

HOW PRIMARY HEALTH CARE CAN HELP REACHING MORE WORKERS WITH BASIC OCCUPATIONAL HEALTH

Peter Buijs, Frank van Dijk

Both from LDOH: Learning and
Development of Occupational Health, The
Netherlands

buijspc@gmail.com

Symposium title: Education in OSH, emerging trends and unmet needs

- A huge unmet need: the 85-90% of the global workforce without any form of Occupational Health Care (OHC);
- Emerging trend: looking for ways and allies to reach them by Primary Health Care (PHC).

High risk work in informal economies without social security.

- Many without OHC are working in high-risk jobs in e.g. agriculture, small industries, construction, transport and health care;
- In numerous countries, especially in Africa, Asia and Latin America, 50–90% of all workers are active in the informal economy, far out of reach of regular OHS and often without any social security.

Biggest challenge for the international occupational health care community

To serve much more workers with a kind of basic OHC than the 10 –15% of the global workforce now within reach of some form of occupational health care.

WHO World Conference Connecting Health & Labour (The Hague, 2011)

Only feasible solution for the short run is expanding the capabilities of PHC to deliver a basic kind of occupational health care, because of its coverage: 70–80% of the world population.

Obstacles in PHC re OSH

- Lack of OSH expertise
- Insufficient attention to potential work-relatedness of health problems: 'Blind Spot'
- Lack of referral options
- Lack of structural governmental support

Conditions for 'PHC-strategy' to succeed

- Active role of governments;
- PHC professionals support for this approach;
- Support from the main relevant international organisations (WHO, ILO, ISSA, ICOH, WONCA)
- Policy&programmatic conditions

Active role of governments

Active role of governments, e.g.:

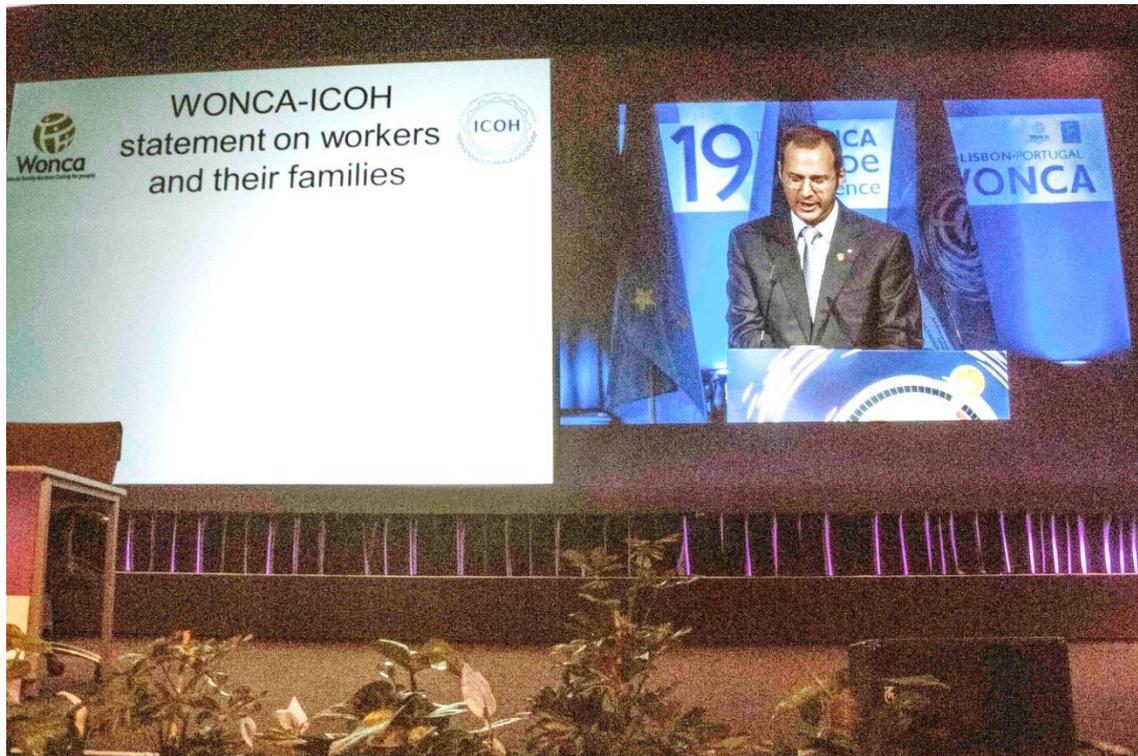
- Thailand;
 - China;
 - Brazil
 - S-Africa
 - Slovenia
 - (Netherlands)
-
- (See TNO-report, commissioned by WHO, 2014)

PHC professionals support

WONCA: Since 2005 attention to this issue, e.g.:

- 2006: ICOH Centennial
- 2007: ICOH-WONCA Work group (Dubrovnik)
- 2011: WHO Conference Health&Labour
- 2014: WONCA-ICOH Pledge
- 2016: WONCA SIG (Rio de Janeiro)
- 2018: ICOH Dublin

ICOH-WONCA Statement & Pledge (Lisbon, 2014), a boost for collaboration between PHC and OHC



ICOH – WONCA Pledge (Lisbon, 2014)

“WONCA and ICOH pledge to work with our partner organizations (including WHO and ILO) to address the gaps in services, research and policies for the health and safety of workers and to better integrate occupational health in the primary care setting, to the benefit of all workers and their families.”

Support from international organisations

- WHO: Alma Ata 1978 (“.. bringing PHC to where people *live and work*.”); 2011 Hague Conference; ICOH Cancun, 2012;
- ILO: mostly following WHO;
- ISSA: new interest; ‘2015-initiative ->G7/G20’;
- WONCA: see before;
- ICOH: see later.

Policy & programmatic conditions for incorporating OSH elements in PHC

- Adapted mission statements, strategy and objectives for PHC;
- Support and facilitating from government, social partners and social security;
- Appropriate tools and good practises;
- Education&training regarding knowledge, competences, skills, ethics;
- Infrastructure for support by OHS-experts and clinical/laboratory referral systems

Rewarding

Despite all obstacles it is very rewarding to work on enabling PHC 'to do the job' because of:

- Meeting a huge need
- Joining and reinforcing an emerging trend
- Giving a concrete follow up to a major common priority of ICOH and WONCA, as formulated in their common Pledge (2014)

Special challenge & opportunity for SCETOH

Education and training is key for enabling PHC

1. On an individual level to:

- Recognize ODs and work-related health problems
- Support workability, RTW/rehabilitation

2. On a collective level:

- Preventive work
- Educating workers and companies

Special challenge & opportunity for SCETOH/SCEOHS/Rural SC

So why not let WONCA know that ICOH/SCETOH is willing to initiate developing, disseminating and evaluating OSH-Modules for education & Training for PHC professionals, together with SCEOHS (evaluation) and Rural SC (40–50% of the workers involved are in rural areas)?

Important prerequisite: funding!!

„An offer WONCA can't refuse”

Such an ICOH proposal towards WONCA can be a substantial contribution to the health of the global workforce and a good, concrete way to meet the aim of the Symposium title: Education in OSH, emerging trends and unmet needs!

Hvala vam na pozornosti!