

Abstract from:
Dr. Ivan D. Ivanov
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***Occupational Health and Equity: an Integral Part of a Fair
Globalization***

SPEAKER:

Dr. Ivan D. Ivanov

FUNCTION:

Scientist, Occupational and Environmental Health Programme, World Health Organization

ABSTRACT:

Inequalities in occupational health represent uneven distribution of opportunities of different individuals, social groups, countries and regions for a healthy, safe and productive working life. With regards to health, social inequalities translate into disproportionate burden of disease, death and disability among certain groups of society. Social differences in health status are further exacerbated by the unequal access to health services. Work is a major determinant of human health. Poor working conditions interact with persistent poverty in a vicious circle, where diseases, disabilities and premature death arising from the workplace hamper economic development of individuals, families and communities.

Globalization creates both opportunities and constraints for efforts to reduce gaps in the distribution of occupational health risks throughout the world. In the global trade system, action to improve quality of the working environment in one part of the world may lead to transferring risky technologies and hazardous materials to other countries and communities which lack necessary policy, economic and social power to protect themselves from occupational risks.

A recent global survey carried out by WHO demonstrated that there are large inequalities between groups of countries and regions in using the political opportunities of global health initiatives such as the Global Strategy on Occupational Health for All to improve worker's health. Countries with low level of human development were less likely to translate such initiatives into national policies and mechanisms for political dialogue about occupational health and safety.

Inequalities in occupational health require incorporating a strong equity dimension into the planning, delivery and evaluation of global programmes, projects and initiatives in order to reach those in greatest need. It is necessary to assist developing countries to generate political will and to establish mechanisms for improving the health of workers. Such efforts should target those at greatest risk as a result of the division of labour between sectors, social classes, genders, generations and geographical areas. There is a need to collect, evaluate and disseminate experience and good practice in the delivery of occupational health interventions in a fair and equitable way.

