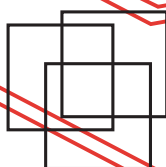# Emerging risks and new patterns of prevention
## in a changing world of work

**WORLD DAY FOR SAFETY AND HEALTH
AT WORK
28 APRIL 2010**

**Emerging risks and
new patterns of prevention
in a changing world
of work**

Photographs© International Labour Organization

## The new context

Recent decades have seen significant technological advances in the workplace, which, together with rapid globalization, have transformed work for many throughout the world. The effects of such changes on occupational safety and health (OSH) have also been significant. In some cases, more traditional hazards and risks have been reduced or eliminated, for example through plant automation, but new technologies have also created new risks. Many of the traditional workplace risks persist however, and the numbers of work-related accidents and diseases are still unacceptably high.

At the same time, many workers are exposed to 'new' risks emerging from changing patterns of work, for example because of conditions arising from precarious employment and increased pressures to meet the demands of modern working life. Workforce age profiles are also changing, as is the gender balance in many workplaces. These changes in employment patterns have created evident risks that were either less prevalent or less obvious previously.

As a result, many governments and employers' and workers' organizations have placed greater emphasis on prevention, recognising that risks have to be managed and controlled and that OSH management systems are vital for preventing occupational accidents and ill health. There is also an increasing acceptance that taking action for safety and health is good for enterprise productivity and quality employment. As a result, and in spite of the global economic recession, many stakeholders are working to ensure that standards of OSH are maintained. An ILO General Survey on Convention No. 155 on Occupational Safety and Health[1] undertaken in 2009 showed that a significant number of countries, particularly in the developing world, were in the process of updating their national policies and their regulatory and enforcement systems on OSH. Others were targeting emerging issues, such as stress and musculoskeletal disorders, providing assistance to small and medium-sized enterprises and engaged in the promotion of best practices on OSH.

## Emerging risks at work

The study of new and emerging risks in the world of work has been the focus of much attention in recent years. Many researchers have been monitoring and forecasting new trends in work-related accidents, and especially in ill health, all with a view to improving prevention. For example, the European Risk Observatory has recently published a study of new and emerging risks at work in the EU[2].



---

[1]   Report III(IB) to the International Labour Conference, June 2009 – "General Survey concerning the Occupational Safety and Health Convention, 1981 (No. 155), the Occupational Safety and Health Recommendation, 1981(No. 164), and the Protocol of 2002 to the Occupational Safety and Health Convention, 1981" http://www.ilo.org/wcmsp5/groups/public/---ed_norm/---relconf/documents/meetingdocument/wcms_103485.pdf
[2]   See "New and emerging risks in occupational safety and health", European Risk Observatory, European Agency for Safety and Health at Work, December 2009 http://osha.europa.eu/en/publications/outlook/en_te8108475enc.pdf

New and emerging occupational risks may be caused by technical innovation or by social or organizational change, such as:

- **New technologies and production processes, e.g. nanotechnology, biotechnology**

- **New working conditions, e.g. higher workloads, work intensification from downsizing, poor conditions associated with migration for work, jobs in the informal economy**

- **Emerging forms of employment, e.g. self-employment, outsourcing, temporary contracts**

They may be more widely recognized through better scientific understanding, e.g. the effects of ergonomic risks on musculoskeletal disorders.

They may be influenced by changes in perceptions about the importance of certain risk factors, e.g. the effects of psychosocial factors on work-related stress.

### New technologies

There is global concern about previously unknown risks caused by new technologies, new work processes and organizational change. New discoveries and their application in industry usually take place before we have a good understanding of their effects on safety and health. With the global spreading of supply chain networks and the growth of manufacturing in the developing world, technological change affects developing and developed countries simultaneously. For example, modern manufacturing processes using nanotechnology and biotechnology are increasingly to be found all over the world.

## Nanotechnology and manufactured nanomaterials

Nanotechnology[3] has applications in a number of areas including health care, biotechnology, clean energy production, information and communications, chemical, electronic and military industries, agriculture and construction. It is expected that by 2020 approximately 20% of all goods manufactured around the world will be based to some extent on the use of nanotechnology. However, it is an emerging technology and the risks associated with the manufacturing and uses of nanomaterials are largely unknown. There is a big knowledge gap between advances in the application of nanotechnology and its impact on health. Due to the extensive and highly diversified use of nanomaterials in industry, the number of workers exposed is also difficult to estimate. While little is known about the health and environmental impact of these new materials, it is likely that workers will be among the first to experience high rates of exposure.



Several governments and nanotechnology trade associations from the private sector have established national and industrial task-forces to evaluate the potential impact of nanomaterials on human health and the environment, in order to carry out hazard classifications and to assess their regulatory implications. A significant amount of research is already under way. For example, the OECD Council has established a Working Party on Manufactured Nanomaterials to study the practices of OECD member countries concerning nanomaterials safety and to develop the required assessment methodology. Regulatory bodies such as the US Environmental Protection Agency and the European Commission's Health and Consumer Protection Directorate have started to investigate the potential risks of nanoparticles, so that they can be understood and effectively managed. An expert group from the United Nations Educational, Scientific and Cultural Organization (UNESCO) is evaluating the ethical aspects of nanotechnology and has already published a number of reports on the subject. Nanotechnology does not only concern developed countries. Nanotechnology research and development are widespread in developing and transition countries as well, which is quite remarkable considering how recent this technology is.

---

[3] Nanotechnology concerns the manipulation of substances at the scale of 1 to 100 nanometres and relies on a change in their physical properties. Nanoparticles can influence the mechanical properties of materials, such as their stiffness and elasticity. A nanoparticle is defined as a small object that behaves as a whole unit in terms of its transport and properties. It is further classified according to size: in terms of diameter, fine particles cover a range between 100 and 2500 nanometers, while ultrafine particles are sized between 1 and 100 nanometers.

## Biological risks and biotechnology

Biological risks arising from the application of new technologies can affect workers in many sectors, ranging from health care, emergency and rescue workers to those employed in agriculture, waste management and the biotechnology industry.



There are biological risks that have become more significant in recent decades, including newly emergent infectious diseases (SARS, H1N1 influenza), drug-resistant types of infectious diseases (tuberculosis, malaria) and the ongoing HIV/AIDS epidemic. All these are particularly serious risk factors for workers in the health care sector, which employs more than 35 million workers worldwide. Health care workers are especially at risk when the means by which a disease is transmitted are poorly understood and when appropriate personal protective equipment is inadequate or not available. Managing infectious waste can also pose a serious problem for health care workers as it includes handling of contaminated sharps, such as used syringes and scalpels.

Biological risks can also affect farmers and animal breeders. Exposures to biological agents, such as mycobacteria, leptospira, bacillus anthracis and biological allergens in agricultural workplaces are widespread in developing countries. Exposure to antimicrobial resistant organisms, animal wastes and endotoxins associated with numerous types of animal confinement is also frequent in farm settings. Endemic diseases, such as malaria and tuberculosis, are also present in agricultural workplaces in the developing world. According to WHO, half of the world's population is at risk of being infected with malaria and it is among the top ten causes of death in low-income countries. An estimated 243 million cases led to 863,000 deaths in 2008. The African region was the most affected by malaria, with 89% of the cases.[4]

In the biotechnology industry, those engaged in the development of new products and genetically modified organisms can be at particular risk. Many national regulatory authorities impose strict approval regimes before such work can start, but if the work is outsourced to less-regulated countries, as may happen more in the future, the risks may not be so strictly controlled. Overall, appropriate risk assessments and control measures and better tools for the detection of biological risks need to be developed to improve their prevention.

[4]    World Malaria Report 2009.WHO

## Chemical risks

Chemicals are widely used with both positive and negative effects on human health and the environment. In spite of the significant progress made in the regulation and management of chemicals both at the international and national levels, this is still an area of concern for workers' health.

The use of allergenic, sensitizing, carcinogenic and mutagenic substances, as well as of substances toxic to the reproductive system, has become a source of growing concern. Many pesticides can cause cancer, endanger reproduction and can negatively affect the nervous, immune or hormonal systems. Lead, mercury and other heavy metals, as well as pesticides remain poorly controlled in many developing countries.

In the last 20 years there has been an enormous growth in the number of chemicals that are used in the industrial environment, many of which have not been adequately tested. The impracticability of systematically testing all new materials means that many risks may go undetected until there is a demonstrable threat to human health or the environment. There are many examples of the impacts of known mixed exposures, e.g. multiple pesticides, diesel fumes and other fuels, and mixed solvents. A major gap remains in understanding the potential impact of mixed chemical exposures and how they may interact with non-work exposure such as cigarette smoking.



For the purposes of chemical safety, it is important to establish a national system for the assessment and classification of chemicals and to ensure the adequate flow of information from manufacturers and importers to workplace users through labelling and chemical safety datasheets. In order to enhance prevention in the workplace, such information should include hazards and safety precautions (including control and emergency measures), as well as legal requirements at the national level. Workers need to be adequately informed and trained with regard to potential hazards, and appropriate engineering controls should be in place to limit exposure. When necessary, personal protective equipment should be provided and worn, though generally this is regarded as a last resort after other precautions have been taken to limit exposure. An effective management of chemicals needs to be implemented in order to avoid harmful effects. Each chemical product should be properly identified before it comes to the market. An in-depth assessment of any possible hazardous properties should be carried out, and methods for safe handling should be developed to avoid exposure, or at least to reduce risks to a minimum.

## Changing patterns of employment

Patterns of employment have seen significant changes in recent decades, which have also contributed to the emergence of new risks affecting the workforce. Restructuring work organization, downsizing, subcontracting and out-sourcing, for example, have inevitably had an impact on working conditions, making it harder to achieve a healthy work-life balance. Taken together with other factors, such changes have led to increased work-related stress and other forms of mental ill-health, trends that can be all the more acute during a global economic crisis.



At the same time, the informal economy has expanded markedly and now accounts for a large proportion of workers in many countries, especially in developing ones. There has also been an increase in the numbers of migrant workers, who, because of precarious employment status, may often have to accept jobs with low OSH standards, low wages and poor working conditions.

In recent years, there have also been significant changes in the age and gender profiles of the workforce. For example, women in developing countries have been affected by precarious employment in low-skill and poorly-paid jobs in free trade zones and the informal economy, and are thus more vulnerable to emerging risks. Such issues, together with those mentioned above, are considered briefly in the following paragraphs.

### The informal economy and OSH

The informal economy comprises half to three-quarters of all non-agricultural employment in developing countries and involves more than 80% of the working population as a whole.[5] Although it is hard to generalize about the quality of informal employment, it is often associated with poor working conditions and poverty. Some of the characteristic features of informal employment are lack of protection in the event

---

[5]   Background document. Tripartite Interregional Symposium on the Informal Economy: Enabling Transition to Formalization. ISIE2007/1. Geneva, 27-29 November 2007. ILO

of non-payment of wages, compulsory overtime or extra shifts, lay-offs without notice or compensation, unsafe and unhealthy working conditions and the absence of social benefits such as pensions and health insurance. Women, migrants and other vulnerable groups of workers who are excluded from other opportunities have little choice but to take informal, low-quality jobs.

The informal economy includes mostly small-scale activities within traditional economic sectors, but it can also include new production processes at the end of more formalized supply chains. In many countries, the majority of new jobs are created in the informal economy, whether in the form of self employment or in paid work.

The majority of informal economy workers are not registered, regulated or protected under labour legislation; they have little access to OSH advice and information and do not have the necessary awareness, technical means and resources to implement preventive measures. As a consequence, poor OSH standards persist in the informal economy, and implementing and maintaining better standards will be a key challenge in addressing emerging risks in the future. It will be important to ensure that OSH measures are fully integrated within broader employment programmes to improve working conditions.



## Migrant workers and OSH

Migrant workers have increased in numbers in many countries for both political and economic reasons. However, they are often at an increased risk of exploitation, they may not have access to health care or social security and are frequently not protected by OSH legislation. They tend to work in high-risk jobs and in the informal economy, and in most cases have little access to OSH advice, information or training. Many also have to work long hours to obtain an adequate income and may suffer from poor general health.

The shifting patterns of migration pose a further challenge to both the international community and to national governments and their social partners, who have to ensure that acceptable standards of OSH are provided for migrants wherever they work.

### Older workers and new trends

Most developed countries are experiencing unprecedented process of population ageing with the increase of older workers. A similar evolution is projected for many developing countries. Older workers are more vulnerable to certain risks, such as infectious diseases and musculoskeletal disorders. Examples of accidents and injuries more prevalent among older workers include falls due to poor balance, slower reaction times and visual problems; and sprain and strain injuries due to loss of strength, endurance and flexibility. They also are more likely to have a greater incidence of diseases with a long latency period, such as occupational cancer. When older workers have accidents, their injuries are often more severe and they may also take longer to recover. Sound occupational safety and health policies and practices that invest in workers' safety, health and well-being during their entire working life are therefore necessary to keep them employed longer and to ensure their well-being.

### Younger workers' working conditions

Young workers are often engaged in hazardous and precarious work, a situation which will have long-term implications for the health and quality of life of the global workforce. When new to the workplace, young people may lack physical and psychological maturity and their lack of skills, training and experience may result in their being ignorant of the risks they face. They may also be unaware of their own rights and duties, as well as of their employer's responsibilities; they may lack the confidence to speak up when there is a problem. Employers may also be unaware of the specific vulnerability of young people. This situation can be overcome by providing young workers with work that is appropriate to their skills and with adequate OSH training, supervision and safety measures.

## Gender-related considerations

The concentration of women workers in particular occupations leads to specific patterns of injury and disease. General OSH measures directed at all workers do not always achieve desired benefits for the specific working conditions of women workers. Concern has been expressed over the gender-specific effects of exposure to hazardous substances and in particular over the effects of exposure to biological agents on reproductive health for both women and men. There are well-known gender-related differences concerning the physical demands of heavy work, the ergonomic design of workplaces and the length of the working day.



Analysing the gender dimension in OSH has implications for policy-making and preventive strategies. Recognition of difference and diversity is essential in promoting safer and healthier workplaces for all workers. The effects of gender roles on health need to be more carefully explored to develop a better understanding of the relationship between occupational health and the social and economic roles of women and men. Gender-sensitive approaches make the differences more visible and thus help to identify and address specific problems. Due weight has to be given to analysing risks in woman-dominated occupations and in men-dominated sectors, as well as to the development of appropriate guidance. The systematic development of sex-disaggregated data is necessary. Findings from OSH research need to be incorporated into policy making and workplace action. Positive changes will come about in OSH policies and practices at national and workplace levels only if we ensure that both women and men participate in the decisions affecting their safety and health at work.

# Current trends on occupational accidents and work-related diseases

Global estimates for occupational accidents and work-related diseases continue to give much cause for concern, as shown in Table 1.

**Table 1.**
**Estimated numbers of work-related fatal and non-fatal accidents and diseases: ILO, 2008**

| Year | Accidents causing > 4 days' absence from work | Work-related fatal accidents | Work-related fatal diseases | Total of fatal accidents and diseases |
|------|-----------------------------------------------|------------------------------|-----------------------------|---------------------------------------|
| 2001 | 268 million | 351 000 | 2.03 million | **2.38 million** |
| 2003 | 337 million | 358 000 | 1.95 million | **2.31 million** |

Nevertheless, there is evidence of a decrease in the incidence of occupational fatalities in developed countries. This can be mainly attributed to a greater emphasis on prevention and management of OSH, as well as to the diminishing presence of many of the heavy and more hazardous traditional industries. In particular, agriculture, mining and other hazardous industrial sectors are becoming a smaller part of the economy, as compared with the services sector. While in recent years we have continued to observe this lower incidence of injuries and fatalities in developed countries, other long-term health disorders (such as work-related cancer, musculoskeletal disorders and cardiovascular diseases) and stress at work are becoming an increased concern to workers' health.

The situation differs in developing countries. Expansion of industrial activities, often without proper safety and health measures, has resulted in an increase in the incidence of occupational accidents. This is more evident in countries where accident reporting systems are efficient. However, many occupational accidents and diseases continue to be unreported due to the weakness in the reporting systems in many developing countries.

While there is growing recognition of occupational diseases and the use of national lists for compensation purposes, the prevention of occupational diseases remains a global challenge due, in part, to limitations in national recording and notification systems. One reason for this is the difficulty in the determination of a causal relationship between workplace conditions and workers' health impairments. The problem is particularly evident in the case of diseases with long latency periods and with multifactorial causes.

The ILO's international list of occupational diseases is used by many countries as a model for the establishment, reviewing and updating of their national lists. The latest list, adopted by an ILO meeting of experts in 2009, included mental and behavioural disorders.[6]

[6]  See the report of the meeting and the new list in http://www.ilo.org/safework/info/meetingdocs/lang--en/docName--WC-MS_116784/index.htm

Prevention of occupational diseases is still not a priority in many developing countries and countries in transition. This is largely due to the lack of data on occupational diseases. There is an urgent need to improve national systems for recording and notification in line with the provisions of the Protocol to the Occupational Safety and Health Convention 1981 (No. 155), adopted in 2002. Continued action is also needed to improve preventive and diagnostic measures for occupational diseases and for national systems for workers' health surveillance.

## Psychosocial factors and work-related stress

Psychosocial factors have now been generally acknowledged as global issues, affecting all countries, professions and workers. Increased flexibility and precariousness of work, work intensification, as well as working relations involving bullying and mobbing are some of the factors behind a rise in work-related stress disorders. While further research is necessary to understand their implications fully, it is also accepted that such factors can have a significant impact on workers' health, absenteeism and performance.



In the longer term, work-related stress can also contribute to musculoskeletal disorders and other forms of ill health, such as hypertension, peptic ulcers and cardiovascular diseases. Work-related stress can further contribute to an inability to cope with work. Personal lifestyle factors can also have a huge impact on work performance and working relations. Work-related stress can both influence and be indirectly intensified by problems outside the workplace, such as violence, the abuse of drugs, tobacco and alcohol, and strained family and personal relationships. Stress can be a major contributing factor to depression and even suicide. All this represents a potentially huge cost in terms of human distress and economic burden for the individual and society.

Studies in Europe and other developed countries suggest that stress is a factor in between 50% and 60% of all lost working days. Stress was reported as the second most frequently recorded cause of work-related health disorders, affecting 22% of workers in the EU in 2005. The latest EU study from 2009 confirms that although there was a decrease in the average level of work-related stress in fifteen EU members in more recent years, the average stress level in twelve of them increased.[7]

There are many good examples of companies recognizing stress as a workplace issue and providing assistance to individuals to identify and treat the root problem. Research studies and other workplace interventions are also being undertaken in many developing countries, such as Argentina, Botswana, Brazil, Colombia, Ghana, India, Kenya, Mexico, the Philippines and Uganda, in order to find innovative ways to deal with the prevention of work-related stress and assess the impact of other psychosocial factors. Some trade unions have also raised concern about the impact of work-related stress and have developed their own risk assessment methods. Further assessment of national conditions and practices is essential to have a clearer picture and deeper understanding of this problem globally and to improve preventive practices.

Comprehensive OSH management systems should be able to ensure that psychosocial factors are properly assessed and managed, much as other OSH risks are. Specific preventive measures aimed at reducing the potential consequences of work-related stress should be in place. Until now stress management measures have included individual counselling, induction and mentoring of new staff, on-going support by co-workers and trade unions during unemployment and addressing major life events by building links with local NGO's.

## New patterns of prevention

### New approaches to knowledge sharing

The need to share information about emerging risks is vital, at both the national and international levels. In fact, the pace of global socio-economic development over the past twenty years has brought about much scientific and technical progress in research and knowledge concerning risk management. The wide accessibility of the Internet and other communication systems has facilitated knowledge sharing everywhere. The study of nanomaterials, for example, illustrates the importance of knowledge sharing in the development and application of new technologies, whereby the identification and assessment of associated hazards and risks need to be considered and communicated at a stage before widespread application in industry.

---

[7]  See, http://osha.europa.eu/en/publications/reports/TE-81-08-478-EN-C_OSH_in_figures_stress_at_work/view

Many countries have impressive technical capabilities but lack the means and infrastructure needed to cope with the most serious problems. It is necessary to discuss progress and gaps in applied research and evidence-based tools for the prevention of emerging hazards at work in order to identify needs and strategies at national and regional levels. It is important to seek synergies and promote the establishment and strengthening of partnerships among relevant national and international institutions and networks in this field. A comprehensive approach by practitioners, academics and researchers, as well as by governments and by workers' and employers' organizations is needed to face the challenges of emerging risks and develop new patterns of prevention.

## Risk assessment and risk management

Assessing and establishing preventive measures for emerging risks in the future are expected to be part of a complex process because of the many diverse factors considered earlier. Traditional prevention and control tools are still effective if applied correctly to well known hazards and risks, such as those arising from hazardous chemicals, machinery and tools, manual handling and biological agents. However, these tools need to be complemented by strategies and tools designed to anticipate, identify, evaluate and control emerging risks arising from changes in the world of work, as well as from innovative technologies.

A comprehensive approach to risk management can only be achieved through the implementation of national, as well as enterprise-based OSH management systems. National OSH policies should promote risk management strategies, including research incorporating forward-looking methods to evaluate and understand the impact of the driving forces of change. The established system for OSH management includes hazard identification, risk assessment, implementation of prevention measures, monitoring and review. The ILO Guidelines on OSH Management Systems (ILO-OSH 2001) provides a comprehensive guidance in this regard.

Cooperation and the exchange of information among stakeholders concerning emerging risks also need to be promoted. Multinational enterprises are in a good position to transfer good practices from one country to another, so that they can establish common safety standards for all of their operations. They can also promote good practice amongst their suppliers and contractors. Where suppliers are based in developing countries, the review of legislation and its effective application, as well as regular audits, can lead to good practices being promoted more widely within the working community, with broad collaboration among multinationals, suppliers, OSH inspectorates and other government agencies.

## Health promotion at the workplace

There is a growing trend to integrate general health promotion into OSH programmes of enterprises as an additional element to complement traditional programmes for the prevention of occupational accidents and diseases. These health promotion programmes are often designed to encourage and help build healthy behaviour, especially in relation to alcohol and drug abuse, tobacco, stress and mental health, nutrition, physical exercise, etc. Assisting workers in managing their chronic conditions and becoming proactive in their health care has become an accepted strategy for worksite health promotion programmes in many developed countries. Many successful workplace health promotion activities are also found to have positive impacts on productivity. These programmes will continue to develop and expand as the workforce ages.

# Promoting a national preventative safety and health culture

**A national preventative safety and health culture is:**

"**one in which the right to a safe and healthy working environment is respected at all levels, where governments, employers and workers actively participate in securing a safe and healthy working environment through a system of defined rights, responsibilities and duties, and where the highest priority is accorded to the principle of prevention**"[8].

Building and maintaining a preventative safety and health culture requires making use of all available means to increase general awareness, knowledge and understanding of hazards and risks and how they may be prevented or controlled, as well as enabling an exchange of experience and good practice on OSH. The progressive development of a preventative culture would have a significant impact on strengthening national OSH capacities and mobilizing national and international resources. Full national and international cooperation is vital to ensure that future efforts lead to the development of efficient and integrated preventative strategies on OSH.



A commitment by top management and workers' participation are essential to promote a safety and health culture at the workplace. Enterprises that embrace social values and act conscientiously according to their OSH policy seem to generate a positive environment and significant participation from all those involved in the enterprise. A coherent policy implemented through concrete programmes and actions can convert commitment by management and workers into practice. This influences, in a positive way, safety and health culture as a whole. Society's success or failure in managing risks are not only a question of specific prevention and mitigation measures, but also of its attitudes towards risk and safety at every level of decision making, particularly in times of crisis and economic recession.

---

8   Global Strategy on Occupational Safety and Health, ILO, 2003
http://www.ilo.org/wcmsp5/groups/public/@ed_protect/@protrav/@safework/documents/publication/wcms_107535.pdf

In 2008, the Seoul Declaration on Safety and Health at Work was adopted[9]. It reaffirms the principle that the right to a safe and healthy working environment should be recognized as a fundamental human right. Such a principle applies equally to ensuring protection against both emerging and well-established OSH risks. The Declaration was adopted during the Summit held at the XVIIIth World Congress on Safety and Health at Work in Korea, where high-level representatives from around the world committed unanimously to pursuing the protection of this fundamental human right through the implementation of the Declaration.

**National and regional strategies and programmes**

In light of the above, several national and international authorities have developed broad-based strategies to address emerging as well as current OSH issues. The European Union, for example, adopted a Community strategy on health and safety at work for 2007-2012. Since then, they jointly analyse OSH trends and their implications through applied research and information exchange among Member States on their national OSH strategies. Countries in other regions are also integrating such concerns into national OSH policies. Many countries have established regional networks of government institutions, researchers and practitioners for the promotion and exchange of national strategies, good practices, training and research on emerging risks. Examples of such networks include ASEAN Occupational Safety and Health Network, the East African Regional Programme on Occupational Safety and Health, and the Latin American and Caribbean Network for Workers' OSH.



This has led to the adoption of many national OSH programmes based on partnerships between governments, workers' and employers' organizations and other stakeholders such as the scientific community, associations of OSH professionals and educational and training institutions. Associations of informal economy and low-income workers and representatives of vulnerable groups have also been included in some programmes.

[9]  Seoul Declaration on Safety and Health http://www.seouldeclaration.org/index.php

Such programmes have often matched the provisions of the Occupational Safety and Health Convention (No.155) and the Promotional Framework for Occupational Safety and Health Convention (No. 187). By promoting the continuous improvement of OSH through the systematic development of a national OSH policy, system and programme, many ILO member States are increasingly in a position to ratify these Conventions.

## The ILO and a changing world of work

The global economic crisis emerged just as the ILO approached its 90th anniversary, highlighting the ongoing importance of the ILO's mandate. Many international labour standards have become well established over the last nine decades, and because of their broad-based approach they continue to be relevant in addressing the complex issues in the world of work today. This is particularly so in the area of safety and health at work, where many older international standards are still relevant.

International labour standards on OSH thus continue to be used as the reference for member States in the development and strengthening of their national OSH systems, regulations and practices. Such standards also provide guidance on addressing emerging risks, as described above, because of their flexibility in allowing for progressive application, taking into consideration available human, technological and economic resources. The recent ILO General Survey on Occupational Safety and Health Convention (No. 155), mentioned earlier, also confirmed this.

Most ILO member States have committed to implement Decent Work Country Programmes, many of which emphasize the need to enhance OSH for all workers. Some of these countries have specifically developed national OSH programmes that focus on key national priorities. The ILO provides technical advice and support for such programmes, strengthening national capacities, particularly for hazardous sectors, such as construction, mining and agriculture, and for specific categories of workers such as those mentioned earlier in this document.

Through such efforts, the ILO promotes an integrated multi-disciplinary approach to OSH, taking into account the physical, mental and social well-being of women and men at work, in all economic sectors and in the informal economy. Such a comprehensive approach is vitally important in the context of new and emerging risks to safety and health at work within a changing global economy, in order to ensure sustainable economic and social development.

www.safety2011turkey.org

# Building a Culture of Prevention for a Healthy and Safe Future

The XIX World Congress provides a unique opportunity for the exchange of information among decision-makers, safety and health professionals, employers' and workers' representatives and other stakeholders.

The main topics proposed for this Congress are:

- New challenges in a Changing World of Work and the Global Economy

- Social Dialogue, Partnerships and Innovation on Occupational Safety and Health

- Systems Approach for Occupational Safety and Health

- Comprehensive, Proactive and Preventative Approaches to Safety and Health at Work

## Come and meet us in Istanbul in September 2011 !

International Labour Organization

International Social Security Association

Ministry of Labour and Social Security-Turkey