Caring for all working people

Consensus Statement
of the International Consultation on Interventions, Indicators and Service Delivery for Workers’ Health
organized by the WHO Regional Office for the Eastern Mediterranean, Ministry of Health and Medical Education, and Semnan University of Medical Sciences,
in collaboration with the International Labour Organisation, World Organization of Family Doctors, and the International Commission on Occupational Health
Semnan, Islamic Republic of Iran, 28–30 April 2014

Concerned that large proportion of working people in the WHO Eastern Mediterranean Region, particularly people in the informal sector and small enterprises and migrant and agricultural workers, still do not have access to the needed preventive, promotive, curative and rehabilitative health services and to social protection against catastrophic health expenditures, occupational diseases and injuries;

Acknowledging that there are several good models for providing health coverage, including essential interventions and basic health services for the prevention and control of occupational and work-related diseases and injuries of workers in countries of the Region and elsewhere;

Recalling that the 60th Session of WHO Regional Committee for the Eastern Mediterranean in resolution EM/RC60/R.2 on universal health coverage called upon Member States to ensure that all people have access to essential health services that are of sufficient quality, without the risk of financial hardship, and to progressively expand health coverage to all the population, including deprived groups, rural populations and those working in the informal sector;

Further recalling that the 60th World Health Assembly in resolution 60.26 “Workers’ health: global plan of action” urged Member States 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;

Noting that the WHO global action plan for the prevention and control of noncommunicable diseases 2013–2020, endorsed by the 66th World Health Assembly in resolution 66.10, foresees meeting the needs for long-term care of people with noncommunicable chronic diseases, related disabilities and co-morbidities through innovative, effective and integrated models of care, connecting occupational health services and community health services/resources with primary health care and the rest of the health care delivery system;
Recalling the Promotional Framework for Occupational Safety and Health Convention (C187), as well as the Convention concerning Occupational Safety and Health and the Working Environment (C155) and the Occupational Health Services Convention (C161), adopted by the International Labour Conference;

Bearing in mind the Kuwait Initiative for Promotion of Occupational Health in the Cooperation Council States adopted in 2011 by the Gulf Cooperation Council;

Guided by the policy directions for scaling up workers’ health coverage given by Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean and by H.E. Dr Seyyed Hassan Hashemi, Minister of Health and Medical Education of the Islamic Republic of Iran;

The participants in the International Consultation on Interventions, Indicators and Service Delivery for Workers’ Health held from 28 to 30 April 2014 in Semnan, Islamic Republic of Iran, unanimously agreed that achieving the goal of universal health coverage for working people in the Eastern Mediterranean Region requires the following actions:

**Strengthen governance**

1. Ensuring political commitment and intersectoral collaboration involving major stakeholders for protecting and promoting equitable workers’ health, including ministries responsible for health, labour, economic sectors, social protection, organizations of employers, workers and civil society.
2. Building institutional and human resource capacities of ministries of health to steer national actions on workers’ health and its environmental, social and behavioural determinants, equity and access to health services.
3. Including workers’ health in national and international policies and initiatives for universal health coverage and health systems strengthening.

**Scale up service delivery**

4. Defining the essential interventions for prevention and control of occupational and work-related diseases and injuries, such as primary prevention of occupational health risks, detection and case management of occupational and work-related diseases and injuries and health surveillance of workers and including them into the nationally determined sets of basic health services or essential health packages for universal health coverage.
5. Devising regulations and capacities for gradually increasing coverage and quality of workers’ health services through developing basic occupational health services and their integration with the existing primary health care networks and centres, as well as strengthening the preventive functions of health services provided by large enterprises.
6. Enabling people-centred primary health care services to meet the specific health needs of working people, such as prevention and control of occupational and work-related diseases and injuries, protection and promotion of working capacity and fitness for work.
7. Developing connections and referral pathways between primary health care services and specialized occupational health services and laboratories.
8. Establish specialized support services for workers’ health, such as occupational medicine clinics, occupational hygiene laboratories, and poison control centres and incorporate essential drugs and equipment for diagnosis and treatment of occupational diseases into the national lists of essential medicines and medical equipment.
9. Encouraging large enterprises, as part of their corporate social responsibility, to provide comprehensive preventive, promotive, curative and rehabilitative health services to workers and subcontractors and, as appropriate, to their families and the surrounding communities.

**Expand health financing**

10. Devising financial mechanisms for scaling up health coverage of disadvantaged [deprived] groups of workers according to national specificities, such as migrant, domestic, agricultural and informal sector workers, including preventive, promotive, curative and rehabilitative health services and financial protection.
11. Expanding the coverage of employment injury benefits schemes for compensation for occupational diseases and injuries as part of national social protection floors.
12. Developing mechanisms for full financial protection for preventive, diagnostic, curative and rehabilitative services for occupational diseases and injuries.
13. Introducing methodologies and tools for costing the essential interventions for prevention and control of occupational and work-related diseases and injuries and the scenarios for their scaling up.

**Build up health workforce**

15. Establishing in-service occupational health training programmes and career pathways for general and family practitioners and other medical specialists, practice nurses, environmental and public health technicians and community health workers.
16. Creating and expanding programmes for pre-service training, specialization and career pathways and continuous medical education and development in occupational medicine, nursing, hygiene and safety.
17. Training primary care providers to deliver the essential interventions for workers’ health in the context of people-centred primary health care.
18. Developing programmes for protecting the occupational safety and health of health care workers.
19. Integrating of occupational and environmental health and safety measures into the accreditation systems of hospitals and other health care facilities.

**Improve health information**

20. Including workers’ health indicators into national health information systems, and improving the registration and recording of occupational diseases and injuries.
21. Introducing and applying indicators and mechanisms for measuring and monitoring coverage with essential interventions and basic occupational health services for prevention and control of occupational and work-related diseases and injuries.
22. Strengthening research and access to knowledge on the coverage, quality and effectiveness of occupational health services and interventions and work capacity.