**Why health care for workers?**

Workers represent one third of the world population. A healthy workforce is an essential prerequisite for productivity and economic development. Every year about 160 million new cases of occupational diseases and more than two million deaths are caused by work. For many workers and their families, the workplace is the only way to access health care services. Yet only 15% of workers in the world are covered in occupational health services. The economic losses from a lack of occupational health and safety are estimated at around 4% of GDP.

The links between health, sustainable development and poverty eradication become striking when we look at the world of work. In 2010, an estimated 942 million workers—nearly one in three—were living below the US$2 poverty line. Such people are more likely to work in hazardous conditions and suffer work-related diseases, injuries and disabilities that reduce their working capacity and earning potential. Furthermore, a growing burden of non-communicable diseases and mental health results in additional reduction in working capacity and labour force participation.

Access of workers to health protection and preventive services is limited mostly to workers in large enterprises in the formal sector with decent jobs and social protection benefits. The working poor and informal sector workers do not have social protection and insurance for occupational injuries. Therefore, in working toward universal health coverage, it is important to provide all workers with access to people-centred health services that can respond effectively to their specific health needs and expectations. These include protection against occupational hazards and diseases, maintaining their working capacity, workforce participation income-earning potential, and empowering them to promote their physical and mental health and social well-being. The financing of such services should be organized so that workers do not have to pay for prevention and treatment of occupational diseases and injuries and have social health protection for accessing services needed for maintaining their health and working capacity.

The *Alma Ata Declaration on Primary Health Care* (1978) emphasized the importance of bringing health care as close as possible to "where people live and work". Furthermore, World Health Assembly 2007 resolution 60.26 "Workers health: Global plan of action" urged Member States to work towards full coverage of all workers with essential interventions and basic health services for prevention and control of occupational and work-related diseases and injuries. Though such interventions are highly effective, their power is not matched by the ability of health systems to deliver them to those in greatest need, in a comprehensive way and on an adequate scale.

**What WHO is doing?**

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

WHO worked with experts in occupational and primary health care, and other international partners, to define the directions for integrating occupational health in primary health care as a strategy for working towards universal health coverage for all workers. Field studies in countries across all regions have defined a range of interventions for workers’ health delivered at the primary care level and the related costs to health systems. Such interventions include:

- counselling from improving working conditions;
• early detection and referral to cases with occupational diseases and injuries;
• evaluation and promotion of working capacity (fitness for work, return to work).

Methodology for costing the delivery of these interventions is being included in the International OneHealth Costing Tool to allow for their integration into national health accounts.

Through its large network of collaborating centres for occupational health, WHO provides expertise in effective interventions for prevention of occupational diseases and injuries, education and continuous training, dissemination of information, and specialized support for occupational health services.

Currently, this work concentrates on mapping models for delivery of the essential interventions for workers’ health at the primary care level in different underserved populations, such as rural and agricultural communities, the informal sector, small-and medium-sized enterprises, and migrant workers.

In collaboration with international partners, WHO is also developing practical tools for the assessment and management of certain occupational risks, such as chemicals, silica, asbestos and psycho-social factors, to be used by primary health-care providers.

In 2008, WHO launched a set of reforms to provide primary health care to all citizens. This process provides ample opportunities to scale up occupational health services using the values and principles of primary health care.

### Expected results

- Methodologies for costing the delivery of essential interventions for workers’ health at the primary care level.
- Set of indicators for measuring coverage with essential interventions for workers’ health and guidance for setting up national targets.
- Information resources on occupational health for primary-care providers.
- International training materials and curricula for building capacities for occupational health at the primary care level.
- Global guide for early detection of occupational diseases and for health surveillance of workers.
- Policy options for linking specialized occupational health services with primary care centres, including the use of e-health records.
- Technical assistance to countries for setting up national programmes for scaling up health coverage of vulnerable and high-risk working populations, such as informal sector workers.

### Planned activities

- **Support the integration of workers’ health in primary health care through:**
  - identifying effective models for delivery of occupational health services using the primary health-care approach to working populations without cover and across sectors;
  - documenting regulatory and financial mechanisms to improve coverage and quality of occupational health services;
  - supporting countries to assess the performance of their health systems in workers’ health;
  - establishing partnerships for workers’ health at the international, national and community levels.

- **Devise and update national policy instruments for workers’ health by:**
  - helping countries to develop national workers’ health profiles;
  - reviewing good practices and providing guidance for planning, implementation and evaluation of national actions in the area of workers’ health;
  - benchmarking, twinning and exchanging experience between countries.

- **Generate human and intellectual resources for occupational health, through:**
  - an online resource centre for primary health care providers of occupational health services;
  - a training package on basic occupational health, adapted to primary health care and resource-limited settings;
  - production of additional practical tools for assessment and management of occupational risks (ergonomic, physical, biological), promotion of workers’ health, health surveillance and first aid.