Health is everybody's business:  
The business case for a healthy workplace

1. Introduction: we can't afford to ignore the benefits of a healthy workplace

Good morning, ladies and gentlemen,
I would like to thank the Conference de Montreal for providing me with this opportunity to speak on an issue which is central to WHO's work.
I would like to thank especially the Fondation Chagnon and the Chagnon family for their vision in sponsoring these important discussions on health and prevention, which are so important WHO's mission of 'the attainment of the highest possible level of health for all people'.
When we speak of health improvement measures, it often evokes thoughts of 'expense' and 'increased costs'. In actual fact, the cost of inaction on health is, and will increasingly be, much higher than the cost of addressing the health and safety of workers. Preventing illness and injury of all kinds is much more cost-effective than paying to have employees treated and cared-for, paying to replace them or have them absent, or the price of a less-than-optimally productive workforce.
To really achieve cost savings, though, we must move beyond the traditional vision of workplace health and safety issues, which of course remain vitally important goals. We need to embrace the value of ensuring that employees, so often referred to as a company's 'greatest asset', are in the best possible health. If they are physically and mentally healthy and therefore productive, well and motivated, it will be to everyone's benefit: the employer, the community, and not least by any means, their own welfare and that of their families.
I hope we leave here in agreement that we are all, whether business owners, employers or employees, products of our environments, and unless the workplace environment supports and promotes health, we will all struggle to achieve it on our own.
The simple fact is that prevention is the key. It pays off on the bottom line. We have the numbers and the evidence to prove it. And never more so than in this rapidly globalizing and competitive world market.

2. Occupational safety and health: The 'traditional approach' is still at the core

The issue and its costs:
Keeping workers safe from health risks and dangers on the job must be our first and central concern: it is the foundation of workplace health.

While great strides have been made, much more is needed, particularly in rapidly industrializing countries. The working conditions for the majority of the world's three billion workers do not meet even minimum standards and guidelines set by WHO and ILO. Only 10 to 15 percent of the total global workforce has access to any occupational health services.

In fact, ILO estimates job-related accidents and illnesses claim two million lives and cause more than a quarter of a billion non-fatal accidents and illnesses each year. Numbers are rising due to rapid industrialization in many developing countries.

In many newly-industrialized countries with rapid growth and rapid increase in new workers, Asia and Latin America in particular, there are alarming increases in fatal accidents. In China, the number of fatal accidents rose by 17 thousand in just three years.

However, contrary to traditional images of workplace health risks, occupational disease now far exceeds accidents as the number one danger. Workers are 4 times more likely to fall sick from work conditions than to be injured: asbestos alone is responsible for 100 thousand occupational deaths per year, pesticides for another 70 thousand. The top workplace risk factors are: carcinogens, airborne particulates, noise, and risk factors for back pain and injuries.

What's the price-tag for all this? ILO calculates total workplace accidents and illnesses cost the global economy 4% of its GDP.

**The solution: Prevention is the key.**

Occupational health and safety is about prevention: addressing the key risk factors that threaten workers. This requires governments and employers to recognize the risk factors relevant to their workforce and implementing preventative programmes to minimize them.

The cornerstone of WHO's approach is the *Global Strategy on Occupational Health for All*: we are working with the ILO to develop and implement effective government policies, promote employer and employee programmes for primary prevention and healthy environments, and make current information on risk factors widely known.

As well, we are currently working with a number of WHO collaborative centres worldwide to develop the 'Occupational Risk Management Toolbox', aimed primarily at small and medium sized businesses and emerging and developing economies. It addresses health and safety issues at work in a comprehensive manner with practical tools, procedures training and solutions for different workplace hazards.

3. **Mental stress and burnout: it's on the rise in the workplace**

**The issue and its costs:**

As the summary for this session rightly notes, we are hearing more and more about workplace burnout and mental stress.

We can all speculate on the wide range of causes, all it takes is a glance at the news headlines: globalization, out-sourcing jobs, job insecurity, leaner workforces and the migration of workers. Clearly the nature of work is changing rapidly, and that can produce a great deal of stress and anxiety.
In fact, the workplace and the role of work in a person’s life and self-esteem are crucial to one’s overall mental health.

Work-related stress can range from a feeling of distress or not coping, to anxiety disorders. It can cause depression or substance abuse such as drugs or alcohol. ‘Burnout’ - a term used more and more - is characterized by feelings of intense fatigue, loss of control and accomplishing nothing at work. In one study it was reported to affect as many as 50% of all Finnish workers to some degree.

Depression is the most common work related disorder, and is on the increase. It is expensive, too: American studies show that the medical and disability costs for employees with depression may be as much as 4 times higher than for other causes.

The evidence is clear that mental health issues and the related costs are dramatically on the rise:

- The University of Laval right here in Quebec reports absenteeism for psychological reasons increased 400% between 1993 and 1999. It’s the number 2 cause of absenteeism in the UK.
- The Association of Canadian Insurance Companies estimates 30 to 50 percent of disability allowances are for mental health problems. They are the leading cause of long-term absence.
- In Europe, it has been estimated that work-related stress affects at least 40 million workers, costing 20 billion euros - that's roughly 30 billion Canadian dollars - annually, or 3-4 percent of GDP.

Can we afford to ignore the mental health of employees?

The solution: Prevention is the key.

WHO is in the process of developing a practical guide to mental health and the workplace. The key for companies is to recognize the problem, analyse it, and then develop a workplace mental health policy to prevent and protect staff from mental stress and mental disorders, and to support those who are suffering.

One important goal is to minimize the risk factors for mental health problems in the workplace, which can include:

- Excessive or insufficient work
- Lack of control in the workplace
- Lack of recognition
- Inequity
- Poor working conditions
- Conflicting home and work demands

And to maximize the protective factors, which include:

- A sense of belonging
- A positive work climate
- Opportunities for success and recognition of achievement
- Economic security
- Access to support services
- Good physical health

We are in the process of finalizing these guidelines, which will be published and available in the autumn of this year as a module of our WHO Mental Health Policy and
4. The health promotion model: a healthy workplace saves money

The issue and its costs:
WHO promotes a more holistic, 'big picture' approach to workplace health: it's a health promotion model, recognizing that we all live in a multitude of 'environments', the home, the community, the marketplace, perhaps school, and, of course, the workplace.

They each have a key role to play in the state of an individual's health, and each must be addressed as equally important: you can't expect an employee to only address his or her health 'on his or her own time' when we spend most waking hours in the workplace.

Equally, an employee brings the effects of all the other environments into the workplace: poor health due to environmental factors at home, in the marketplace, or the community are going to have an impact on your most important asset: your workforce, and on your bottom line.

One of my chief responsibilities at WHO is to oversee the department of chronic diseases: heart disease, stroke, diabetes and cancer are the leading ones. The hard numbers here are 3, 4 and 67. Three risk factors are largely responsible for these 4 major chronic diseases which account for 67 percent, or 2/3rds of the global burden of disease.

The three risk factors are: Poor diet, lack of physical activity and tobacco use. All preventable risks, but which are growing exponentially every day: globally more than 300 million people are now obese, 1.2 billion are overweight. 5 million people will die this year as the result of tobacco use.

And the fastest increases of these risk factors are not, as you'd expect, in the developed world, although the problem is certainly acute there, but on the rise fastest in developing countries.

Here are more hard numbers to add to the equation:
100 million Americans have one of the 4 major chronic diseases, which account for three-quarters of the $1.7 TRILLION dollars spent in the US on healthcare each year. Three quarters of 1.7 TRILLION dollars, in just one country. Take those numbers and apply globally. It's astronomical.

To the private sector I say: these are your employees, your healthcare insurance scheme, your public healthcare tax dollars.

When you know that most of that cost can be prevented, is there any further argument needed to persuade you that immediate action is in your best interest?

How about the additional argument that the strain this economic burden is placing on economies will affect their competitive ability in an increasingly globalized world: the countries with the healthiest workforce will have the lowest costs and taxes, the highest productivity and the greatest competitive advantage.

The solution: Prevention is the key.

There is compelling reason, then, to extend our vision of a healthy workplace beyond preventing only work-related disease, injury and mental health problems. Those will
always be central matters, and clearly the responsibility of a good employer and a responsible government.

Public health professionals know, too, that the best approach to reducing risk factors such as obesity or smoking is to work across entire populations. By changing their environment, it's possible to promote healthier habits and to support their changed behaviours. The workplace is key to success.

So workplace health prevention interventions of a broader scope can lead to larger gains in worker productivity, reduced absenteeism and cost-savings. To give you one concrete example, Johnson and Johnson's, the American manufacturer, has a Health and Wellness programme which works along these lines, providing staff with an integrated health promotion and occupational health and safety model. After nearly three years, the evaluation showed that staff had significantly lowered 8 of 13 risk categories, including tobacco use, high cholesterol, even seatbelt use. As well, there were more than 4 times the savings per employee for medical and health expenses by the fourth year of the programme.

WHO has been working with a range of partners to develop and implement these cost-effective interventions. We are working right now on a World Report on Preventing Chronic Diseases: a Vital Investment. It will outline the role of all stakeholders, including employers, to collectively address this rising health crisis.

Among the most effective interventions is the smoke-free workplace. I note with pleasure that most Canadian provinces have enacted legislation to this effect, as have more and more countries under the WHO Convention on Tobacco Control Treaty, which was ratified just last February.

WHO is also working to implement the Global Strategy on Diet and Physical Activity, which gives an important role to private industry in to develop workplace policy to improve diets and increase physical activity. We are also working with the food industry to improve the quality of food products offered, to increase education of consumers, especially children.

Employers can contribute with education and awareness campaigns, healthy food choices on offer, and the promotion and availability of physical activity opportunities, as well as support for smoking-cessation for employees.

5. Conclusion: Health is everybody's business

We work on the principle that health is everybody's business. We cannot expect individuals to take the entire responsibility for their own health and healthy behaviours. It is crucial that the environment in which they live and work promotes health, prevents risk factors, and supports their efforts.

Additionally, the principle extends to the concept that no one sector of society alone will be able to effect the change necessary to prevent unnecessary illness, death and costs to business and the economy: this must encompass a multi-stakeholder approach.

What each stakeholder needs to do:
For our part, we are working on many fronts to create healthy environments: with governments, businesses, communities and civil society on occupational health and safety, on mental health in the workplace and to prevent chronic diseases.

WHO's newly convened Commission on Social Determinants of Health will take a close look at employment: the workplace and external factors such as the social, economic
and governance structure of employment conditions - range from working conditions of migrants and child workers to the mental physical and lifestyle impact of employment, such as job insecurity. The Commission will report back on its findings in 2008.

Governments have a crucial role to play in the partnership: you must set standards and policies on workplace safety and health and on mental health and show leadership towards a broad-based, multi-sectoral approach to health promotion which includes promoting healthy workplaces.

The private sector is pivotal and its role must increase if real gains are to be made: On occupational safety and health - you need to ensure your programmes meet the highest standards, but also be aware you have great influence over the practices and standards of your partners, your suppliers, and you have an obligation to ensure their workers are adequately protected as well as your own.

You must see the value in a healthy workforce, and create the environment in which it can flourish. It is, in the end, to your benefit and will show its profit-margin in productivity and competitive edge.

And to the public health experts and representatives, you have a crucial role to play here, too: you hold the knowledge and evidence necessary to advance the cause of a healthy workplace. But we must move from knowledge to action, and you are key; you must use your knowledge, experience and influence to advocate for improvements from the stakeholders: government, and employers.

In the end, the evidence is clear that prevention is the most cost-effective route and the smart business choice. But let us not forget Mahatma Gandhi's wisdom and perspective:

*It is health that is real wealth and not pieces of gold and silver.*

Thank you all, I look forward to our discussion.