

directing council

regional committee



**PAN AMERICAN
HEALTH
ORGANIZATION**

XXXVI Meeting



**WORLD
HEALTH
ORGANIZATION**

XLIV Meeting



Washington, D.C.
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Provisional Agenda Item 5.9

CD36/19 (Eng.)
30 July 1992
ORIGINAL: SPANISH

WORKERS' HEALTH

This item is being presented to the XXXVI Meeting of the Directing Council of the Pan American Health Organization by decision of the Executive Committee, which, at its 109th Meeting, was informed of the activities that have been carried out in fulfillment of the mandates on workers' health of the XXIII Pan American Sanitary Conference. The Secretariat reported that the Director had established an inter-programmatic group in the Organization to motivate the various programs, within their respective plans and areas of work, to develop and implement activities relating to workers health. The report presented to the Committee also outlined the impact that the initiative "1992: Year of Workers' Health" has had in the different countries, many of which are strengthening their political commitment and preparing national plans, with multisectoral participation by the Government, employers, and workers.

In its discussion of this item, the Executive Committee commented very favorably on the document and its four annexes. Reference was made to the importance and impact of workers' health and there was consensus regarding the value of the material presented. The Committee considered the document a valid contribution to the development of workers' health, expressed its agreement with the plan of action, and manifested its support for the Declaration on Workers' Health. In addition, the Members pointed out the need to develop practical methods of programming in order to improve working conditions for workers, establish surveillance systems for reporting injuries and diseases in the working population, and determine interventions to reduce work-related health problems.

The Director drew attention to the composition of the Organizing Commission for the initiative "1992: Year of Workers' Health," emphasizing the effort that had been made to achieve balanced participation by government representatives, specialized and academic institutions, workers, the mass media, and religious and social organizations. Among the members of the Commission are Belisario Betancur, former

President of Colombia (1982-1986) and Miguel de la Madrid, former President of Mexico (1982-1988).

The Executive Committee adopted the following resolution for consideration by the Directing Council:

RESOLUTION XII

WORKERS' HEALTH

THE 109th MEETING OF THE EXECUTIVE COMMITTEE,

Having seen Document CE109/24, and its annexes, on Workers' Health, and considering that the health of the economically active population, which constitutes a large percentage of the total population, is the key to sustainable economic development in the countries,

RESOLVES:

To request the XXXVI Meeting of the Directing Council to adopt a resolution along the following lines:

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen Document CD36/19, and its annexes, on Workers' Health;

Taking into account both the large number of persons of working age who because of risk factors in the workplace suffer impairments of health that could be avoided, and the low coverage of workers' health services, especially with regard to prevention; and

Emphasizing the positive economic and social impact of the promotion and protection of health and the prevention of risk factors in the workplace,

RESOLVES:

1. To support the Declaration on Workers' Health and the Plan of Action for the Initiative recommended by the Organizing Commission in accordance with the guiding principles of the initiative "1992: Year of Workers' Health," as set forth in Resolution XIV of the XXIII Pan American Sanitary Conference.

2. To urge the Member Governments to maintain the political decision to implement their national plans for the development of workers' health in coordination

with and with the participation of State institutions, public and private companies, and the workers themselves, with a view to strengthening the existing programs and services for workers' health and to expanding their coverage by means of new alternatives, including the incorporation of workers' health into primary health care, local health systems, and new social security modalities.

3. To request the Ministries of Health of the Member Governments to establish specific programs for workers in the health sector, and to carry out plans for research on this subject.

4. To recommend that the Member Governments identify and mobilize the resources needed to support workers' health in the respective national plans.

5. To request that the Director, within available resources:

- a) Continue to cooperate with requesting Governments in the ongoing evaluation of national policies and plans in order to facilitate identification of the most pressing needs and provide such cooperation as may be required, especially with regard to the working populations that are least served;*
- b) Promote interprogram and interinstitutional coordination, and especially collaboration with the various national and international agencies concerned with this area;*
- c) Continue the Organizing Commission of the Initiative "Year of Workers' Health," as an advisory body to the Workers' Health Program, so that it may collaborate on the studies for the mobilization of resources and in securing increased cooperation at the regional level.*

*(Adopted at the eighth plenary session,
25 June 1992)*

CD36/19 (Eng.)
ANNEX

WORKERS' HEALTH

WORKER'S HEALTH

Introduction

This document is being presented to the Executive Committee of this Organization as the Year of Workers' Health is being observed in the Region of the Americas. It reports on the activities and cooperation that the Bureau and the countries have undertaken in fulfillment of the mandates on workers' health of the XXIII Pan American Sanitary Conference. The Secretariat requests that the Executive Committee study the Plan of Action (Annex II) for the initiative known as "1992: Year of Workers' Health" and the Declaration on Workers' Health (Annex IV) and that it manifest its support and make recommendations on how the desired impact can best be achieved.¹

Workers' health was named by the XXIII Pan American Sanitary Conference as one of the priority program areas for the quadrennium 1991-1994. During the same Conference, the Ministers of Health adopted Resolution XIV on Workers' Health (Annex I), which designates 1992 as the "Year of Workers' Health" in the Region of the Americas.

The goal of the initiative "1992: Year of Workers' Health" is to achieve greater attention to the health of workers without diminishing efforts that are already under way to develop projects and activities at the national, subregional, or Regional level and, in the countries, to promote the strengthening and articulation of workers' health through a comprehensive program with a broader political spectrum. By giving high visibility to the area of workers' health in 1992, it should be possible to achieve a commitment from leaders, promote the exchange of information between employers and workers regarding the problems and causes of work-related accidents and diseases, and foster the development of a preventive consciousness. This, in turn, should result in increased resources for occupational health programs and the plans of action that have been or are being developed. It should also contribute to widespread recognition of the social and economic importance of these programs and plans. Finally, it should help to bring about the needed changes of attitude so that, even after the campaigns carried out during this

¹ The following documents are attached:

Annex I - Resolution XIV of the XXIII Pan American Sanitary Conference

Annex II - Plan of Action for the Initiative "1992: Year of Workers' Health"

Annex III- Guidelines for the Preparation and Adjustment of a National Plan for the Development of Workers' Health

Annex IV - Declaration on Workers' Health, Washington, D.C., 26 February 1992.

initiative have come to an end, the activities and structures established will continue, and there will be increased attention to the health of workers and a new culture of workers' health, with special emphasis on health promotion and protection, enhanced ability to work, and the prevention of occupational risk factors.

Organizing Commission for the Initiative "1992: Year of Workers' Health"

In order to plan activities for the development of this Initiative, an Organizing Commission was formed that included a number of prestigious political and scientific figures, among them two former presidents of countries in the Region. The Commission was given responsibility for promoting broad dissemination in order to ensure political commitment and encourage active participation by the various sectors of society. These objectives are enshrined in the Declaration on Workers' Health, signed by the members of the Commission in Washington, D.C., on 26 February 1992. It is hoped that the Governing Bodies will endorse the content of this Declaration, lending their support so that it can then be disseminated to all the concerned agencies and institutions and facilitating the mobilization of resources and the delivery of cooperation.

Plan of Action for the Initiative

The development of the Initiative will be guided by the Plan of Action, which was revised and approved by the Organizing Commission. It is hoped that these program guidelines will be espoused by the Governing Bodies and adopted by the member countries. The Plan is aimed at the attainment of two targets:

- ▶ All the countries of the Region will formulate or revise and approve a National Plan for the Development of Workers' Health.
- ▶ At least ten countries in the Region will set up mechanisms for intersectoral articulation, coordination and cooperation, and will establish National Committees on Occupational Health to implement their National Plans for the Development of Workers' Health.

In order to prepare a National Plan and achieve its objectives it is indispensable to obtain the participation of government, employers, and workers.

National Plans for the Development of Workers' Health

One of the purposes of the National Plans is to ensure coordination between all the agencies and institutions, both governmental and nongovernmental, that are in a position to contribute effectively to the promotion and protection of workers' health, stressing the prevention of occupational risk factors, with the collaboration of employers and workers.

In the governmental sector there are various institutions with basic responsibility for the preparation, implementation, and periodic evaluation of the National Plan. These entities have traditionally worked in isolation and have had a largely pathological orientation. They include:

- The ministry of health, which is responsible for providing curative care and rehabilitation for sick workers.
- The ministry of labor, which is primarily concerned with legislation on prevention and standards to regulate the working environment and the practices used in the workplace. There are difficulties surrounding the applicability of such provisions and limitations with regard to the implementation and enforcement thereof.
- Social security institutions or insurance schemes, which serve their affiliated members in case of illness and compensate them in the event that they become disabled and cannot work.
- Institutes that specialize in occupational health, which sometimes fall under the aegis of the ministry of labor and sometimes under that of the ministry of health.
- The ministries of agriculture, industry, and trade, which play an important role in the development, dissemination, and enforcement of standards.
- The ministry of education, which has the task of bringing about changes in attitude and disseminating information to help identify the risk factors that threaten workers' health and find the most effective means of eliminating or controlling them. This type of action is a great deal less expensive and more effective than curative or compensatory actions.

In the nongovernmental sector, in addition to the agencies involved, the labor unions, and the trade associations, it is important to point out that participation by employers and workers in this area is essential and fundamental. Without their active and aware collaboration it will not be possible to maintain economic progress and preserve the social stability that can result from programs aimed at improving the health and working capacity of the economically active population.

Participation by the media mass and educational institutions is indispensable in order to ensure that human resources in all the professions and trades receive training that emphasizes a new attitude oriented toward prevention and the promotion and maintenance of health.

The national plans for the improvement of workers' health will incorporate lines of action for the extension of health care coverage to the most exposed, most vulnerable, and least served workers, including women, children, indigenous peoples, and the handicapped, as well as those in the informal sector, bearing in mind that only a small percentage--less than 10%--of the working population currently benefits from comprehensive attention in accordance with ILO instruments. These lines of action will need to be innovative and envisage alternatives such as primary health care and local health services, in addition to considering new modalities of social security, so that the action taken will be preventive, rather than strictly curative. The plans will encompass various basic components, including: specific policies, legislation, regulation and standardization, promotion, utilization of mass communication, information, generation of knowledge and epidemiological surveillance, active participation, manpower development, institutional strengthening, development of services and programs, surveillance, and control. The will also call for the adoption of an ergonomic approach to personal health care so that simultaneous consideration is given to the working environment and the techniques used in the workplace, to tools and machinery, to the organization of work, and especially to health education and prevention in the workplace.

The foregoing discussion points up the need to review the types of benefits that have traditionally been offered to workers, with a view to ensuring that they are line with current socioeconomic and labor realities, new risks, and available technical and medical possibilities for prevention.

The preparation of a national plan should make it possible to achieve within institutional structures the constitution of an information network that will promote the elimination of unhealthful, dangerous, explosive, toxic, and uncomfortable working conditions, with priority given to the reduction of occupational risk factors that not only are directly harmful to the health of exposed workers but also produce environmental changes that are detrimental to the entire population. In addition, an effort needs to be made to adapt the requirements and conditions of work to the capacity and ability of working women and men.

A set of guidelines (Annex III) has been drafted to aid in the preparation and revision of the national plans for the development of workers' health. These guidelines stress the importance of multidisciplinary cooperation between the various institutions and health programs, with support and collaboration from the community, unions and trade associations, and especially employers and workers.

The national plans for the development of workers' health will be based, inter alia, the following frames of reference:

- Improvement of the health of workers:
 - ▶ Reduction of the number of fatal accidents;
 - ▶ Reduction of the cases of disability and disease;
 - ▶ Reduction of work-related diseases;
 - ▶ Promotion of factors that contribute positively to health;
Promotion of health education and healthy lifestyles;
 - ▶ Implementation of measures to increase the average length of economically active life.

- Adaptation of working conditions to the characteristics of workers:
 - ▶ Reduction of hazards (prioritizing the most serious risk factors);
 - ▶ Creation of better safety and hygiene conditions in the workplace;
 - ▶ Guarantee of basic sanitary conditions in all workplaces;
 - ▶ Control of workers' exposure to dangerous substances.

- Formulation of a National Plan of Action:
 - ▶ Generalized participation and interinstitutional cooperation;
 - ▶ Programs, services, protection, prevention;
 - ▶ Coverage for under-served groups;
 - ▶ Utilization of innovative strategies;
 - ▶ Collaboration in the areas of hygiene, safety and occupational health, and in other disciplines concerned with the issue, making optimal use of existing structures.

The development of a National Plan presupposes identifying the most serious deficiencies and finding ways of eliminating them. The most pressing needs generally are:

- Personnel to achieve the objectives in the area of practice, research, and training (training at all levels: training in occupational health for health workers; training of specialists in safety, hygiene, occupational medicine, and others disciplines relating to occupational health; and training of workers and employers);

- Epidemiological surveillance in workers' health in order to identify the most vulnerable groups and those who are exposed to important work-related risk factors and pathological situations;

- Research on work-related injuries and diseases, hazard factors, measurement techniques, tools and equipment, most vulnerable and least covered groups, and preventive techniques;

- Information and education to raise awareness and encourage self-care and to enhance the effectiveness of interventions;
- Improvement of the human resource development for all professions and trades, with a view to providing workers with the training required so that they will become involved in prevention activities in the workplace and in the promotion of workers' health;

Cooperation in Workers' Health by the Organization

In order to help enlist the participation of the national working groups, the interinstitutional committees, and the multidisciplinary technical commissions responsible for the formulation and implementation of policies and plans, the Organization is intensifying the provision of advisory services to the countries, utilizing to this end all the operating capacity at its disposal or within its reach.

For this purpose, and to give priority to workers' health, the Director has enlisted the participation of the WHO Collaborating Centers in the area of workers' health and, in addition, has established an interprogrammatic group which, taking into account that workers' health is a program priority for the 1991-1994 quadrennium, is endeavoring to motivate all the Organization's programs, within their respective plans and areas of work, to develop and implement activities aimed at specific workers' health situations and special groups of workers. The interprogrammatic group is also attempting to identify activities that might be carried out jointly by the various programs in order to achieve progress in the area of workers' health. The same type of integrated collaboration is being proposed in the PAHO/WHO Country Representations.

The following scheme is being utilized for the delivery of cooperation:

- ▶ In the Country Representations (generalized support and actions by the focal points for environmental and occupational health);
- ▶ General activities (dissemination of information and knowledge, training, fellowships, research, intercountry initiatives, intercountry cooperation);
- ▶ Activities by the various programs in the area of workers' health, coordination by the Interprogram Group at Headquarters;
- ▶ Activities by the Program on Workers' Health (under the coordination of the Program on Environmental Health).

A basic document has been prepared for evaluating progress in the implementation of Resolution XIV. This document is intended to help the countries to find the best procedures to quantify the advances made and adjust their orientations and activities accordingly.

The Organization hopes that the proposed efforts and activities will make it possible for the countries to achieve better levels of health and well-being in the working population, extend the average length of economically active life, decrease absenteeism, reduce human suffering and disability, and, thus, increase production and economic and social development.

Repercussions of the Initiative "1992: Year of Workers' Health"

The Initiative has already had a number of repercussions at the Regional level. For example, workers' health has been included on the agenda of the Latin American Parliament, discussed in meetings of labor organizations, and incorporated into the activities of the Andean, Central American, and Southern Cone subregions. A joint meeting with ILO has been planned on the topic of "Health and Work."

At the country level, several congresses and other events have been organized on workers' health and there is growing recognition that the responsibility for workers' health should be shared by the government, the public and private sectors, and the workers themselves. It has been confirmed that no government sector can address the problem alone. The Ministries of Labor are unable to guarantee benefits for the population and they have only limited means for enforcing the laws and standards that govern the workplace and its practices. Social Security institutions normally offer only curative care and financial compensation to the sick workers; they do not deal with preventive measures nor are they concerned with healthy workers. Moreover, in most of the countries coverage levels are quite low. The Ministries of Health are responsible for carrying out a wide range of functions, which should include the provision of preventive health care to the vast majority of workers who do not have access to preventive services in or near the workplace. For these reasons, an attempt is being made to overcome the difficulties through the promotion of political commitment, intersectoral cooperation, and the preparation of national plans in consultation with the national committees on workers' health and with the participation of various sectors.

XXIII PAN AMERICAN SANITARY CONFERENCE

RESOLUTION XIV
WORKERS' HEALTH



Approved 27 September 1990



PAN AMERICAN
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RESOLUTION

XIV

WORKERS' HEALTH

THE XXIII PAN AMERICAN SANITARY CONFERENCE,

Having examined Document CSP23/4 on "Workers' Health," and taking into account the existence of vulnerable workers' groups exposed to high-risk situations; and

Noting that risk factors in the workplace are related to high ratios of morbidity, absenteeism and mortality caused by occupational accidents and diseases and other work-related illnesses,

RESOLVES:

1. To adopt the programmatic and cooperation guidelines for PAHO contained in the document on "Workers' Health" (CSP23/4).
2. To request that Member Governments:
 - a) Give priority to the formulation and evaluation of specific policies related to occupational health in both the formal and the informal sector, with particular emphasis on achieving coordination among national institutions with responsibility for this area;
 - b) Give priority to the development and implementation of occupational safety and health laws, to the development and enforcement of standards related to exposure to hazards in the workplace, to research into occupational safety and health and into measures to reduce occupational health risks, and to the development and implementation of disease and injury prevention technologies;
 - c) Increase the development of different institutional workers' health care arrangements in order to promote the attainment of universal coverage, with special emphasis on education for health, the promotion of health, primary health care, and the inclusion of occupational health at all levels of health services, including local health care systems;

- d) Promote and facilitate greater community participation, including workers and employers, in programming, execution and evaluation of occupational health programs;
 - e) Train and increase the human resources needed for the gradual expansion of workers' health programs and services, drawing on the experience acquired by the countries of the Region in this area through cooperative exchange programs;
 - f) Include occupational health activities in all relevant health programs in order to address the needs of all workers, particularly those who are most vulnerable, such as child and adolescent workers and women of reproductive age;
 - g) Establish information and epidemiological surveillance systems on occupational health;
 - h) Promote and facilitate employee participation in healthy life styles to include: smoking cessation, healthy nutrition, exercise and programs to decrease injury and disease risks for specific occupations;
 - i) Encourage the development of legal instruments on working conditions and environments in countries where they do not yet exist, and the issuance of regulations to implement them in the countries whose legislatures have framed and enacted them.
3. To request that the Director:
- a) Give workers' health a greater priority when formulating the program budgets during the quadrennium 1991-1994;
 - b) Promote and encourage mechanisms leading to a greater mobilization of resources and an increase of PAHO's technical cooperation capacity in occupational health;
 - c) Promote cooperation to the extent possible and encourage the development of specific occupational health projects for people employed in the agricultural sector, in small businesses, and in the informal sector;
 - d) Give greater support to efforts toward the establishment of the Andean Center for Occupational Health;
 - e) Take, to the extent possible, measures to strengthen the national institutes of occupational health and build a regional network based on them and on those to be established.

4. To designate 1992 as the year of workers' health in the Region of the Americas and, with the agreement of all the Governments present, to propose to the World Health Organization that it be made an international year.

(Adopted at the seventh plenary session,
27 September 1990)

PLAN OF ACTION FOR THE INITIATIVE
"1992: YEAR OF WORKERS' HEALTH"

Program Guidelines



Prepared January 1991
Revised February 1992

EXECUTIVE SUMMARY

The Plan of Action for the Initiative **"1992: Year of Workers' Health"** is a response to paragraph 4 of Resolution XIV of the XXIII Pan American Sanitary Conference and the outcome of an exchange of various views. It covers the activities that need to be carried out during the preparatory phase, some of the events that will constitute the key elements in 1992, a series of promotional activities, and the preparation and dissemination of publications and other informational material that has been identified as the minimum nucleus required in order for the countries and the institutions to be able to structure their own programs.

The document has the following objectives:

- To establish a system for articulating actions at the regional, subregional, and national levels.
- To promote interest in the Initiative **"1992: Year of Workers' Health"** among the various agencies, countries, and sectors.
- To establish links between the health programs of PAHO and those of the countries, as well as the health and sectoral programs involved in the prevention of work-related damages.
- To outline the first steps for celebrating the Year of Workers' Health in the Americas, and to generate new ideas for achieving the desired outcome.
- To promote the mobilization of internal and external resources.

The document also gives the targets for the approval of national plans for workers' health plans and for the implementation thereof, as well as the strategies that will contribute to their fulfillment.

The document has been organized into a series of objectives and expected outcomes to be attained through the development of six components: interprogram cooperation, cooperation between Headquarters and the PAHO/WHO Representations, cooperation with national authorities, promotion of workers' health, specific lines of action, and mobilization of resources.

The last part of the document deals with the national level and, after specifying the rationale, aims, and objectives, focuses on the need to carry out a series of activities and events. In addition, the suggestion is made to broaden participation by the governmental and nongovernmental sectors and the various social agents involved on the basis of program lines of action considered to be of greatest impact.

The document presents an organizational structure at the regional and national levels designed to ensure proper coordination and implementation of the schedule of activities.

INTRODUCTION

This document has been prepared pursuant to Resolution XIV, approved at the XXIII Pan American Sanitary Conference on 27 September 1990. It presents lines of action to guide the activities of the Workers' Health Program of the Pan American Health Organization and contains suggested guidelines for development by the countries in connection with the Initiative "**1992: Year of Workers' Health**," with a view to establishing unified criteria in the Region of the Americas and maximizing the benefits to be derived. It has been prepared taking into account the need to review and adjust the program budget that was prepared prior to this mandate, which created new obligations, including the need to promote lines of action to foster the improvement of workers' health in the future.

The national initiatives will contribute to increasing the exchange of collaboration and cooperation required so that workers' health will receive the attention it deserves as a priority program area specifically aimed at preventing accidents, diseases, and disability from work-related risk factors.

In its role of providing technical cooperation, PAHO's contribution should assist in ensuring that the interest manifested by the member countries in Resolution XIV will result in greater promotion, understanding, and acceptance of the need for vigorous efforts to improve workers' health as an integral part of national health plans, social advancement, and economic development.

The Organizing Commission of the Initiative will present the revised Plan of Action to the Governing Bodies in 1992, together with a report on the activities that have been carried out. At a meeting to be held in 1993 it will report on the achievements to date. The Initiative will be promoted and disseminated in early 1992,¹ at which time the groundwork will be laid for its organization, programming, and implementation.

Implementation of the Initiative "**1992: Year of Workers' Health**" involves the planning of actions at various levels in specific priority areas in occupational health and the participation of the various health sectors and programs.

¹ Close collaboration should be sought with the European Economic Community, which also has agreed to declare 1992 the "European Year of Safety, Hygiene, and Health Protection in the Workplace" (from March 1992 to March 1993). During 1992 consideration should be given to the possibility of designating an International Year of Occupational Health. Since this would require a decision by the United Nations General Assembly based on a recommendation of the United Nations Economic and Social Council, it could correspond to 1994 or 1995.

The document covers the following aspects:

- A) Overall context
- B) Regional level
- C) Subregional level
- D) National level

In drawing up the Plan of Action for the Initiative, Workers' Health has been regarded as the area that most visibly demonstrates the relationship between health and the economic and social development of the countries. Workers' Health is also the prerequisite for eliminating poverty and bringing about increased social equilibrium and at the same time an element of recognized importance in ensuring that the economic recovery and reopening of Latin America and the Caribbean will achieve the desired outcomes.

A) OVERALL CONTEXT

TARGETS

By the end of the Initiative, all the countries of the Region will have approved a **National Plan for the Development of Workers' Health.**²

By the end of the Initiative, at least 10 countries in the Region will have set up mechanisms for intersectoral articulation, coordination, and cooperation through multidisciplinary working groups and the organization of National Committees on Occupational Health, and they will also have initiated implementation of their National Plans for the Development of Workers' Health.³

² The National Plans seek to contribute to the progressive extension of workers' health coverage until it becomes a universal right for all workers regardless of their particular activities or companies in which they perform their functions. The overall approach of such coverage not only encompasses curative treatment, rehabilitation, and material compensation when an incapacitating condition is diagnosed but also assigns priority to the promotion and maintenance of health and to prevention in the workplace.

³ In order to consider that implementation of a National Plan has been initiated, it is required that at least the following conditions have been met:

- a) The political decision to promote workers' health has been clearly expressed and confirmed, with due consideration of its relationship to the well-being of most of the population, as a basic condition for achieving social and economic development and reducing poverty;
- b) Existing legislation has been revised to take the current situation into account and to guarantee the rights and obligations that will facilitate the application of a body of doctrine, knowledge, and techniques that will benefit the workers directly, and, by so doing, indirectly increase their capacity for work and production and thus be of help for business enterprises and have a positive effect on the socioeconomic equilibrium;
- c) The structure of a public technical information system is in place which will provide data on the dramatic social and economic costs of work-related pathology and the disability it can produce; the social value of sensitized and active cooperation on the part of employers, workers, and the State; the significance of various work-related risk factors; and the common characteristic they share in that they are all capable of being eliminated and/or controlled;
- d) Training in occupational health for workers, entrepreneurs, and decision-makers has been stepped up, together with manpower training, based on planned numbers and training needs;
- e) The technical leaders have been identified who are capable of bringing about a change in attitude and who can broadly motivate understanding and acceptance of the concepts and their application; and
- f) The minimum material and institutional resources necessary for developing occupational health have been mobilized with the participation of the institutions and the social groups concerned.

STRATEGIES

This Plan of Action for "1992: Year of Workers' Health" will be put into practice based on the strategies of:

- Promoting workers' health as a key political and economic strategy in the search for sustained development and the consolidation of democracy.
- Incorporating the support of the PAHO programs at Headquarters and in the PAHO/WHO Representations for activities to benefit workers' health.
- Developing concepts and mechanisms for intersectoral and interagency coordination and cooperation.
- Including in all health programs activities that are specifically oriented toward workers' health.
- Increasing the cooperation provided by the PAHO/WHO Representations in organizing national counterparts and intersectoral working groups.
- Developing broad-based social participation that goes beyond tripartite participation and leads to a social pact for workers' health.
- Ensuring the participation of all sectors—employers and trade associations, workers and labor organizations, universities and educational centers, nongovernmental organizations (NGOs), the mass media, occupational and public health associations, the Church, concerned groups, and the community as a whole.
- Ensuring the active participation of the WHO Collaborating Centers in the area of occupational health.
- Mobilizing internal and external resources.
- Organizing a series of national and regional events that incorporate specific topics in the area of occupational health.
- Promoting joint programs, particular lines of action, and lines of common interest shared by the countries and the different sectors.
- Seeking new models of health care and services for workers that are consistent with the present structural composition and trends of the work force, and the encouragement of joint responsibility and intersectoral efforts.
- Promoting the implementation of projects on workers' health at the subregional level.
- Enlisting the mass media.

ORGANIZATION

The Plan of Action provides for the appointment of an **Organizing Committee for the Initiative "1992: Year of Workers' Health,"** to be structured as follows:

a) At the Regional Level

- A Regional Commission, headed by an Honorary Chairman, with whom the other members invited to make up this Commission will collaborate.⁴
- A PAHO Interprogram Working Group, which will organize the participation and collaboration of the Organization's technical programs.

b) At the Subregional Level

- The Regional Commission will be part of the organizational structure of the subregional health initiatives. Existing mechanisms that are useful in the promotion of workers' health will be utilized at this level.

c) At the National Level

- A National Commission or National Working Groups will be organized pursuant to national decisions, taking into account intersectoral collaboration and participation by the State, employers, and workers. The PAHO/WHO Representations should promote cooperation with the commissions or working groups and facilitate relations between the national commissions and Headquarters.

⁴ The Regional Commission will be supported by the secretariat of the Workers' Health Program at Headquarters with the cooperation of the PAHO/WHO Representations and the collaboration of the National Commissions and will have the following main functions:

- To contribute to the promotion of regional and subregional activities and to facilitate mobilization of the resources required;
- To promote and coordinate the Plan of Action for the Initiative "1992: Year of Workers' Health" and to promote collaboration with the agencies concerned with occupational health as well as with and between the National Commissions.

B) REGIONAL LEVEL

OBJECTIVES

- To promote interprogram cooperation so that issues related to workers' health will be considered in all programs.⁵
- To promote implementation of the lines of action for workers' health and for the health programs approved by Resolutions XIII and XIV of the XXIII Pan American Sanitary Conference.
- To step up the provision of technical assistance to the countries for the formulation, adjustment, implementation, and evaluation of the National Plans for the Development of Workers' Health.
- To prepare promotional and informational material to assist the PAHO/WHO Representations in providing cooperation to the countries, to promote the commitment of the community, and to advance political will on workers' health.
- To mobilize internal and external technical, financial, and human resources for carrying out specific occupational health activities and activities of common interest.
- To support the countries in planning and carrying out the activities planned for the Initiative "1992: Year of Workers' Health."
- To emphasize the importance of workers' health on various occasions⁶ and to contribute to creating awareness and arousing interest so that employers will promote safe working conditions; workers will promote their own health and cultivate self-care; governments will orient and supervise the implementation of occupational health programs; and jointly with the International Labor Organization (ILO) and other concerned institutions, attention will be focused on eliminating and controlling work-related risk factors and on other strategies to ensure and maintain the health of the work force.

⁵ The PAHO Interprogram Working Group will define the joint activities and specific tasks that each program is to undertake with regard to workers' health.

⁶ For example, on World Health Day, in meetings concerned with working conditions, productivity, and the economy; in all meetings concerned with health and medicine; and in other ways such as dissemination through the mass media and through publications produced by PAHO and the countries.

- To contribute to the creation of a new culture of worker's health at the political, legislative, technical, labor, and educational decision-making levels that will involve all sectors, civil organizations, and the community as a whole.

EXPECTED OUTCOMES

By the end of 1992, it is expected that:

- All the countries in the Region will have participated actively in the Initiative **"1992: Year of Workers' Health."**
- In all the countries of Latin America, commitment by the community and political commitment with regard to workers' health will have been promoted and consolidated through the dissemination of information in the mass media, the exchange of experiences, and analysis of the occupational health problems of specific labor groups.
- In the countries where National Committees on Occupational Health do not exist, intersectoral working groups will have been set up as a mechanism for articulation, coordination, and cooperation.
- Lines of action in priority areas in the Region will have been promoted that will serve in subsequent years as guides for the improvement of workers' health as part of the goal of Health for All.
- Technical publications on specific aspects of workers' health that are of common interest to the countries will have been prepared and disseminated.
- An interprogram process of cooperation will have been strengthened in the area of workers' health within PAHO, as well as a process of intersectoral cooperation in all the countries.
- The initiative will have stimulated the will to implement the pertinent recommendations contained in Resolution XIV of the XXIII Pan American Sanitary Conference.

COMPONENTS AND ACTIVITIES

Component 1

INTERPROGRAM AND INTERAGENCY COOPERATION

Activities:

1. Promotion, within the framework of the PAHO programs, of activities related to workers' health through a memorandum signed by the Director in which reference is also made to Resolution XIV on workers' health.
2. Formation of a PAHO internal working group to contribute to development of the Initiative "1992: Year of Workers' Health." One of the objectives of this group would be to participate in a regional meeting on "Health and Work" in which all the technical programs would cooperate on specific subjects in their respective areas of interest and material would be prepared by the program or by its consultants.
3. Holding of interprogram meetings for follow-up on tasks that have been scheduled.
4. Inclusion of the issue of workers' health in meetings that the programs organize, sponsor, or participate in and in any publications they may prepare.
5. Negotiation with a view to setting up a joint committee comprising PAHO, ILO, and other agencies concerned with workers' health.

Component 2

COOPERATION BETWEEN HEADQUARTERS AND THE PAHO/WHO REPRESENTATIONS

Activities:

1. Transmittal of the text and follow up on Resolutions XIII and XIV, together with program guidelines for the countries for 1992 and suggested alternatives for providing the country with cooperation in occupational health, with the request that the information be disseminated and that comments be elicited on which areas appear to be of more specific interest.
2. Periodic transmittal of information to the institutions for dissemination via the mass media.

3. Support for the Representations in their task of fostering the work of the interprogram groups on occupational health and the national committees responsible for organizing and developing activities in connection with the Initiative **"1992: Year of Workers' Health."**
4. Collaboration to promote the inclusion of topics relating to occupational health in congresses and other national events dealing with health, labor, and other areas related to workers' health.
5. World Health Day, 1992: Programming of material and activities on workers' health for this occasion.

Component 3

COOPERATION WITH NATIONAL AUTHORITIES

Activities:

1. Promotion of interinstitutional and interprogram cooperation at the national level, as well as exchange of experiences between the national working groups.
2. Collaboration in the programming for the Initiative **"1992: Year of Workers' Health"** through contact with the interprogram technical groups on occupational health and the national committees responsible for this task and through visits to national authorities and institutions.
3. Support for the exchange of material and information produced in the countries and the promotion of documents, articles, and other publications.
4. World Health Day, 1992: Joint consultation with national authorities regarding the organization of activities on workers' health.
5. Technical assistance to the countries for the formation of intersectoral working groups and the preparation, evaluation, adjustment, and implementation of National Plans for the Development of Workers' Health through specific consultations and the holding of workshops in the countries.
6. Technical support for the countries for the development of training programs in workers' health and the strengthening of those already under way.

Component 4

PROMOTION OF WORKERS' HEALTH

Activities:

1. Collection of information on congresses and other events dealing with health, labor, or other areas relating to occupational health that take place in the United States, Canada, Latin America, and the Caribbean in order to promote the inclusion of topics on workers' health. (This activity will be carried out jointly with the PAHO/WHO Representations and international agencies).
2. Establishment of contact with institutions involved in occupational health--for example, NIOSH, OSHA, ACGIH, the Inter-American Safety Council, and national safety councils--to obtain their assistance in promoting the Initiative "1992: Year of Workers' Health" in their publications and meetings.
3. Identification of documents, adaptation, printing, and dissemination of informational and promotional material for periodic transmittal to the Representations and, through them, to the health authorities for distribution to institutions that use the mass media. Preparation of material to fill existing gaps.
4. Dissemination of material of interest through the Boletín de la OPS, the PAHO Bulletin, and other PAHO publications.
5. Dissemination of the Declaration of Washington on Workers' Health (26 February 1992) with a view to making it universal.
6. Identification of regional and subregional political, trade union, managerial, parliamentary, etc., meetings, and inclusion of the topic of workers' health on their agendas.
7. Preparation of material on workers' health for the 90th Anniversary of PAHO.
8. Preparation of a document on new alternatives in workers' health in Latin America and the Caribbean for presentation at the International Congress on Occupational Health to be held in Nice, France, on 29 September-1 October 1993.
9. Collaboration in the preparation of information on workers' health for inclusion as background for the Investment Plan for the Strengthening of Health Services and the Development of Environmental Sanitation Infrastructure to be presented at the Ibero-American Conference of Presidents in Madrid.

Informational Material:

Key issues (monthly distribution starting in August 1991 and during 1992), each issue to be summarized in a written text (two to five pages long) and accompanied by a folded flyer.

Workers' Health and its Social and Economic Implications.

Occupational Health Services.

Alternatives for Extending the Coverage of Preventive Occupational Health.

Health and Agricultural Labor.

Health Problems of Mine Workers.

Health Risks for Construction Workers.

Community Participation in Occupational Health.

Health Problems of Working Women.

Child Labor.

Informal Labor and the Health Conditions of Workers.

Adolescent Workers.

Education in Occupational Health.

Responsibilities of Management regarding the Health Conditions of Workers and the Economic Implications Thereof for Business.

Promotional material:

Reproduction of a decal for "1992: Year of Workers' Health."

Design, preparation, and reproduction of posters. Mobilization of available external resources (slides, pamphlets, videotapes, etc.).

Preparation and broadcasting of a teleconference on "Health and Work" in collaboration with other agencies. Mobilization of external resources.

Component 5

SPECIFIC LINES OF ACTION

The specific areas of action identified were based on the interest manifested by some of the countries in developing a program on workers' health in collaboration with PAHO. In each case an organizational methodology would be used leading to a publication on the area selected. The process would generally include:

- The collection of documents and preparation of basic material;
- A technical meeting;
- Programming of activities in the area selected; and
- Development of a good publication on the subject.

Activities:

1. Production, printing, and distribution of technical documents.

The following topics are included among the specific lines of action in which interest has been manifested:

- Women in the Work Force (Colombia has shown interest; Canada has experience which could be shared).
- Research on Occupational Health (in progress).
- Education in Occupational Health (in progress).
- Child Labor (pending).
- Health and Agricultural Work (pending).
- Mental Health in the Workplace (in progress).
- Ergonomics (pending; Cuba may be interested).
- Epidemiological Surveillance of Workers' Health (in progress).
- Alternatives for the Extension of Coverage (various experiences to be collected and published).
- Workers' Health and Local Health Systems.
- Production of a generic reference on workers' health and the health services.

2. Holding of Regional or Subregional Meetings:

Regional Meeting on Health and Work: In principle it should be financed with resources from the regular budget, but to have adequate coverage it would require financial support from the Director and the mobilization of external resources.

Latin American Meeting on Occupational Health, Women, and Work: This meeting requires financing by the Director and external sources.

Regional Meeting or Subregional Meetings on Occupational Health and Social Security:
The funds should come from the regular budget of the Program on Workers' Health and the Social Security Program. This requires the mobilization of CIESS resources and resources from the social security institutions in the countries.

3. Study of Economic and Social Costs.

A survey to be conducted in all the countries during the course of the Initiative.

Component 6

MOBILIZATION OF RESOURCES

Activities:

- 1. Preparation of specific projects.**
- 2. Contact with occupational health institutions interested in the subject and with international agencies.**
- 3. Meetings with financing agencies.**

6. SCHEDULE OF ACTIVITIES

ACTIVITIES	1992												1993					OBSERVATIONS	
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M		J
MEETINGS OF THE ORGANIZING COMMISSION OF THE INITIATIVE		X																	
<u>Component 1</u> - INTERPROGRAM AND INTERAGENCY COOPERATION																			
1. Promotion of occupational health activities in PAHO programs. Memorandum from Director.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
2. Formation of PAHO Interprogram Group.																			
3. Meetings of PAHO Interprogram Group.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
4. Inclusion of the topic of occupational health in meetings organized by the programs and in their publications.			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
5. Negotiation with a view to setting up a joint committee comprising PAHO, ILO, and other agencies, and promotion of joint projects.			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<u>Component 2</u> - COOPERATION WITH THE PAHO/WHO REPRESENTATIONS																			
1. Transmittal and follow-up of information on Resolution XIV and program guidelines for the countries for 1992.			X		X		X		X		X		X		X		X		
2. Periodic transmittal of promotional and informational material for the institutions (small documents and bulletins) and dissemination in the mass media.					X	X	X	X	X	X	X	X	X	X	X	X	X	X	
3. Promotion of PAHO-sponsored national interprogram groups and national commissions.			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
<u>Component 3</u> - COOPERATION WITH NATIONAL AUTHORITIES																			
1. Promotion of interinstitutional and interprogram cooperation at the national level and of exchanges between national working groups.			X		X		X		X		X		X		X		X		
2. Collaboration in the preparation of the Initiative "1992: Year of Workers' Health."																			As requested
3. Support for the exchange of material produced in the countries.																			As received
4. World Health Day, 1992: Programming with the authorities of activities to be included.																			In accordance with
5. Provision of technical assistance to the countries on the preparation, evaluation, and revision of the National Plans for the Development of Workers' Health.			X		X		X		X		X		X		X		X		Activity 2
6. Technical support for national training programs.																			As requested

6. SCHEDULE OF ACTIVITIES (Cont'd)

ACTIVITIES	1992												1993					OBSERVATIONS
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	
Component 4 - PROMOTION OF WORKERS' HEALTH																		
1. Collection of information on congresses and events and promotion of inclusion of topics relating to workers' health. Network of events.			XXX	XXX	XXX													
2. Contact with institutions involved in occupational health (NIOSH, OSHA, ACGIH, etc.).			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Identification, adaptation, printing, and dissemination of promotional and informational material: - promotional - informative - preparation of material not available.			XXX	XXX	XXX		X	X	X	X	X	X	X	X	X	X	X	X
4. Dissemination of material of interest in the Bulletin and in other PAHO publications.																		
5. Dissemination of the Declaration of Washington on Workers' Health.			XXX	XXX	XXX	XXX												
6. Identification of political meetings and inclusion of worker's health on their agendas.			XXX	XXX	XXX													
7. Preparation of material on workers' health for the 90th Anniversary of PAHO.									X									
8. Preparation of a document on new alternatives for workers' health in Latin America and the Caribbean, and presentation thereof at the International Congress on Occupational Health (Nice, France).										X								
9. Collaboration in the preparation of information for the Investment Plan for the Strengthening of Health Services and the Development of Environmental Health and Sanitation Infrastructure.			XX															
Component 5 - DEVELOPMENT OF SPECIFIC LINES OF ACTION																		
1. Production, printing, and distribution of technical documents.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
2. Regional or subregional meetings: - Health and Work - Occupational Health, Women, and Work - Occupational Health in Social Security.										X				X				
3. Study on economic and social costs.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Compiling of information on legislation.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
Component 6 - MOBILIZATION OF RESOURCES																		
1. Preparation of specific initiative projects.			XXX	XXX	XXX	XXX												
2. Contact with institutions interested in specific projects. Cycle of sensitization and mobilization of resources.			XXX	XXX	XXX	XXX												
3. Meetings with financing agencies (Canada, Italy, Colombia).																		
4. Development of various activities as interest is detected.																		

Various materials on labor groups and experiences in Central America, the Andean Area, and the Southern Cone

C) SUBREGIONAL LEVEL

The subregional initiatives will contribute substantially to the celebration of "1992: Year of Workers' Health" and should include activities outlined in the present document. The objectives and expected outcomes bear a very close relationship to those of the regional level and of each corresponding country.

D) NATIONAL LEVEL

RATIONALE

During the XXIII Pan American Sanitary Conference the member countries of the Region of the Americas adopted Resolution XIV on Workers' Health, paragraph 4 of which designates 1992 the "Year of Workers' Health."

This recognition of occupational health has also been manifested at various regional, subregional, and national levels. More recently, the health initiatives of Central America, ("Health, a Bridge for Peace") and the Andean Area ("The Andes United by Health") have assigned high priority to workers' health among the health problems that afflict their nations.

There is no question that the well-being and health of workers contributes to economic progress and the development of the countries. As a social right, it is incumbent upon the Governments to promote workers' health by providing the necessary resources and ensuring generalized participation.

Since this is an area in which social and economic interests come together, it involves political elements that are capable of mobilizing nations and communities, trade associations, workers, and all sectors, thereby constituting one of the foundations for the promotion of health, well-being, equity, and peace among the people.

The economically active population of Latin America represents a considerable proportion of the inhabitants of the countries, usually between 35% and 40%. This population's health is affected not only by political, social, and economic conditions but also by unsatisfactory working conditions that result in high morbidity and mortality from occupational accidents and occupational diseases and contribute to the increasingly frequent appearance of work-related pathologies, especially in certain occupations and age groups. The incidence of occupational accidents and diseases in the developing countries is six to 10 times greater than in the industrialized countries. Breakdown by areas of activity shows differences that are even more marked.

The current situation is aggravated by poorly planned industrialization, rural-urban migration, growth of the working-age population and the informal sector, incorporation into the labor market of disadvantaged and vulnerable groups, and use of foreign technology that is poorly adapted to anatomical and physiological conditions, all of which are adding to new occupational health problems.

The economic crises and stagnation in the countries make the poor health conditions of the workers even more acute, particularly among low-income and disadvantaged workers whose only patrimony is their health, which is indispensable in order for them to support their families.

The responses that the countries have provided in terms of preventive occupational health services have been, with very few exceptions, feeble, and are characterized by limitations of a political, administrative, and technical order.

National policies fail to take into account the relationship that exists between health, productivity, production, and economic and social development.

Coverage by institutional occupational health programs is very low, reaching no more than 10% of the Latin American worker population. Unprotected and/or underserved workers are largely engaged in agriculture, mining, small business, family and craft occupations, informal sector activities, construction, and services.

Very few employers fulfill their obligation to set up occupational health services, and these are traditionally the larger and better organized companies. It is estimated that such coverage extends to no more than 10% of the workers in a given country.

The technical and financial resources assigned to occupational health programs are extremely limited and vary greatly between the different labor sectors. Furthermore, the search for and development of mechanisms for employing and optimizing the resources existing in the countries and in the international agencies has been carried out on only a very limited scale, as has the search for new alternatives for the appropriation of funds.

The number of skilled personnel in the field of occupational health needs to be increased. A case in point is the situation of the Andean Area, where only one occupational health physician, 0.2 nurses, and 1.7 industrial hygienists, including safety engineers, are available for every 200,000 workers.

This brief summary of the health problem of workers demonstrates the urgent need to intensify efforts in order to make occupational health care available to workers in all occupations and fields of work by promoting the development of program lines of action that will provide the basic infrastructure for the progressive expansion of health services to workers.

AIMS

- To stimulate interest and consolidate political will for collective mobilization on behalf of workers' health.

- To generate greater capacity for analysis and practical development of the relationship between workers' health, economic progress, social development, and well-being with a view to ensuring that it is reflected in national policies and plans for health and economic development.

- To support the development of priority program lines of action in workers' health so as to facilitate the implementation of national programs and subregional projects in occupational health.

OBJECTIVES

- To prepare or revise the National Plan for the Development of Workers' Health and have it approved by the appropriate authorities, employers, and workers; to facilitate its implementation and seek the resources needed for its development.
- To disseminate promotional and informational material on various aspects of workers' health, including social and economic considerations, through the mass media.
- To disseminate technical educational material on occupational health for programs to train professionals, technicians, entrepreneurs, and workers.
- To promote the development of mechanisms of articulation and intersectoral coordination for employers and workers.
- To bring about an exchange of experiences and analyze the occupational health situation of specific high-risk labor groups.
- To promote, at the national level, joint occupational health actions specifically directed toward unprotected, high-risk workers.
- To increase the interest of the education sector in the teaching of workers' health.
- To promote the mobilization, use, and optimization of internal and external resources for the development of occupational health programs and actions.

GEOGRAPHIC AND SECTORAL AREA

The programming and implementation of activities for the Initiative "1992: Year of Workers' Health" should involve all the countries in the Region of the Americas whose Ministers of Health adopted Resolution XIV on Workers' Health.

Inasmuch as the promotion, protection, and maintenance of the health of the worker population is the responsibility of all, "1992: Year of Workers' Health" should seek the broadest possible participation of the various sectors of society:

- a. **GOVERNMENT AGENCIES** (Ministries of Health, Labor, Agriculture, Education, Mines and Energy, Development, Industry, Transportation, Communications, and Construction; Social Security institutions; planning agencies).

- b. **NONGOVERNMENTAL ORGANIZATIONS (NGOs)**
- c. **ECONOMIC TRADE ASSOCIATIONS AND WORK CENTERS**
- d. **LABOR ORGANIZATIONS**
- e. **EDUCATIONAL CENTERS AND UNIVERSITIES**
- f. **PROFESSIONAL AND COMMUNITY ASSOCIATIONS**
- g. **WHO COLLABORATING CENTERS FOR OCCUPATIONAL HEALTH**
- h. **INTERNATIONAL ORGANIZATIONS**

LINES OF PROGRAM ACTION

In order to achieve the overall objectives planned for the Initiative "1992: Year of Workers' Health," several program lines have been defined with a view to orienting preparation of the countries' specific plans of work in accordance with their needs:

a. **PRIORITY LABOR GROUPS:**

Promotion of actions for occupational health on an urgent basis for workers in agriculture, mining, the informal sector, and construction as well as workers with high rates of accidents and occupational diseases and health workers. Specification of the labor groups on which countries will focus their actions in 1992.

b. **PROMOTIONAL AND INFORMATIONAL MATERIAL:**

Identification at the country level of the principal occupational health problems and their causes. For each problem, specification should be made of the objectives, the knowledge to be acquired or disseminated, the attitudes that need to be changed or induced, the strategies for achieving the objectives (written material, radio broadcasts, etc.), and the resources required.

Determination of the subjects and kinds of materials the country will develop, adapt, and disseminate during 1992.

c. **DEVELOPMENT OF HUMAN RESOURCES:**

Definition of the most urgent needs, with special attention to the underserved sectors of the working population. Identification of activities in this area that could be promoted or carried out in 1992.

Organization of a network of educational centers that will assume commitments to undertake specific actions during 1992: their names and definition of their principal activities.

d. TECHNICAL DOCUMENTS:

Preparation of documents on specific subjects worthy of wider dissemination. For example:

- Occupational health, women, and work.
- Organization of occupational health services: Occupational health and local health systems, occupational health in social security.
- Research and occupational health.
- Mental health of workers.
- Health conditions of workers.
- Others of interest.

Decision as to the subject(s) the country would develop for 1992.

e. EVENTS:

Identification of important national events in which specific occupational health topics might be included.

Determination, at the level of each country, of the names and dates of the events and their organizers.

Promotion of the inclusion of subjects important to occupational health, such as:

- Responsibilities of the employer for health conditions of the worker.
- Occupational health and economic and social development.
- The importance of workers' health for business development.
- The organization of workers' health care.
- Strategies for the improvement of workers' health.

STRATEGIES

The Plan of Action for the Initiative "1992: Year of Workers' Health" will be implemented on the basis of the following strategies:

- Organization of intersectoral working groups or National Committees on Occupational Health.
- Organization of a network of national events in which specific occupational health topics will be included.
- Mobilization of internal and external resources.
- Active participation of health programs and other governmental sectors, trade associations, labor organizations, universities and educational centers, nongovernmental organizations, and occupational and public health associations.
- Active articulation of WHO Collaborating Centers for Occupational Health.
- Promotion of actions and exchange of experiences with regard to high-risk workers.
- Dissemination of material on social and economic subjects.

PLAN OF WORK

- a. **First Stage: PREPARATORY ACTIVITIES AND MOBILIZATION OF RESOURCES.**
- Definition of the organizational structure for the Initiative "**1992: Year of Workers' Health.**"
 - Preparation of national programming and appointment of responsible parties.
 - Mobilization of resources for national activities, including the preparation of documents.
 - Identification, at the country level, of the events to be carried out in 1992 relating to public health, workers' health, social security, environmental engineering, medicine (medical schools), nursing, labor, economics, etc.
 - Promotion of the inclusion of important occupational health topics in the programming of these events. Preparation of the background documentation.
 - Design and printing of promotional and informational material.
 - Preparation and printing of educational material.
 - Organization of national occupational health events to be carried out during the course of the Initiative.

- Follow-up of national programming.
- b. Second Stage: EXECUTION OF ACTIVITIES DURING THE INITIATIVE,
JUNE 1992 TO JUNE 1993
 - To be defined on the basis of each country's plan of work.
- c. Third Stage: FOLLOW-UP AND EVALUATION

Activities carried out through:

- Periodic reports prepared by the focal points of the PAHO/WHO Representations.
- Periodic progress reports prepared by the national working groups.

PAN AMERICAN HEALTH ORGANIZATION
PAN AMERICAN SANITARY BUREAU, REGIONAL OFFICE OF THE
WORLD HEALTH ORGANIZATION
ENVIRONMENTAL HEALTH/OCCUPATIONAL HEALTH PROGRAMS

INITIATIVE "1992: Year of Workers' Health"



**GUIDELINES FOR THE PREPARATION AND ADJUSTMENT OF A NATIONAL
PLAN FOR THE DEVELOPMENT OF WORKERS' HEALTH**

Terms of Reference

Summary Version

Washington, D.C., December 1991

GUIDELINES FOR THE PREPARATION AND ADJUSTMENT OF A NATIONAL PLAN FOR THE DEVELOPMENT OF WORKERS' HEALTH

1. INTRODUCTION

The National Plan for the Development of Workers' Health is a basic organizational and operational instrument that sets forth the policies, objectives, directives, mechanisms, and actions which over time are expected to produce the conjunction and coordination of forces that are required at the national, regional, and local level in order to achieve the common goal of extending health coverage to all workers.

2. JUSTIFICATION

The preparation and implementation of a National Plan for the Development of Workers' Health is justified on several counts:

- Every worker, as a person, is entitled to health as a human right. The highest possible degree of well-being for workers is a goal of society; its attainment will contribute to a satisfactory level of health for the population as a whole and will also help countries to achieve their targets for economic and social development.
- In the countries of the Americas, with few exceptions, the programs or services that are responsible for workers' health have only limited coverage.
- Despite the existence of national legislation and international and subregional mandates and agreements on the subject, compliance is minimal.
- The problem of workers' health implies has an economic and social dimension that affects the budgets of countries, institutions, and employers, and even the peace and harmony of nations.
- If maximum use is to be made of the scarce resources available for meeting national, regional, and local goals, there must be intersectoral coordination and cooperation in the planning and development of workers' health.

Since the social and economic development of a country depends on the capacity of its human resources, the implementation of a National Health Plan for Workers' Health is fundamental to achieving, inter alia, the following outcomes:

- Reduced human suffering;
- Longer average working life;
- Increased individual working capacity;
- Fewer cases of individual disability and lost days of work;

- Reduced cost of curative care for sick or injured workers, particularly those who are affected early in life because of unhealthful and unsafe working conditions;
- Increased productivity;
- Better living conditions.

All these outcomes contribute to a country's progress and to the general well-being of the population by keeping it economically productive and helping to break the vicious cycle of poverty.

3. CONCEPTUAL FRAMEWORK OF THE PLAN

The National Plan for the Development of Workers' Health, in addition to conforming to international mandates and existing national legislation, should take into account the prevailing political framework and its underlying conceptual doctrine, particularly in terms of the following:

- The conceptualization of health and work;
- The nature of the relationship between health and work;
- Specification and categorization of the factors that influence workers' health;
- The different spaces in the life of a worker;
- The concept of workers' health and its implications;
- The concepts of occupational disease, work-related disease, occupational accidents, and accidents in transit;
- The concept and responsibilities of workers' health services and comprehensive health care.

4. INFORMING AND GUIDING PRINCIPLES OF THE PLAN

The drafting and development of a National Health Plan for Workers' Health should take several principles into account, including:

- Comprehensive health care for workers;
- An eminently preventive approach;
- The epidemiological criterion and the risk approach;
- Teamwork and multisectoral and multidisciplinary contributions;
- Shared responsibility on the part of the state, employers, and workers;
- Active and informed participation by the community, employers, and workers;
- The workplace seen as a hub for preventive actions.

5. PRIOR CONDITIONS FOR PREPARATION OF THE PLAN

In the preparation of the National Plan for Workers' Health, provision must be made for the promotion of actions that will result in:

- a) Mobilization of support from the community, the various governmental sectors, employers, and workers, as well as the development of public awareness.
- b) Manifestation of a political commitment and the decision to coordinate efforts among the institutions involved, especially in the areas of health, work, social security, planning, and education.

This decision should be expressly aimed at achieving a common objective such as improving the level of health of the economically active population and thus contributing to increased production and to economic and social development; at attaining health for all workers as its single goal; at facilitating active participation by the foregoing institutions and others, such as Ministries of Energy, Mining, and Industry, in a broad information campaign via the mass media; and at securing more active and aware participation on the part of employers, workers, and labor organizations, as well as other collaborating individuals and institutions.

The Ministry of Health would be able to reinforce this political decision by drafting a simple and brief declaration, signed by the Ministers of Health and Labor, the Director of the Social Security Institute, and other involved sectors.

- c) Creation of an intersectoral group to draft the Plan

This initiative could come from the government, based on mutual agreement between the principal sectors responsible for workers' health, or it could come from one or two of these sectors, or even from a university institution. An alternative approach would be needed in countries that have a National Council or Committee on Workers' Health.

It is important that the planning team be intersectoral and interdisciplinary in its composition and that it include both the decision-making sectors and those directly affected by the decisions taken.

- d) The establishment of a National Council or Committee on Workers' Health at the highest national level, to include representation from the health, labor, social security, welfare, industry, agriculture, mining, and energy sectors, as well as representatives of employers and workers.

Establishment of a structure for the National Council or Committee at both the technical and the political levels.

The technical advisory services can provide the justification for setting up commissions or working groups to assume responsibility for specific circumscribed areas.

6. POLICY LINES IN WORKERS' HEALTH

A National Plan for Workers' Health includes the formulation of policy and the setting of priorities, for the development of programs and the integration thereof into the national health system, and for surveillance and evaluation of the strategies, programs, services, and institutions involved in its execution.

Specific policies on workers' health depend on the orientations of the government, but in general they should guarantee:

- The principles of equity and social justice in protecting and maintaining the health of all workers;
- The extension of workers' health coverage through the provision of services characterized by quality and efficiency;
- The development of workers' health programs and services through activities in the areas of health promotion and health protection, treatment, and rehabilitation and retraining, if possible with emphasis on prevention;
- The intensification of actions aimed at the reduction of risk factors and the improvement of working conditions;
- The development of mechanisms for coordination, concerted action, and functional integration;
- Broad-based and active participation and cooperation by all sectors;
- Adaptation of machinery, equipment, and work routines, operations, and processes to the physical and mental capacities of workers;
- Adequate design and maintenance of the material components of the workplace;
- The protection of workers and their representatives;
- The exchange of experience and knowledge;
- Interdependence between workers' health and all segments of society;
- The worker as an indivisible unit;
- The workplace as a base from which to promote the health of the entire population.

7. CHARACTERISTICS OF THE PLAN

The National Plan for Workers' Health should be global, comprehensive, coordinated, participatory, organic, and multidisciplinary, and there should be provision for it to be developed by stages and progressive actions, with short-, medium-, and long-term targets.

8. STAGES IN THE STRUCTURING OF THE PLAN

8.1. Analysis of Participation

Prior to a study of the national health situation of the workers, and before the particulars of the Plan are decided on, other sectors, institutions, organizations, trade associations, and groups should be identified to participate in its development.

8.2 Diagnosis of the Current Situation and Trends

This is an important stage in the planning process in that it enables targets to be set. It involves studying the background and trends of the economically active population (EAP) and the health risks that have come about as a result of economic development and working conditions.

The information should include:

- Data on distribution of the EAP by activity, age, and sex, and projected growth of this population;
- Number of workers exposed to specific risk factors;
- Types of production processes and substances used;
- Epidemiological background on mortality, morbidity, disability, and absenteeism caused by occupational accidents (mortality, frequency, and index of severity), occupational diseases, and work-related diseases; general pathology; trends;
- Workers covered by social security programs and by workers' health programs or services;
- Value of benefits awarded for occupational accidents;
- Institutional structure of workers' health in the country: responsibilities, human resources, and available technological, technical, and financial resources;
- Existing coordination mechanisms with regard to medication and occupational hygiene and safety;
- Degree of worker and employer participation;
- Existing legal framework;
- Research, information, and dissemination in the area of workers' health;
- Historical evolution of workers' health in the country;
- Economic development policies and their impact on workers' health.

The following may be used to identify problems and needs:

- a) Structured interviews to collect data on the prevalence and severity of the problems and on the factors that are impeding their solution;
- b) Inferences about the types of accidents to be expected and the damages to health that could ensue;
- c) Surveys to obtain information on: the population, the epidemiological profile, available resources, forms of prevention and treatment, existence and operation of structures, and predictions regarding the incidence and prevalence of accidents and other pathologies.

8.3. Perceptions about the Health Problems of Workers

The National Plan should take into account the views and expectations of lawmakers, technicians, politicians, workers, employers, and various other sectors and institutions with regard to the health situation of workers.

8.4. Prioritization of the Health Problems of Workers

The number of workers involved and potentially affected, the potential loss of productivity, the severity of the risk, and the feasibility of implementing control measures are all important criteria that help to set priorities among the problems identified.

8.5. Purposes and Objectives of the Plan

The purposes of the Plan are based on the impact of workers' health and the improvement of working conditions with respect to:

- The population's quality of life;
- Social welfare;
- Increased productivity;
- National economic development.

The common multidisciplinary, multisectoral, and participatory goal for all the institutions and sectors involved is to:

- Promote the health of workers: maintain their health and working capacity, prevent work-related risk factors, and provide preventive as well as curative medical care, rehabilitation, and financial compensation for disability.

In the formulation of objectives, special attention should be given to their relevance, specificity, measurement, consistency, and adaptability to changes in the situation.

The objectives may be grouped according to whether they are legislative, political, technical, or administrative.

The specific objectives of the Plan should take into account program projections for:

- The development of specific policies;
- The individual and collective protection of workers and the community against occupational risk factors and the transfer of technology;
- The improvement of working conditions and the elimination, reduction, and control of work-related risk factors;
- The advance identification of potential work-related risk factors with a view to providing for their elimination in the planning phase;

- The extension of qualitative and quantitative coverage of workers' health services and programs;
- The establishment and maintenance of relations at the organizational level for coordination and cooperation with all sectors;
- Community participation and participation by employers and workers;
- Research, generation of knowledge, and increased gathering of information;
- The development of human resources;
- The generation of technical and financial resources;
- Legislation, standardization, and regulation;
- Surveillance and evaluation of the processes and outcomes expected from the Plan.

8.6. Targets

All the institutions share in common the commitment to attain, within a specific period of time through participatory intersectoral activity, the following targets:

- Extension of health coverage for workers to a degree to be determined;
- Improvement of the state of health of workers: quantified reduction of occupational accidents, reduction of cases of disability, and reduction of occupational diseases and frequent and severe work-related diseases;
- Reduction of risks: elimination or control of the most serious risk factors to which the majority of workers are exposed;
- Effective implementation of an information and epidemiological surveillance system that provides up-to-date knowledge about the situation;
- Preparation and implementation of programs and plans for activities by existing institutions and services;
- Increased research on high-risk unprotected workers and on technology for monitoring and control;
- Increased formation and training of human resources;
- Compliance with legal provisions to a degree to be determined.

8.7. Strategic Orientations

Once the priority objectives and the targets of the Plan have been set, the appropriate strategies for achieving them will be identified. These strategies should encourage innovation and action by various sectors in addition to health.

Although the strategies may differ between countries and from one institution to another, in general they are related to:

- Promotion of workers' health;
- Development of specific policies; legislation, regulation and standards; and institutional, regional, and local programs for workers' health;
- Generation of knowledge;

- Use of mass media;
- Development of human resources;
- Surveillance and monitoring of the body of law;
- Concentration of actions on high-risk workers;
- Development of coordination and cooperation;
- Development and strengthening of workers' health programs and services;
- Utilization of existing information and epidemiological surveillance systems;
- Mobilization of resources and creation of the mechanisms for the promotion of investment in workers' health;
- Participation of employers and workers.

8.8. Components Plan, or Areas of Effort, and Lines of Action

Resolution XIV on Workers' Health of the XXIII Pan American Sanitary Conference (1990) approved the lines of program action to be implemented by the member countries. On the basis of these orientations, with due respect for the particular conditions in each country, a National Plan for Workers' Health would serve to develop and organize activities along the lines of the following program components:

- Component 1: Policies on Workers' Health
- Component 2: Legislation, Regulation, and Standardization
- Component 3: Promotion of Workers' Health
- Component 4: Strengthening and Development of Workers, Health Services and Programs
- Component 5: Development of Human Resources
- Component 6: Generation of Knowledge
- Component 7: Information and Epidemiological Surveillance
- Component 8: Surveillance and Monitoring

For each component, specific objectives and characteristic lines of action are to be identified.

8.9. Activities and Timetable

The foregoing lines of action will govern the planning of the most important activities, especially interventions recommended in order to resolve the most common aspects of the problem. The following must be specified:

- What should be done: nature of the activity, coverage, quality;
- Who should carry out the measure: sector and entity, needs involved, and type of personnel required;
- When the activity is to be carried out: establishment of a timetable and schedule for their fulfillment in the short, medium, and long term;
- Where the activity is to be carried out: level or levels of action;
- What is needed in order to accomplish it: indication of the resources needed in order to carry it out.

It is important to identify the critical activities and the particular configuration of prior coordinated steps that they require.

8.10 Intersectoral and Institutional Commitment to Development of the Plan; Levels of Organization and Action

The sectors and institutions that will participate in the Plan should be identified, with specific delimitation of the responsibilities and functions of each. Consideration should also be given to:

- Definition of the regulatory body;
- Formation of an intersectoral support committee to give impetus to the formulation of policies and the definition of strategies;
- Establishment of a scientific/technical secretariat, which in some cases could correspond to a specialized occupational health center that would be responsible for defining policies and monitoring their practical application.

8.11 Budget

On the basis of the foregoing elements, at this stage it is possible to prepare the budget for the National Plan, take stock of the human and material resources available versus those that are needed, and determine how they will be mobilized and used.

The source of funding should be identified, and ways should be proposed for obtaining and allocating them and for supporting the programs.

9. INSTITUTIONALIZATION OF THE NATIONAL PLAN

Once the National Plan for the Development of Workers' Health has been drafted, the next step is to prepare a summary document setting forth a Plan of Action that spells out procedures for implementing the National Plan within a specific period of time and outlines the steps for putting it into operation. This document should contain the mechanisms for bridging the transition between the current status of workers' health and the levels proposed in the Plan.

This document should cover:

- The need for national policies on workers' health, the objectives to be achieved, and the corresponding targets;
- The political, social, economic, administrative, and technological processes that are involved in developing the National Plan;
- The legal structure that needs to be in place in order to organize and administer the Plan, mechanisms for coordination and management, coverage, and the responsibilities of each sector;
- The list of principal actions that have been agreed upon by all the sectors, together with a schedule for their accomplishment on a short-, medium-, or long-term basis. The short-term actions should focus on problems that are readily solvable, the deployment of existing resources, the application of technologies known to be effective, and the creation of mechanisms for implementing changes in the future.
- The allocation of resources, with broad reference to the human, technical, and financial resources needed in order to carry out the Plan, taking into account the resources available, those expected to be obtained, and the gradual increase thereof as the Plan becomes increasingly operational. It should be emphasized that these resources are not regarded as expenditures but rather as an investment that will yield economic and social benefits in the future.
- Social involvement, with arrangements for the document to be presented both to the government and to a mediation body, for study, revision, and approval by the principal sectors involved, by employers, and by workers.

10. RECORD-KEEPING, REPORTING, AND INFORMATION SYSTEMS

Records should be kept of the actions taken under the Plan and other useful information for ensuring continuity and monitoring the system. Reporting should be in the form of feedback that will make it possible to monitor present or past activities under the Plan. Its usefulness will depend to a great extent on the quality of the information generated. A management information system requires a unified, integrated, and complete subsystem for the collection, analysis, and storing of information in order to coordinate data for the overall system corresponding to the Plan.

11. EVALUATION

It is necessary to evaluate implementation of the Plan at every step in order to test the validity of the objectives and to determine the effectiveness and impact of the solutions proposed.

This evaluation will make it possible to reformulate the objectives and to seek new solutions for attaining them, either within the program already under way or as background for the formulation of a new project.

The need for ongoing evaluation calls for the formulation of measurable objectives and the quantification of effectiveness in order to carry out the activities programmed.

Planning is a reiterative process, and it is only through information on the results obtained from previous attempts that it is possible to introduce improvements and to propose new solutions to problems as they arise.

Evaluation should mainly take into account the indicators of relevance, progress, efficiency, effectiveness, and impact; it should also consider such elements as:

- The content of workers' health services;
- The coverage of workers' health services;
- Manpower and technical resources available;
- The active participation of workers and employers in the planning, programming, organization, and evaluation of health services for workers;
- The coordination of workers' health services with the various sectors, with other health programs, and with programs for economic development;
- The improvement of working conditions;
- The health conditions of workers.

**MATRIX FOR THE PREPARATION OF A NATIONAL PLAN
FOR WORKERS' HEALTH**

- ▼ **POLITICAL DECISION, LEGISLATIVE ACTION, AND SOCIAL INVOLVEMENT**
- ▼ **INTERSECTORAL AND MULTIDISCIPLINARY COOPERATION BY THE PUBLIC AND PRIVATE SECTORS**
- ▼ **ANALYSIS OF SECTORAL PARTICIPATION BY EMPLOYERS AND WORKERS**
- ▼ **ANALYSIS AND PRIORITIZATION OF THE PROBLEM OF WORKERS' HEALTH**
- ▼ **IDENTIFICATION OF THE CAUSES AND EFFECTS OF PROBLEMS**
- ▼ **FORMULATION AND ANALYSIS OF THE OBJECTIVES OF THE PLAN - FUTURE SITUATION TO BE ATTAINED - POSITIVE OUTCOMES DESIRED AND ACHIEVABLE**
- ▼ **ANALYSIS OF ALTERNATIVE SOLUTIONS - STRATEGIES FOR THE PLAN**
- ▼ **ESTABLISHMENT OF THE PURPOSES OF THE PLAN**
- ▼ **TIMETABLE FOR LINES OF ACTION COMPATIBLE WITH SUSTAINED DEVELOPMENT**
- ▼ **MECHANISMS FOR SEQUENTIAL EVALUATION OF EXECUTION**

COMPONENTS/OBJECTIVES ACTIVITIES	EVALUATION INDICATORS	SOURCES OF INFORMATION FOR WORKERS	PARTICIPATING SECTORS AND INSTITUTIONS	IMPORTANT ASSUMPTIONS
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COMPONENT:

SPECIFIC OBJECTIVES				
RESULTS PRODUCED				
ACTIVITIES TO BE CARRIED OUT SHORT TERM				
ACTIVITIES TO BE CARRIED OUT MEDIUM TERM				
ACTIVITIES TO BE CARRIED OUT LONG TERM				

Evaluation of Progress in the Application of
Resolution XIV on Workers' Health
(adopted in September 1990 by the XXIII Pan American Sanitary Conference)

The Program on Workers' Health has prepared a form to be used for evaluation which is intended to facilitate the systematized collection of information under the following headings:

- A. National Policies Specifically on Workers' Health: their existence; their inclusion within health, social security, and development policies; characteristics of the policies; date of formulation.
- B. National Plans for the Development of Workers' Health: their existence; intersectoral basis; levels of prevention covered; coordination; labor groups envisaged; objectives and strategies; degree of implementation and major obstacles thereto; responsibilities of each sector; evaluation of the plan.
- C. Coordination for the Development of Workers' Health: links.
- D. Participation of employers and workers: nature of the participation.
- E. Human resources: quantification; planning; training.
- F. Generation of knowledge: existence of information systems and their characteristics; epidemiological surveillance; national research program.
- G. Legislation: existence of a process for coming to agreement; mechanisms adopted; aspects of occupational health in the process of being regulated and standardized.
- H. Institutional Structures and Mechanisms: extent of coverage.
- I. Suggestions for attaining more dynamic development.

The form has an annex with instructions.

NOTE: A copy of this form can be obtained from the PAHO Program on Workers' Health.

DECLARATION ON WORKERS' HEALTH

26 FEBRUARY 1992

WASHINGTON, D.C.



DECLARATION ON WORKERS' HEALTH
26 February 1992

The members of the Organizing Commission of the Initiative "1992: Year of Workers' Health," together with its distinguished observers,

BEARING IN MIND

The limitations of national plans, legislation, and standards regarding health promotion and the prevention of work-related accidents, as well as the insufficient coverage of workers and the inadequate coordination of health care under existing health systems;

The high social cost of their disability and lost lives resulting from work-related pathologies, unhealthy working conditions, and serious occupational risk factors which could be eliminated or controlled; and

The inadequate dissemination of information in this area, including information about preventive techniques and self-care, as well as the scarcity of human resources trained in the disciplines of occupational health who are in a position to contribute to the prevention and maintenance of the health of workers, and

CONSIDERING

That the current situation of workers' health in the countries of the Region could benefit substantially from the strengthening and improvement of the service structure, from actions more directly related to health promotion and the prevention of accidents and diseases, as well as from the extension of health care coverage to those workers who are most exposed, most vulnerable, and least served--namely, children, women, indigenous groups, and the disabled;

That the aims of economic progress are only justified to the extent that concern is focused on human beings and their social well-being, and that in order to ensure viable and sustained development it is essential that workers enjoy good levels of health; and

That knowledge is available about the strategies and techniques for eliminating, reducing, and controlling occupational risk factors, and that the application of this knowledge is not only beneficial for workers but also leads to the attainment of a more equitable, stable, and productive society,

DECLARE

That for Latin America and the Caribbean, workers' health is a strategic element of the utmost importance to achieve a sustainable and equitable development, the consolidation of democracy based on greater social participation and more effective insertion in the world arena.

That it is urgent for the Governments and their legislatures; for workers, employers, and the institutions that represent them; for universities and other centers of culture, education, and research; for the mass media; for the Church; for international agencies; and for each and every member of our society to assign high priority to national programs and international cooperation in workers' health, which should be focused on the following:

Maximum possible emphasis on humanization of the workplace, in consonance with human dignity;

Introduction of a preventive health culture in the workplace;

Promotion and support of programs and all forms of action in the areas of information and education, with a view to eliminating and controlling risk factors and to safeguarding health and well-being and also of centers for research and training with the aim of providing the necessary knowledge and the personnel needed;

Emphasis on health and employment as human rights, and on the establishment of policies and plans at the national level to prevent threats to workers' health and to the environment, as a way of promoting well-being and facilitating efforts to achieve higher levels of democracy and sustained peace;

Encouragement of the active participation of community groups, unions, employers, and workers themselves in the management of health programs and services for workers;

Formulation and strengthening of a strategy that will lead to the expression and consolidation of political commitment at the highest decision-making levels so that the necessary support will be given to achieving greater development of workers' health and so that its importance will be recognized as part of economic and social progress and the well-being of nations; and

Development of mechanisms that will increase solidarity both among the countries of the Hemisphere of the Americas and those outside the Hemisphere in the area of workers' health.

IN LIGHT OF THE FOREGOING, we hereby appeal to Governments, political and civil institutions, and particularly to the political, social, and trade union leaders, to the international community, particularly to the developed countries, to lend their support to initiatives aimed at affirming the right to health of all workers throughout the Hemisphere.

Washington, D.C., 26 February 1992

SIGNED BY

MEMBERS OF THE ORGANIZING COMMISSION

Belisario Betancur, President of the Republic of Colombia (1982-1986); President of the Organizing Commission for Initiative "1992: Year of Workers' Health".

Miguel de la Madrid, Constitutional President of the United States of Mexico (1992-1988).

Constance Mitcham, Minister of Health and Women's Affairs of St. Kitts and Nevis.

Mauro Bertero Gutiérrez, Minister of Agriculture of Bolivia.

Luis Eduardo Gómez Pimienta, Secretary General of the Ministry of Health of Colombia, representing Camilo González Posso, Minister of Health.

Víctor Morales Mora, Vice Minister of Labor of Costa Rica, representing Carlos Monge Rodríguez, Minister of Labor.

Monsignor James Cassidy, representing Cardinal Fiorenzo Angelini, Pontifical Council for Health.

Bryan P. Hardin, representing Dr. John D. Millar, Director of NIOSH.

Juan M. Navia, Dean of the School of Public Health of the University of Alabama in Birmingham.

Diogo Pupo Nogueira, Professor of Occupational Health of the University of Sao Paulo, Brazil.

Margaret Seminario, Director, Department of Occupational Safety and Health, American Federation of Labor and Congress of Industrial Organizations.

Arthur St-Aubin, President and CEO, Canadian Centre for Occupational Health and Safety.

Emilio Azcárraga, President TELEVISA, México.

WITNESSES

David A. Waugh, International Labor Office.

Kye Woo Lee, The World Bank.

Jorge Ossanai, Inter-American Development Bank.

Francisco Knopfli, Ambassador of Portugal in the United States of America.

Gilles Forget, The International Development Research Center.

Clifford S. Mitchell, The Johns Hopkins University.

George Delclos, The University of Texas.

Philip Fleisher, New York College of Osteopathic Medicine.

Laurence Fuortes, The University of Iowa.

Jim Merchant, The University of Iowa.

Alfredo Vergara, The University of Iowa.

SECRETARIAT

Carlyle Guerra de Macedo, Director of the Pan American Health Organization.

Robert Knouss, Deputy Director, Pan American Health Organization; President of P.A.H.O. Interprogrammatic Group for Workers' Health.

George A.O. Alleyne, Assistant Director Pan American Health Organization.

Francisco López Antuñano, Area Director, Health Programs Development, Pan American Health Organization.

José Romero Teruel, Area Director, Health Systems Infrastructure, Pan American Health Organization.

Horst Otterstetter, Coordinator Environmental Health Program, Pan American Health Organization.

Alvaro Durao, Regional Advisor, Occupational Health, Pan American Health Organization.