

# THE PREVENTION OF OCCUPATIONAL DISEASES

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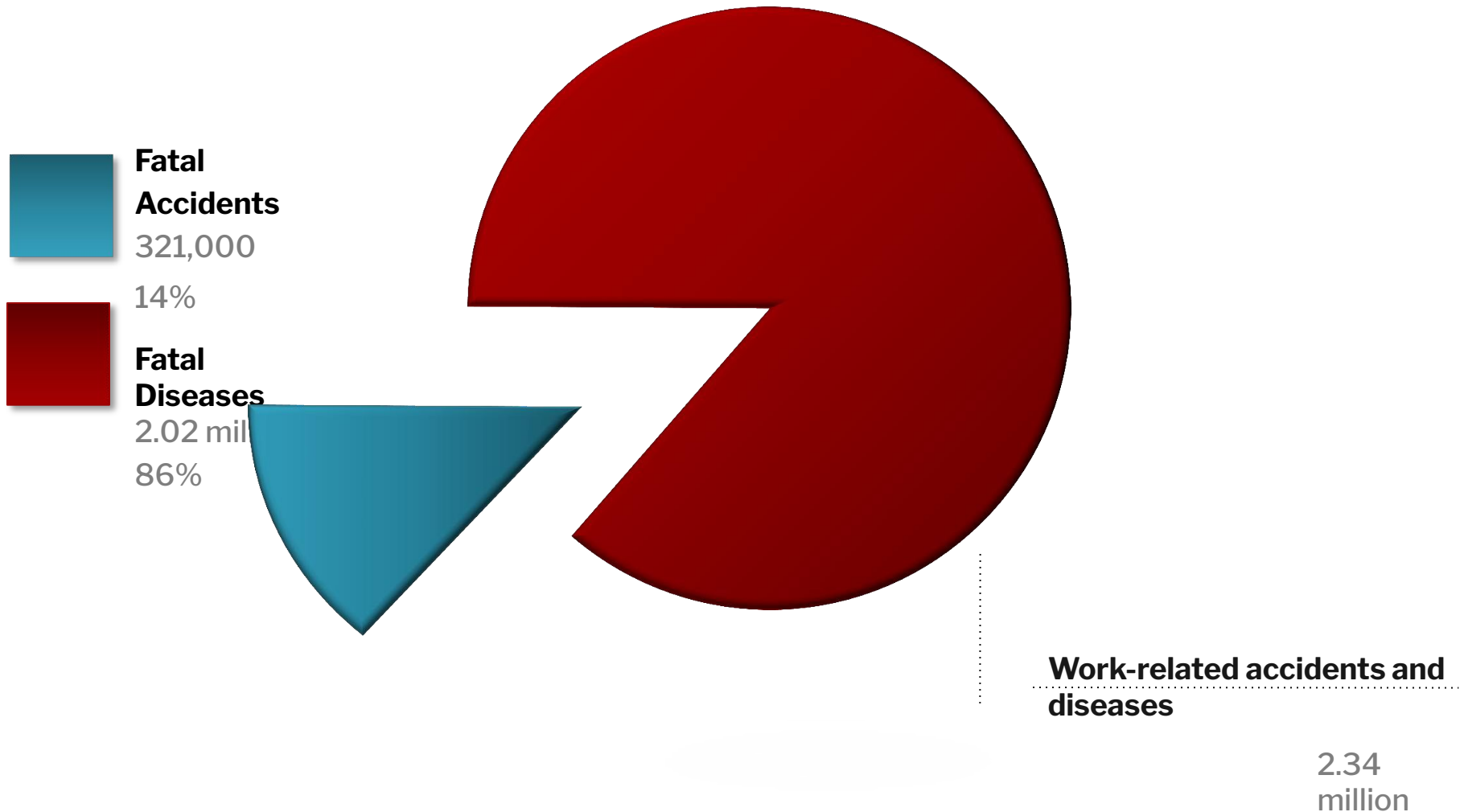
The hidden epidemic: a  
global picture

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# The hidden epidemic: a global picture



# The hidden epidemic: a global picture

## Pneumoconioses

- Millions of workers continue to be at risk of pneumoconioses due to exposure to silica, coal, asbestos
- Pneumoconioses have long latency periods and can often go undiagnosed and unreported
- Their associated illnesses (chronic obstructive pulmonary disease, TB, cancers) often cause disability and death

# The hidden epidemic: a global picture

## Asbestos-Related Diseases

- Asbestos-related diseases (ARDs) include asbestosis, asbestos-related lung cancer and mesothelioma
- Generally, ARDs take between 10 and 40 years to develop after initial exposure
- Despite bans on the use of asbestos, 2 million metric tons of asbestos continue to be produced every year
- Estimates from France, Germany, Italy, Netherlands, Switzerland, and the UK show a cumulative figure of 200,000 mesothelioma deaths to be expected over the period 1995-2029

# The hidden epidemic: a global picture

## Emerging risks and new challenges

- Traditional risks (e.g., asbestos exposure) continue to take a heavy toll on workers' health
- Technological, social and organizational changes in the workplace due to rapid globalization have been accompanied by emerging risks and new challenges
- New forms of occupational diseases, such as musculoskeletal and mental health disorders are increasing without adequate preventive, protective and control measures

# **The hidden epidemic: a global picture**

## **Musculoskeletal disorders (MSDs)**

- MSDs, including carpal tunnel syndrome, represented 59% of all recognised diseases recorded by the European Occupational Diseases Statistics in 2005
- The European Commission reports that MSDs account for the highest number of absences (49.9 per cent of all absences of more than three days) and cases of permanent incapacity for work (60 per cent)
- In the Republic of Korea, MSDs sharply increased from 1,634 in 2001 to 5,502 in 2010
- In 2010, Argentina reported 22,013 cases of occupational

# The hidden epidemic: a global picture

## Work-related stress

- Psychosocial risks and work-related stress have emerged as matters of great concern
- Stress has been linked to musculoskeletal, cardiovascular and digestive disorders
- Workers may turn to unhealthy behaviours (e.g., alcohol and drug abuse) in an attempt to cope with work-related stress
- The economic crisis has led to an increase in stress, anxiety, depression and other mental disorders, even bringing people



# Assessing the need for better data

## Why data is important

- Good data provide a basis for designing an effective prevention strategy
- Data on occupational accidents and diseases are mainly obtained through three channels:
  1. reporting by employers to labour ministries
  2. claims accepted by employment injury compensation schemes
  3. information from medical practitioners
- Yet, globally, more than half of countries do not provide statistics for occupational diseases

# Assessing the need for better data

## Challenges in data collection

- Many developing countries lack the specific knowledge and experience for diagnosis, recognition and reporting of occupational diseases (trained doctors, list of occupational diseases, guidelines for diagnostic criteria and recognition and compensation)
- In several countries, workers in SMEs and the informal economy tend to be outside national OSH systems
- The intensification of migration flows, ageing of the workforce and increasing number of people in temporary work complicate monitoring and recording of occupational diseases
- Most occupational diseases are difficult to identify due to

# Steps for the prevention of occupational diseases

For national OSH systems to deal effectively with the prevention of occupational diseases, it is necessary to:

- build capacity for recognition and reporting of occupational diseases and establish the related legislative framework
- Improve mechanisms for collection and analysis of occupational disease's data
- improve collaboration of OSH and social security institutions to strengthen employment compensation schemes
- integrate the prevention of occupational diseases into OSH inspection programmes
- improve capacity of occupational health services for health surveillance and monitoring of the working environment
- update national lists of occupational disease using the ILO list as a reference
- reinforce social dialogue among governments, employers and

# Steps for the prevention of occupational diseases

## The role of employers and workers

- The active participation of employers' and workers' organizations is vital for the development of national policies aimed at preventing occupational diseases
- Employers have a duty to prevent occupational diseases by taking precautionary measures through the assessment and control of occupational hazards and risks, and health surveillance
- Workers have a right to be involved in formulating, supervising and implementing prevention policies and programmes

# Steps for the prevention of occupational diseases

## ILO action

- Promote the ratification and implementation of ILO Conventions related to occupational safety and health
- Strengthen alliances with other institutions (e.g., WHO, ISSA, ICOH) for the prevention of occupational diseases
- Support member States' efforts to strengthen their capacities for prevention and recognition of occupational diseases
- Encourage the exchange of good practices at national and international levels

# The road ahead

A new **paradigm of prevention** focusing on occupational diseases and not only on occupational injuries is needed. The paradigm must underscore that:

- Just because the problem is difficult to tackle, it cannot be ignored
- Recognition, prevention and treatment of occupational diseases as well as improvement of recording and notification systems are high priorities
- Enhancing national safety and health programmes is essential to the health of both individuals and the

**THANK YOU  
FOR YOUR  
ATTENTION**

