

A dynamic vision of prevention

The International Social Security Association (ISSA)

Social security is everybody's business. It affects our daily life by protecting us against work and life risks – health care needs, disability, old age and unemployment. ISSA Secretary General Hans-Horst Konkolewsky explains how social security and the prevention of occupational accidents and diseases go hand-in-hand.

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GENEVA – Headquartered in Geneva, the International Social Security Association (ISSA) is a member-based international organization for national social security administrations and agencies. Bringing together social security and prevention experts from around 350 social security institutions in more than 150 countries, the ISSA offers a unique platform and network for the sharing of good practice developments, including those concerned about improving workers' health.

Prevention: A success story for social security

Safety and health at work lie at the heart of social security. Every day, investment in prevention helps to avoid occupational accidents and diseases. Prevention saves lives and protects the well being of individuals and families.

Moreover, investments in prevention make economic sense. Safer workplaces support increased productivity. Prevention pays.

Reaching out further than the traditional focus on occupational safety and health, the ISSA supports preventive approaches protecting and promoting workers' health in all social security branches. It provides good practice information, research, expert advice and platforms for members and other stakeholders to exchange on innovation in workplace health promotion, active employment policies, rehabilitation and reintegration.

Preventive approaches broaden the nature of social security policies. They are a cornerstone of what the ISSA calls a dynamic social security system.

The challenges are getting tougher

Work-related fatalities are increasing. According to the ILO, 2.3 million people die each year because of work-related accidents and diseases and 337 million people are involved in non-fatal workplace accidents.

The annual cost of financing cash benefits, health care and rehabilitation for work-related disabilities is colossal: a sum equivalent to 4 per cent of global gross domestic product (GDP) for work injuries alone. And for some developing countries the cost equates to 10 per cent of national GDP.

The current phase of globalization bears witness to rising levels of informal employment, increased migration flows and profound social shifts, posing new challenges to prevention especially in countries with less developed prevention cultures. Meanwhile, new technologies and working patterns, and the challenges of workplace stress and psychosocial risks, increase the complexity of prevention even more.

New technologies, new risks

Reports from the World Health Organization (WHO) indicate that the world's workforce is increasingly exposed to epidemics, industrial accidents, natural disasters and other health emergencies, and that only 10-15 per cent of them have access to a basic standard of occupational health service.

And a recent ISSA study shows that, compared with work injuries, occupational diseases are actually rising in some countries. The cause appears to be the growing number of so-called "new occupational diseases", many of them with long latency periods, which may become a much more pressing problem than occupational accidents in the future.

"Proactive and comprehensive prevention policies carried out by social security and occupational health and safety institutions can substantially reduce work-related accidents and illness levels, diminish the related human suffering and avoid the resulting economic losses," says ISSA Secretary General Hans-Horst Konkolewsky. "In Germany, for example, experts estimate that accident prevention since the 1960s has saved industry up to 10 billion euros annually."

Prevention pays

The good news is that statistics, both for developed and emerging economies, show that where investments in prevention measures have taken place over a period of time, a significant decrease in work accidents and occupational diseases and thus considerable cost-reductions can be achieved.

ISSA can point to examples where targeted accident prevention policies by social security institutions have reduced the number of work accidents by between 25 and 50 per cent – and not just in the industrialized countries: in Côte d'Ivoire, for example, the social security institutions estimate that the number of declared accidents has been reduced by 50 per cent since the 1980s, while in the same period Niger has experienced a decrease of almost 25 per cent in work accidents, thanks to a programme of prevention education for workers.

80 years of prevention

The concept of accident and illness prevention in the workplace was already in the minds of the ISSA pioneers when they included it in the fundamental policy principles adopted by their Constituent Assembly as far back as 1928, while a year later the relationship between sickness insurance and industrial hygiene was already on the agenda. But it was only in 1957, with the establishment of the Permanent Committee on the Prevention of Occupational Risks, that the ISSA became formally involved in occupational safety and health.

In 1969, under the umbrella of the Special Commission on Prevention, the International Section on the Prevention of Occupational Risks in Agriculture was formed, and over the next decades 10 other international sections were established, six of which represent an area of occupational risk like agriculture – chemistry, construction, mining, electricity, machine and system safety and iron and metal. Another three international sections cover horizontal issues, of interest to all OSH practitioners – education and training, research and information.

The intersection of the ISSA and prevention does not stop with the Special Commission and its International Sections. Many of the ISSA's 11 Technical Commissions including those on work accident, health care or employment policies, which were set up as early as 1947 to provide networks for specialists to collaborate in advancing discussion on technical social security issues, have been focused on issues related to protecting and promoting workers' health.

ISSA: 80 years old and stronger than ever

Founded in Brussels in 1927, the beginnings of the International Social Security Association were directly linked to steps then being taken by the International Labour Organization to introduce international regulations for the health of workers through social insurance schemes. At the 10th International Labour Conference held in the spring of 1927 two Conventions on sickness insurance were adopted. Albert Thomas, the first Director General of the ILO, needed popular support to secure the ratification of these, and welcomed the suggestion of leading personalities of mutual benefit societies and sickness insurance institutions to set up an international conference whose purpose would be to extend and strengthen sickness insurance worldwide. As a result, the International Conference of National Unions of Mutual Benefit Societies and Sickness Insurance Funds was created in Brussels in October 1927. The Constituent Assembly was attended by delegates of 17 organizations, representing some 20 million insured persons from Austria, Belgium, Czechoslovakia, France, Germany, Luxembourg, Poland, Switzerland and the United Kingdom. The objective of the Conference was to coordinate internationally and to strengthen efforts to protect, develop and improve social insurance and sickness insurance.

ISSA's foundations are laid

It was the hardships created by two world wars that demonstrated the need for public social security and occupational protection, and it was quickly realized that only through extensive international cooperation could the very concept of social security and its practical application be perfected and developed.

At the International Labour Conference in Philadelphia, the real foundations of the ISSA were laid through the passage of a resolution that became its programme of action: to promote, on an international or regional basis, systematic and direct cooperation among social security institutions to further the regular interchange of information and the study of common problems.

International cooperation

Today, the objective of the Association is "to cooperate, at the international level, in the promotion and

development of social security throughout the world, primarily through its technical and administrative improvement, in order to advance the social and economic conditions of the population on the basis of social justice”.

For the international community, ISSA is the main international focal point for ideas and debate on social security, providing platforms for the exchange of information and discussion and a unique knowledge centre for the collection and dissemination of research and information on social security, including the prevention of employment injuries and occupational diseases. For the 2008 – 2010 triennium the ISSA is focusing on the following priority areas that were identified by its members:

- Governance and social security
- Risk management and leadership
- Extension of coverage
- Information and communications technology as a strategic management tool
- Compliance and contribution collection
- Responding to demographic changes.

Cooperation with the ILO

Cooperation between the ISSA and the ILO on occupational safety and health (OSH) started in practice during the 1955 First World Congress for the Prevention of Occupational Accidents and Diseases in Rome. Since then, the World Congress, the biggest international event on OSH, has been organized jointly by the ISSA and the ILO every three years. Once established, the Prevention Commission implemented several joint projects in collaboration with the ILO Occupational Safety and Health Service. Among them was the International Occupational Safety and Health Information Centre (CIS), which complements the various national CIS centres, such as those in France, Italy and the United Kingdom.

To maintain close cooperation between the ILO and the ISSA in OSH, members of the ISSA Commission and its technical sections were included in various ILO technical advisory groups. Similarly, ILO's OSH specialists joined their ISSA colleagues in drafting programmes of the technical sections of the Permanent Committee. In recent years the ISSA has supported the promotional activities for the International Day for Safety and Health at Work, launched by the ILO in 2003.

The cooperation between the ISSA and the ILO in the field of workers' health has contributed to the achievement of mutual goals and is as fruitful and important as 50 years ago. Most recently, the ISSA and the ILO co-sponsored the XVIII World Congress in Seoul in July this year, hosted by the Korea Occupational Safety and Health Agency (KOSHA). They also organized just prior to the opening of the World Congress a Safety and Health Summit which has led to the **Seoul Declaration** adopted by some 50 high-level decision-makers from around the world as a major new blueprint for constructing a global culture of safety and health at work. Recognizing that improving safety and health at work has a positive impact on working conditions, productivity and economic and social development, the Declaration also emphasizes that the right to a safe and healthy working environment should be recognized as a fundamental human right (see page 43).

The Declaration recognizes the important role of social security organizations in promoting prevention and in providing treatment, support and rehabilitation services. The prevention of occupational risks and the promotion of workers' health constitute an essential part of the ISSA's mandate.

Since its inception, ISSA has always sought and fostered international cooperation with other agencies, including those involved in the field of prevention of occupational risks.

The ISSA clearly recognizes the need for better international cooperation to make good practice information on OSH simple, applicable and accessible to both professionals and workers; to secure government and employers' commitment to safety and health; and to build a closer link between prevention, compensation and rehabilitation. Towards this end, the ILO's Promotional Framework for Occupational Safety and Health Convention, 2006 (No.187) and its accompanying Recommendation (No.197) as well as the 2007 WHO Global Plan of Action on Workers' Health 2008 – 2017 provide sound guidelines for future efforts.

Demographic changes, globalization and demands for greater social justice confirm that the protection of workers' health is vital for economic and social progress. Health may be determined by occupational and non-occupational factors, but healthy individuals, and especially healthy workers, make for healthier and

more just societies. And as the ISSA is fully aware, healthy societies contribute to making social security programmes healthy financially too.

To face today's immense challenges and in line with the ILO's Decent Work Agenda and its new Declaration on Social Justice for a Fair Globalization, adopted by the International Labour Conference in June 2008, and the Seoul Declaration, the ISSA is committed to strengthen its long-standing relation for the benefit of the health of workers around the world.

Promoting investment in workers' health

Investing in workers' health is at the core of social security's mission and an important factor for its future sustainability.

ISSA is involved in OSH mainly through one of its eleven Technical Commissions – the Special Commission on Prevention. Building on a unique history of activities, the Special Commission on Prevention is ISSA's flagship in prevention today: it initiates, coordinates and conducts international activities to promote occupational safety and health and specific activities are carried out by the eleven International Sections.

Each of these sections organizes, often together with other sections, international seminars, round-tables and workshops. They also publish topical documentation on relevant prevention issues, provide technical support, and run joint projects. Working groups within the sections devise practical tools and solutions for training, information and communications. All sections are actively involved in the organization of the World Congresses on Safety and Health at Work.

A typical example is that of the International Section for the Prevention of Occupational Risks in the Chemistry Industry, which has held some twenty international symposia since it was established in 1970. It has set up expert working groups on Dangerous Substances, Explosion Protection and Biotechnology respectively, as well as other ad hoc working groups. The Section has also produced a series of illustrated brochures, some of which are available in several languages.

The International Section on Agriculture produced in 2007 a DVD to promote safety for children growing up on a farm. The DVD features a series of easy-to-understand stories which depict potential risks for these children. As there is no spoken language involved, this is a must see for children around the world who live on a working farm.

The Electricity Section, on top of its active meetings and publication programme organizes with the Information Section the prestigious International Multi-Media and Film Festival, a key component of the World Congress. In 2008 the competition was stiff with over 100 entries from around the world.

ISSA: Responding to priority challenges in workers' health

Asbestos, an enduring evil

Although its dangers have been well known for decades, the menace of asbestos is still very much with us. The ISSA's Special Commission on Prevention has been campaigning hard for its ban. In 2004 it adopted a declaration which urged all countries to ban the manufacture, trade and use of all types of asbestos as quickly as possible. Other anti-asbestos efforts include a series of reports on the prevention of and compensation for asbestos-related occupational diseases and an information leaflet "Asbestos: Towards a Worldwide Ban" in eight languages. It is available free of charge on the ISSA Website at www.issa.int.

Dangerous chemicals

Since 2005, the Special Commission on Prevention and the eleven International Sections have organized some 30 international and regional technical seminars, including one organized in February 2008 by the International Chemical Section at which 350 participants from 16 African, American and European countries had an in-depth exchange on the new globally harmonized system of classification and labelling of chemicals.

Skin disease protection

There has been a reported increase in the number of irritative, allergic and degenerative skin diseases in a number of European countries. In response to this the ISSA Health Services Section held a Workshop on Prevention of Skin Diseases in the Health Services Sector in April 2008 in Dresden, Germany. It provided a forum for skin disease prevention experts to exchange ideas, share problems and best practices and discuss

prevention strategies.

Safe electricity

A recent seminar, hosted by the ISSA Electricity Section and held in Santiago, Chile, allowed more than 160 electrical safety and prevention experts from Latin America, the United States, Canada and Europe to discuss the latest safety and health issues, trends and breakthroughs in the electrical industry.

Occupational disease prevention

Over the past three years, the Technical Commission on Insurance against Employment Accidents and Occupational Diseases organized a cycle of seminars on occupational diseases (ODs) in Latin America, Africa and Asia. At these a number of shared challenges have been identified, including the problem of underreporting of ODs, the shortage of well-trained practitioners and resources for effective prevention, the low awareness among workers and employers of these diseases and their reporting mechanisms, and the non-update of the list of ODs in some countries. The Technical Commission is planning seminars on disability management and the impact of demographic changes on the health of both older and young workers; it will also contribute to regional forums as well as to the ISSA's World Social Security Forum to be held in South Africa in 2010.

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In the next two years ISSA's prevention sections will organize at least ten international meetings, symposia and workshops on a variety of workplace health and safety problems areas, including the risks faced by elderly workers, a continuation of the campaign on the ban of asbestos, and a meeting focusing on prevention in French-speaking sub-Saharan African countries..

The future: Dynamic Social Security

The key role of social security in building more equitable societies demands a broader, more dynamic concept of social security that embraces the proactive and preventive approaches pioneered in the field of occupational health and safety.

To assist social security institutions to meet the current socio-economic challenges, the ISSA has developed the strategic concept of Dynamic Social Security, which calls for sustainable and accessible social security systems that are based on integrated, proactive and innovative responses.

Occupational safety and health is at the heart of Dynamic Social Security. Dynamic safety and health strategies can substantially reduce work-related accidents and illness levels, avoid needless human suffering, and contribute to economic and social progress.

Dynamic Social Security: key to the new ISSA

The strategic concept of Dynamic Social Security articulates ISSA's vision of social security geared to better ensure accessible and sustainable social protection systems, which not only provide protection, but also adopt preventive approaches, support rehabilitation and reintegration and contribute to better realizing socially inclusive and economically productive societies.

Today's more complex health risks call for these more innovative measures. For example, a sharp increase in chronic diseases shows that workplace prevention should engage in broader health promotion activities. Going forward, the following cardinal points should guide the delivery of integrated dynamic social security that has the health of working populations at its centre.

1. Workers' health must be recognized as a strategic asset for companies and for society

Workers' health is central to human capital formation and fosters competitiveness and innovative capacities.

2. Workers' health is a societal responsibility and increased investment by society is needed

Workers' health is increasingly determined by both occupational and non-occupational factors. In view of the enormous challenges, companies and societies must scale up their investment in workers' health.

3. Workers' health must be addressed by all social security branches

Innovative preventive approaches that invest in workers' health need to be developed and implemented widely in the different social security branches and efforts to create integrated approaches involving several social security actors should be intensified.

4. Workers' health must count – for all workers

All workers must be given a right to benefit from measures to protect their health, also and in particular those in the growing informal sector, in small and micro businesses, and the self-employed should be covered and have access to prevention programmes.

5. Workers' health requires partnerships and innovation

Today's more complex health risks call for more innovative measures and for partnerships of all actors involved in promoting workers' health. This is not the time for uncoordinated action – cooperation and partnerships will boost the impact of investments in workers' health.

Only through change and innovation can social security meet the challenges of globalization and contribute to social justice and equitable economic development. It must be dynamic, integrated and proactive – an alignment that is the core of the ISSA's new strategic vision of Dynamic Social Security.

ISSA will spare no effort to collaborate with its member social security organizations and work in partnership with other international organizations to make the world's workplaces safer and healthier for the millions of people who risk their lives simply by doing their jobs.

SHINING A LIGHT OF HOPE: SOCIAL SECURITY FOR HEALTH IN THE INFORMAL ECONOMY

PUNE, India – Sunita's world came crashing down the day her auto rickshaw driver husband suffered a paralytic stroke.

Still recovering from the shock of losing her 15-year-old son in a road accident, she was totally unprepared for this bolt from the blue. Gathering her wits, she somehow managed to get her husband to a private hospital, where she was promptly told that the treatment would cost 20,000 Rupees (about US\$500) – a huge sum for Sunita who barely earns Rs. 2,000 a month through her tailoring work.

People like Sunita's husband represent millions of informal economy workers in India and around the world falling ill from overwork, stress and an unhealthy work environment.

45-year-old watchman Vasant Narvekar, who suffers from asthma, is another example. The nature of Vasant's work entails being out in the open, doing rounds of the area on his beat in a dusty environment for close to 12 hours each day. With a family of four to support, he has no choice but to continue working. Recently he suffered severe asthmatic attacks and needed hospitalization. The treatment estimate was INR 1,600, well over half of his meagre monthly earnings of INR 3,000.

Sunita's husband had been working double shifts to pay back the mortgage on his rickshaw. The stress of working long hours at his age (57) led to a paralytic stroke.

At this point what came in handy for both Sunita and Vasant was their membership of the Health Insurance Scheme. This scheme, set up in 2003 under the aegis of the Community Based Health Mutual Fund (HMF), initiated by Uplift India Association, responds to the healthcare needs of women members of self-help groups in the slums of Pune. The objective of the scheme is to create a health fund through mutual contributions and create a network of healthcare services which provide quality treatment at affordable rates to the poor through a network of doctors and private hospitals.

Sunita consulted the doctor at the HMF branch office of her area. The doctor's referral letter helped her shift her husband to another private network hospital, where he was given immediate treatment. This not

only helped save his life but also prevented further complications to his condition.

While the actual cost of treatment was Rs. 20,000, the network hospital charged only Rs.9,000, a saving of Rs.11,000 in the first instance. Being a HMF member, Sunita received a further discount of Rs. 900 from the hospital. Thanks to his HMF membership, Vasant only had to pay INR1,000 for his treatment at the hospital.

Building on solidarity and ownership, the risk management of HMF is carried by the local community. The plan is open to all workers in the informal sector. Besides medical coverage this unique insurance plan provides for wage loss for the breadwinner at the rate of Rs. 50 per day for 15 days.

For over a year, Uplift Health has been organizing a broad Communities-Led Association for Social Security (CLASS), aimed at promoting the social security rights of disadvantaged groups. Supported by the German Agency for Technical Cooperation (GTZ) and the ILO'S Programme on Strategies and Tools against Social Exclusion and Poverty (STEP), CLASS groups comprising cooperatives, self-help groups, trade unions are now spread across India.

"The ILO programme shows that, with the appropriate support, informal sector workers can move from a situation of mere survival to a stronger economic position enhancing their contribution to economic growth and social integration, as well as participating in the improvement of their own working and living conditions," concludes Assane Diop, ILO Executive Director, Social Protection Sector.