrated primary health care and setting up a global agenda for interdisciplinary research on the occupational health aspects of health systems and health services delivery.

The presentations made at the conference, the programme, list of participants and the background documents are available at http://www.slideshare.net/healthandlabour
The conference outcome document entitled "The Hague Statement on Connecting Health and Labour: Bringing together occupational health and primary care to improve the health of working people" will be available on the WHO website for occupational health in the beginning of 2012.

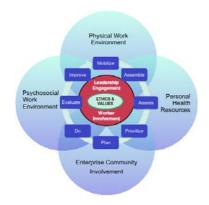
Acknowledgement: The financial support for preparation and organization of the conference from the Ministry of Health, Welfare and Sport and the Ministry of Social Affairs and Employment of the

Netherlands, the National Institute of Occupational Safety and Health of the United States, and TNO Work and Health is gratefully acknowledged.

Protecting and promoting health at the workplace: A WHO Global framework and global guidance on healthy workplaces

Dr Evelyn Kortum (kortume @who.int), Interventions for Healthy Environments, WHO, Geneva

The WHO Global Plan of Action states that capacities should be built for primary prevention of



occupational hazards, diseases and injuries, including strengthening of human, methodological and technological resources, training of workers and employers, introduction of healthy work practices and work organization, and of a health-promoting culture at the workplace. It further states that mechanisms need to be established to stimulate the development of healthy workplaces, including consultation with, and participation of, workers and employers.

The Healthy Workplace Framework aims to increase awareness among the business community, workers, practitioners, occupational health experts and policy makers, of the benefits of the comprehensive approach and the underlying principles of the HWP model to reduce the health

impact of hazardous, unsafe and unhealthy working conditions; to develop **global and specific how-to approaches** based on the criteria of the healthy workplace model and good practice; to increase ease of use and **ownership** by the business community, as well as to expand the global **partnership alliance** with committed members to ensure continued support for the development, implementation and evaluation of healthy workplace programmes in enterprises of all sizes.

The implementation of the Global Plan of Action requires interventions at international, national and workplace levels. Such interventions need to be planned and delivered in an integrated way bringing together health protection and health promotion. Currently, a large network of 180 global resource members ready to pilot and adapt guidance has been built up. In parallel, the summary document 'Healthy Workplaces: A model for action' has been translated into Spanish, Portuguese, Arabic and Russian. The literature review was translated into Spanish from English. We have been working on the development and evaluation of a number of reliable tools to propose for a global guidance for employers and workers. We have also been collecting good practice examples and devised indicators for healthy workplace programmes in the four avenues of influence. Once the new calls for projects for the 20012-2107 workplan of the global network of WHO CCs have been finalized, we will have a better idea about their number and nature. The final outcome should be practical guidance for employers and workers to support them in the development, implementation and evaluation of comprehensive healthy workplace programmes. Link to the healthy workplace website:

http://www.who.int/occupational_health/healthy_workplaces/en/index.html