

Workers' health: global plan of action

The Sixtieth World Health Assembly,

Having considered the draft global plan of action on workers' health;¹

Recalling resolution WHA49.12 which endorsed the global strategy for occupational health for all;

Recalling and recognizing the recommendations of the World Summit on Sustainable Development (Johannesburg, South Africa, 2002) on strengthening WHO action on occupational health and linking it to public health;²

Recalling the Promotional Framework for Occupational Safety and Health Convention, 2006, and the other international instruments in the area of occupational safety and health adopted by the General Conference of the ILO;³

Considering that the health of workers is determined not only by occupational hazards, but also by social and individual factors, and access to health services;

Mindful that interventions exist for primary prevention of occupational hazards and for developing healthy workplaces;

Concerned that there are major gaps between and within countries in the exposure of workers and local communities to occupational hazards and in their access to occupational health services;

Stressing that the health of workers is an essential prerequisite for productivity and economic development,

¹ As contained in document A60/20, Annex.

² Plan of Implementation of the World Summit on Sustainable Development. Document A/Conf.199/20, Annex.

³ International Labour Conference, Ninety-fifth Session, Geneva 2006. Provisional Record 20A.

1. ENDORSES the global plan of action on workers' health 2008–2017;
2. URGES Member States:
 - (1) to devise, in collaboration with workers, employers and their organizations, national policies and plans for implementation of the global plan of action on workers' health as appropriate, and to establish appropriate mechanisms and legal frameworks for their implementation, monitoring and evaluation;
 - (2) to work towards full coverage of all workers, including those in the informal economy, small- and medium-sized enterprises, agriculture, and migrant and contractual workers, with essential interventions and basic occupational health services for primary prevention of occupational and work-related diseases and injuries;
 - (3) to take measures to establish and strengthen core institutional capacities and human resource capabilities for dealing with the special health needs of working populations and to generate evidence on workers' health and translate that evidence into policy and actions;
 - (4) to develop and make available specific guidelines for the establishment of appropriate health services and surveillance mechanisms for human and environmental hazards and diseases introduced into local communities where mining, other industrial and agricultural activities have been set up to meet the associated needs of those communities;
 - (5) to ensure collaboration and concerted action by all national health programmes relevant to workers' health, such as those dealing with prevention of occupational diseases and injuries, communicable and chronic diseases, health promotion, mental health, environmental health, and health systems development;
 - (6) to encourage incorporation of workers' health in national and sectoral policies for sustainable development, poverty reduction, employment, trade, environmental protection, and education;
 - (7) to encourage the development of effective mechanisms for collaboration and cooperation between developed and developing countries at regional, subregional and country levels in implementing the global plan of action on workers' health;
 - (8) to encourage development of comprehensive health and non-health strategies to ensure reintegration of sick and injured workers into the mainstream of society, in coordination with different government and nongovernmental organizations;
3. REQUESTS the Director-General:
 - (1) to promote implementation of the global plan of action on workers' health 2008–2017 at national and international levels with a definite timeline and indicators for the establishment of occupational health services at global level;
 - (2) to strengthen collaboration with ILO and other related international organizations and to stimulate joint regional and country efforts on workers' health;

(3) to maintain and strengthen the network of WHO collaborating centres for occupational health as an important mechanism for implementation of the global plan of action;

(4) to report to the Health Assembly through the Executive Board at its 132nd (2013) and its 142nd (2018) sessions on progress made in the implementation of the global plan of action.

ANNEX

GLOBAL PLAN OF ACTION ON WORKERS' HEALTH 2008–2017

INTRODUCTION

1. Workers represent half the world's population and are the major contributors to economic and social development. Their health is determined not only by workplace hazards but also by social and individual factors and access to health services.
2. Despite the availability of effective interventions to prevent occupational hazards and to protect and promote health at the workplace, large gaps exist between and within countries with regard to the health status of workers and their exposure to occupational risks. Still only a small minority of the global workforce has access to occupational health services.
3. Increasing international movement of jobs, products and technologies can help to spread innovative solutions for prevention of occupational hazards, but can also lead to a shift of that risk to less advantaged groups. The growing informal economy is often associated with hazardous working conditions and involves such vulnerable groups as children, pregnant women, older persons and migrant workers.
4. The present plan of action deals with all aspects of workers' health, including primary prevention of occupational hazards, protection and promotion of health at work, employment conditions, and a better response from health systems to workers' health. It is underpinned by certain common principles. All workers should be able to enjoy the highest attainable standard of physical and mental health and favourable working conditions. The workplace should not be detrimental to health and well-being. Primary prevention of occupational health hazards should be given priority. All components of health systems should be involved in an integrated response to the specific health needs of working populations. The workplace can also serve as a setting for delivery of other essential public-health interventions, and for health promotion. Activities related to workers' health should be planned, implemented and evaluated with a view to reducing inequalities in workers' health within and between countries. Workers and employers and their representatives should also participate in such activities.

ACTIONS

5. The following actions are to be considered and adapted by countries, as appropriate, to their national priorities and specific circumstances in order to achieve the objectives described below.

Objective 1: to devise and implement policy instruments on workers' health

6. National policy frameworks for workers' health should be formulated taking account of the relevant international labour conventions and should include: enactment of legislation; establishment of mechanisms for intersectoral coordination of activities; funding and resource mobilization for protection and promotion of workers' health; strengthening of the role and capacities of ministries of health; and integration of objectives and actions for workers' health into national health strategies.

7. National action plans on workers' health should be elaborated between relevant ministries, such as health and labour, and other major national stakeholders taking also into consideration the Promotional Framework for Occupational Safety and Health Convention, 2006. Such plans should include: national profiles; priorities for action; objectives and targets; actions; mechanisms for implementation; human and financial resources; monitoring, evaluation and updating; reporting and accountability.
8. National approaches to prevention of occupational diseases and injuries should be developed according to countries' priorities, and in concert with WHO's global campaigns.
9. Measures need to be taken to minimize the gaps between different groups of workers in terms of levels of risk and health status. Particular attention should be paid to high-risk sectors of economic activity, and to the underserved and vulnerable working populations, such as younger and older workers, persons with disabilities and migrant workers, taking account of gender aspects. Specific programmes should be established for the occupational health and safety of health-care workers.
10. WHO will work with Member States to strengthen the capacities of the ministries of health to provide leadership for activities related to workers' health, to formulate and implement policies and action plans, and to stimulate intersectoral collaboration. Its activities will include global campaigns for elimination of asbestos-related diseases – bearing in mind a differentiated approach to regulating its various forms – in line with relevant international legal instruments and the latest evidence for effective interventions, as well as immunization of health-care workers against hepatitis B, and other actions addressing priority work-related health outcomes.

Objective 2: to protect and promote health at the workplace

11. The assessment and management of health risks at the workplace should be improved by: defining essential interventions for prevention and control of mechanical, physical, chemical, biological and psychosocial risks in the working environment. Such measures include also integrated management of chemicals at the workplace, elimination of second-hand tobacco smoke from all indoor workplaces, improved occupational safety, and health-impact assessment of new technologies, work processes and products at the design stage.
12. Protecting health at the workplace also requires enacting regulations and adopting a basic set of occupational health standards to make certain that all workplaces comply with minimum requirements for health and safety protection, ensuring an appropriate level of enforcement, strengthening workplace health inspection, and building up collaboration between the competent regulatory agencies according to specific national circumstances.
13. 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. Mechanisms need to be established to stimulate the development of healthy workplaces, including consultation with, and participation of workers, and employers.
14. Health promotion and prevention of noncommunicable diseases should be further stimulated in the workplace, in particular by advocating healthy diet and physical activity among workers, and promoting mental and family health at work. Global health threats, such as tuberculosis, HIV/AIDS, malaria and avian influenza, can also be prevented and controlled at the workplace.

15. WHO will work on creating practical tools for assessment and management of occupational risks, recommending minimum requirements for health protection at the workplace, providing guidance on development of healthy workplaces, and on promoting health at the workplace. It will also incorporate workplace actions in international programmes dealing with global health threats.

Objective 3: to improve the performance of and access to occupational health services

16. Coverage and quality of occupational health services should be improved by: integrating their development into national health strategies, health-sector reforms and plans for improving health-systems performance; determining standards for organization and coverage of occupational health services; setting targets for increasing the coverage of the working population with occupational health services; creating mechanisms for pooling resources and for financing the delivery of occupational health services; ensuring sufficient and competent human resources; and establishing quality-assurance systems. Basic occupational health services should be provided for all workers, including those in the informal economy, small enterprises, and agriculture.

17. Core institutional capacities should be built at national and local levels in order to provide technical support for basic occupational health services, in terms of planning, monitoring and quality of service delivery, design of new interventions, dissemination of information, and provision of specialized expertise.

18. Development of human resources for workers' health should be further strengthened by: further postgraduate training in relevant disciplines; building capacity for basic occupational health services; incorporating workers' health in the training of primary health care practitioners and other professionals needed for occupational health services; creating incentives for attracting and retaining human resources for workers' health, and encouraging the establishment of networks of services and professional associations. Attention should be given not only to postgraduate but also to basic training for health professionals in various fields such as promotion of workers' health and the prevention and treatment of workers' health problems. This should be a particular priority in primary health care.

19. WHO will provide guidance to the Member States for the development of basic packages, information products, tools and working methods, and models of good practice for occupational health services. It will also stimulate international efforts for building the necessary human and institutional capacities.

Objective 4: to provide and communicate evidence for action and practice

20. Systems for surveillance of workers' health should be designed with the objective of accurately identifying and controlling occupational hazards. This endeavour includes establishing national information systems, building capability to estimate the occupational burden of diseases and injuries, creating registries of exposure to major risks, occupational accidents and occupational diseases, and improving reporting and early detection of such accidents and diseases.

21. Research on workers' health needs to be further strengthened, in particular by framing special research agendas, giving it priority in national research programmes and grant schemes, and fostering practical and participatory research.

22. Strategies and tools need to be elaborated, with the involvement of all stakeholders, for improving communication and raising awareness about workers' health. They should target workers, employers and their organizations, policy-makers, the general public, and the media. Knowledge of

health practitioners about the link between health and work and the opportunities to solve health problems through workplace interventions should be improved.

23. WHO will define indicators and promote regional and global information platforms for surveillance of workers' health, will determine international exposure and diagnostic criteria for early detection of occupational diseases, and will include occupational causes of diseases in the eleventh revision of the International Statistical Classification of Diseases, and Related Health Problems.

Objective 5: to incorporate workers' health into other policies

24. The capacities of the health sector to promote the inclusion of workers' health in other sectors' policies should be strengthened. Measures to protect workers' health should be incorporated in economic development policies and poverty reduction strategies. The health sector should collaborate with the private sector in order to avoid international transfer of occupational risks and to protect health at the workplace. Similar measures should be incorporated in national plans and programmes for sustainable development.

25. Workers' health should likewise be considered in the context of trade policies when taking measures as specified in resolution WHA59.26 on international trade and health.

26. Employment policies also influence health; assessment of the health impact of employment strategies should therefore be encouraged. Environmental protection should be strengthened in relation to workers' health through, for instance, implementation of the risk-reduction measures foreseen in the Strategic Approach to International Chemicals Management, and consideration of workers' health aspects of multilateral environmental agreements and mitigation strategies, environmental management systems and plans for emergency preparedness and response.

27. Workers' health should be addressed in the sectoral policies for different branches of economic activity, in particular those with the highest health risk.

28. Aspects of workers' health should be taken into account in primary, secondary and higher level education and vocational training.

IMPLEMENTATION

29. Improving the health of workers can be achieved through well-coordinated efforts of society as a whole, under government leadership and with substantial participation of workers and employers. A combination of actions, adapted to national specificities and priorities, is needed to meet the above-mentioned objectives. Actions are designed for implementation at national level, and through intercountry and interregional cooperation.

30. WHO, supported by its network of Collaborating Centres for Occupational Health and in partnership with other intergovernmental and international organizations, will work with the Member States to implement this plan of action by:

- promoting and engaging in partnership and joint action with ILO and other organizations of the United Nations system, organizations of employers, trade unions and other stakeholders in civil society and the private sector in order to strengthen international efforts on workers' health;

- in coherence with the actions undertaken by ILO, setting standards for protection of workers' health, providing guidelines, promoting and monitoring their use, and contributing to the adoption and implementation of international labour conventions;
- articulating policy options for framing national agendas for workers' health based on best practices and evidence;
- providing technical support for tackling the specific health needs of working populations and building core institutional capacities for action on workers' health;
- monitoring and addressing trends in workers' health;
- establishing appropriate scientific and advisory mechanisms to facilitate action on workers' health at global and regional levels.

31. Progress in implementing the plan of action will be reviewed and monitored using a set of national and international indicators of achievement.

Eleventh plenary meeting, 23 May 2007
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