Workers’ health and decent jobs

A healthy working life reduces poverty and stimulates economic growth, supporting achievement of Sustainable Development Goal 8 (Decent Work).

The workplace is a key setting for preventing disease and promoting health. The WHO Global Workers’ Health Programme addresses the full range of occupational disease and injury risks, environmental, social and individual. Promoting access to health and occupational health services for workers and their families is a key goal of the decade-long WHO Global Plan of Action on Workers’ Health (2008–2017).

Major health impacts related to work

More than 2 million work-related deaths and about 160 million new occupational disease cases are reported every year. Occupational risk factors account for a substantial part of chronic disease (see fig.).

In addition, occupational risks account for 14% of road traffic accidents, 14% of unintentional poisonings, 6% of falls, 10% of burns, 11% of drownings, and 11% of other unintentional injuries. Furthermore, about 11% of the burden of disease from depression is attributable to occupational risks.

Lack of occupational health and safety measures cost the global economy about 4% of GDP, in terms of lost productivity, health care and compensation. Productivity losses due to sickness and disability are exacerbated by the epidemic of non-communicable diseases, often work-related.

For many people worldwide, workplace health care is the only means of access to health care at all. Yet only 30% of workers in the world are covered with essential interventions and basic occupational health services, mostly workers in large enterprises in the formal sector. Conversely, the working poor and informal sector workers largely lack occupational health services or coverage. These groups are more likely to work in hazardous conditions and suffer work-related diseases, injuries, and disabilities, reinforcing poverty. About 942 million workers – nearly one in three – are currently living below the global poverty line of US$2 daily.

A Healthy Workforce – key to the 2030 Agenda for Sustainable Development

Workers represent one third of the world population. People are living longer and working longer, well into the old age. Women are increasingly participating in the labour force. Health-care workers are exposed to significant disease risks as well as being first responders in emergencies, and their occupational health services require special attention. In line with the Sustainable Development Agenda, WHO is providing leadership on the following:

**SDG 1 Elimination of poverty**
- Improving detection and reporting of occupational diseases and injuries to guarantee workers’ access to employment injury schemes and meet the target of universal social protection.

**SDG 3 Health and wellbeing**
- Prevention and control of occupational cancer and respiratory diseases;
- Expanding health coverage of workers in the informal economy by integrating occupational health and safety interventions into people-centred health care;
- Protecting occupational health and safety of responders to public health emergencies;
- Reducing workplace air pollution exposures and occupational poisonings.

**SDG 8 Decent work and economic growth**
- Strengthening the capacities of health systems to address hazardous child labour;
- Improving working conditions of workers in the informal economy;
- Improving the global measurement and monitoring of workers’ health.

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### Chronic disease due to Occupational risks

<table>
<thead>
<tr>
<th>Disease</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>Back Pain</td>
<td>26%</td>
</tr>
<tr>
<td>Hearing Loss</td>
<td>22%</td>
</tr>
<tr>
<td>Chronic Obstructive Pulmonary Disease</td>
<td>12%</td>
</tr>
<tr>
<td>HIV</td>
<td>10%</td>
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<tr>
<td>Sexually Transmitted Infections</td>
<td>8%</td>
</tr>
<tr>
<td>Asthma</td>
<td>9%</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>7%</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>2%</td>
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<tr>
<td>Leukaemia</td>
<td>1%</td>
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</tbody>
</table>
WHO action on workers’ health

WHO is strengthening the capacity of Ministries of Health to: promulgate programmes on workers’ health; measure and monitor workers’ health; respond to emergencies; promote the health of migrant workers, women, and workers in the informal economy; and eliminate hazardous child labour. Specific WHO activities include the following:

1. Norms, standards and tools
   - Health workforce and emergencies
   - Tools for occupational health and safety in emergency preparedness and response;
   - Training tools for workplace improvement in health care facilities.
   - Universal health coverage and social protection
   - Tools for costing of primary health care interventions for prevention and control of occupational and work-related diseases and injuries;
   - Training materials for healthcare providers;
   - Methods for early detection of occupational diseases.
   - Non communicable and pollution related diseases
   - WHO guide for prevention and control of NCDs at the workplace;
   - WHO/International Agency for Research on Cancer (IARC) guidance on prevention and control of occupational cancer.
   - Decent work and economic growth
   - Strategies and policy options for improving the health of workers in the informal economy;
   - Guide for health care providers on hazardous child labour.

2. Support to countries in policy development and implementation
   - National situation assessments of the health of workers, followed by national action plans;
   - National programmes and core capacities for protection of occupational health and safety in the health sector;
   - Roadmaps and capacities for scaling up access of workers to essential interventions and basic occupational health services for prevention and control of work-related diseases and injuries.

3. A global, public database to monitor progress on workers’ health

WHO is developing a global database of 41 indicators to monitor the health of working people; environmental and social health determinants; and access to health services. WHO, jointly with ILO, is developing a methodology for estimating work-related health impacts to be used for monitoring progress on SDG 8 and related targets of other SDGs. (SDG targets 1.3, 3.4, 3.8, 3.9)

The Workers’ Health Module in the International OneHealth costing tool allows countries to measure and cost interventions for prevention and control of occupational diseases and injuries and to develop scenarios for scaling up.

Endnotes:
1 International Labour Organization – Safety and Health at Work, 2014
2 Prüss-Ustün et al., 2016.
3 WHO/International Labour Organization (ILO), and Organization for Economic Cooperation and Development (OECD) 5-year plan of action on health employment and inclusive economic growth
4 OneHealth Tool – http://www.avenirhealth.org/software-onehealth.php

4. Research and programme evaluation

The WHO global occupational health collaborating centre network comprises 50 national research and academic institutions that collaborate with WHO to support development of tools, methodologies and standards for protection and promotion of health at work.

5. Leadership, partnerships and advocacy

WHO is advocating for prioritized action on the health and safety of the health-care workforce under the UN High Level Commission on Health Employment and Economic Growth, and the UN Global Compact on Migrants and Refugees. The International Labour Organization (ILO) is the main international partner for protecting and promoting the health of working people. There is a WHO/ILO joint committee on occupational health that provides guidance by constituents on the interagency collaboration. WHO also contributes to the Future of Work centennial initiative of ILO.

WHO working at country level:

In the wake of the Ebola crisis, WHO and the ILO initiated a collaboration to strengthen the capacities of African countries to address workers’ health in the health care and emergency workforce as well as in the informal economy. Activities have included:

- Expert workshop involving ministries of health of 17 African countries to build capacities for protection of occupational health and safety in public health emergencies;
- Assistance with development of national situation analysis and workers’ health action plans in Tanzania, Madagascar and Togo;
- Support to develop national occupational health and safety programmes for health care workers in South Africa, Tanzania, Madagascar, Botswana, Benin, Togo, Ethiopia, Ghana and Kenya;
- Integration of occupational health services into primary health care systems in South Africa, Tanzania and Benin;
- Communicating country success stories and advocating for the health needs of migrant workers, women, workers in the informal economy and child labourers in South Africa, Tanzania, Madagascar and Benin.

For more information:

Public Health – Environmental and Social Determinants of Health
Climate and Other Determinants of Health
World Health Organization (WHO), Geneva 27, Switzerland
Dr Ivan D. Ivanov, Team Leader, Global Workers’ Health Programme (ivanov@who.int)
http://www.who.int/occupational_health/en/