Working Paper

MULTIPLE CASE STUDY ON SIX REGIONAL OCCUPATIONAL HEALTH AND SAFETY NETWORKS
Multiple Case Study on Six Regional Occupational Health and Safety Networks

Working Paper

Labour Administration, Labour Inspection and Occupational Safety and Health Branch (LABADMIN/OSH)

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<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>ALASEHT</td>
<td>Latin American Association of Safety and Health at Work</td>
</tr>
<tr>
<td>ASEAN-OSHNET</td>
<td>ASEAN Occupational Safety and Health Network</td>
</tr>
<tr>
<td>BSN</td>
<td>Baltic Sea Network on Occupational Health and Safety</td>
</tr>
<tr>
<td>EBDM</td>
<td>Evidence-based decision-making</td>
</tr>
<tr>
<td>EBPM</td>
<td>Evidence-based policy-making</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>EU-OSHA</td>
<td>EU Occupational Safety and Health Agency</td>
</tr>
<tr>
<td>ENETOSH</td>
<td>European Network Education and Training in Occupational Safety and Health</td>
</tr>
<tr>
<td>IAPRP</td>
<td>Inter-African Association for the Prevention of Occupational Risks</td>
</tr>
<tr>
<td>ICOH</td>
<td>International Commission on Occupational Health</td>
</tr>
<tr>
<td>ICT</td>
<td>Information and communications technology</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organization</td>
</tr>
<tr>
<td>ISSA</td>
<td>International Social Security Association</td>
</tr>
<tr>
<td>LMICs</td>
<td>low- and middle-income countries</td>
</tr>
<tr>
<td>OH</td>
<td>occupational health</td>
</tr>
<tr>
<td>OSH</td>
<td>occupational safety and health</td>
</tr>
<tr>
<td>PEROSSH</td>
<td>Partnership for European Research in Occupational Safety and Health</td>
</tr>
<tr>
<td>SEENWH</td>
<td>South-East European Network on Workers’ Health</td>
</tr>
<tr>
<td>SEEWA</td>
<td>South-East European Workplace Academy</td>
</tr>
<tr>
<td>UMICs</td>
<td>upper middle-income countries</td>
</tr>
<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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Acknowledgements

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It was prepared by Professor Jorma Rantanen with guidance and technical contributions provided by Mr Claude Donald Loiselle coordinating ILO work on OSH networking, knowledge and information management. The ILO also wishes to underline the contributions of network leaders and experts in producing the profiles, in particular of Eng. Renán Alfonso Rojas Gutiérrez and Ms Giuliana De Rosa for ALASEHT; Mr Zié Adel Coulibaly, Mr Nogbou Alphonse Ahoua and Mr Bernard Foe Andegue for IAPRP; Mr Jan Michiel Meeuwsen and Dr Dietmar Reinert for PEROSH; Mr Wilbur Oh for ASEAN-OSHNET; and Pr Jovanka Karadzinska Bislimovska for the profile of SEENWH.

Acknowledgements extend to the members of the Project International Advisory Committee that provided guidance throughout the modernization project design and implementation, notably during the meeting held in Turin in November 2016 to discuss the theoretical foundations, the proposed set of descriptors and the methodological aspects of this multiple case study analysis.
Foreword

This report presents the results of the multiple case-study analysis of regional occupational safety and health (OSH) networks. It was undertaken as part of the modernization of the ILO portfolio of activities in OSH knowledge and information, which is a primary objective of the ILO’s global strategy to improve occupational safety and health. The study was undertaken in order to understand how and why OSH agencies, institutions, organizations and experts collaborate with one another. It covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. In addition to producing individual network profiles that are published separately, the results highlight similarities and differences in ways of organizing collaboration in OSH by providing new knowledge to support international cooperation which has always been and remains a key role of the ILO.

The adoption of a need-based approach to international networking is central to the modernization process. The first step consisted of undertaking a global survey of OSH knowledge agencies, institutions and organizations as a means to understand the organization of OSH knowledge and information development. The survey notably provided invaluable descriptive information covering the typical forms of international collaboration arrangements; the objectives pursued by engaging in networks; and the key enabling factors facilitating participation in international collaboration, networking and partnership initiatives. The results also revealed the diversity of existing collaborative arrangements in the field of occupational health and safety. The multiple case-study analysis complements the global survey by documenting the functioning of six networks and identifying some of the key characteristics of productive regional OSH networks.

The exploratory nature and the complexity of the participatory approach adopted for the study should be kept in mind when reading the report. Adopting the set of standard descriptors, selecting and engaging with networks, accessing baseline information, choosing the key topics of interest for the cross-cutting analysis, preparing and validating the network profiles all required intensive interactions with network leaders, and in some cases with network members. Important lessons are drawn from the research outcomes and from the research process itself. Given the complexity of the task, it was only possible to cover the functioning of a limited number of regional networks, thus relegating at a later stage the study of other existing networks, including subject-matter OSH networks. The results are providing new data and knowledge that can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of existing OSH networks.

The modernization of ILO international networking in OSH is well on course. Advancements achieved to date concur to consolidate a new and modern ILO networking model for strengthening institutional capacities to acquire and use OSH knowledge and information. The emerging model focusses on networking networks so that regional and subject-matter collaboration accelerate international knowledge transfer and exchange for effective prevention worldwide. By taking stock, analyzing and sharing experience on OSH knowledge and information development and networking efforts, the ILO wishes to impulse a renewed global knowledge and information sharing dynamic and contribute connecting institutions and people with the knowledge they need.

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Occupational Safety and Health Branch (LABADMIN/OSH)
International Labour Organization
Preface by author

Information and communications technology (ICT) and the Internet have provided fast and wide-ranging changes in professional and research communication; opened and enhanced new research and data collection and analysis opportunities; and changed our working practices. Today, international institutional and professional collaboration and networking are typical features of occupational safety and health (OSH) research and information. Networks provide forums for the exchange of information and knowledge, for joint projects, for education and training, for quality assurance in scientific research, and for learning between peers. The Internet and ICT have provided new opportunities and greater efficiency in access, collection, analysis, evaluation, and dissemination of information. Capacities for information processing, deposition, and knowledge management have been radically enhanced.

In 2016 the International Labour Organization (ILO) carried out a global survey on the work of agencies, institutions, and organizations that are concerned with OSH. One of the crucial aspects of the survey was to analyse, and learn from, the existing working practices in OSH networks. A multiple case study of six regional networks was carried out in order to deepen the analysis. The six selected networks were analysed using pre-set criteria in order to draw up a framework for developing the work of the OSH networks, with the aim of enhancing the improvement of safety and health in the workplace, worldwide.

The descriptions of the six networks are provided in this report, with the content of the reports as shown below. Some modifications may have been made, because the networks are in different stages of their work and development.

The chapter analysis covers each network’s formal status and constitution; mission and policy; basic orientation; strategy and programmes; structure, governance, and coordination; membership; financing; functions and outcomes; projects; outputs; and collaborative partners. It is our hope that these descriptions and analysis will increase the understanding of establishing and running successful OSH networks for the benefit of workers’ health and safety, globally.

Jorma Rantanen
1. Multiple case study on regional OSH networks

1.1 Background

Evidence-based policy-making (EBPM) and decision-making (EBDM) have gained growing interest among national and international policy-makers and decision-makers, due to growing demands for accountability and transparency, efficiency, and effectiveness, and, in the field of OSH, due to the growing number and interests of stakeholders and social partners that participate in policy choices and decisions. National governments and international organizations, including the ILO and World Health Organization (WHO), have produced strategic and guidance documents for EBPM and EBDM, and have supported international networks in the search for, and evaluation of, evidence.

Scientific communities, such as the Cochrane Collaboration (medicine) and Campbell Collaboration (social sciences and psychology), have, for 35 years, organized international networks for the production of critically evaluated evidence and critical reviews, to provide a reliable evidence basis for EBPM, EBDM, and for the best practices. These efforts have been substantially enhanced by advances in research, the better generation and collection of research data, better communication within scientific communities, and more effective dissemination of research results, including the critical reviews. The European Union (EU) has given a special role to scientific communities in the generation of evidence for policy making. European science journalists have also worked for the dissemination of high-quality, critically evaluated evidence for users in EBPM, EBDM, and practical application.

Today, international institutional and professional collaboration and networking are typical features of OSH research and information distribution. Networks provide forums for the exchange of information and knowledge, for joint projects, for education and training, for quality assurance in scientific research, and for learning between peers. The Internet and ICT have provided new opportunities and greater efficiency in access, collection, analysis, evaluation, and dissemination of information, for information processing and deposition, and for knowledge management.

Internet-enabled networking provides a way to:

- generate new knowledge in joint research projects and programmes;
- evaluate and assure the quality of this knowledge;
- support and guide practical application and implementation; and
- educate and train.

Networking facilitates the exchange and generation of information and knowledge among individuals, groups, or institutions that share common interests. Today, computerization and Internet-based communication systems provide the technical platforms for such networking. In addition to the well-established international networks, the number of national, regional, and subregional networks is growing and exceeds the number of international networks. The ILO global survey has identified 20 OSH networks, with a wide variation in structure, geographical coverage, mission,
policies, membership, and methods of operation.

The objective of the ILO multiple network analysis project was to study in more detail a sample of well-established regional or subregional OSH networks, in order to understand the critical characteristics and success factors behind their generation, organization, functions, and achievements. More specifically, the ILO defined the following objectives:

a) to generate a standard set of descriptors of networks for constitutional and organizational models, and for functions and outputs;
b) to produce six regional network profiles on the basis of the standard descriptors; and
c) to produce a cross-cutting analysis and evaluation of the six regional networks regarding their structures and functions.

The specific study questions were:

a) What are the typical characteristics of the existing regional and subregional networks, as analysed by using the pre-set descriptors?
b) What are the common characteristics and differences between the analysed networks: How do the networks differ in various regions?
c) What are the factors making an effective and successful network?

Access to the Internet – a prerequisite for effective networking

Access to the Internet is a critical prerequisite for networking. About 75 per cent to 90 per cent of the populations in advanced economies have access to the internet, but the rates are substantially lower in low- and middle-income countries (LMICs), resulting in a 50 per cent world average (Figure 1).

Most LMICs have limited capacity to engage in the necessary steps towards the effective absorption of international OSH information and OSH research evidence needed to formulate a national OSH policy; or for adopting tailored, risk-based OSH programmes, or for using and developing OSH knowledge for good practices.

In the ILO global survey, all OSH institutions – even in the LMICs – seemed to have nearly 100 per cent access to the internet, and their multilateral networking with international organizations – WHO, ILO, the International Social Security Association (ISSA), and the European Agency on Safety and Health at Work (EU-OSHA) – was more common than their formal, inter-institutional bilateral networking. Thus, even in the LMICs, OSH institutions may play an important role in mediating OSH information from international sources to government authorities, national institutions, enterprises, social partners, training and education institutions, and other stakeholders, including the public (some or many of whom may not have access to the Internet).
1.2 Material and methods

Six regional or subregional networks from four continents were chosen for the survey:

- Latin American Association of Safety and Hygiene at Work (ALASEHT) (Latin America).
- ASEAN Occupational Safety and Health Network (ASEAN-OSHNET) (South-East Asia).
- Baltic Sea Network on Occupational Health and Safety (BSN) (Baltic Sea subregion).
- Inter-African Association for the Prevention of Occupational Risks (IAPRP) (Western and Central Africa subregion).
- Partnership for European Research in Occupational Safety and Health (PEROSH) (EU Europe).
- South-East European Network on Workers’ Health (SEENWH) (South-East European subregion).

Different networks linked 10 to 15 institutional members, and their constituent populations varied widely, between 120 million and 633 million (Table 1).
A structured format was prepared, including 12 descriptors for asking questions and mining Internet data on the networks. The descriptor parameters used for the analysis were discussed and approved by the ILO International Advisory Committee Meeting, in Turin, Italy, in November 2016, representing the institutions participating in the networks.

The model outline was sent to the coordinators of the networks and four (English-speaking respondents) were also sent a draft profile as a model for replying. The French-speaking IAPRP and Spanish-speaking ALASEHT network coordinators were contacted and assisted by ILO Geneva experts, who also translated the replies into English. All the replies were complemented by data mined from the Internet, using information from the networks’ websites, reports, meeting reports, annual reports, publications, conference presentations, and internal reports. The coordinators were consulted for completion of data and for possible corrections. The characteristics considered to be the key features of efficient networks are described below.

1.3 Summary of the results

A summary of the most typical findings of the multiple case analysis are presented here in a concise form, following the pre-set descriptors (some of them combined). The key common features of the networks, and the potential success factors and challenges, are briefly presented. All the indicators are shown in Annex 1 to this chapter.

1.3.1 Participants in the study

A total of six subregional networks were chosen for analysis using the following criteria:

a) geographical distribution;
b) availability of data (feasibility);
c) substantive orientation (occupational safety, occupational health, integrated); and
d) willingness to participate.

The participant networks were active in different regions of the world, and represented both advanced economies, upper middle-income countries (UMICs) and LMICs (Table 1).

The six networks are active in countries with a total population of 2 billion, i.e. 1 billion workers or more.

1.3.2 Mission and policy

All the networks reported their missions and policies, and presented them on their websites. A number of mission items or policy objectives were common to all, such as collaboration and
sharing of OSH information. However, substantial differences were observed in many specific objectives: two networks focused on a limited number of objectives (safety and accident prevention), whereas three had a wide, multidisciplinary profile. The description of missions varied, and the analysis of functions and activities showed more versatile profiles than a brief mission statement gave reason to expect.

Table 1. Participant networks

<table>
<thead>
<tr>
<th>Network</th>
<th>Region or subregion</th>
<th>Number of institutional members</th>
<th>Constituency population (million) (UN, 2015)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latin American Association of Safety and Hygiene at Work (ALASEHT)</td>
<td>Latin America</td>
<td>8 active 4 corresponding 2 adherent members = 14</td>
<td>5361</td>
</tr>
<tr>
<td>The ASEAN Occupational Safety and Health Network (ASEAN-OSHNET)</td>
<td>South-East Asia</td>
<td>10</td>
<td>633</td>
</tr>
<tr>
<td>Baltic Sea Network on Occupational Health and Safety (BSN)</td>
<td>Baltic Sea (northern European) Subregion</td>
<td>13</td>
<td>1662</td>
</tr>
<tr>
<td>Inter African Association for the Prevention of Occupational Risks (IAPRP)</td>
<td>Western and central Africa</td>
<td>15</td>
<td>184</td>
</tr>
<tr>
<td>Partnership for European Research in Occupational Safety and Health (PEROSH)</td>
<td>EU Europe</td>
<td>13 + 3 collaborating members</td>
<td>3973</td>
</tr>
<tr>
<td>South-East European Network on Workers’ Health (SEENWH)</td>
<td>South-East Europe</td>
<td>10</td>
<td>120</td>
</tr>
<tr>
<td>Total</td>
<td>Six subregions</td>
<td>68 ordinary members and 9 corresponding or collaborating members = 77 institutions</td>
<td>2036</td>
</tr>
</tbody>
</table>

1 + 89 million in corresponding members’ countries.
2 + Only the north-western region of Russia included.
3 + 366 million in collaborating partners’ countries

1.3.3 Formal status and constitution

The formal statuses of networks differed substantially. ASEAN-OSHNET has a strong governmental profile – steered, supervised, and supported by the ministries of labour, and safety and health authorities of the member States. ALASEHT is a voluntary association of national OSH professional organizations while IAPRP is a legally constituted association of national social security organizations. PEROSH is a collaborative partnership of governmental national or insurance-governed OSH institutes, and the BSN and SEENWH are typical voluntary expert networks with no formal status. Formal status has an influence on, for example, the resource basis of the network.

1.3.4 Basic orientation

The networks' formal status and mission are reflected in their basic orientation. The IAPRP and ALASEHT are strongly and almost exclusively safety and accident prevention and occupational hygiene (work environment) oriented. The BSN and SEENWH are predominantly occupational health (worker) oriented. ASEAN-OSHNET and PEROSH are highly multidisciplinary, covering safety, health, work environment, work organization, and psychosocial orientation.

1.3.5 Geographical coverage

Typically, the analysed networks cover 10–15 countries, with collective populations varying between 120 million for SEENWH and 633 million for ASEAN-OSHNET. The geographical location naturally influences activity profiles – for example, communicable diseases and heat stress in tropical regions, and the hazards of cold work in northern areas.

1.3.6 Membership and stakeholders

Membership structures also vary. The IAPRP membership base is constituted of social security organizations, whereas ALASEHT brings together non-profit organizations of OSH professionals and ASEAN-OSHNET members are directly or indirectly linked to national OSH authorities. The BSN, PEROSH, and SEENWH are closely related to national OSH or occupational health institutes. About a third of PEROSH members are, however, research institutes governed by national social insurance. As all are professionally and research oriented, social partners do not directly participate in the governance of these networks.

1.3.7 Organization, focal point, and institutional support

International networking needs international structure and national organization, which vary greatly. The degree of institutionalization is different in different networks. ASEAN-OSHNET and
PEROSH are strongly institutionalized; the IAPRP and ALASEHT are also organized into association-like structures, but the BSN and SEENWH are less institutional and very much dependent on the voluntary activities of individual experts, steered and supported by the national institutes. This has an impact on operational activities and, for example, financing and resources.

The degree of regulation (or codification) varies: ASEAN-OSHNET is based on an inter-governmental memorandum of understanding between national OSH Authorities of ASEAN member States; ALASEHT and IAPRP are both founded on an agreement to cooperate and are self-regulated like most associations; PEROSH is a network of public or semi-public research institutes founded on statutes and inter-institutional agreement; and the two other networks work on a less regulated model – the BSN based on recommendations of the WHO/Europe Consultation on 6 and 7 November 1995, Copenhagen, and the SEENWH on the WHO/Europe Consultation recommendations on 18 and 19 December 2006, Skopje, FYR Macedonia.

1.3.8 Leadership and coordination

All of the networks are steered by a collective body, general assembly, annual meeting of members, coordinating board, or steering committee, reflecting a “flat and horizontal” organization, typical for networks. Operational responsibility is assigned to a president, secretary-general, chairman, or coordinator, and is supported by a secretariat. Operational management may rotate in two- or three-year cycles or be assigned for longer periods. Usually, the coordination of the scientific activities is assigned to a special coordinator and a scientific advisory committee.

1.3.9 Resources: human, network technology, and financing

The formal status has an impact on operational activities and, for example, financing and resources. Networks founded through formal agreements by governmental or other public bodies (ASEAN-OSH, IAPRP, PEROSH) have more stable financing than the less formal networks (ALASEHT, BSN, SEENWH). Specially assigned resources and finances (budget) are available for IAPRP, ASEAN-OSHNET, and PEROSH (member institutes’ contributions) and to some extent ALASEHT, but the BSN and SEENWH work with no stable financial basis (temporary project funding and some funding and in-kind contributions from the members). In all of the analysed networks the member institutions were the key contributors for substantive inputs and resources, although with different models.

1.3.10 Strategy and programmes

All of the networks have drawn up and periodically updated strategies and action programmes for the implementation of their missions and practical objectives. The content of the strategies varies according to the type of network: some focus strongly on supporting the policy objectives of the government authorities (ASEAN-OSHNET); others orientate more towards their research priorities (PEROSH); and the majority contribute to both public needs, training, and research. Depending
on the formal status of the network, some – for example, ASEAN-OSHNET and PERO SH – have a strong national and regional policy impact.

The priorities and content of activities are chosen on the basis of government policy, strategy, or public needs; on the national or subregional OSH strategies; institutional strategies; and on the basis of future foresight.

**1.3.11 Functions, activities, and knowledge management**

The key prerequisite for networking is the establishment of a well-functioning Internet platform and website, which is found in almost all networks. The structure and content of the websites varies: typically, they describe the network mission, strategy, and programmes, and communicate network projects, programmes, and events. Some have daily interaction channels. Member country OSH or OH profiles and institutions’ profiles, or both, are presented, and some websites have project descriptions, publications, and reports, even special data banks and repositories. Strongly institutionalized networks with better resources can provide their members with notable support through their Web data services. A most valuable asset in networking is the information made available from all individual member institutions, keeping the members up-to-date with developments and outputs from their peers. Sharing institutions’ research results, strategy documents, and planning materials provides peer-to-peer support and stimulus.

While the exchange of information is a core activity for all of the networks, their research, training, and advisory activities have different levels of priority in the strategies and programmes, due to their different missions and orientation. The SEENWH is unique with its South-East European Workplace Academy (SEEWA), which was established as an advanced expert training activity. The BSN works closely with the Nordic NIVA Institute, and other networks provide training for their constituents.

Research is one of the key activities in most networks, though with different levels of priority. PERO SH is predominantly a research network and has established a systematic method for the identification of the most important priorities for European OSH research. A limited number of projects, fewer than 10, are carried out at the same time, and the responsibility for coordination of each project is assigned to a single member institution, with participation by other members. It is a rule that every member must participate at least in two projects. Some networks, such as ALASEHT and ASEAN-OSHNET, consider the governmental strategic objectives in their priority setting. All the other networks carry out research and development projects in parallel with several other activities.

Most of the networks publish a newsletter for internal information within the network, as well as for external communication. E-publications or printed newsletters, or both, may be available.

**1.3.12 Outputs, quality, quantity, overall achievements**

Some of the networks, such as ASEAN-OSHNET and PERO SH, have well-established follow-up systems for the evaluation of their activities, outputs, and effects. Some self-evaluations have
also been carried out. So far, systematic evaluations by external evaluators are not available. Depending on structure, status, institutionalization, and resources, the networks report different numbers of outputs on their websites. Constant outputs include regular meetings, training events, good practice guidelines, publications, and research reports. The BSN has worked hard to improve registration and statistics for occupational accidents and diseases. The IAPRP, ALASEHT, and ASEAN-OSHNET have produced good practice guidelines, and ASEAN-OSHNET has also produced standards. In general, the networks report several achievements, which would be impossible for an individual country or institution to do alone, thus confirming the added value of networking.

1.4 Discussion

In addition to about 20 OSH research and information networks identified by the ILO global survey, numerous other OSH research and information networks exist nationally, regionally, and globally. They include the WHO collaborating centres for occupational health (global and regional networks), the EU-OSHA network, and several more specific research or training and education networks – for example, the European Network Education and Training Occupational Safety and Health (ENETOSH). The objective of this project was to study in more detail a sample of well-established regional OSH networks in order to understand the critical characteristics and success factors behind their generation, organization, functions, and achievements. The project covered six case networks, selected from all continents and representing both the industrialized and developing world. The aim was to analyse networks in different subregions on four continents. The analysis recognized numerous generic structural, functional, and substantive similarities, regardless of differences in the nature of the networks. Several differences were also recognized, related to the formal status, region, level of institutionalization, and financing of networks (Figure 2).

Figure 2. Arbitrary comparison of analysed networks by 12 parameters.
The survey was qualitative and descriptive. The quantitative analysis was not found possible within the available time and because of substantial challenges in getting that data from the performance of the networks.

It would be possible to make a quantitative statistical analysis on networks’ internal and external communication, and the connectivity and concentration, by using the available statistical network analysis methods. Such a project may be justified in the future.

1.5 Summary

The networks have several similarities, but also great differences, particularly in the constitutional basis and resources, degree of codification, and in mission content. On the basis of the analysis, generic features of effective networking can be listed, as shown in Box 1. The list may be expanded with further technical developments and as experience is accumulated. The overall conclusion reveals a positive impact, increased contacts, more effective exchange of information and experiences, learning from peers, and increased productivity through networking. A more detailed cross-cutting analysis of the surveyed networks is presented in Annex 1.

Much still remains to be developed. The use of modern communication technologies — for both finding information, storing it in the network depositories, and processing it for the use of members — can still be substantially improved. Opening to external users could also be expanded.

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**Box 1. Characteristics of successful professional network**

- Collectively approved mission, policy, strategy, objectives, and targets, aiming at some kind of utility or (professional) productivity.
- Limited number of members sharing the same vision (social capital), or membership determined by special criteria such as research area or institutional or professional status.
- Practice of inviting members to draw up interest, competence, or activity profiles.
- Clear rules regarding responsibilities, conditions of operation, sharing of activities, and division of work.
- Well-identified coordinating body and focal point for speaking in the collective voice of the network.
- Formal status and representative role in relation to other professional networks.
- Coordinator or “leader” with competencies and capacities to lead the network’s activities.
- Certain degree of institutional support (for example, communication technologies), maintenance of websites, ICT platforms, data depositories, and financial resources for implementation of the above.
- Genuine interest in outcome-orientation by carrying out collectively agreed-on functions, special projects, training and education events, organization of conferences, and publishing of research results.
- Annual meetings in vivo and publishing of a network newsletter or e-newsletter are considered important instruments for both cohesion and the functions of the network.
- Growing emphasis given to behavioural and ethical principles in networking.
References


ANNEX 1.
Summary of the analysis according to the descriptors

All networks were analysed by using 12 different parameters considered to be the key features of efficient networks. A summary of the most typical findings is presented.

<table>
<thead>
<tr>
<th>Descriptor</th>
<th>ALASEHT</th>
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<td>Mission and policy</td>
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<td>Formal status</td>
<td>Association of OSH professional organizations with non-profit status.</td>
<td>Network of public authorities (Memorandum of understanding, between Member States’ OSH authorities).</td>
<td>Network of OSH authorities, public institutes and some universities.</td>
<td>Legally constituted association of national social security organizations (agreement).</td>
<td>Network of public or semi-public research institutes (statutes and agreement).</td>
<td>Network of public health authorities and occ. health institutes.</td>
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<td>Membership</td>
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<td>Governmental OSH authorities.</td>
<td>OSH/OH authorities, institutes and some universities.</td>
<td>National social security organizations.</td>
<td>OSH/OH research institutes.</td>
<td>OSH/OH authorities, OH institutes.</td>
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<td><strong>Financing and resources</strong></td>
<td>Congress income, other (project) sources.</td>
<td>Cost sharing by members, projects’ self-financing.</td>
<td>No specified funding source; member institutes (in-kind). Coordinating institute covers the costs of the Secretariat and website (in-kind).</td>
<td>Member fees (main source), Congress and event income. Savings from projects.</td>
<td>Cost-sharing by members. EU project funding.</td>
<td>No specified funding. WHO/ Europe support. (BIA). Member institutes (in-kind).</td>
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<td>b) Providing BSN website with data depositories.</td>
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<td>b) Sustainable employability to prolong working life.</td>
<td>b) Protecting and promoting health at the workplace.</td>
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<td>c) Providing national OH and OSH profiles.</td>
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<td>c) Disability prevention and reintegration.</td>
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<td>e) New technologies as a field of action for OSH.</td>
<td>e) Incorporating workers’ health into other policies.</td>
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<td>f) Occupational risks related to engineered nano-materials (ENMs).</td>
<td>f) Partnering with WHO/Europe and the EU-OSHA.</td>
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<td>g) Safety culture to prevent occupational accidents.</td>
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| Functions and activities | a) Network meetings.  
b) JOLASEHT (Latin American OSH Days - biennial).  
c) Latin American Accident Prevention Day (annually).  
d) Organization of expert meetings on OSH.  
e) Recognition awards to businesses. | a) Multinational OSH initiatives.  
b) Technical cooperation.  
c) Cooperation with external partners for research information:  
- share experiences on accident risk prevention, hygiene, and occupational health;  
- exchange of knowledge on laws and norms, and their amendments;  
- facilitate training and education;  
- promote technical studies and scientific research;  
- issuing specialized publications;  
- promoting the exchange of information; | a) Network meetings, other thematic meetings.  
b) Research projects.  
c) Maintaining and developing websites and web information.  
d) Provision of and maintaining country OH profiles.  
e) Maintaining OH data repositories.  
f) Training experts. | a) Organization of subregional meetings.  
b) Research projects.  
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b) PEROSH Newsletter www.per.osh.eu/newsletter  
c) PEROSH projects (eight ongoing, nine completed).  
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d) Supporting EU Directive transposition.  
e) Supporting BOHS (basic occupational health services) implementation. |
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<td>− disseminating the conclusions and recommendations of international congresses organized by ALASEHT with WHO/OMS, ILO, UNESCO, and governments; and&lt;br&gt;− promote the creation of institutions for accident risk prevention.</td>
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<td>Knowledge management</td>
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<td>a) Website (in Spanish).&lt;br&gt;b) Several ALASEHT documents in websites of member institutions.&lt;br&gt;c) YouTube videos on ALASEHT activities.</td>
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<td>a) BSN website: <a href="http://www.balticsea">www.balticsea</a> OSH.net&lt;br&gt;b) Country profiles.&lt;br&gt;c) Data depositories.&lt;br&gt;d) Development reporting and statistics on occupational accidents and diseases.</td>
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<td>a) ASEAN-OSHNET website: hwww. asean-osh.net&lt;br&gt;b) Production of national OSH profiles.</td>
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<td>a) Website <a href="http://www.iaprp.org/">http://www.iaprp.org/</a> &lt;br&gt;b) Establishment of OSH data and statistics observatories.</td>
<td>a) PEROSH website.&lt;br&gt;b) Databanks:&lt;br&gt;− Nano databank;&lt;br&gt;− Nano exposure and contextual database (NECID);&lt;br&gt;− PEROSH systematic reviews clearing house;&lt;br&gt;− National institutes’ publication databases.</td>
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<td><strong>Outputs and achievements</strong></td>
<td>a) Latin American glossary of terms.</td>
<td>a) ASEAN-OSHNET occupational safety and health management systems (OSHMS).</td>
<td>a) Organization of series of subregional thematic meetings.</td>
<td>a) A practical guidance for assessments of sedentary behaviour at work; A. Holtermann et al. 2017.</td>
<td>a) 12 SEENWH annual meetings.</td>
<td>a) 12 SEENWH annual meetings.</td>
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<td>b) Practical guide to prevent the consumption of alcohol and illicit drugs.</td>
<td>b) ASEAN-OSHNET Code of Integrity for Occupational Safety and Health Inspections.</td>
<td>b) Creation of training programmes and centres.</td>
<td>b) Development of a nano-exposure and contextual information database (NECID); Pelzer et al. 2014.</td>
<td>b) Symposia on OH organized in connection with annual meetings.</td>
<td>b) Symposia on OH organized in connection with annual meetings.</td>
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<td>c) A series of “ALASEHT models” with a Latin American scope:</td>
<td>c) ASEAN Guidelines for Occupational Safety and Health.</td>
<td>c) Establishment of observatories, and development of guidelines.</td>
<td>c) Concept of Integration of Ambient Intelligence Solutions for Safety and Health Towards Smart Factories; Lars Adolph 2017.</td>
<td>c) The South-East European Workplace Academy (SEEWA) founded and training activities started.</td>
<td>c) The South-East European Workplace Academy (SEEWA) founded and training activities started.</td>
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<td>− analysis of costs and losses caused by occupational accidents and diseases;</td>
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<td>c) Reliable occupational accident registration; Eikrem &amp; Samant.</td>
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<td>d) Severe underreporting of work injuries; Kurppa 2015.</td>
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<td>e) BSN contribution on the EC occupational disease study 2016.</td>
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<td>– education and training of children in risk prevention and accident prevention;</td>
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<td>h) Road transport profile of the transport sector in St Petersburg; Kurppa et al. 2015.</td>
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<td>f) Priority setting for future European OSH research; Van den Heuvel et al. 2014</td>
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<td>– training safety and self-care fundamentals at school;</td>
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<td>g) Towards a nano-specific approach for risk assessment; Dekkers S. et al. 2016.</td>
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<td>– brochures and guidelines on safety.</td>
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ALASEHT
Asociación Latinoamericana de Seguridad e Higiene en el Trabajo (Latin American Association of Safety and Hygiene at Work)

(http://www.alaseht.com)
August 2018

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References

Annex ALASEHT member organizations

Active members (by alphabetical order of country name)

ARGENTINA Instituto Argentino de Seguridad
BRAZIL Associação Brasileira para Prevenção de Acidentes
CHILE Consejo Nacional de Seguridad de Chile
COLOMBIA Consejo Colombiano de Seguridad
ECUADOR Sociedad Ecuatoriana de Seguridad, Salud Ocupacional y Gestión Ambiental
MEXICO Asociación Interdisciplinaria de Salud Ocupacional e Higiene de México, A.C.
PANAMA Consejo de Seguridad, Salud y Medio Ambiente de Panamá
VENEZUELA Sociedad de Ingenieros y Técnicos de Seguridad, Higiene y Ambiente de Venezuela

Corresponding members (by alphabetical order of country name)

COSTA RICA Asociación Costarricense de Ingeniería en Seguridad Laboral e Higiene Ambiental
PARAGUAY Asociación de Profesionales de Higiene y Seguridad de Paraguay
PERU Asociación Peruana de Prevencionistas de Riesgos
URUGUAY Centro de Estudios de Seguridad

Adherent Members

Fundación MAPFRE, de España
International Section of the ISSA for Electricity, Gas and Water
### Abbreviations and acronyms

<table>
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<tr>
<th>Abbreviation</th>
<th>Description</th>
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| ABPA         | Asociación Brasiler 
| ACISLHA      | Asociación Costarricense de Ingeniería en Seguridad Laboral e Higiene Ambiental |
| AISOHMEX     | Asociación Interdisciplinaria de Salud Ocupacional e Higiene de México |
| ALASEHT      | Asociación Latinoamericana de Seguridad e Higiene en el Trabajo (Latin American Association of Safety and Health at Work) |
| APDR         | Asociación Peruana de Prevencionistas de Riesgos |
| APHSP        | Asociación de Profesionales de Higiene y Seguridad de Paraguay |
| AUS          | Asociación Uruguaya de Seguridad |
| CCS          | Consejo Colombiano de Seguridad (Colombian Safety Council) |
| CNS          | Consejo Nacional de Seguridad de Chile |
| COSSMAP      | Consejo de Salud, Seguridad y Medio Ambiente de Panamá |
| CSE          | Centro de Estudios de Seguridad |
| DWCP         | Decent Work Country Programmes |
| IAS          | Instituto Argentino de Seguridad (Argentinian Institute of Safety) |
| ILO          | International Labour Organization |
| ISSA         | International Social Security Association |
| JOLASEHT     | Jornada Latinoamericana de Seguridad e Higiene en el Trabajo |
| OH           | occupational health |
| OSH          | occupational safety and health |
| SESO         | Sociedad Ecuatoriana de Seguridad, Salud Ocupacional y Gestión Ambiental |
| SOITSHA      | Sociedad de Ingenieros y Técnicos de Seguridad, Higiene y Ambiente de Venezuela |
| UNESCO       | United Nations Educational, Scientific and Cultural Organization |
| WHO          | World Health Organization |
The profile of the Asociación Latinoamericana de Seguridad e Higiene en el Trabajo (ALASEHT) is published as an appendix to the ILO Working Paper presenting the results of the multiple case-study analysis of six regional occupational safety and health (OSH) networks. The study was initiated in order to inform the modernization of the ILO portfolio of activities in OSH knowledge and information. It benefited from financial support provided under the Partnership Agreement between the Government of South Korea and the ILO 2015-2017 (GLO/15/50/ROK).

The study covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. The results allow a better understanding of how and why OSH agencies, institutions, organizations and experts collaborate with one another. They provide invaluable descriptive information covering the diversity of existing collaborative arrangements and key characteristics of productive regional OSH networks. They highlight similarities and differences in ways of organizing collaboration in OSH and provide new knowledge to support international cooperation which has always been and remains a key role of the ILO. They can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of the network.

This profile was produced as part of the work programme of the ILO LABADMIN/OSH Branch with initial contributions from Eng. Renán Alfonso Rojas Gutiérrez and Ms Giuliana De Rosa, as well as Professor Jorma Rantanen who prepared the multiple case-study analysis. Acknowledgements extend to the members of ALASEHT who provided comments and engaged prospective discussions with a view of developing a joint development cooperation project to enhance the capacity of ALASEHT to become a key ILO partner in prevention. To all we wish to express gratitude for their interest and support.

Claude Donald Loiselle
Coordinator – OSH network, knowledge and information management
Labour Administration, Labour Inspection and
Occupational Safety and Health Branch (LABADMIN/OSH)
International Labour Organization
1 Summary

The Asociación Latinoamericana de Seguridad e Higiene en el Trabajo (Latin American Association of Safety and Health at Work) or ALASEHT, was founded on 25 November 1977. It is a non-profit association bringing together national organizations of safety and health experts from Latin America, including occupational hygienists, safety engineers, experts in occupational health, and experts in other OSH professions. The association aims to improve safety and health at work, prevention of accidents at work and in traffic, and protection of the environment through knowledge and information sharing.

The ALASEHT currently counts 14 member organizations, of which 12 from Latin America on the principle of a maximum of one member per country. Membership is divided into three categories; the active members from eight Latin American countries; four correspondent members and two adherent members based in Europe. The different categories have different rights and powers in ALASEHT decision-making.

All members can participate in the General Assembly which is the supreme decision-making body and primary means of coordination. It decides on strategic and principal issues such as amendments to the statutes and regulations, membership, strategy and programme, and financing and external and international relations.

Practical management and daily activities are entrusted to the president and its secretariat held on a rotating basis every other year. The president chairs the annual meetings and represents the association internationally while member organizations represent ALASEHT in their respective country. The president oversees activities of ALASEHT that are undertaken in a collaborative manner by the member organizations and experts. The ALASEHT has increasingly transformed its activities to e-networking.

Key activities of the network are:

- organizing the academic conference day held every two years, called Jornada Latinoamericana de Seguridad e Higiene en el Trabajo (JOLASEHT), and the Latin American Safety and Health Day;
- generating, exchanging, and disseminating OSH information, including guidelines for OSH and good OSH practices (ALASEHT Model);
- providing and developing training for OSH practitioners, and granting regional accreditation;
- serving government agencies, public-sector entities, enterprises, and communities with expert advice;
- collaborating nationally and internationally.

ALASEHT has a long history as a network, and many of its activities have made an impact on safety and health at work, not only in the member countries, but also in the region as a whole, and globally.
2 Introduction

The Asociación Latinoamericana de Seguridad e Higiene en el Trabajo (Latin American Association of Safety and Health at Work) or ALASEHT, is a non-profit association bringing together national organizations of safety and health experts from Latin America.

ALASEHT was founded on 25 November 1977 with the signing of the “Buenos Aires Acts” recognizing the association as a private, non-profit association for the exchange of knowledge and information between enterprises, organizations, and specialists in the Latin American region, with special participation of organizations from other countries and international organizations.

It was created on the occasion of the Third River Plate Congress for the Prevention of Professional Risks organized in Buenos Aires which is known to be the 1st Latin American conference on safety and hygiene at work. That conference was convened with contributions from the Instituto Argentino de Seguridad (IAS) and the Asociación Uruguaya de Seguridad (AUS). Its aim was to promote collaboration among Latin American OSH specialists. Participants mainly came from Argentina and Uruguay, and representatives from Chile, Brazil, Bolivia, and Ecuador also joined.

3 Formal status and constitution

The current ALASEHT statutes and general regulations were adopted in October 2007 in Santiago de Chile. The document titled “Estatuto y Reglamentos” are extensively developed and detailed. Together they define the association’s governance structure and modalities, its fundamental mission and objectives. The ALASEHT is not legally constituted in any given jurisdiction.

The initial founding documents of ALASEHT dating from 1977 were renewed in 1993 when the General Assembly approved the new statutes in Bogota, Colombia. New general regulations were annexed to the renewed statutes in 2007 as some policies of the former “general regulations” were outdated.

The general regulations define and specify characteristics, functions, and procedures that have been considered the most important for clarifying the operations of the association. Some are formal while others refer to procedures for the execution of specific projects or activities. Key elements of the statutes are further complemented by the general regulations.

4 Mission, policy, and strategy

The ALASEHT mission statement translates from its original version in Spanish into the following:

- seek knowledge, exchange, and regular action facilitating the promotion and development of safety through the prevention of accident risks and in the areas of occupational safety and health, occupational health, and environmental preservation;
• maintain and improve the quality of life in Latin American countries; and
• improve productivity, competitiveness, and sustainable development in Latin American countries.

The mission was first formulated in the “Buenos Aires Acts”, when the association was founded. The 1993 update of the Statute included topics that were not foreseen at the time of its foundation, thus reflecting the evolution of the scope of ALASEHT activities and objectives.

Twelve strategic objectives were set for guidance in 2007:

1. Promote the development of multinational initiatives for accident risk prevention in the member countries.
2. Promote technical cooperation programmes between members and specialized institutions in Latin American countries not represented in ALASEHT.
3. Cooperate with any initiatives on accident risk prevention, to apply scientific and technological knowledge for improvement of the standard of living in all Latin American countries.
4. Promote the sharing of experiences between specialized agencies and professionals, to seek solutions to problems in accident risk prevention, hygiene, and occupational health in Latin American countries.
5. Establish the exchange of knowledge on legal provisions and standards regarding accident prevention and occupational health.
6. Promote stipulation and modification of legislation and norms for prevention of occupational health hazards and accidents of any origin, as well as for environmental protection, by defining responsibilities and forms for making them effective.
7. Facilitate the training and education of specialized professionals needed in Latin American countries to promote accident prevention.
8. Promote technical studies and scientific research on OSH, and disseminate the results.
9. Encourage the production of specialized publications in the official languages of ALASEHT, allowing specialists to learn about up-to-date ideas and techniques on accident and risk prevention.
10. Promote the exchange of highly qualified professionals between different member countries, so that they will be able to provide technical assistance in any of them when required.
11. Disseminate the conclusions and recommendations of the assemblies, conferences, and other international events organized by ALASEHT with international organizations –WHO, ILO, the United Nations Educational, Scientific and Cultural Organization (UNESCO), and others – and governments, so that, to the extent possible, they will be taken into account in their respective legislation.
12. Promote the creation of non-profit entities – whether public, private, or mixed – specialized in accident risk prevention, in the Latin American countries where there are no institutions linked to ALASEHT.

ALASEHT has drawn up detailed guidelines for strategic planning, covering all the relevant aspects of the strategy. As the presidency, headquarters and secretariat rotate every two years,
these guidelines played an important role in standardizing organizational processes as a means to ensure continuity in the implementation of the strategic plan. The strategy is discussed, approved, and its implementation is followed-up by the General Assembly.

5 Structure, governance, and coordination

5.1 Structure, headquarters, official languages, logo

In principle, the president and members are supported by the secretariat and the office, together defined as headquarters. The headquarters are moved every two years on a rotating basis, corresponding to the location of the active member holding the presidency.

The official languages of ALASEHT are Spanish and Portuguese.

The ALASEHT logo is a green cross, evoking safety and risk prevention, framed within a square with a series of green horizontal stripes outlining Latin America in white.

5.2 Governance

The governance of ALASEHT is hierarchical and based on two governing bodies: the General Assembly and the presidency.

5.2.1 General Assembly

The General Assembly is the main decision-making body. It is constituted by representatives of all categories of members. The General Assembly is convened annually. The presidents or delegates of member organizations usually attend. GA meetings are presided over by whoever exercises the ALASEHT presidency. GA meetings may also be convened extraordinarily when requested by at least half plus one active members.

Traditionally, General Assembly meetings are convened in-person every other year when coinciding with the JOLASEHT. However, it is foreseen that, in justified circumstances, the presidency may call an ordinary or extraordinary General Assembly not-in-person, in which case all members must participate by expressing their opinions, formulating proposals, discussing, and taking decisions via electronic means. Nonetheless the presidency always tries to convene in-person meetings for
all assemblies to the extent possible, taking into consideration practical aspects, availability of participants and on-going interactions among the different member organizations.

**Functions of the General Assembly**

Article V of the ALASEHT statutes specifies ten functions of the General Assembly. These functions must be interpreted as a general framework guiding the day-to-day operations of the association. Their unofficial transcript below with accompanying notes provide an overview of their practical significance.

*a) Authorize the entry of new members to the association, in accordance with the provisions of the statutes*

This is one of the central points of every General Assembly meeting. A follow-up of the submissions for entry is done by verifying that the requirements are fulfilled. Also, the degree of participation and fulfilment of the member entities for each category is checked against the rights and obligations detailed in the statutes.

It is also customary at this point in the agenda to review the work of the presidency and of the members regarding identifying and inviting associations from countries not yet represented in ALASEHT. This is how eight additional organizations have joined the four founding members.

*b) Modify the statutes and adopt the regulations that are deemed necessary for the fulfilment of ALASEHT’s objectives and administration of the association*

This function is carefully developed, seeking to preserve the philosophy and operational framework of the association in order to ensure its stability. The latest revision proposed by Consejo Nacional de Seguridad de Chile (CNS) with suggestions from other members was approved in 2007.

*c) Determine the plan of action of ALASEHT for the biennium, including monitoring progress and evaluation of specific programs*

ALASEHT has an established work plan that is reviewed annually during the General Assembly. This work plan mainly consists of approved projects that are implemented by all members. They report on the work accomplished by their organization during the year and decisions are made about the relevance and the continuation of each programme or activity.

In 2009 the General Assembly would have considered a document proposed by one of its member organization, the Consejo Colombiano de Seguridad, to use as a framework for strategic planning. It is believed that updating that document would provide strategic guidance for the association, and a good basis for strengthening ALASEHT.

*d) Study, approve, reject, or modify presentations, plans, and programmes proposed by members*
This is a key item on the agenda of every meeting of the GA. In practice, a proposal to include a new topic or project into the work plan is presented by a member on the basis of identified needs or good practices for risk management in its home country. The proposal is first submitted to the presidency for discussion at the General Assembly. The relevance, needs and potential benefits of introducing the new idea are debated among members. Typically, the members that first proposed an initiative take leadership for its implementation.

In principle, upon approval by the GA, all members are required to promote the new initiative and work towards its achievement in their country. The president monitors the implementation process in between annual meetings where members are asked to report on progress. In practice, it is understood that not all implementation processes are monitored and the impact of efforts remain undocumented.

**e) Set the amount and the form of payment of contributions from partners**

ALASEHT does not have fixed contributions to support any programme or activity. Therefore, there is no established modality for payment (annual fees or charges). In some cases, the project manager establishes the cost for an activity, and the amount is collected during the General Assembly. For example, the plaques awarded with the “ALASEHT distinction” are usually designed and provided by CNS Chile, and each year the cost is shared between members. Traditionally, the costs of a project are assumed by the entity that proposes it, or by the entity that agrees to participate in it. As there are no fixed membership fees, there is no need for subsidies aiming at supporting member associations in countries subject to a particular economic situation.

**f) Evaluate the plans and programmes under development, and degree of compliance with decisions of the General Assembly.**

ALASEHT does not have a formal control mechanism in place for programmes under development nor undertake their formal evaluation. Instead, each member reports on milestones achieved and provides information explaining the results during the General Assembly where discussions are held on the continuity of a project, and decide whether it should be turned into a regular (permanent) activity, or be considered completed. In the latter case, it is also decided what to do with the materials.

**g) Study and approve the programme and plan presented by the organizer of JOLASEHT to be held the following year**

JOLASEHT is a regional conference on occupational health and safety organized on a biennial basis by an ALASEHT member organization under the oversight of the General Assembly (see section on activities). This is a key function carried out during the annual meeting of the GA held the year in between each JOLASEHT event (also called mid-term GA). The members discuss technical content, methodology, and other organizational aspects, and authorize the organizer of the event to move forward with the plan.

**h) Review the application and operation of the ALASEHT administrative filing.**
The president presents the report on the management of the previous year to the General Assembly, including the financial aspects and the coverage of costs.

i) **Determine the awarding of distinctions.**

This is a recurrent function. Each member organization nominates its candidates for distinctions for the decision by the General Assembly. In practice, determining the awarding really is a formality as applications submitted by members for their country are, by tradition, always respected and endorsed by others. Distinctions are awarded at the opening ceremony of the JOLASEHT.

j) **Designate commissions to undertake specific tasks assigned by the General Assembly.**

These commissions have been designated on a few occasions, for example in 2007 with members from Mexico, Colombia, Chile, and Spain to bolster international relations, and in 2009 to establish contact with the ILO with the participation of Chile and Colombia. Likewise, in 2009 a commission involving members from Argentina and Chile was designated to initiate the development of an ALASEHT curriculum.

**Convocation and quorum**

The invitation to the General Assembly, complete with agenda and background information on subject matters to be discussed, must be sent by the president to all members at least 60 days before the date set for the meeting. Some restrictions apply for General Assembly e-meetings. For instance the acceptance of new members, withdrawal of membership, and changes to statutes and regulations can only be decided during in-person meetings.

The quorum for decisions in a General Assembly is half plus one (simple majority) of the active members. In practice most members attend GA meetings regularly.

Decisions are made on a consensual basis as a matter of principle, and the president is expected to facilitate consensus building throughout the decision-making process. However, if this is not achieved, an absolute simple majority of members present in the meeting is required for decision. Decisions on certain matters – such as changes to statutes – are governed by specific rules defined in Chapter 2 of the statutes.

**5.2.2 ALASEHT presidency**

The president of ALASEHT is the Head of the member organization that has organized the biennial Latin American OSH Conference (JOLASEHT), which is a core ALASEHT activity and a most prominent OSH event in the region. In principle he or she leads the association for two years, until the presidency is passed to the active member that will have organized the following JOLASEHT.

The presidency is handed over at the beginning of the General Assembly which must be held on the day preceding the official opening of the JOLASEHT. Thus, the presidency was handed
over in June 2017 from the Instituto Argentino de Seguridad (IAS) to the Consejo Colombiano de Seguridad (CCS) in Bogotá.

**Duties of the president**

The president represents ALASEHT and is responsible for official relations with international organizations, authorities and industrial actors, in accordance with the association’s objectives listed in the statutes.

The president is expected to carry out the following duties routinely, and report to the General Assembly by providing details:

- Chair the General Assembly and take responsibility for the implementation of its decisions.
- Communicate relevant information about agreements, decisions and calendar of activities adopted by the General Assembly to the governments of Latin American countries that do not count an ALASEHT member organization.
- Inform relevant international organizations as well as private and non-profit organizations pursuing similar objectives to those of ALASEHT about agreements, decisions and calendar of activities, including the dissemination of the conclusions and recommendations from JOLASEHT.

The president is in charge of managing the association and verifying that the plans, programs and activities agreed upon by the General Assembly are carried out in a timely and adequate manner. In order to do this, the president must maintain permanent communication with all the members. In order to carry out his or her functions, the president may designate a secretariat, with the personnel it deems appropriate. The case being, the secretariat is usually financed with resources per applicable internal regulations, such as the resources from the JOLASEHT and other initiatives implemented during the tenure.

### 6 Membership

Three categories of members currently compose ALASEHT: active, correspondent and adherent members. A fourth category, observers, is currently not in use as no member organization qualifies.

The principle of one member per country was agreed upon from the foundation of ALASEHT. It was a choice made to prevent conflicts within the association between different organizations of a same country. In particular, disputes over the representation of the country in the General Assembly, the organization and leadership of the JOLASEHT and representation functions at the national level could have become bones of contention. This principle has been challenged sometimes, but the decision has always been to maintain the membership system as it is.

Active members are national non-profit entities, whose basic objective is the prevention of risks, representing each of the Latin American countries. In order to be admitted as an active
member, the entity must send a written request to the president, accompanied by a certified copy of its legal status and by-laws. All active members have the right to speak and vote in the assemblies.

All active and correspondent member organizations are non-profit organizations of public interest, bringing together professionals from different disciplines who work in the field of prevention of occupational and environmental risks, and are willing to share their experience and knowledge within the association. Adherent members are primarily partner organizations.

6.1 Active members

All active members assume a joint commitment to meet the general and operational objectives and statutory provisions. In addition, when appropriate, they hold the presidency and provide resources to fulfil the functions and objectives established for the position.

Current active members by alphabetical order of country name (details in the Annex):

- Instituto Argentino de Seguridad (IAS), Argentina.
- Asociación Brasilera para la Prevención de Accidentes (ABPA), Brazil.
- Consejo Colombiano de Seguridad (CCS), Colombia.
- Consejo Nacional de Seguridad de Chile (CNS), Chile.
- Sociedad Ecuatoriana de Seguridad, Salud Ocupacional y Gestión Ambiental (SESO), Ecuador.
- Asociación Interdisciplinaria de Salud Ocupacional e Higiene de México (AISOHMEX), Mexico.
- Consejo de Salud, Seguridad Y Medio Ambiente de Panamá (COSSMAP), Panama.
- Sociedad de Ingenieros y Técnicos de Seguridad, Higiene y Ambiente de Venezuela (SOITSHA), Venezuela.

6.2 Correspondent members

The correspondent category was established to encourage the creation of institutions similar to the already constituted active members. Correspondent members are non-profit national entities dealing with specific subjects in risk prevention or occupational health from Latin American countries that are not recognized as active members. They may be private, public, or mixed public-private entities. They apply to join ALASEHT in a different category from the active members. They may, and should, participate in all the activities defined in the statutes and general regulations. They do not hold the right to vote but have the right to speak in assemblies. It is possible for correspondent members to become active members provided they meet the requirements for membership in that specific category.
Current correspondent members by alphabetical order of country name:

- Asociación Costarricense de Ingeniería en Seguridad Laboral e Higiene Ambiental (ACISLHA), Costa Rica.
- Asociación de Profesionales de Higiene y Seguridad de Paraguay (APHSP), Paraguay.
- Asociación Peruana de Prevencionistas de Riesgos (APDR), Peru.
- Centro de Estudios de Seguridad (CSE), Uruguay.

6.3 Adherent members

Adherent members are non-profit entities that are not based in the Latin American region, but which share the same objectives as ALASEHT. To join the association under this category, an entity must make a similar request as that required from active members, and also commit to meet the general and operational objectives. Adherent members may, and should, participate in all the activities stipulated in the statutes and general regulations. They have the right to speak but do not hold the right to vote in the General Assembly meetings.

At present, two organizations based in Europe have joined ALASEHT as adherent members, recognizing its scope and influence in the Latin American context and beyond.

6.4 Rights of members

All member organizations have the right to:

a) take part in General Assembly meetings according to the regulations established for each category (in particular, the right to vote or to speak, or both);

b) propose the development of activities and the adoption of resolutions aiming to fulfil the association’s operational objectives;

c) receive from ALASEHT all the information that members deem useful for the achievement of their objectives; and

d) participate in the JOLASEHT and present reports on their activities.

In addition, active and correspondent members hold the right to represent ALASEHT in their respective country.

6.5 Members’ general responsibilities

All ALASEHT members – within the framework of its missions, functions, and objectives – must actively participate in the development of actions that seek to spread technical information, proposals on legislation and regulations, research information, survey results, and training
developments, among institutions, organizations, companies, and sectors interested in accident prevention in their home countries, and which ALASEHT decides to communicate or study.

They also have to inform the government authorities, at the appropriate level, about the conclusions and recommendations from the JOLASEHT, as well as about decisions of the ALASEHT governing bodies that are considered relevant to contribute to the development of safety and health at work.

They are also required to:

a) respect the ALASEHT statutes, its general regulations, and the resolutions, agreements, and conclusions legitimately adopted by its bodies;

b) commit their efforts to achieving the objectives of ALASEHT, by developing the means of actions required; and

c) provide information requested by ALASEHT.

6.6 Duties of active members

In addition to the general responsibilities, the active members also have the following specific duties:

a) represent ALASEHT in their home country;

b) organize, in their home country, the JOLASEHT as determined by decision of the General Assembly; and

c) contribute to the association’s expenditures according to the conditions determined by the General Assembly, as previously mentioned.

In particular circumstances, the president has the right to grant exemption from duties for up to one year, to a member who, for specific and justified reasons, cannot guarantee to meet the duties of an active member.

6.7 Withdrawal or loss of membership

This decision can only be taken by the General Assembly for one of the following reasons:

a) voluntary resignation;

b) failure to comply with the statutory provisions;

c) failure to provide financial contribution as required by the General Assembly; or

d) any other situation that seriously violates the principles, policies, or objectives of ALASEHT.
7 Programmes and activities

Several projects and activities have been developed as part of ALASEHT members’ efforts to achieve the operational objectives of the association throughout its 41 years of existence. Internal rules were adopted in 1993 and in 2007 in order to facilitate the orderly and homogenous conduct of major and recurrent activities of the association.

Some activities are organized on a regular basis such as the regional OSH conference, the awarding of honorary distinctions and the annual commemoration of the Latin American day for accident risk prevention, while others aim at delivering a singular specific output (e.g. study, guidelines) within a given timeframe.

7.1 Jornadas Latinoamericana de Seguridad e Hygiene en el Trabajo (JOLASEHT)

The JOLASEHT was established as a founding activity of ALASEHT in order to facilitate the sharing of experience between specialized organizations and professionals; and stimulate the development of actions for the effective prevention of work-related risks, the promotion of occupational health and the preservation of the environment in Latin American countries. It has become a major biennial Latin American conference on safety and health at work. The event aims at sharing technical knowledge through the dissemination of results from studies and scientific research in relation to the prevention of occupational safety and hygiene at work, occupational health, the protection of the environment and the promotion of work-life quality.

It also offers a unique opportunity to discuss relevant issues and problems that are specific to Latin America, and to formulate recommendations to address them. The conclusions and recommendations of JOLASEHT support advocacy efforts undertaken by the ALASEHT presidency and members at the governmental, business and workplace levels across the region for improving national OSH legislation and developing specific intervention programmes.

The JOLASEHT is organized on a rotating basis by an ALASEHT active member and is governed by Chapter IV of the association’s general regulation. The regulation specifies key principles, formalities and responsibilities of the organizer at the various stages that comprise the planning, programming, promotion, and registration of participants. It also foresees the organization of complementary activities, development of recommendations, adoption of conclusions and follow-up. While the regulation sets the thematic areas, some flexibility is allowed to adjust the programme and format according to the practices and topics of priority interest of the organizing country. The organizer assumes all related administrative tasks. The details of the organization (venue, programme, other) are submitted to the General Assembly for approval at least a year before the event.

As a result of its formal organization process, there has been twenty-one regular editions of JOLASEHT since its inception in 1977, the latest was held in June 2017 in Bogotá Colombia. Table A below presents the list of organizing members for each edition and year.
7.2 Exchange of specialists in accident risks prevention

This activity was initiated in 1979 and remains to this day. It aims to promote and facilitate the exchange of highly qualified professionals from member countries, so that they can provide technical assistance in any of them when required.

7.3 Accreditation of specialists in safety and hygiene at work in Latin America

The accreditation of OSH professionals was instituted in 2013 by ALASEHT at the initiative of the Instituto Argentino de Seguridad (IAS) leading this activity. The purpose is to certify,
at the regional level, the qualifications of OSH practitioners who graduate from educational programmes delivered by universities or tertiary entities. This accreditation seeks to verify that the practitioners’ educational and training background meets the requirements detailed in the ALASEHT qualification profile in terms of hours of study, years of experience and the relevance of the contents of both formal and non-formal training in relation to occupational health and safety.

Applicants for accreditation submit their request free-of-charge to the national member organization for accreditation by ALASEHT. As a minimum, they must either have completed an occupational safety and health academic programme at the undergraduate level; hold a professional or technological degree of other related disciplines; or have successfully completed postgraduate specialization courses in occupational safety and health of not less than 400 hours of duration.

7.4 MAPFRE-ALASEHT Scholarships

The Fundación MAPFRE (Spain) and ALASEHT collaborated until 2013 to provide scholarships to OSH practitioners from Latin America wishing to pursue their professional development towards specialization. The scholarship also aimed at deepening the study and investigation of related matters of interest for the development of prevention. It contributed to support exchange of experiences in accident risk prevention, occupational health and environmental preservation.

7.5 Awarding of the ALASEHT Distinción

The ALASEHT has instituted a regional honorific awarding ceremony to acknowledge outstanding efforts by enterprises and individuals (different categories) for their sustained engagement, collaboration, action and overall contribution to the prevention of accident risks, occupational health and preservation of the environment. This ALASEHT distinction is awarded every other year during the opening ceremony of the regional OSH conference JOLASEHT. It aims to motivate, stimulate and recognize contributions to the advancement of prevention in Latin America. Each ALASEHT member organization is responsible for identifying and recommending, to the General Assembly of ALASEHT their national nominees in each category with the necessary background information.

7.6 Latin American day of accident prevention – 7 November

In 1998 the General Assembly of ALASEHT agreed to establish November 7 as the Latin American day of accident risks prevention with a first edition held in 1999. This event was instituted to raise awareness of public authorities, the private sector and the community at large about the importance of addressing the risks of accidents in all areas of life (work, transportation, home, others). All ALASEHT member organizations are expected to mobilize the concerned institutions and organizations from the civil society and carry out promotional
activities in their respective country on 7 November. Member organizations report back to the General Assembly on actions undertaken.

7.7 Other activities

In general terms, the president is responsible for identifying possible activities and new project ideas from members for inclusion in the agenda of the next General Assembly. Discussions cover the relevance, resource needs and leadership arrangements as well as steps for its effective implementation. The General Assembly later follows up on on-going and planned project assignments in coordination with the concerned member organization or individuals.

The ALASEHT is currently focused on preparing new guides and publications as “ALASEHT models”, including:

a) motivation of youth in accident prevention programmes;
b) a road safety education guide;
c) a model national policy for the prevention of accidents, occupational health, and environmental preservation;
d) a project on legal standards for the protection of the elderly at work in Latin America;
e) a project on the design of private and public open spaces in cities, with the aim of reducing the risk of accidents among the elderly;
f) an educational project on restoring and respecting the values of civic education on the basis of prevention; and
g) a proposal to prevent fire hazards in discotheques and centres with large influxes of people.

8 Development cooperation projects

In 2017 the ILO and ALASEHT engaged collaboration for the development of a regional technical cooperation project that would provide direct assistance to enhance the capacity of OSH practitioners and their associations in Latin America by strengthening the role of ALASEHT and its member organizations. The intended project strategy entails organizational development,
knowledge and information management, institutional partnership and advocacy. The project is being designed according to the initial needs expressed in the region to establish ALASEHT as a key regional partner and centre of excellence for advancing the prevention of work-related accidents and diseases.

In its current draft version, the project would consolidate the structure and support the functioning of the association for the effective development of health and safety at work across Latin America. It would also enhance the association’s capacity to respond to the development needs of its member organizations, notably through the adoption of a strategic and results-based management approach to programming and budgeting. The project would also establish responsive knowledge management capacity of ALASEHT, including the development of an adequate information and communication strategy, plan and infrastructure. In addition, the project would support the extension of institutional partnerships with leading OSH agencies, institutions and organizations, as well as with similar professional associations in other parts of the world.

9 Financing and resources

The ALASEHT does not have a permanent secretariat nor fixed headquarters, and does not require its members to provide a yearly financial contribution to sustain it. It is believed that the rotating system allows every member, at some point, to cover the role, and therefore the costs associated with it, allowing a balance in sharing the responsibility. Thus, operations are funded by the following sources:

a) 10 per cent of the registration fees for the JOLASEHT (organized and administered by the active partner that assumes the presidency);
b) Direct costs incurred by the active member assuming the presidency; and
c) other resources that may be determined by the ALASEHT General Assembly.

In addition, following a General Assembly decision, each member assumes the costs of implementing a project or activity in its home country. Alternatively the costs for some projects are assumed on a voluntary basis. For example, the IAS scholarships, the MAPFRE-ALASEHT grants, and the cost for maintaining the CCS-Colombia website all received contributions from most of the partners. Only in special cases are fees requested to cover the cost of a project. It is intended that the managers of the projects be effective in providing the necessary contributions.

10 Outputs

10.1 Key outputs

- 21 JOLASEHT conferences.
- Latin American Day of Occupational Safety Health and Hygiene.
• “ALASEHT models” with a “Modelos ALASEHT” of Latin American scope, including:
  a) Methodology of operational procedure for the organization, and administration of security in the company (1995).
  b) Methodology for investigating accidents and work incidents (1999).
  c) Analysis of costs and losses of accidents at work, and occupational diseases (2007).
  d) Inductive and motivational training programmes for safe behaviour (2007).

10.2 Publications

Over the years, ALASEHT has developed contributions such as bibliographies and guides, including:

• Latin American glossary of terms of frequent use in accident prevention and risk prevention.
• Practical guide to prevent the consumption of alcohol and illicit drugs in companies.
• Methodology of operational procedures for organizations and the management of safety in companies.
• Analysis of costs and losses caused by occupational accidents and diseases.
• Inductive and motivational training programme for safe behaviour.
• Safe traffic guide.
• Safety total: The four modalities of safety for the prevention of occupational risks and hazards.
• Education and training of the child in risk prevention and accident prevention.
• Safety and self-care fundamentals at school.
• Systematic education.
• Brochures on safety.

11 Collaborative partners


ALASEHT has permanent collaboration with the International Social Security Association (ISSA) Section for Electricity, hosted by the BG Fine Mechanics and Electrotechnique, Cologne, Germany, which works internationally for the promotion of safety in this sector, providing, among other things, guidelines and standards for safety. The section encourages the international exchange of information and sharing of experience among experts, through symposia, workshops, international working groups, and training on safety and health, with regard to crucial issues of occupational safety and health protection in this sector.
ALASEHT also aims to disseminate information and materials from international organizations like the ILO, WHO, and the UN, to the network member organizations and countries more largely. In addition, ALASEHT and ILO are collaborating on the formulation of a development cooperation project aiming at enhancing the capacity of the association and its member organizations to acquire and use OSH knowledge and information for advancing prevention in Latin America.

Taking into account the ALASEHT mission and objectives, and their interest in contributing to sharing experience and knowledge, entities and professionals in other countries may be invited by ALASEHT, or make a request themselves to participate as observers.

12 Follow-up and evaluation

Throughout its 41 years, ALASEHT has successfully developed and implemented activities and projects in accordance with its strategic and operational objectives, but no systematic evaluation of their impact has been undertaken.

Since 1977 to the present, a total of 21 JOLASEHT events have been realized every other year without disruption, with a growing participation and greater regional notoriety.

Communications and monitoring of strategy and programme implementation, including project activities, are directly supervised by the president in duty in coordination with the leaders of member organizations. Proper coordination is achieved through well-established dialogue between members at annual meetings during which they report on activities and achievements, discuss adjustments to initial plans that are deemed necessary, and decide whether to pursue or not activities and projects.

ALASEHT members contemplate the possibility to constitute a repository of communications, technical material developed and archives of projects and activities as part of a larger knowledge management strategy with a view to protect this information and make it more readily accessible.

13 Future challenges

The strengths of ALASEHT as a network are its continuity from the foundation, operations through the system of assemblies and rotating presidencies, and the organization of the biennial JOLASEHT, which in 2017 celebrated its 21st anniversary. The sharing of common goals and operational objectives among members, and the existence of a series of agreements and projects, are key factors of stability for ALASEHT.

However, the context in which ALASEHT and its member organizations operate is changing rapidly in terms of regulation, knowledge development and governance of OSH, notably. These challenges are impacting its ability to represent OSH practitioners effectively both in Latin America and globally in a context of changes to national systems for occupational health and safety calling for
more inclusive governance, sustainable financing through injury insurance programmes, greater integration of technical interventions of the concerned institutions, organizations and experts from the relevant disciplines.

A key challenge for the future of ALASEHT is to respond to the needs of its member organizations, and by extension and through them, respond to the needs of OSH practitioners across Latin America. These needs have to be carefully understood and responded to by their representative organizations in order to ensure their practical relevancy in the future. The following paragraphs present some opportunities for ALASEHT to engage into by making productive use of its capacity, notoriety and collective will to bring about tangible improvements in OSH in Latin America.

13.1 Participation of practitioners in the governance of OSH

The ILO Regional Office for Latin America and the Caribbean is engaged with its member States for the development and implementation of Decent Work Country Programmes (DWCP) in which strengthening national capacities in the area of occupational health and safety is given priority importance. Currently, over 20 DCWP are implemented in Latin America and the Caribbean for which expertise is needed. These activities will continue for a few years, most of them beyond 2020.

ALASEHT member organizations can play an important role working with national competent authorities and the social partners with the framework of national OSH systems for the implementation of these programmes. The ALASEHT could potentially contribute to the coordination of their efforts by further developing productive working relations with the ILO at the regional and global level, and supporting efforts of their member organizations aiming at participating in the national governance of OSH in their respective countries.

13.2 Creating a generation of safe and healthy workers

The ILO and its Latin American and Caribbean offices have published documents on the future of work in the region, covering a survey of young people at work, and the future of vocational training (OIT, 2017 a, b, c; ILO, 2017a). The perspectives presented in the reports are highly relevant to ALASEHT future strategies. Some ALASEHT members already offer comprehensive educational and training programmes in OSH, some of which could be adapted specifically to meet the need of technical and vocational education and training institutions and programmes in Latin America. ALASEHT could collaborate with the ILO CINTENFOR in Uruguay to position its member organizations in both an advisory and support roles to mainstream OSH into TVET, an area for which the ILO responsible Branch for OSH has engaged decisively in the recent years.¹

13.3 Fostering global working relations

In other regions of the world, research reports on the burden caused by occupational accidents and diseases and the economic impact of OSH hazard, has brought much attention and action (ILO 2017 b, 2014, Hämäläinen et al., 2017). Though the global estimates also cover Latin America and its countries, more specific country and regional analyses may be warranted. ALASEHT and its member organizations could contribute to ongoing global work of this nature, and join the worldwide dialogue on advancing prevention both in the formal and informal economy. Some of the topical challenges for ALASEHT were discussed in the ALASEHT Regional Session in the World Safety Conference, WSH 2017 in September in Singapore (ILO, 2017a).

Now that the ALASEHT as a regional association counts member organizations in most countries in Latin America, the association would most likely gain visibility, support and resources by establishing a permanent liaison and working relation with the ILO and other organizations active internationally. As the governance of OSH is increasingly becoming global, the voice of Latin America needs to be taken into consideration in shaping renewed global policies, programmes and action plans.

13.4 Regulating the OSH profession

International organizations and independent experts are observing a professionalization movement of the role of OSH practitioners. This movement appears both necessary for improving and guaranteeing the quality of practice, and for protecting the value of the profession and the employability of the professional themselves. Not surprisingly they have been organizing into associations at country and regional levels to promote and protect their role in most regions of the world but only devote marginal efforts at influencing the adoption of appropriate regulation governing their profession.

In fact, the strategic position and role of professional associations at the national and regional levels such as ALASEHT remain unexploited for most as their attention continue to focus on technical matters. Other regional organizations of OSH practitioners have engaged policy and regulatory development work towards internationally agreed upon definitions, requirements, guidelines and model legislation for regulating the roles, functions and activities of work-related safety and health professionals. ALASEHT and its member organizations could join the movement.
References


ANNEX     ALASEHT member organizations

ALASEHT is currently composed of: eight active members (Argentina, Brazil, Chile, Colombia, Ecuador, Mexico, Panama, and Venezuela); four corresponding members (Costa Rica, Paraguay, Peru, and Uruguay); and two adherent members.

Active members (by alphabetical order of country name)

ARGENTINA – Instituto Argentino de Seguridad

The Instituto Argentino de Seguridad (IAS) is a non-profit civil and cultural association founded in April 1940. Its first president was Dr Gotardo Pedemonte. It was the first institution of its kind in Argentina, and one of the first at the international level, specifically dedicated to the prevention of accidents and occupational diseases. Its objectives include promoting, organizing, and providing technical and educational services on safety, hygiene, occupational medicine, environmental protection, and the prevention of accidents in industry, at home, in traffic, and in sport. The IAS is a founding and active member of ALASEHT. Its current president is Mr Jorge Alfredo Cutuli.

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BRAZIL – Associação Brasileira para Prevenção de Acidentes

Founded in May 1941, the Associação Brasileira para Prevenção de Acidentes (ABPA) is a civil, non-governmental, non-profit entity. In 1962, it was declared an organization of public interest by Decree No. 1328, and received recognition as an entity of philanthropic purposes by the National Conselho de Serviço Social in August 1974. Its mission is to promote OSH education and information, and encourage people and enterprises to adopt social responsibility through training and qualification courses, congresses, seminars, statistical studies, environmental surveys, legislation, and labour standards. ABPA, which has its own headquarters and is owned by its members - individuals and legal entities - has served nearly two million workers and 4,500 companies throughout the country and is proud to be internationally recognized for the quality and seriousness with which it carries out its mission. The ABPA has offices in Rio de Janeiro, Sao Paolo, and Minas Gerais State. It ABPA publishes its SOS magazine, and has the motto “Prevent – To Reduce Human and Financial Loss”. The ABPA is an active member of ALASEHT.

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CHILE – Consejo Nacional de Seguridad de Chile

The Consejo Nacional de Seguridad de Chile (CNS) is a private, non-profit organization, created in May 1953 by governmental decree with the objective of promoting risk prevention and raising awareness of the need to prevent accidents and occupational diseases. Its members are representatives of ministries, institutions, the armed forces, universities, public- and private-sector companies, and qualified natural persons. Any organization can apply for membership of the CNS. Its objective is to promote and develop the prevention of accident and occupational disease risks, especially in the workplace. The CNS studies and applies principles and techniques related to safety, health, and well-being of individuals and families; and the protection and conservation of the environment. The CNS is a founding and active member of ALASEHT. The current chair is Ing. Guillermo Gacitúa Sepúlveda.

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COLOMBIA – Consejo Colombiano de Seguridad

The Consejo Colombiano de Seguridad (CCS) is the technical association of entrepreneurs and professionals specialized in the prevention of occupational risks. Since 1954, it has contributed to the sustainability of Colombian companies as an advisory and consultative body supporting the government, the business sector and safety professionals. Its permanent role of promoting risk prevention is strengthened through its participation in dialogue and coordination regarding draft regulations on safety and health at work, and the environment. CCS is actively engaged in the transfer of successful practices and lessons learned as a point of reference in support to continuing improvement. It participates in government-related technical committees and in the development of projects responding to the needs of industrial sectors. CCS promotes and supports business development through the application of technical knowledge and the adoption of international best practices.

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**ECUADOR – Sociedad Ecuatoriana de Seguridad, Salud Ocupacional y Gestión Ambiental**

The Sociedad Ecuatoriana de Seguridad, Salud Ocupacional y Gestión Ambiental (S.E.S.O.) is a non-profit scientific establishment, founded on 1st May 1988. It is specialized in the following technical areas: Occupational medicine; industrial psychology; safety and industrial hygiene; risk and insurance management; occupational health; ergonomics; quality management (ISO 9000 Standards); environmental management (ISO 14000) and health and safety management (OSHAS 18000). Its legal status was granted by agreement of the Ministry of Public Health of Ecuador No. 1269 of February 16, 1989, Official Gazette No. 180 of Friday, April 28, 1989. The S.E.S.O., was established as a response to the requirements and needs in the field of work safety raised by the public and private enterprises to protect their assets and resources within a comprehensive security concept that seeks to reduce and manage risks. The S.E.S.O. organizes courses, seminars, conferences, colloquiums, round tables, masters and diploma, the latter with the endorsement of Ecuadorian and foreign universities. It provides technical assistance, training and information material to enterprises with the aim of preventing occupational hazards. S.E.S.O. is an active member of the ALASEHT and its current president is Dr. Moisés Castro Carrasco.

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Web Site: [http://www.seso.org.ec](http://www.seso.org.ec)

**MEXICO – Asociación Interdisciplinaria de Salud Ocupacional e Higiene de México, A.C.**

The Asociación Interdisciplinaria de Salud Ocupacional e Higiene de México, A.C. (AISOHMEX) was constituted in June 2005. Its mission is to provide specialist services to contribute to the improvement of working conditions and welfare in industries and service companies through the provision of alternative solutions. It aims to influence the behavior of the various actors related to health, to create habits and safety awareness, to modify behavioral patterns that currently generate accidents, property damage and occupational diseases that decrease the quality of life of the workers and the population in general. It provides advisory services to industries and businesses in the area of industrial health and safety, covering the priority branches of organizations. The AISOHMEX is an active member of the ALASEHT and the current chair is: Ing. Victoriano Angüis Terrazas.

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PANAMA – Consejo de Seguridad, Salud y Medio Ambiente de Panamá

El Consejo de Seguridad, Salud y Medio Ambiente de Panamá (COSSMAP) was created in 1995 and registered as a foundation in 1997 in the Republic of Panama by a group of professionals devoted to improving safety and health in the country. COSSMAP was the first non-governmental non-profit association (NGO) of technical and scientific nature that brought together professionals in the fields of health, safety and environment in Panama. Today, COSSMAP brings together professionals from the private and public sectors that are engaged as an organized group in promoting their profession and exercising a positive influence on Panamanian society. It seeks to develop a culture of prevention, to promote health and environmental protection as societal values at work and in life in general. COSSMAP is an independent organization without any connection to any government or corporate entity and is independently funded by its membership.

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VENEZUELA – Sociedad de Ingenieros y Técnicos de Seguridad, Higiene y Ambiente de Venezuela

The Sociedad de Ingenieros y Técnicos de Seguridad, Higiene y Ambiente de Venezuela (SOITSHA) is an independent professional organization dedicated to advising, training and certifying people and companies in the area of safety, hygiene and environment. The SOITSHA was founded in May 2000 and initiated its activities in the Center of Engineers of the Zulia State. SOITSHA is an active members of the Latin American Association for Safety and Hygiene at Work (ALASEHT), with which its activities are recognized throughout the Latin American region.

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Corresponding members (by alphabetical order of country name)

COSTA RICA – Asociación Costarricense de Ingeniería en Seguridad Laboral e Higiene Ambiental

The Asociación Costarricense de Ingeniería en Seguridad Laboral e Higiene Ambiental (ACISLHA) was created on August 5, 1998, with the name of Association of Professionals in Safety and Environmental Hygiene (APROSLHA). From 2006 it was renamed into the Asociación de Ingenieros en Seguridad Laboral e Higiene Ambiental (AISLHA), and a year later the name further evolved
into ACISLHA in reference to Costa Rica. It is an association attached to the College of Engineers Technologists (CITEC) of the Federated College of Engineers and Architects of Costa Rica (CFIA). Among its objectives are the professional, academic, cultural, social and associative development of the members, as well as the development and application of technological research related to engineering in OSH. Its mission is to guarantee to workers, organizations, and society the best professional practice in OSH engineering, and to intervene in preventative actions according to current regulations. The ACISLHA aspires to become the leading association in the field of safety and environmental hygiene through the regulation and certification of its professional members; participating in the interdisciplinary work of engineering, occupational safety, environment, and health; and committing itself to the provision of technical criteria to provide a quality service for the national community. It is currently chaired by Ing. Mainor Edo. Rojas Hidalgo.

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e-mail: aislha@cfia.or.cr or acislha@cfia.or.cr

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**PARAGUAY – Asociación de Profesionales de Higiene y Seguridad de Paraguay**

The Asociación de Profesionales de Higiene y Seguridad de Paraguay (APHSP) was founded in April 1997. Its objectives are to: stimulate social ties between the members, foster and maintain the spirit of solidarity and cooperation, and share experiences and ideas among OSH professionals. Its mission is to collaborate with public authorities in research projects on laws, decrees, regulations, and ordinances related to OSH, as well as to reconcile, manage, or intervene in OSH sanctions – to protect the interests of professionals; exercise the collective representation of members; resolve the problems of interested parties; sponsor and support (technically, economically, and administratively) the study and scientific research of subjects in the different OSH specialities; encourage the exchange of technical information; and organize and participate in congresses, scientific meetings, seminars, and refresher courses. The current president is Ms Stela González Becker.

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**PERU – Asociación Peruana de Prevencionistas de Riesgos**

The Asociación Peruana de Prevencionistas de Riesgos (APDR) is a private, civil, non-profit association. The APDR’s mission is to optimize the competitive capacity of enterprises subject to national OSH regulations and the effects of globalization. The APDR brings together competent professionals in the OSH field, including: technicians in OSH prevention; engineers in branches related to hygiene, safety, and health at work; physicians specialized in occupational health, ergonomics, or occupational medicine; firefighters; and technicians and professionals working
in occupational risk prevention. The APDR’s objectives are to: unify the criteria for industrial safety, hygiene, ergonomics, and occupational health; share news, knowledge, contacts, and experiences; disseminate good practices in health and safety at work; promote scientific research associated with risk management; and advise companies to improve their safety culture. The APDR is the only Peruvian organization associated with ALASEHT (as a correspondent member).

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URUGUAY – Centro de Estudios de Seguridad

The Centro de Estudios de Seguridad (CES) was founded in Montevideo, Uruguay in October 2007 as a non-profit working group focusing on research, analysis, and the application of preventative technology in the various areas of life, e.g. work, traffic, education, community, among others. Its fundamental objective is the promotion of a preventative culture, through specialized advice and the development of technical-scientific and environmental training, and preventative actions. The CES considers itself a broad and independent expert group providing support to all public or private organizations, and aims to establish and maintain good relationships with all involved actors, at the national, regional, and international levels. The CES is currently chaired by Professor Vicente Catarozzi.

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Adherent Members

Fundación MAPFRE, de España

MAPFRE is a foundation of the Spanish insurance group MAPFRE. It was founded in 1975 as a private cultural foundation. It notably develops activities in Spain and Latin America.

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e-mail: antonioguzman@fundacionmapfre.org
web site: http://www.fundacionmapfre.org
International Section of the ISSA for Electricity, Gas and Water

The International Section of the International Social Security Association (ISSA) for Electricity, Gas and Water promotes the protection of workers against electrical accidents and occupational diseases due to electricity and ionizing radiation. The ISSA is based in Switzerland and the secretariat of the section is based in Germany.

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web site: www.issa.int/en/web/prevention-electricity/about
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## Abbreviations and acronyms

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<tr>
<td>ALMM</td>
<td>ASEAN Labour Ministers’ Meeting</td>
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<td>ASCC</td>
<td>ASEAN Socio-Cultural Community</td>
</tr>
<tr>
<td>ASCLA</td>
<td>ASEAN Subcommittee on Labour Affairs</td>
</tr>
<tr>
<td>ASEAN</td>
<td>Association of Southeast Asian Nations</td>
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<tr>
<td>ASEAN-BCA</td>
<td>ASEAN Business Coalition on HIV/AIDS</td>
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<tr>
<td>ASEAN-OSHNET</td>
<td>ASEAN Occupational Safety and Health Network</td>
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<tr>
<td>EU-OSHA</td>
<td>EU Occupational Safety and Health Agency</td>
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<td>IALI</td>
<td>International Association of Labour Inspection</td>
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<td>ICOH</td>
<td>International Commission on Occupational Health</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<tr>
<td>ISSA</td>
<td>International Social Security Association</td>
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<td>MOLs</td>
<td>Ministries of Labour</td>
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<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
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<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
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<tr>
<td>OH</td>
<td>Occupational health</td>
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<tr>
<td>OSH</td>
<td>Occupational Safety and Health</td>
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<td>PIACT</td>
<td>ILO Programme for the Improvement of Working Conditions and Environment</td>
</tr>
<tr>
<td>SLOM</td>
<td>ASEAN Senior Labour Officials’ Meeting</td>
</tr>
<tr>
<td>SME</td>
<td>Small and medium-sized enterprise</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>WIND</td>
<td>Work Improvement in Neighbourhood Development</td>
</tr>
<tr>
<td>WISCON</td>
<td>Work Improvement in Small Construction Sites</td>
</tr>
<tr>
<td>WISE</td>
<td>Work Improvement in Small Enterprises</td>
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<tr>
<td>WISH</td>
<td>Work Improvement for Safe Homes</td>
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Foreword and acknowledgements

The profile of the ASEAN Occupational Safety and Health Network (ASEAN-OSHNET) is published as an appendix to the ILO Working Paper presenting the results of the multiple case-study analysis of six regional occupational safety and health (OSH) networks. The study was initiated in order to inform the modernization of the ILO portfolio of activities in OSH knowledge and information. It benefited from financial support provided under the Partnership Agreement between the Government of South Korea and the ILO 2015-2017 (GLO/15/50/ROK).

The study covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. The results allow a better understanding of how and why OSH agencies, institutions, organizations and experts collaborate with one another. They provide invaluable descriptive information covering the diversity of existing collaborative arrangements and key characteristics of productive regional OSH networks. They highlight similarities and differences in ways of organizing collaboration in OSH and provide new knowledge to support international cooperation which has always been and remains a key role of the ILO. They can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of the network.

This profile was prepared by Professor Jorma Rantanen as part of the multiple case-study analysis commissioned by the ILO LABADMIN/OSH Branch, with an initial contribution from Mr Wilbur OH from the Ministry of Manpower in Singapore during their term as Secretariat of ASEAN-OSHNET. Acknowledgements extend to the members of the network who provided comments at various stages of development and revision. To all we wish to express gratitude for their interest and support.

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Summary

The ASEAN Occupational Safety and Health Network (ASEAN-OSHNET) and its predecessors have a long history, extending back to the 1980s. It is a network of 10 ASEAN countries’ government OSH institutions, OSH departments of the ministries of labour (MOL), or respective bodies or institutions in the jurisdiction of the MOL. The legacy of the ASEAN-OSHNET is based on the memorandum of understanding (MOU) between the members’ OSH administrations from the year 2000. The member governments have formally recognized the ASEAN-OSHNET as an important instrument for the development of ASEAN OSH policies and practices in the region, and have delegated key tasks in the implementation of the ASEAN Labour Ministers’ Meeting (ALMM) OSH strategy.

The substantive content of the ASEAN-OSHNET strategy and programme are associated with the ASEAN governments’ strategies. The ASEAN-OSHNET strategies cover the key dimensions for development of the OSH policies and practices through elements for research, training, information, awards, standards and guidelines, inspection, development of national OSH frameworks, and OSH for small and medium-sized enterprises (SMEs) and the informal sector. The practical activities are based on division of work between the members, joint projects and programmes, and members’ mutual collaboration, plus international collaboration. Each member has been assigned the coordination of some of the strategic programme areas.

The organization is based on network management through the Coordinating Board (CB) of representatives of all members, a network secretariat, and various types of project groups. The network reports through the CB to the ALMM. The hosting of the secretariat, CB meetings, and ASEAN-OSHNET Congress rotates between the member countries.

The financing is based on cost-sharing between members and on external support for various programmes and projects. The cost-sharing between the governmental bodies makes the financing, for the most part, stable and predictable, and ensures continuity, enabling secretariat resources and basic funding.

Active and regular collaboration takes place between the members and also with the ASEAN “Plus Three” countries (the People’s Republic of China, Japan, and the Republic of Korea) and the ILO, the International Social Security Association (ISSA), and the International Association of Labour Inspection (IALI), and, on an ad-hoc basis, with the EU Occupational Safety and Health Agency (EU-OSHA) and the International Commission on Occupational Health (ICOH).

ASEAN-OSHNET can demonstrate high productivity and impact at the level of policy support for the prevention and management of occupational hazards, accidents, and diseases. This has been done through the implementation of the network’s own, and ASEAN OSH, strategies; development of strategic planning and national OSH programmes; development of OSH framework and infrastructures; development of research, information, human resources, and their competence through training; and guidelines and methods for good practices in OSH and in inspection.
1 Introduction

ASEAN-OSHNET has its origin in the ILO Programme for the Improvement of Working Conditions and Environment (Programme international pour l’amélioration des conditions et du milieu de travail) (PIACT), which was launched in 1976. An ILO seminar, held in 1984 for the ASEAN countries, recommended the establishment of a regional centre to collect and disseminate information in ASEAN, and to manage research and training for the improvement of working conditions and environments.

The idea to develop a project network for improving working conditions was agreed by the First ASEAN Labour Technical Working Group Meeting, held in October 1984 in Manila, and the proposal was approved by the Fifth ASEAN Labour Ministers’ Meeting, held in Manila at the same time (ASEAN-OSHNET Secretariat, 2013a, b).

In 1995, the ASEAN Secretariat obtained United Nations Development Programme (UNDP) funding to conduct a feasibility study on the establishment of an ASEAN training centre and network for the improvement of working conditions and environments. The feasibility study was conducted in 1996, and a workshop to review the results was convened in Manila in October 1996.

The 1996 workshop was attended by the head of the Philippine National OSH Centre and national experts from seven ASEAN countries. They agreed upon the following five recommendations (ASEAN-OSHNET Secretariat, 2013a):

1. To establish ASEAN-OSHNET among the national OSH institutions in ASEAN.
2. To form an ASEAN-OSHNET Coordinating Board, comprising the heads of the national OSH centres or their equivalents – which report directly to the ASEAN Subcommittee on Labour Affairs (ASCLA) – to oversee the operation of ASEAN-OSHNET, and the planning and implementation of its Plan of Action.
3. That the ASEAN-OSHNET Coordinating Board will meet once a year, and its immediate task will be to establish the secretariat of the network.
4. That ASEAN-OSHNET be considered a flagship project of the ASEAN Economic Charter
5. To include six projects in the Proposed Four-Year Plan of Action (FYPA).

The development history of ASEAN-OSHNET can be divided into four stages (ASEAN Occupational Safety and Health Network, 2015, ASEAN Ministers of Labour Meeting 2016):

1. Foundation – establishment of the network, defining the mission and objectives, building infrastructure, and agreeing on division of work (2000–05).
2. Policy, and substantive capacity development – earning official recognition by the ALMM, focusing on programme areas, content and methods, training capabilities, and learning networking practices (2006–2010).
3. Revitalizing – evaluating the achievements, identifying strengths and challenges, showing results, raising the OSH profile, and expanding scope and coverage (2011–15).
4. Integration, regional and global – combining objectives from several policy dimensions for the overall development of work life within the framework of the ASEAN Socio-Cultural Community (ASCC) vision 2025, and the ALM labour ministers’ Work Plan 2016–2020, and the UN Sustainable Development Goals in collaboration with the Plus Three and global partners, ILO, ISSA, the IALI, and ICOH.

From the beginning, the development of the network has been continuous and progressive. After 15 years of activity ASEAN-OSHNET is well established, active, and productive. An extensive report, Turning Visions into Action, was published in 2015 for the 15th anniversary of the network, and it documented full achievement of the objectives set in the foundation meetings. The objectives were, in many respects, even exceeded (the ASEAN Occupational Safety and Health Network, 2015).

2 Formal status and constitution

ASEAN-OSHNET was formally established in 2000 with the signing of an MOU by 10 heads of the ASEAN occupational safety and health centres (Memorandum of Understanding, 2000).

The ASEAN-OSHNET members are Brunei Darussalam, the Kingdom of Cambodia, the Republic of Indonesia, the Lao People’s Democratic Republic, Malaysia, the Republic of the Union of Myanmar, the Republic of the Philippines, the Republic of Singapore, the Kingdom of Thailand, and the Socialist Republic of Viet Nam.

Over time, the network and OSH in general have gained higher priority in ASEAN overall strategies and in governments’ policies. In 2006, OSH was added as the sixth priority area for ASEAN (ASEAN Occupational Safety and Health Network, 2015). The ALMM has formally recognized ASEAN-OSHNET as an instrument for the ASEAN OSH policy implementation (ALMM, 2017).

The ASEAN labour ministers met in September 2017 and adopted a Statement on Improvement of Occupational Safety and Health for Sustainable Economic Growth. ASEAN-OSHNET is assigned an important role in the implementation of the statement’s objectives. Thus, besides being an inter-agency network of OSH national institutions, it has also gained a role in ASEAN governments’ OSH policy implementation.

3 Mission, policy, and strategy

The ASEAN-OSHNET mission and policy are related also to the ASCC Vision 2025 and objectives for the ASEAN Community that engages and benefits the peoples and is inclusive, sustainable, resilient, and dynamic (ASEAN Secretariat, 2015). This is achieved through the enhancement of inclusive policies, social responsibility and participation by people, the promotion of equal opportunities and human rights, social development and environmental protection, and enhancement of capability to adapt and respond to social and economic vulnerabilities, disasters, climate
change, as well as emerging threats and challenges, i.e. resilience and innovation, and a pro-active contribution to the global community.

On the basis of the general socio-cultural policy framework of the ASCC, the ALMM has drawn up a Work Programme on OSH: the ASEAN Labour Ministers’ (ALM) Work Programme 2016–2020 and Work Plans of the Subsidiary Bodies (ALMM, 2016).

In the ALM Work Programme 2016–2020 the ministers agreed upon a general labour policy objective: “A better quality of life for ASEAN people through a workforce with enhanced competitiveness, and engaged in safe and decent work derived from productive employment, harmonious and progressive workplaces, and adequate social protection.”

The ALM Work Programme has four key result areas:

1. a skilled and adaptable workforce;
2. productive employment;
3. harmonious, safe, and progressive workplaces; and
4. expanded social protection.

The key result area 3 of the Work Programme – harmonious, safe and progressive workplaces – contains intermediate targets by 2020 that are contributed by ASEAN-OSHNET:

promoting sound industrial relations, leading to a reduced incidence of labour disputes in ASEAN;

a) increased capacity and strengthened institutionalized mechanisms for social dialogues and tripartite cooperation in ASEAN;
b) fostering safe and healthy environments in the workplace;
c) strengthened capacity for labour inspection; and
d) increased capacities for labour law enforcement.

The ultimate objective of the Work Programme is to promote non-discriminatory laws, policies, and practices, by developing effective, responsive, accountable, and transparent institutions at all levels. Strengthening labour inspection is a key element in this objective.

These objectives are implemented in 23 projects. The projects as a whole are in line with the ASCC vision and strategies, and with the ALM Work Plan 2016–2020. They will be implemented on the principle of division of work between the members, as described above. The projects cover the programme area themes listed in Table 1 below, and some new items have also been included, e.g. development of work injury compensation systems, updating and harmonizing training curricula, and training of trainers (Annex 2).

In general, the Work Programme assigns much responsibility to ASEAN-OSHNET, particularly in project implementation.

The overall policy principles of ASEAN-OSHNET are set by the ASEAN governments’ general labour policies defined above. The network supports the implementation of OSH ministries and
authorities’ policies and programmes, by working as their expert advisory organization, and supporting and participating in the implementation of policies.

In line and within the framework of the ASCC Vision 2025 and the ALM ASEAN-OSH policies, ASEAN-OSHNET has drawn up a vision and mission for the network (ASEAN-OSHNET Secretariat, 2013b):

**Vision**

ASEAN-OSHNET is an effective network in fostering a safe and healthy working environment, to bring about a productive and competitive workforce, leading to a better quality of life.

**Mission**

- Beneficial cooperation and solidarity among the national OSH institutions in ASEAN countries.
- High capability of national OSH institutions in OSH promotion, training, and research.
- Free flow of OSH information, particularly through the utilization of information and communications technology.
- Harmonization of OSH standards and guidelines.

Within the framework of the ASCC Vision 2025 and the 2016–2020 Work Programme, the ASEAN-OSHNET Work Plan 2016–2020 integrates ASEAN-OSHNET with the ALM strategies (ASEAN Secretariat, 2016). The Work Plan delegates many implementation activities to ASEAN-OSHNET. It means covering OSH for all sectors of the economy and all workers, expanding the volume of the overall network activities, and strengthening collaboration with the Plus Three countries, international organizations and non-governmental organizations (NGOs).

4 Structure, governance, and coordination

ASEAN-OSHNET is a well-established and dynamic network of 10 member countries’ OSH administrations, with a constituency of 633 million people, i.e. approximately more than 300 million workers. The network members are ministries’ OSH departments; governmental OSH agencies or national OSH institutions under the ministries of labour or respective authorities with mandates for OSH policy and law implementation; OSH inspection, training, and education bodies; OSH advisory and guidance bodies; and organizations responsible for research and information, and international collaboration in the field of OSH. The directors or heads of ministry departments, agencies, and institutions participate in the network activities in the capacity of the Coordinating Board (Figure 1), which gives the network a strong formal status and mandate, and ensures appropriate funding and effective participation in cost-sharing (institutional support).
ASEAN-OSHNET comprises a Coordinating Board and a secretariat (ASEAN-OSHNET Secretariat, 2013b).

The Coordinating Board comprises heads of national OSH centres or their equivalents, and they meet yearly at the Coordinating Board Meeting (CBM) to decide on policy direction and plans of action. The hosting and chair of the CBM is rotated amongst member countries in alphabetical order. The 18th CBM was held in Cambodia in 2018.

The ASEAN-OSHNET executive director, with support of the secretariat, is in charge of administrative and operational matters, and oversees programme implementation. They have a three-year tenure and the assignment is rotated amongst member countries in alphabetical order. Myanmar was the ASEAN-OSHNET secretariat from September 2017 to 2019. There are also national members; OSH centres; OSH authorities, agencies, or institutions; and programme area coordinators in member countries, with special project assignments (see below).

4.1 Roles of governance bodies and actors

The ASEAN-OSHNET Memorandum of Understanding 2000 defines the roles of the network actors as the following:
4.1.1 Coordinating Board

The CBM is held once a year and decides the policy direction of ASEAN-OSHNET, and facilitates the approved programmes in collaboration with the secretariat. The tasks of the Coordinating Board are:

a) deciding the policy directions and strategy;
b) approving the Work Plan;
c) coordinating programme area activities; and planning, implementation, follow-up, and evaluation;
d) assigning programmes and projects to the area coordinators; and

e) participating in preparing the ALMM.

4.1.2 ASEAN-OSHNET Secretariat

To facilitate the approved programmes, the ASEAN-OSHNET Coordinating Board designates a secretariat on a three-year rotating basis. The Coordinating Board also appoints an executive director and staff of the secretariat, with the following functions:

a) organize the Coordinating Board Meeting and all other meetings as directed;
b) plan and organize ASEAN-OSHNET programmes, projects, and activities;
c) propose and develop a plan for sourcing and generating funds;
d) coordinate, monitor, and evaluate programmes, projects, and activities;
e) assess and review, periodically, the ASEAN-OSHNET accomplishments;
f) submit the Report of CBM to SLOM unless the chair of CB can submit; and
g) perform other functions that may be assigned by the Coordinating Board.

The secretariat also:

a) assists in Coordinating Board activities;
b) supports and assists programme area coordinators in programme preparations;
c) reports on the programmes and projects to the Coordinating Board;
d) prepares information on ASEAN policy or dialogue partner relations; and

e) communicates with the national centres and programme area coordinators.

4.1.3 Programme area coordinators

The tasks of the programme area coordinators are to:

a) prepare programme plans on selected topics for the secretariat;
b) contact the programme partners and collaborators;
c) prepare the plan for receiving programme financing; and
d) report on the programme.

5. Members

The member countries have different societal and government models, and variation in administrative structures and practices. Besides the national official languages, English is widely spoken in the region, which facilitates ease of communication.

6. Functions and programmes

The network has agreed upon a multifunction strategy covering all key substantive areas of OSH, and developing them according to the needs of improving work conditions in the member countries, and taking into account international best practices and global developments. At present there are seven programme areas, with a programme area coordinator assigned for each area (Table 1).

Table 1. Assignments for programme area coordination for member countries

<table>
<thead>
<tr>
<th>Programme area</th>
<th>Coordinating country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information</td>
<td>Thailand</td>
</tr>
<tr>
<td>Research</td>
<td>Indonesia</td>
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<tr>
<td>Standards</td>
<td>Malaysia</td>
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<tr>
<td>Training</td>
<td>Philippines</td>
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<tr>
<td>Inspection</td>
<td>Singapore</td>
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<tr>
<td>National OSH framework</td>
<td>Viet Nam</td>
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<tr>
<td>SMEs and the informal economy</td>
<td>Cambodia</td>
</tr>
</tbody>
</table>

Source: ASEAN-OSHNET Secretariat, 2017c.

The key substantive functions of ASEAN-OSHNET (Memorandum of Understanding 2000; ASEAN-OSHNET Secretariat, 2017a, 2017b; ASEAN-OSHNET, 2015) are:

**Generation, compiling, and sharing of information**

The four main activities, with coordination by Thailand, are developed and implemented:

1. ASEAN-OSHNET website, hosted and maintained by the Thai Ministry of Labour, the Department of Labour Protection and Welfare. The website (ASEAN-OSHNET Secretariat, 2013 a) has been continuously updated and developed for broader substantive scope.
2. The ASEAN-OSHNET Scorecard has been updated by Thailand, as the country coordinator. The ASEAN-OSHNET Scorecard includes data on national policy and strategy, national programmes, national OSH systems, occupational accidents, and occupational and work-related illness.

3. The national OSH profiles of ASEAN Member States continue to be updated under the coordination of Viet Nam. Updating of the national OSH profiles continues by using ILO Convention No. 187 (Promotional Framework for OSH) as a framework.

4. The ASEAN-OSHNET Congress, international congresses such as the triennial World Safety Congress, and other national, regional, and international conferences are organized and participated in regularly. ASEAN-OSHNET organizes special sessions or congress days in these events, and utilizes the presence of members by organizing network meetings in the same context.

Research on OSH, with area coordination by Indonesia

The following research topics are covered:

a) OSH standard development;
b) development of, and training in, OSH inspection;
c) development of national OSH frameworks;
d) ensuring OSH for SMEs and the informal economy;
e) developing and maintaining the ASEAN-OSHNET website;
f) developing and updating the ASEAN-OSHNET Scorecard; and
g) international collaboration.

Standards and guidelines for OSH

Malaysia acts as the area coordinator. Standards and guidelines have a double objective:

a) guiding practical OSH activities, and
b) harmonizing OSH practices in the ASEAN framework.

Some key standards have been produced – for example, on hazardous chemicals and on OSH in SMEs and the informal sector. Numerous guidelines have been drawn up, such as the Code of Integrity in OSH Inspection, and Guidelines for OSH in Retail Industries.

Training of OSH actors and experts

The Philippines acts as the area coordinator. The following target groups are trained in all member countries:

a) OSH inspectors;
b) other OSH experts;
c) safety engineers; and  
d) workplace actors, particularly in SMEs.

Particularly for SME workplaces and the informal sector, the ILO methods for participatory training (WISE, WIND, WISH, WISCON) have been employed in several member countries.

Training is an important element in the effort to elevate the status and competence and effectiveness of OSH in the member countries. Harmonization of training curricula and programmes is included in the objectives of the current Work Plan.

**Inspection**

Singapore acts as the area coordinator. The ultimate objectives of OSH inspection are improvement of working conditions; protection of workers’ safety and health through prevention of occupational accidents and diseases; enforcement of OSH law; control of compliance by enterprises; and advice on the implementation of regulations, to promote safety and health, thus supporting the objectives of decent work, including well-functioning and productive workplaces.

Development of inspection has focused on the following main activities:

a) development of competences, and capacities of OSH inspection, through training;  
b) strengthening of the effectiveness of inspection capabilities, through the development of OSH management systems, by focusing on high-risk sectors;  
c) extending the outreach of inspection to SMEs, the informal sector, and other formerly uncovered sectors; and  
d) strengthening the advisory role and capability of inspection.

Training of inspectors in all member countries, and regionally, has been one of the main activities in the programme area, supported by the development of modern inspection methods and production of guidelines, checklists, and other instruments for good inspection practices.

**Development of national OSH frameworks**

Viet Nam acts as the area coordinator. There is substantial variation among the ASEAN-OSHNET members in national frameworks and capabilities for OSH activities, concerning law, implementation and enforcement, inspection, services, and other relevant activities such as training, and collection of statistics and information. ASEAN-OSHNET has adopted the ILO Promotional Framework on OSH Convention No. 187, and Convention No. 155 on Occupational Safety and Health, as the basis for OSH framework development. The activity aims at harmonization and equal development of OSH systems within ASEAN. The Work Plan 2016–2020 is the key policy document steering the activity. The ILO OSH-MS principles serve as practical guidance.

**Development of OSH for SMEs and the informal economy**

Cambodia acts as the area coordinator. The majority of workplaces in ASEAN are small, and half of them informal. Traditionally, these workplaces have not enjoyed the coverage of OSH
legislation and services, even though these workplaces are often high risk and vulnerable. The ASEAN policies aim at their equal inclusion in OSH protection and decent work developments. ASEAN-OSHNET activities for these sectors cover the following activities:

a) surveys of work conditions in SMEs and the informal sector;
b) production of special guidelines for SMEs and the informal sector, e.g. ILO OSH-MS; and
c) participatory training and workplace improvement interventions by using the ILO methods (WISE, WIND, WISH, WISCON) (Khai et al., 2011).

Other activities – such as development of OSH frameworks, improvement of inspection outreach, and training of inspectors – support the objectives set for SMEs and the informal sector (Priyanto, 2017).

**ASEAN-OSHNET conferences and awards to raise the OSH profile in ASEAN**

Since 2014, annual ASEAN-OSHNET conferences have been held in conjunction with the Coordinating Board Meetings in the host country. These conferences allow for the sharing of the latest OSH developments and best practices, both in the region and internationally. In 2016, the ASEAN-OSHNET awards were introduced on a bi-annual basis, with the aim of showcasing, recognizing, and rewarding companies with excellent OSH achievements, and inspiring further improvement of OSH, which will build a positive image for ASEAN in the process of attracting greater foreign investment. Two types of awards are available:

a) the ASEAN-OSHNET Award of Excellence; and
b) the Best Practice Award.

The award ceremonies are organized in connection with the ASEAN-OSHNET congresses.

**Principles for strategy implementation – strategic action**

For practical implementation, the ASEAN-OSHNET principles have been described as follows (ASEAN-OSHNET Secretariat, 2017b):

a) gathering and exchanging of information on OSH, training courses and materials, appropriate technologies, and formulating and implementing standards and guidelines, among others;
b) developing a regional OSH knowledge base that is relevant and responsive to the needs of the ASEAN members;
c) matching of training needs with capabilities in the region, through the secondment of experts and trainees, with a view to promoting mutual assistance and self-help;
d) cost-sharing and the “lead shepherd” approach in implementing OSH activities and projects;
e) carrying out research in collaboration with universities, specialized research institutions, private sectors, and NGOs;
f) networking among OSH professional bodies;
g) articulating the ASEAN common position in response to international standards or policies;  
h) mobilizing funding resources and technical assistance from ASEAN members, dialogue partners, and international agencies;  
i) establishing links with related ASEAN bodies, dialogue partners, international agencies, and private sector-based regional organizations, including labour unions, employers’ associations, and professional OSH bodies; and  
j) disseminating information on OSH activities to the public, OSH professionals, and interested parties.

The Work Plan 2016–2020 contains 23 ongoing or planned projects, assigned to the member institutions and their partners (ALMM, 2016). Some of the projects are unique, while some are repeated annually on the basis of rotation:

a) development of guidelines and checklists;  
b) organization and hosting of regular meetings, congresses, and workshops;  
c) participation in, and contributing to, international events such as the World Safety Congress and  
d) Asia-Pacific OSH Conference;  
e) training of OSH experts and inspectors;  
f) joint research projects; and  
g) collection and dissemination of OSH data, e.g. national OSH profiles.

**ASEAN-OSHNET and HIV/AIDS prevention**

This programme is for the implementation of the ASEAN Declaration of Commitment: Getting to Zero New HIV Infections by 2030, Zero Discrimination, and Zero AIDS-Related Deaths, of 17 November 2011 in Bali, which was delegated to the responsibility of the ASEAN ministers of labour and further to the ASEAN Senior Labour Officials’ Meeting (SLOM).

In 2011 the SLOM established the Working Group on HIV/AIDS, (SLOM-WG-HIV). The working group, in its first meeting in 2011, adopted the SLOM-WG-HIV Work Plan 2011–15, in which the establishment of an ASEAN Business Coalition on HIV/AIDS (ASEAN-BCA) was included. In 2014, the 10th SLOM decided to subsume SLOM-WG-HIV under ASEAN-OSHNET, in order to streamline the issue of HIV prevention and control in the workplace, under the realm of occupational health.

The ASEAN BCA is now included in the ASEAN-OSHNET Work Plan 2016–2020 as a special thematic area (3.3). The programme contains three main areas (ASEAN Secretariat, 2016):

1. **ASEAN BCA on HIV/AIDS (ASEAN BCA).** The Coalition has been established and included in the Work Plan 2016–2020.  
2. **ASEAN Red Ribbon for Outstanding Workplace Awards (ARROW).** First awards were granted in the inaugural ARROW award ceremony, hosted by the Ministry of Manpower of the Republic of Indonesia in 2016.
3. ASEAN Guidelines on Essential Workplace Action for Enterprises on the Prevention and Management of HIV and AIDS in ASEAN Member States were approved in 2016. In line with ILO and WHO guidance, the guidelines cover principles of HIV/AIDS prevention policy at company level; recognition and testing; care; prevention of stigmatization and discrimination; confidentiality of health information; education; and the development of healthy workplace (12th SLOM, 2016; ASEAN Secretariat, 2017a).

7 Financing

ASEAN-OSHNET operates on a cost-sharing basis. The cost-sharing between governmental bodies makes the financing, for a substantial part, stable and predictable, and ensures continuity, enabling the secretariat and resources needed for operations, and providing basic funding, which is important for continuity. The members assigned to programme area coordination support the network by using their resources in kind.

Projects may have several sources of funding. The network has generated a resource mobilization strategy based on the cost-sharing between members, cost-sharing among ASEAN Member States; sometimes with support from ASEAN dialogue partners and external parties through resource mobilization efforts by the country coordinators, or in collaboration and with the support of the ASEAN Secretariat (Memorandum of Understanding 2000).

8 Outputs

The 15-year Anniversary Report, “Turning Visions into Actions” (ASEAN-OSHNET, 2015) contains a comprehensive list of achievements in all of the previous strategy and programme objectives on information, research, standards and guidelines, training, inspections, national OSH frameworks, and SMEs and the informal sector. Some examples of achievements are described in Annex 3. The outputs are produced either as collective outcomes of the network, by different programme groups of members, or by individual members for the use of the whole network. While translating ASEAN OSH research into practice, they meet the strategic objective on harmonization of OSH policies and practices in the ASEAN region, and on improvement of efficiency and coverage of modern OSH activities, including inspection.

9 Collaborative partners

As constant partners of ASEAN-OSHNET, the Plus Three countries, ILO, ISSA, and IALI, are invited regularly to ASEAN-OSHNET Coordinating Board Meetings. On an ad-hoc basis, other OSH organizations may be invited into partnerships, subject to the consensus of all ASEAN-OSHNET members. Examples include ICOH and EU-OSHA (ASEAN-OSHNET, 2015).
10 Follow-up and evaluation

ASEAN-OSHNET’s progress report is reported yearly at the SLOM, and every two years at the ALMM (ASEAN Secretariat, 2016).

The ASEAN-OSHNET Scorecard and national OSH profiles are used for both information and follow-up purposes.

The Work Plan 2016–2020 contains the plan for monitoring, follow-up, and reporting on the implementation of the Plan:

• The respective country coordinators will report the implementation progress of their respective items under the Plan of Action 2016–2020 at the annual ASEAN-OSHNET CBM.
• The ASEAN-OSHNET chair, with the assistance of the secretariat, will compile and report the progress of the Plan of Action 2016–2020 and report it annually to the SLOM, and, biennially, to the ASEAN-OSHNET CBM.
• Mid-term and final reviews of the Plan of Action 2016–2020 will be conducted and reported to the CBM by the secretariat (2018 and 2020, respectively).
• The implementation of the Plan of Action will be reported to the SLOM and ALMM.

11 Future challenges

Policy level

ASEAN-OSHNET has discussed on several occasions the future developments in OSH, and used the results in strategy and programme planning. An international event, the Fourth Singapore Workplace Safety and Health Conference, “Total WSH: the Future of Our Workplace”, 24–25 August 2016, Singapore, provided valuable input to the government-level OSH strategies, including the ASEAN labour ministers’ work plans and statement signed on 3 September 2017 in Singapore: the “Statement on occupational safety and health for economic growth” (Ministry of Manpower, Singapore, 2016; ALMM, 2017). ASEAN-OSHNET is given the task (together with the SLOM) to work for the implementation of the statement objectives:

• Raise the OSH standard through development of regulation.
• Build (and enhance) OSH inspection capabilities and capacities.
• Strengthen risk management.
• Enhance the collection of OSH data through the ASEAN-OSHNET Scorecard.
• Promote sharing experiences, best practices, and knowledge.
• Improve private-sector OSH capability.
• Encourage the participation of employers’ and workers’ organizations.
• Improve productivity through new technology that reduces workplace hazards.
• Reduce the social cost of injury and illness, through OSH improvement.
• Improve collaboration with key partners, the ILO, and Plus Three countries.

It provided the policy framework for future development of ASEAN-OSHNET activities.

**Technical level**

The near-future technical priorities are listed in the activities for 2016–2020 above, which are concordant with the ALMM policy objectives (ALMM, 2016).
References

Output references by ASEAN-OSHNET


HIV


General References


ASEAN-OSHNET Secretariat, 2013b. Introduction to ASEAN-OSHNET. Available at: http://www.asean-osh.net/ [last accessed 10 December 2017].


ANNEX 1.
ASEAN-OSHNET member countries and organizations

Extracted from the report, “Turning Visions into Practice”. (http://asean.org/storage/2012/05/Turning-Visions-into-Actions_ASEAN-OSHNET.pdf)

Brunei Darussalam

Department of Labour, Brunei, Ministry of Home Affairs
(www.lbour.gov.bn/Theme/Home.aspx)

Brunei Darussalam is unique in its own governance of health and safety. Instead of having one ministry on OSH, Brunei Darussalam functions within a steering committee, multi-ministry approach to addressing issues related to health and safety. Under the national OSH profile, the following strategic missions are identified:

a) to implement and enforce OSH legislation effectively;
b) to develop a competent and efficient workforce in OSH; and
c) to ensure strong tripartite involvement in raising OSH standards.

The Brunei Darussalam OSH profile aims to provide a benchmark for monitoring and assessing future OSH programmes and activities. It comprises information on enforcement and advisory authorities, laws and legislation pertaining to workplace safety and health, statistics, and ongoing government and private sector activities. The Brunei Darussalam national OSH profile is available at: http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---safework/documents/policy/wcms_346855.pdf.

Kingdom of Cambodia

Occupational Safety and Health, Ministry of Labour and Vocational Training
(mlvt.gov.kh/index.php/en)

Cambodia administers the OSH mandate through:

a) strengthening the OSH system at national level through the establishment of OSH regulations, extending a safety and health network to provincial level and a tripartite mechanism;
b) improving OSH inspection and law enforcement through capacity building, extending the coverage of inspection, developing plans and strategies to address the challenges of inspection, and ensuring OSH inspection information and investigation of work-related hazards;
c) encouraging OSH activities through employers’ and employees’ organizations, by assisting and promoting OSH cooperation among employers and employees;
d) extending OSH protection to small enterprises in rural areas, and to informal workplaces, through WISE and WISE training; and
e) promoting OSH training for farmers in target provinces through the WIND training programme.

Cambodia does not have a written national OSH policy or OSH-related articles in its National Socio-Economic Development Plan, but there are articles in the Royal Government Rectangular Strategy (Phase II) of the Fourth Mandate relating to the need for better work conditions, the establishment of social safety nets, and enhanced health services.


**Republic of Indonesia**

**Ministry of Manpower and Transmigration**

Indonesia has identified OSH as a national policy and has committed to three key missions:

1. Increase the establishment and supervision of OSH.
2. Increase the implementation of the OSH management system.
3. Increase participation by enterprises, workers, and communities on OSH implementation.

The key strategies are to:

a) develop OSH policies in accordance with needs;
b) increase capacity and capabilities in human resources for OSH;
c) increase facilities and infrastructure to support OSH inspection activities;
d) increase the establishment and implementation of the OSH management system; and
e) build networking and enhance the participation of institutions, personnel, and related parties in OSH activities.
f) Indonesia is assigned as the ASEAN-OSHNET programme area coordinator on research.


**Lao People’s Democratic Republic**

**Ministry of Labour and Social Welfare**
(www.molsw.gov.la)

The Lao PDR is still developing its national OSH policy and law. It is gradually putting in place a systemic approach towards raising OSH performance. A key to this effort was the establishment of
the Central Committee on OSH (CC-OSH) in 2009. This tripartite committee comprises members from the Ministry of Labour and Social Welfare (MOLSW), the Ministry of Trade and Industry, the Ministry of Agriculture and Forestry, the Ministry of Power and Mines, the Ministry of Education, the Ministry of Public Health, the Ministry of Construction and Transportation; and the Water and Environment Organization. The Lao Federation of Trade Unions represents workers, and the Lao National Chamber of Commerce and Industries represents the interests of employers.

To raise the Lao PDR’s OSH performance, the CC-OSH has a number of important roles, including to:

a) draft the National Plan on Occupational Safety and Health;
b) promote OSH laws, regulations, and agreements;
c) set up local OSH committees; and
d) report on OSH developments and performance.


Malaysia

Department of Occupational Safety and Health, Ministry of Human Resources

The publication of the Malaysian National Profile on Occupational Safety and Health (2008) was a major step by the Department of Occupational Safety and Health (DOSH), the Ministry of Human Resources, in providing complete information on the current status of OSH in Malaysia. In May 2009, the OSH Master Plan for Malaysia 2015 (OSH-MP 15) was launched. The MP 15 is a strategic plan developed at the national level to inculcate safety culture among employees in Malaysia.

There are four national strategies under OSH-MP 15:

1. Foster and enhance government leadership and practices.
2. Establish a preventative workplace culture.
3. Industry leadership and community engagement.
4. Strong partnership locally and internationally.

Malaysia has been assigned with ASEAN-OSHNET programme area coordination for OSH standard development.

Republic of the Union of Myanmar

Factories and General Labour Laws Inspection Department, Ministry of Labour, Immigration, and Population  
(www.mol.gov.mm/announcements-in-english)

The primary responsibility for safety, health, and working conditions rests with the Factories and General Labour Law Inspection Department (FGLLID) under the Ministry of Labour, Immigration, and Population.

In 2010 Myanmar set up its National Profile on Occupational Safety and Health and updated its second version in 2018, and has been formulating a national OSH strategy and programme to address OSH challenges and concerns. Recent initiatives include working environment measurements on noise, illumination, and ventilation; the formation of safety and health committees in factories; the establishment of private-public partnerships to train OSH professionals; OSH seminars; and national training strategies for labour inspectors.

Myanmar recognizes that most provisions in its Factories Act, 1951 are unable to keep pace with societal and technological changes. Hence, the FGLLID has formulated a new Occupational Safety and Health Law, in line with international standards and norms. The draft law received technical input from the ILO and the Korea Occupational Safety and Health Agency.

Myanmar’s national OSH profile is available at:  

Republic of the Philippines

Occupational Safety and Health Centre, Department of Labour and Employment (DOLE)  
(https://www.dole.gov.ph/)  
(www.OSHc.dole.gov.ph)

The DOLE is the lead agency in implementing and enforcing OSH policies and practices in the Philippines, and has set up a National Occupational Safety and Health Profile and National Occupational Safety and Health Medium-Term Plan (N OSH MTP) 2005–2010. The vision is for all workers to enjoy a better quality of life through OSH policies and programmes; to give all OSH stakeholders the capability to carry out cost-effective OSH preventative programmes of the highest quality, reaching out to the majority of workers in the formal and informal sectors, in all regions of the country; and to reduce work-related injuries and illnesses. Strategies include: harmonizing OSH systems and programmes and mechanisms, with a focus on prevention through policy, training, information, technical services, and research; and delivering and mobilizing quality OSH services.

The Philippines has been assigned responsibility for ASEAN-OSHNET programme area coordination on OSH training. The National OSH Country Profile of the Philippines is available at:  
Republic of Singapore

Occupational Safety and Health Division, Ministry of Manpower

The Singapore framework is designed to engender a paradigm shift and ingrain good workplace safety and health (WSH) habits in all individuals at the workplace. This is enshrined in three key principles of the framework, with risk management being the cornerstone. The underpinning principle under the framework is to eliminate or mitigate risks. The second principle calls for greater industry ownership of WSH outcomes. The third principle seeks to effect greater penalties on workplaces with unsafe practices and systems, even if accidents have not occurred.

To support the framework, the WSH Council – comprising industry leaders, government, and union representatives – was set up in 2008 to spearhead WSH initiatives. In 2011, the WSH Institute was also set up to help the Ministry of Manpower (MOM) and WSH Council recalibrate and ensure that policies and programmes continue to stay relevant and effective.

Four strategies have been developed to achieve the ambitious target of a fatality rate of 1.8 per 100,000 employed persons by 2018:

1. Build strong capabilities to better manage workplace safety and health.
2. Implement an effective regulatory framework.
3. Promote the benefits of WSH, and recognize best practices.
4. Develop strong partnerships locally and internationally.

Singapore has been assigned ASEAN-OSHNET programme area coordination on the development of OSH inspection. Singapore’s workplace safety and health profile (National OSH Profile) is available at: http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---safework/documents/policy/wcms_436953.pdf.

Kingdom of Thailand

Department of Labour Protection and Welfare, Ministry of Labour

The department, with the assistance of the National Institute of Occupational Safety and Health, initiated a National Master Plan on Occupational Safety, Health, and Environment (2012–16) and has in place the following missions:

a) to establish or develop OSH standards;
b) to monitor, control, and follow up on OSH issues that are problematic;
c) to develop and promote OSH activities; and
d) to develop OSH management systems.
Five strategies have been identified to meet these objectives:

1. Promoting labour protection with effective OSH standards.
2. Promoting and strengthening the capacity of OSH networks.
3. Developing and managing OSH knowledge.
4. Developing OSH information systems; and
5. Developing an effective mechanism for OSH administration.

Thailand has been assigned with ASEAN-OSHNET programme area coordination on OSH information, including the establishment and maintenance of the network website. Thailand’s national occupational safety and health profile 2015 is available at: http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---safework/documents/policy/wcms_436936.pdf.

**Socialist Republic of Viet Nam**

**Department of Work Safety, Ministry of Labour, Invalids, and Social Affairs**
(www.molisa.gov.vn/en/Pages/Home.aspx)

On 25 June 2015, the National Assembly passed the Law on OSH. Among other things, this law widens the coverage for labourers without labour contracts, particularly for those working in agriculture, craft villages, and household businesses. In order to ensure the rights of workers in the informal areas, the law also regulates the fund for occupational accidents and diseases insurance, with the volunteer participation. Major OSH policies have gradually been integrated in the law, including a national policy; national advisory council; national programme; national profile; support mechanisms for the promotion of working conditions; collaboration among management, workers, and their representatives, with a policy on the prevention of occupational accidents and diseases; regulations on promotional frameworks for OSH services; information; and OSH training and inspections. The law covers workers in sectors without labour relations (the informal sector, private sector, and agriculture).

Viet Nam has been assigned ASEAN-OSHNET programme area coordination on the development of national OSH frameworks. Viet Nam’s national OSH profile is available at: http://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---sro-bangkok/documents/policy/wcms_125431.pdf.
ANNEX 2.
Current activities listed in the ASEAN-OSHNET Work Plan 2016–2020

(Source: ASEAN Secretariat, 2016.)

- Development of a common checklist for OH and OSH inspection standards.
- Collaborate with SLOM-WG on convening the ASEAN Labour Inspection Conference.
- Training of trainers on labour inspection in SMEs and the informal sector.
- ASEAN-OH and OSHNET Awards.
- Workshop to improve the ASEAN-OH and OSHNET Scorecard 2017–18, Thailand ILO.
- Workshop on OH and OSH data collection and analysis (including on work injury compensation systems).
- Participate in international events to raise the ASEAN-OH and OSHNET profile.
- Annual updating on ASEAN Member States’ training requirements and expertise.
- Development of an ASEAN risk management guidebook.
- Regular updating of national OH and OSH profiles using ILO Convention 187 (Promotional Framework for OH and OSH) as a framework.
- Stock-taking of existing injury compensation institutions in ASEAN Member States, for OH and OSH standards and performance enhancement.
- Workshop on prevention and awareness-raising on work injury compensation.
- Stock-taking of annual national OH and OSH campaigns in ASEAN Member States.
- Workshop on OH and OSH and work injury compensation in the informal sector and rural employment.
- Training of trainers to enhance understanding and implementation of the Guidance Note on OH and OSH Management Systems for SMEs.
- Undertake joint research on risks and economic benefits of OH and OSH among research institutions in ASEAN, 2017.
- HIV prevention and control.
- Contributing to the ASCC Blueprint, 2025 Strategic Measures.
- Support accelerated implementation among ASEAN Member States to extend coverage, accessibility, availability, comprehensiveness, quality, equality, affordability, and sustainability of social services and social protection.
- ASEAN Red Ribbon for Outstanding Workplace (ARROW).
- ASEAN Guidelines on Essential Workplace Action for Enterprises on the Prevention and Management of HIV and AIDS.
- Development of ASEAN guidelines on HIV counselling and testing in the workplace.
- Workshop to review the current practices on HIV in migration, recruitment policies, and mandatory testing in the workplace.
- ASEAN regional forum on addressing stigma and discrimination in the workplace against people living with HIV and AIDS.
ANNEX 3.
Examples of outputs in different programmes areas by ASEAN-OSHNET

<table>
<thead>
<tr>
<th>Programme area</th>
<th>Coordinating country</th>
<th>Key outcomes in different countries (examples)</th>
</tr>
</thead>
</table>
| **Information**   | Thailand             | a) ASEAN-OSH website; national OSH profiles.  
b) First to third ASEAN-OSHNET conferences; annual activity reports.  
c) “Turning the Vision into Actions: 15 Years of Collaboration” (ASEAN-OSHNET, 2015).  
d) ASEAN-OSH Scorecard.  
e) Awards.                                                                                                                                     |
| **Research**      | Indonesia            | a) Several research projects; Rice dust, OSH in SMEs.  
b) Survey on work conditions in SMEs.  
c) Participatory OSH research projects.  
Formulation of research strategy  
- Comparative studies of OSH gaps and issues.  
- Broader OSH issues: GHS, OSH-MS, OSH culture.  
- Risk sectors: construction, agriculture, garments, mining, SME and the informal economy.  
- Specific hazards and risks.  
- Standards, capabilities, and tools.  
- Good OSH practices and low-cost solutions. |
| **Standards and guides** | Malaysia              | a) Code of integrity; Good OSH practices.  
b) ASEAN-OSHNET Guidance Note on OSHMS for SMEs.  
c) ASEAN Guidelines on Classification, Labelling, and Packaging of Hazardous Chemicals.  
d) ASEAN Guidelines on Implementation of OSH-MS in SMEs (ASEAN Guidelines with 14 checklists).  
e) ASEAN-OSHNET Guidelines for the Retail Industry.  
f) ASEAN-OSH Guidelines for Good Occupational Health Practices (the ASEAN Occupational Safety and Health Network and the Ministry of Manpower, Singapore).  
g) ASEAN Guidelines for OSH, Prevention, and Control of HIV/AIDS in the Workplace. |
| **Training**      | Philippines           | a) Approximately 20 OSH courses in different countries.  
b) Assessment of ASEAN-OSHNET members’ training needs.  
c) Courses such as “Training for Safety and Health Officers” and “Train the Trainers Course on Forklift Safety”.                                                                 |
<table>
<thead>
<tr>
<th>Programme area</th>
<th>Coordinating country</th>
<th>Key outcomes in different countries (examples)</th>
</tr>
</thead>
</table>
| Inspection     | Singapore            | a) Strengthening capabilities for better OSH management.  
|                |                      | a) Good inspection practice.  
|                |                      | a) Inspector training.  
|                |                      | a) Effective implementation through strengthened inspection. |
| National OSH framework | Viet Nam and Lao PDR | a) Profile chapter on national OSH frameworks.  
|                |                      | b) National OSH strategies and programmes in the Lao PDR, Cambodia, the Philippines, and Myanmar.  
|                |                      | c) OSH framework development programmes in all members, for shaping national OSH frameworks.  
|                |                      | d) Policy dialogue and framework description.  
|                |                      | e) Drawing up national OSH strategies and programmes by all members. |
| SMEs and the informal economy | Cambodia | a) ASEAN-OSHNET. Good Occupational Safety and Health Practices 2008–09: 19 reports on various OSH development projects in nine ASEAN-OSH countries and in two Plus Three countries, including Cambodia OSH projects for SMEs and the informal sector by using participatory low-cost approaches, WIND, WISH, and WISCON.  
|                |                      | b) Several WIND, WISH, and WISCON projects for SMEs on different islands of Indonesia, and in the Lao PDR and Myanmar. |

(Source: ASEAN-OSHNET, 2015; Qun T F, Kawakami T. Good Occupational Safety and Health Practices 2008/2009; and other ASEAN-OSHNET output references, below.)
BSN
Profile of the Baltic Sea Network on Occupational Health and Safety

(http://www.balticseaosh.net/)

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Annex 1. Members of the Baltic Sea Network on Occupational Health and Safety ............................................. 97
## Abbreviations and acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAuA</td>
<td>Federal Institute for Occupational Safety and Health (Germany)</td>
</tr>
<tr>
<td>BOHS</td>
<td>basic occupational health services</td>
</tr>
<tr>
<td>BSN</td>
<td>Baltic Sea Network on Occupational Health and Safety</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>EU-OSHA</td>
<td>EU Occupational Safety and Health Agency</td>
</tr>
<tr>
<td>FIOH</td>
<td>Finnish Institute of Occupational Health</td>
</tr>
<tr>
<td>IALI</td>
<td>International Association of Labour Inspection</td>
</tr>
<tr>
<td>ICOH</td>
<td>International Commission on Occupational Health</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organization</td>
</tr>
<tr>
<td>MOU</td>
<td>memorandum of understanding</td>
</tr>
<tr>
<td>NDPHS</td>
<td>Northern Dimension Partnership in Public Health and Social Well-Being</td>
</tr>
<tr>
<td>NFA</td>
<td>Det Nationale Forskningscenter for Arbejdsmiljø (National Research Centre for the Working Environment) (Denmark)</td>
</tr>
<tr>
<td>NRCWE</td>
<td>National Research Centre for the Working Environment (Denmark)</td>
</tr>
<tr>
<td>OH</td>
<td>occupational health</td>
</tr>
<tr>
<td>OSH</td>
<td>occupational safety and health</td>
</tr>
<tr>
<td>SEE</td>
<td>South-East Europe</td>
</tr>
<tr>
<td>SEENWH</td>
<td>South-East European Network on Workers’ Health</td>
</tr>
<tr>
<td>SEEWA</td>
<td>South-East European Workplace Academy</td>
</tr>
<tr>
<td>SME</td>
<td>small to medium-sized enterprise</td>
</tr>
<tr>
<td>STAMI</td>
<td>National Institute of Occupational Health (Norway)</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>WHO/Europe</td>
<td>WHO Regional Office for Europe</td>
</tr>
</tbody>
</table>
The profile of the Baltic Sea Network on Occupational Health and Safety (BSN) was prepared by Professor Jorma Rantanen. It is published as an appendix to the ILO Working Paper presenting the results of the multiple case-study analysis of six regional occupational safety and health (OSH) networks. The study was initiated in order to inform the modernization of the ILO portfolio of activities in OSH knowledge and information. It benefited from financial support provided under the Partnership Agreement between the Government of South Korea and the ILO 2015-2017 (GLO/15/50/ROK).

The study covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. The results allow a better understanding of how and why OSH agencies, institutions, organizations and experts collaborate with one another. They provide invaluable descriptive information covering the diversity of existing collaborative arrangements and key characteristics of productive regional OSH networks. They highlight similarities and differences in ways of organizing collaboration in OSH and provide new knowledge to support international cooperation which has always been and remains a key role of the ILO. They can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of the network.

Claude Donald Loiselle
Coordinator – OSH network, knowledge and information management
Labour Administration, Labour Inspection and
Occupational Safety and Health Branch (LABADMIN/OSH)
International Labour Organization
Summary

The Baltic Sea Network on Occupational Health and Safety (BSN) has been active for over 20 years and has proved to be effective in carrying out inter-institutional and professional collaboration in the field of occupational health and safety, covering 10 countries around the Baltic Sea region. With efficient partnerships and coordinated policies, it has produced and distributed information for the members, and collected information on member countries for common use in the development of occupational health (OH) and occupational safety and Health (OSH). The BSN’s activities can be summarized as follows:

- The mission of the network is to communicate and exchange information on OH and OSH, and to facilitate research, development, and collaboration between the national OH and OSH institutions and experts in the Baltic Sea region.
- The main activities are communication mainly through the Internet; organization of training courses; carrying out joint research projects; publishing reports on the basis of research; and organizing expert meetings. The policy, strategy, and management decisions are made in the annual network meetings.
- The BSN has also networked with the Northern Dimension Partnership in Public Health and Social Well-Being (NDPHS), the South-East European Network on Workers’ Health (SEENWH), and with several European and international organizations including EU-OSHA, the ILO, WHO/Europe, IALI, and ICOH.

1 Introduction

In the mid-1990s, the Baltic countries, as well as Poland and Russia, were in transition, as their socio-economic systems went through fundamental changes in all societal sectors, including OH and OSH. The Baltic States and Poland were also preparing for EU membership. In order to facilitate the restructuring of OH and OSH in these countries, a Consultation on Strengthening Occupational Health Services in the Baltic Countries was organized in the WHO Regional Office for Europe from 6–9 September 1995 (WHO, 1995). One of the outcomes of the consultation was an agreement on strengthening of institutional and professional contacts, and the development of information systems that support the OH and OSH in these countries, especially by supporting expert activities and services. Additional goals were to review and discuss the technical and educational support rendered so far to the Baltic countries, and to investigate the type of support needed in the future. The meeting also discussed possible mechanisms for international assistance to support the development of work environments OH and OSH services in the Baltic countries (WHO, 1996).

The establishment of the telematics information network was agreed upon by the participants, and the Finnish Institute of Occupational Health (FIOH) was appointed as the secretariat of the network. The network’s website was opened in 1997.

Gradually the area and scope of the BSN was expanded to cover all of the countries around the Baltic Sea, and the substantive content was developed to collect and share OH and OSH information for all members, and on a broad scope of substantive items.
The Baltic Sea region has a population basis of 166 million, and about 60–70 per cent of the adult population belong to the workforce (in Russia, only the north-western region is considered.)

2 Formal status and constitution

Initiated under the “patronage” of the WHO Regional Office for Europe, the BSN network is a voluntary, collaborative, non-profit entity made up of 13 institutions and experts from 10 northern European Countries around the Baltic Sea. It has a decentralized architecture of fully autonomous national focal points located in the key OSH or OH institutions in each country. All institutions participate on a voluntary, peer-to-peer basis, and are responsible for the content, quality, and maintenance of their own country information. The focal points produce, collect, deposit, and update the information on their Web pages in their national servers. The Web pages provide information on the OSH systems and strategies, programmes and projects, as well as outcomes of the institutions.

3 Mission, policy, and strategy

Mission

The BSN is an expert information network. Its purpose is to strengthen peer-to-peer networking and collaboration between expert institutions and respective bodies in OH and OSH in the Baltic Sea Region. A major function of the BSN is to facilitate, through the Internet, the exchange of information among participating countries, and the provision of easy and immediate access to country OSH information in the region and in other countries.

Policy

At the operational level, the BSN aims at bringing the essential country information in OH and OSH within easy reach of interested parties, by constantly transmitting up-to-date information in the network data sources. The network facilitates the search of information by keeping up useful links to other OH and OSH information sources.

Through inter-institutional networking, the BSN provides a forum for transmitting information and developing good models and good practice guidelines for OH and OSH policies and practices. The activities also include the dissemination of information on OH and OSH training possibilities in the member countries.

In creating permanent contacts between experts and OH and OSH institutions, the network can provide support to OH and OSH authorities when needed, and can encourage countries to develop national networking arrangements in order to strengthen the collaboration between OH and OSH institutions and organizations, and to develop the OH and OSH infrastructure within each country.
The network also offers a framework and stimulation for joint bilateral and multilateral projects among member countries.

Strategy

Originally founded for support to ensure the best possible access to OSH research and expert information for Baltic countries that were in socio-economic transition, the BSN has changed its profile gradually to become a multidisciplinary, Internet-based network covering broad areas of development in OH and OSH, with geographical coverage of the whole northern European subregion around the Baltic Sea. The scope of activities has been expanded to cover expert meetings and research and development projects, in collaboration with partners, particularly the Northern Dimension Partnership in Public Health and Social Well-Being (NDPHS) (NDPHS, 2018).

The initial orientation was primarily in occupational health, but has become more multidisciplinary, to cover occupational hygiene, ergonomics, psychology, safety, and the economic aspects of OH and OSH.

The BSN serves as a contact forum for leadership of the national institutions, and provides regular contacts for experts in OH and OSH institutions. The network provides scientific and professional expert support for OH and OSH authorities when needed, and encourages countries to develop national networking in the field of OH and OSH, in order to strengthen collaboration between institutions and organizations.

The network also aims to provide regular contacts with the international and European OH and OSH organizations such as the ILO, WHO, and EU-OSHA.

4 Structure, governance, and coordination

Structure

The backbone of the BSN is its national institutes and departments. The BSN network has a decentralized architecture between fully autonomous national focal points in each country. According to the basic principles of voluntary networking, the BSN is a “flat” organization with as equal membership as possible. Experience, however, shows that a sustainable network needs some kind of leadership, coordination, and organization.

The network collaborates closely with the WHO Regional Office for Europe; the ILO, Geneva; the European Commission; the European Agency for Safety and Health at Work; EU-OSHA, Bilbao; and ICOH, all of which participate in and observe the BSN activities.

The BSN national focal points are “nested” in the national member institutions, and enjoy institutional and financial support from them.
The BSN organization consists of a coordinating secretariat and national focal points located in one of the member organizations in each member country. The focal points are supported by the leadership of the host institute, which also provides institutional support including travelling costs, technical facilities, and information support.

The main organizational event is the annual meeting of all members. The meeting reports on activities in the member countries, and on network projects, and agrees upon the activities for the coming year.

The annual network meeting (the directors of 13 institutes) is the principal decision-making body, which decides on meetings, projects, and participation in external collaboration. Most of the practical programmes and tasks are carried out on the principle of division of work.

Coordination

One of the network members' representatives (usually the director of the institute or national focal point) is elected by the network members as coordinator, and his or her institute as the coordinating institute.

Regular meetings for network member institutions are organized once or twice a year. These meetings discuss and agree on guidelines and directions for improving the structure and content of regional and national information, also from the technical point of view. The network serves as one subregional forum for regional collaboration between OH and OSH institutions and experts in an integrating Europe.

5 Members

The BSN has 13 members from 10 countries around the Baltic Sea. The membership is mainly occupational health oriented: 60 per cent of members are institutes of occupational health; 40 per cent ministries' OSH departments or a government health agency; and the rest an OSH institute, OSH research and information centre, or a medical university. The members are:

- National Research Centre for the Working Environment (NFA), Denmark (http://www.arbejdsmiljoforskning.dk/en)
- Finnish Institute of Occupational Health, Finland (https://www.ttl.fi/en/)
- Federal Institute for Occupational Safety and Health (BAuA), Dortmund, Germany (http://www.baua.de/en/Homepage.html)
6 Functions and programmes

The main activities of the network are:

a) collecting, compiling, organizing, and disseminating information on OH and OSH;
b) reporting of occupational accidents and diseases, and harmonization of statistics;
c) training and education of experts in OH and OSH;
d) organizing expert meetings on OH and OSH; and
e) carrying out research and development projects on OH and OSH.

Network meetings

Decision-making and future planning, as well as the follow-up of network activities, takes place in the network annual meetings, which rotate between the national members. The co-chairs of the meetings are the network coordinator and the rotating co-chair from the host institution of the meeting. With only a few exceptions, the national focal points have participated in the annual meetings in corpore. The seminars and training courses may be organized in connection with annual meetings. In addition to the national focal points, observers from collaborating organizations also participate – for example, from the ILO Geneva; WHO Regional Office for Europe; the EU; the NDPHS, EU-OSHA, and ICOH. The two-day meeting may contain, for example, the following agenda items:

a) situation analysis of OH and OSH policies in Europe and worldwide;
b) OH and OSH strategies of the European and international organizations;
c) theme sessions on key Baltic, European, or international items;
d) important events and national plans in the member countries;
e) strategies of member institutions;
f) reporting on ongoing and completed projects;
g) planning of new projects;
h) BSN participation in partners’ projects and programmes; and
i) group work or workshops on important and topical themes.

Projects

The BSN has carried out special projects since its foundation. Examples include the “Reliable occupational accident registration – an indicator for prevention” project, in collaboration with the NDPHS, and “Training of occupational health personnel in the BSN countries”. Currently discussion is ongoing concerning participation in the EU Cost projects. Collaboration in projects with the NDPHS will be continued (see below).

The BSN served as the leading partner for the NDPHS programme, Developing the National OH and OSH System and Improving Health and Preventing Accidents in the High-Risk Sectors in North-West Russia, 2008–09. It also took a leading role in the NDPHS-EU programmes on “Reliable occupational accident registration” 2013–14. At the beginning of 2017, a new two-year project was launched, funded by the European Neighbourhood Instrument (ENI): “Better prevention, identification, and reporting of work-related and occupational diseases and emerging risks”. The expected results are lists of “comparable” occupational diseases; information on their criteria and recognition practice in the NDPHS member countries and Belarus; the estimated number of work-related diseases; and recommendations for reliably recording them. The BSN has also been a key partner in surveying the training programmes in occupational health in the Baltic countries.

In the early years of the BSN, priority was given to capacity building of members, and for network activities in training – for example, in the then-new computer-based communications and use of the Internet, and drawing up of national OH and OSH profiles. Later on, fewer training courses were organized, but there was more dissemination of information in the Baltic region and in Europe on OH and OSH courses and events. The reports published by the network are still used as material for training courses organized by BSN partners or member institutes.

Web information

From the very beginning, the BSN has maintained a website for reporting the basic information of the network – on its activities, meetings, projects, and other topics. The main sites are the chapters on BSN in general, participating institutes, projects, meetings, current news, and publications.

Country profiles

Each national focal point has prepared a basic information package on the country, and gives links to key actors and institutions that are relevant from the OH and OSH point of view. The
country profiles contain a brief description of the BSN member institute; contact information; OH and OSH legislation; other links in the country; training courses and conferences; public services website links; and information on the parliament, government, statistics office, social security system, and accident and other insurance.

A typical website structure is that of Germany:

<table>
<thead>
<tr>
<th>Germany country profile</th>
<th>Basic information on the country</th>
<th>Information by subject area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Germany national focal point</td>
<td>Basic info on the institute.</td>
<td>Safety and health at work</td>
</tr>
<tr>
<td>Federal Institute for Occupational Safety and Health (BAuA).</td>
<td>Contact information.</td>
<td>Annual Report on Safety and Health at Work (SUGA) of the Ministry of Labour and Social Affairs (BMAS):</td>
</tr>
<tr>
<td>Kooperationsstelle Hamburg IFE GmbH.</td>
<td>Information by subject area (see right).</td>
<td>The Federal Institute for Occupational Safety and Health (BAuA) provides information from A to Z on their Web portal:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The New Quality of Work Initiative (INQA) promotes good practice in the workplace and is supported by institutional OSH stakeholders and social partners: <a href="http://www.inqa.de/">http://www.inqa.de/</a> (In German).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical Rules for Hazardous Substances:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Workplace Air Limit Values.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Workplace Biological Limit Values:</td>
</tr>
</tbody>
</table>
Profiles are available in the BSN website for nine other member countries and three international organizations: EU-OSHA, ILO, and WHO/Europe.

The new joint strategy with the OH and OSH Expert Group of the NDPHS includes further elements for profiling at the national level, and for strengthening and maintaining the information systems within the NDPHS-BSN.

The links to national focal points and international partners are available on the BSN website, and the profiles of the countries provide numerous further links to their national institutions, constituents, and partners, as well as national statistics. This facilitates and organizes the searching of data from the countries.

**Meeting reports**

The network meetings are well documented, as is the information of the key decisions, agreements, and plans. The meeting information also covers the materials from the presentations in the meetings or associated seminars. The meeting reports are available on the BSN website: http://www.balticseaoh and osh.net/meetings/.

<table>
<thead>
<tr>
<th>Country Profile</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ergonomics Industrial Science: <a href="http://www.gfa-online.de/englisch/english.php">http://www.gfa-online.de/englisch/english.php</a>.</td>
</tr>
</tbody>
</table>
Data repositories on OH and OSH

The BSN does not have its own data banks or other repositories. The archives of the network describe only the events in the network activities, but the produced publications and reports are archived. The links to the national focal points, however, open the contacts to data banks and national statistics and publications of the institutions.

As the affiliate NDPHS membership and the joint strategy with the OH and OSH Expert Group of the NDPHS links the BSN with the NDPHS, the large data repositories of the NDPHS are available to the BSN, and the BSN data will be for the most important parts stored in that database.

Contents of the network Web pages

The BSN uses Internet technologies for information distribution. The regional main homepage contains information about the network, links to international organizations, and electronic publications. It also provides access to each participating country’s national homepage. Besides producing pages in the English language, the BSN encourages participating countries to produce and collect network information in their national languages.

The basic structure of the BSN Web pages has been standardized. Country home pages have the following main categories:

a) background information;
b) contact information;
c) organizational profiles;
d) OH and OSH information sources;
e) information by subject areas;
f) news and activities;
g) training, courses, and conferences; and
h) legislation.

Information activities are the most important issues for the BSN, which aims at bringing essential OH and OSH data to all member countries, by constantly transmitting up-to-date information in the network data sources. The network also maintains links to other OH and OSH information sources.

The regional main homepage of the network is maintained by the coordinator institute, earlier the FIOH, and nowadays the Institute of Occupational and Environmental Health, Riga. As a technical focal point, the coordinator institute gives secretarial support, e.g. in organizing meetings, and technical support. In principle, all the activities are carried out on an own-account basis; sometimes the individual institutes may provide support for special network activities or events, if needed.
The BSN is a forum for transmitting and developing good models and good practice guidelines, and for disseminating information on OH and OSH training possibilities in the member countries. In creating permanent contacts between experts and OH and OSH institutions, the network can provide support to OSH authorities when needed, and encourage member countries to develop national networking arrangements in order to strengthen the collaboration between OH and OSH institutions and organizations and to develop the OSH infrastructure within each country. The network may also offer a framework and stimulation for joint bilateral and multilateral projects among the member countries.

7 Financing

The BSN does not have a special budget; all the resources are provided by the member institutions in kind. The costs of activities of the focal point – such as technical facilities, communications, and office space – are provided by the host institutes, as the personnel active in the BSN belong to the staff of the institute. The costs of participation in the network meetings are also covered by the host institutes. The costs of the coordinator, secretariat, and the network website, which naturally are higher than those of the members’ national focal points, are covered by the coordinator institute. Funding for joint projects by the network is covered by special project applications from various external financing sources.

8 Outputs over the past few years

Some of the key outputs of the BSN are listed here. Further examination of the relevant documents is possible at the BSN website.


9 Collaborative partners

The BSN has regular contacts with several other networks in OH and OSH or related fields. Most important among them are briefly described here for general orientation and for the nature of collaboration.

Northern Dimension Partnership in Public Health and Social Well-Being (http://www.ndphs.org/)

The NDPHS is a political and policy framework for cooperation involving the EU, its Member States in the northern European region, and the European Economic Area (EEA) countries, Iceland and Norway, and North-West Russia. It aims at providing a common platform for promoting dialogue and concrete cooperation, as well as strengthening stability and promoting economic integration, competitiveness, and sustainable development in northern Europe.

The following priority sectors have been agreed for Northern Dimension Cooperation: economic cooperation; freedom, security, and justice; external security; research education and culture; the environment; nuclear safety; natural resources; and social welfare and health care. Currently, there are four Northern Dimension partnerships in place for the implementation of those priorities: environment (NDEP); culture (NDPC); public health and social welfare (NDPHS); and transport and logistics (NDPTL). The NDPHS is a cooperative effort of ten governments, the European Commission, and eight international organizations in the northern European area, and provides a regional forum for concerted action to tackle challenges to health and social well-being in the region.

Collaboration with the BSN is continuous, regular, and close, and includes: coordinated strategies; the division of work; joint projects and courses; and mutual participation and representation in meetings and expert groups, one of which is the OSH Expert Group. (For further details see: http://www.balticseaosh.net/wp/wp-content/uploads/2016/11/NDPHS-EG-OSHBSN.pdf.)
The strategic activities of the partners are based on the long-term action plan of the OSH Expert Group, which was agreed on in the OSH Expert Group and BSN joint meeting in Tallinn, September 2015, and further confirmed in the Partnership Annual Conference (PAC) meeting in November 2015.

The plan has the following objectives:

1. **Tripartite situational OSH analyses for better decision-making and addressing OSH challenges in the Northern Dimension area.**

   - Update and draft comprehensive national OSH profiles (outline available). During the implementation of the “Health at Work” strategy, most of the countries drafted tripartite OSH profiles, which are now in need of regular updating.
   - Empower the members to draft in-depth profiles on specific topics.
   - Encourage the members to ratify related OSH ILO conventions.
   - Improve the comparability of relevant indicators (occupational accident and disease statistics).
   - Disseminate and promote the results and recommendations of the “Reliable occupational accidents registration – indicators for prevention” project (Realocc), which ended in March 2015; now under discussion in EUROSTAT, EU-OSHA.
   - Project to be launched: Better prevention, identification, and reporting of work-related and occupational diseases and emerging risks.

2. **Coordinate national policy frameworks for health and safety at work, and for the provision of working conditions conducive to health and well-being.**

   - Draft and update national OSH programmes, based on the above tripartite analyses (profiles), including action plans that are in line with WHO, ILO, and EU strategies.

3. **Coordinate special national programmes for the development of OSH services for all working people.**

   - Further improve the quality of OSH systems in countries with an operational system.
   - Develop basic OSH concepts in countries in need of improved services. Concept to be approved at the highest political level. Drafting a questionnaire and survey of quality standards for OSH specialists’ training, initiated in autumn 2015.

4. **Higher national commitment to the prevention of occupational hazards.**

   - Based on the priorities set in the above programmes (item 2), each member defines its targeted areas and hazards, and related prevention programmes.
   - Development of an Arctic OSH network aimed at improving work and working conditions in the Arctic environment; part of the Finnish presidency of the Arctic Council 2017–19.
5. Providing a strengthened training framework for OHS staff in the Northern Dimension area.

- Exploring training needs in individual countries, with the aim of developing suitable curricula for several countries in the region.
- Organizing cooperation with European and national training organizations.

6. Implementing policies more practically, by improving information dissemination and ensuring the present level of information dissemination.

South-East European Network on Workers, Health (SEENWH)
(http://seehn.org/partnerships-in-health/partners/south-east-european-network-on-workers-health-seenwh/)

The SEENWH network is an international network of WHO collaborating centres for occupational health, occupational health institutes, and WHO national focal points in South-East Europe, that collaborate with WHO/Europe on occupational health issues. The members of the network are occupational health institutions from 9 participating countries: Albania, Bosnia and Herzegovina, Bulgaria, Croatia, the former Yugoslav Republic of Macedonia, Montenegro, Romania, Serbia, and Turkey.

This network serves as a forum for exchanging and disseminating information and knowledge; a platform for developing and sharing good models and good practice guidelines; a basis for developing programmes for training and education of professionals; and a framework for bilateral and multilateral projects enabling the best possible use of resources available. The main focus in the activities is the implementation in the SEE subregion of the WHO Global Strategy on Occupational Health for All, and the WHO Global Action Plan on Workers’ Health. The South-East European Workplace Academy (SEEWA) serves as the expert training network for the subregion.

A strategic agreement has been concluded in the form of an MOU between the BSN and SEENWH. The MOU includes collaboration in the field of occupational health; exchange of information; collaboration in training; research; and mutual participation in meetings and joint projects. For future themes in collaboration, the following items were listed in the 21st Annual Meeting of the BSN, with the participation of the SEENWH chair, Professor Bislimovska (Bislomovska, 2014; BSN and SEENWH, 2015):

- Occupational health services for all, including SMEs and farmers.
- Situation analysis of asbestos exposure, and elimination of asbestos-related diseases.
- Prevention of occupational diseases and accidents in high-risk sectors.
- Improving the work ability of ageing workers.

For further details see: BSN and SEENWH 2015 and http://hdmr.hlz.hr/6kongres/pdf/6k-prez--Karadzinska--See_Network.pdf.
European and international partner organizations

Northern Dimension Partnership in Public Health and Social Well-Being (NDPHS) (www.ndphs.org/).

Collaboration is very close with this EU network, and particularly with its OSH Expert Group. The collaboration covers wide topics in OSH, including, among other things, the development of statistics and reporting of occupational accidents and diseases.

European Agency for Safety and Health at Work (EU-OSHA), Bilbao, Spain (https://osha.europa.eu/fi)

EU-OSHA is the EU information agency for OSH. It contributes to the European Commission’s Strategic Framework for Safety and Health at Work (current strategy period 2014–2020) and other relevant EU strategies and programmes, such as Europe 2020. The main activities are:

The Healthy Workplaces campaigns; Online Interactive Risk Assessment (OIRA) project.

- Two-year campaigns to raise awareness of OSH topics across Europe.
- Provision of online risk assessment tools for SMEs, to assess and manage risks in the workplace.
- The Extensive Enterprise Survey provides a snapshot of how safety and health risks are managed in European workplaces.
- “OSHwiki” – a collaborative online encyclopaedia of accurate and reliable information on OSH.
- Foresight projects highlight and study new and emerging risks in OSH.
- OSH overviews – on specific OSH topics, to identify priorities.

NAPO film is a series of short, light-hearted, language-free films on important workplace safety and health topics.

EU-OSHA participates in the BSN meetings, and the BSN uses information provided by the EU-OSHA. For further details, see: http://www.balticseaosh.net/wp/wp-content/uploads/2016/11/BSN-EU-OSHA-activities.pdf.

WHO Regional Office for Europe (http://www.euro.who.int/en/home)

The WHO Regional Office for Europe (WHO/Europe) is one of six regional WHO offices, covering 53 countries and carrying out all the key WHO activities. The Regional Office is governed by the Regional Committee (RC), consisting of the representatives of the ministries of health of 53 Member States. The regional director (RD) is the chief executive responsible for the RC. The WHO/Europe implements several themes in occupational health; national programmes for the elimination of asbestos-related diseases; prevention of cancer; national occupational health profiles; and promotion of the health of working people. The WHO/Europe office participates reg-

Participation in, and support for WHO policies, takes place through participation in the WHO/Europe contribution to the WHO Global Plan of Action on Workers’ Health.

Collaboration with international organizations

International Labour Organization, Geneva

Collaboration with the ILO is focused on the development of good OSH practices, on statistics and reporting, and on capacity building, training, and education in OSH, for experts and social partners.

International Commission on Occupational Health
(http://www.icohweb.org/site/homepage.asp)

The International Commission on Occupational Health (ICOH) is the leading global professional association in the field of occupational health, with a membership of 2,000 professionals from 93 countries. The main functions of ICOH are research, training and education, information and development of good practices, plus activities to foster the development of professional occupational health ethics in all its aspects throughout the world. ICOH has decided on substantive strategic priorities for the present strategy period 2015–18 as follows: death, disability, and disease; risk management 2.0; exposure elimination; and better analysis on:

a) non-communicable cancer, CVDs, and respiratory disorders;
b) communicable diseases – tropical and others;
c) injuries, in particular in low- and middle-income economies;
d) musculoskeletal disorders; and
e) psycho-social factors and disorders.


10 Follow-up and evaluation

The member institutions include a chapter on BSN in their annual reports. The externally funded projects will be reported to and evaluated by the financier. The BSN annual meeting receives activity reports on the contributions to the network activities and outputs. No systematic evaluation of network activities, outcomes, and effects has so far been made.
11. Future challenges

The future challenges for all member countries are approximately the same, and are well recognized by the international organizations, the EU, NDPHS, national OH and OSH bodies, and research communities (European Political Strategy Centre, 2017) – for example:

a) providing an evidence basis for policy-making;
b) identifying emerging trends in OSH;
c) generating effective responses to new problems;
d) considering the growing problems in new modes of employment (non-standard work);
e) new working schedules and working hours;
f) ageing and vulnerable workers, and protecting their health and work ability; and
g) the overall increase in occupational stress among working people.


ANNEX 1.
Members of the Baltic Sea Network on Occupational Health and Safety

The BSN has 13 members from 10 countries around the Baltic Sea. The following institutions act as national focal points of the network. Brief descriptions of their profiles are presented here:

**National Research Centre for the Working Environment, Denmark**
(http://www.arbejdsmiljoforskning.dk/en)

The National Research Centre for the Working Environment (NRCWE) is a national research institute under the Danish Ministry of Employment. It has the following tasks:

a) to provide consultancy services within the institute’s core areas;
b) to communicate research-based knowledge to workplaces, authorities, social partners, and health and safety consultants;
c) to participate in the training of researchers, and in educational activities at the universities within its core areas;
d) to perform tasks for the authorities; and
e) to perform development work that has a clear social mission.

**Ministry of Social Affairs, Working Environment Department, Estonia**
(https://www.sm.ee/en)

The objectives of the Ministry of Social Affairs, Estonia, emerge through compiling development plans for social security, as well as organization-based development plans. The ministry's five objectives are:

a) to ensure the people's economic prosperity and good work;
b) to ensure the people's social development;
c) to support the well-being of children and families;
d) to promote mutual care, equal opportunities, and gender equality; and
e) to ensure long and high-quality life.

The Ministry's activities cover:

a) health, including occupational health;
b) labour, including OSH;
c) social security;
d) children and families; and
e) gender equality.
Health Board, Estonia

The Health Board is a government agency that operates within the remit of the Ministry of Social Affairs. It has a direct function within the scope of its authority to exercise state supervision and apply enforcement powers of the state pursuant to the Health Services Organization Act and other legislation.

The Health Board operates in the general national administration of health in the country, covering supervision of all health organizations, registering health personnel, organizing emergency medical care, and developing legislation. In the field of occupational health, the Health Board, through its Bureau of Occupational Health, pursuant to the Occupational Health and Safety Act:

a) participates in the preparation of occupational health programmes, and organizes their implementation;

b) analyses information concerning occupational diseases and illnesses;

c) organizes in-service training for occupational health specialists;

d) authorizes maritime doctors; and

e) supervises OHS providers.

Finnish Institute of Occupational Health, Finland
(https://www.ttl.fi/en/)

The Finnish Institute of Occupational Health (FIOH), is an independent legal entity in the jurisdiction of the Ministry of Social Affairs and Health. The FIOH is a multidisciplinary research institute that carries out research, disseminates information, and provides expert services and training for occupational health and safety specialists, employers, and workers. The institute’s mission covers improvement of occupational safety, occupational health and well-being at the level of individuals, working populations, enterprises, and society at large, through the development of safe and healthy working conditions, work environments, and work communities.

Federal Institute for Occupational Safety and Health, Dortmund, Germany
(http://www.baua.de/en/Homepage.html)

The Federal Institute for Occupational Safety and Health (BAuA) is a governmental research institute that conducts research and development in the field of safety and health at work; promotes the transfer of knowledge into practice; advises policy-makers, and performs sovereign functions under the hazardous substances law, in product safety, and with a health data archive. The BAuA is within the purview of the Federal Ministry of Labour and Social Affairs.

Kooperationsstelle Hamburg (KOOP), Germany
(http://www.kooperationsstelle-hh.de/?lang=en)

Kooperationsstelle Hamburg IFE GmbH (KOOP) is an independent research and service institution in the fields of OSH and environmental protection, standardization, and labour market
development research and services. For more than 25 years, KOOP has been carrying out national and international projects in research and development, and good practice dissemination. Recently, KOOP has been increasingly active in conducting both national and European-wide projects on the impact evaluation of OSH policies, strategies, and laws.

**Institute for Occupational Safety and Environmental Health, Riga Stradins University, Latvia**

The Institute of Occupational Safety and Environmental Health (IOSEH) is a leading training and research institute on OSH in Latvia. The IOSEH has more than 40 years of work experience. It is an academic, scientific, and training institution, providing training for undergraduates and post-graduates. It participates in research projects and provides information on occupational safety and health issues. The IOSEH is a structural unit (agency) of Riga Stradiņš University.

**Occupational Health Centre, Institute of Hygiene, Lithuania**
(http://www.hi.lt/occupational-health-centre-3.html)

The Institute of Hygiene is a governmental budgetary institution, which implements the state policy in Lithuanian health and health care monitoring; public health disparities and public health technology assessment; patient safety; and occupational health care. The Institute of Hygiene is administrated by its director – Doctor of Medicine Science Remigius Jankauskas. The Occupational Health Centre is a structural unit of the Institute of Hygiene, and it is mainly involved in the implementation of the state’s policy and research in occupational health care. The centre is administrated by Raimonda Eicinaite-Lingiene.

**The National Institute of Occupational Health, Norway**
(https://stami.no/en/)

The National Institute of Occupational Health in Norway (STAMI) is a research institute funded by the Ministry of Labour and Social Affairs. It aims to facilitate good working environments; prevent illness; and promote good health. The institute has over 100 employees who create, use, and promote knowledge on occupational health. STAMI has an interdisciplinary research environment consisting of people with various professional backgrounds including medicine, physiology, chemistry, biology, and psychology.

**The Norwegian Labour Inspection Authority**

The Norwegian Labour Inspection Authority is a governmental agency under the Ministry of Labour, focused on OSH. The Labour Inspection Authority has approximately 600 employees and consists of a central office – the Directorate – seven regional offices, and 16 local offices throughout the country. The Directorate in Trondheim regulates the agency’s overall strategy, programmes, and information. The district offices guide and supervise individual enterprises in local communities.
The Nofer Institute of Occupational Medicine, Lodz, Poland
(http://www.imp.lodz.pl/home_en/)

The Nofer Institute of Occupational Medicine (NIOM) is a governmental national institute that provides background research and expertise for the Ministry of Health, and serves as an advisory body to numerous governmental agencies. NIOM promotes healthy lifestyles among Polish workers, aiming at the improvement of quality of life and workers' health, work capability, and work environments. NIOM provides post-graduate training, information, and supports regulatory activities for OSH and environmental health. The research profile is multidisciplinary, covering occupational medicine, toxicology, epidemiology, environmental health physiology, health promotion, occupational health services, and the promotion of work ability. NIOM also provides a wide spectrum of consultancy services in the field of occupational health for Polish workplaces. With its broad scope of activities and quality of expertise and technical capabilities, NIOM aims at taking a leading position in occupational health in Poland and within the Central and Eastern European region.

North-Western State Medical University, St. Petersburg, Russian Federation
(http://www.medstudies.org/mechnikov/post.html 32k 09/Dec/2005)

The North-Western State Medical University was created in 2011, as a merger of the two oldest educational medical institutions in Russia – Saint-Petersburg Medical Academy of Postgraduate Studies and Saint-Petersburg State Medical Academy n. a. I.I. Mechnikov.

The activities of the University are:

a) postgraduate training in several specialties of medicine, including occupational health and industrial hygiene;
b) biomedical research on health protection, and the sanitary and epidemiological welfare of the population;
c) diagnostic and clinical services in six clinics of the university; and
d) the effective transfer of fundamental and applied research results for building supportive scientific and educational environments.

St. Petersburg University has carried out, in the NDPHS and BSN frameworks, a number of projects with the support of the FIOH and the Finnish Ministry for Foreign Affairs, including:

a) three regional OSH profiles (Karelia, Murmansk, Leningrad Oblast);
b) a national OSH programme (Karelia, Murmansk);
c) a project to implement basic occupational health services (BOHS) (Federal-level – piloting in Karelia);
d) risk assessment and risk reduction activities (St. Petersburg and Leningrad Oblast), and related activities including health promotion activities in the transport industry;
e) provision of information (North-West Russia and all NDPHS countries); and
f) developing the national OSH system and improving health and preventing accidents in the high-risk sectors in North-West Russia.
Swedish Work Environment Authority, Sweden
(https://www.av.se/en/)

The Swedish Work Environment Authority is a government agency under the jurisdiction of the Ministry of Employment. It has a mandate from the government and the parliament to see that laws on work environments and working hours are followed by companies and organizations. The agency is also responsible to some extent for the Tobacco Act and the Environmental Code, when it comes to questions about genetic engineering and pesticides. The goal is to reduce the risks of ill health and accidents in working life, and to improve work environments, from a holistic perspective. The agency’s areas of responsibility are:

a) to produce provisions, which clarify the Work Environment Act (some of the most fundamental regulations are those dealing with systematic work environment management, which means that all employers should regularly investigate whether there are risks in the work environment, and fix the shortcomings);
b) to check compliance with the Work Environment Act and OSH regulations, through inspection of workplaces;
c) to produce statistics on work environments, and on work-related accidents and occupational illnesses;
d) to promote cooperation between employers and employees regarding work environments;
e) to realize, together with other authorities, a policy for integration of workers with lower work ability; and
f) to disseminate information about the Work Environment Act and the agency’s provisions.

The main activities of the authority are work environment and OSH inspection; development of healthy work environments and effective work organizations; control of chemical, physical, ergonomic, and psychosocial hazards; prevention of occupational accidents; control of indoor air; and the development of production, industry, and logistics in view of safety and health.
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### Abbreviations and acronyms

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<td>AGERPA</td>
<td>Yaoundé thematic workshops on the management of occupational risks in agroforestry</td>
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<td>CSST Forum</td>
<td>Forum of OSH Committees</td>
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<td>IAPRP</td>
<td>Inter-African Association for the Prevention of Occupational Risks</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>INRS</td>
<td>National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases (France)</td>
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<tr>
<td>ISSA</td>
<td>International Social Security Association</td>
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<tr>
<td>JAP</td>
<td>African Prevention Day (Journée Africaine de la Prévention)</td>
</tr>
<tr>
<td>NGO</td>
<td>non-governmental organization</td>
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<tr>
<td>NSSO</td>
<td>National Social Security Organization (ONSS)</td>
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<td>OH</td>
<td>occupational health</td>
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<td>OSH</td>
<td>occupational safety and health</td>
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<td>RALIPRP</td>
<td>African Meeting in Libreville on the Prevention of Occupational Risks in the Oil Sector</td>
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<td>SAPRIP</td>
<td>African Trade Fair for the Prevention of Occupational Risks</td>
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<td>SYAPRO</td>
<td>Audio-visual Symposium for the Prevention of Occupational Risks (Ouagadougou)</td>
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<tr>
<td>TVET</td>
<td>technical and vocational education and training</td>
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Foreword and Acknowledgements

The profile of the Inter-African Association for the Prevention of Occupational Risks (Interaf- ricaine de la Prévention des Risques Professionnels – IAPRP) is published as an appendix to the ILO Working Paper presenting the results of the multiple case-study analysis of six regional occupational safety and health (OSH) networks. The study was initiated in order to inform the modernization of the ILO portfolio of activities in OSH knowledge and information. It benefited from financial support provided under the Partnership Agreement between the Government of South Korea and the ILO 2015-2017 (GLO/15/50/ROK).

The study covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. The results allow a better understanding of how and why OSH agencies, institutions, organizations and experts collaborate with one another. They provide invaluable descriptive information covering the diversity of existing collaborative arrangements and key characteristics of productive regional OSH networks. They highlight similarities and differences in ways of organizing collaboration in OSH and provide new knowledge to support international cooperation which has always been and remains a key role of the ILO. They can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of the network.

This profile was produced as part of the work programme of the ILO LABADMIN/OSH Branch with contributions from Mr Nogbou Alphonse Ahoua, Mr Zié Adel Coulibaly and Mr Bernard Foe Andegue. Acknowledgements extend to the members of IAPRP who engaged into developing a joint development cooperation project as a way to pursue the long-standing partnership in prevention with the ILO. To all we wish to express gratitude for their interest and support.

Claude Donald Loiselle  
Coordinator – OSH network, knowledge and information management  
Labour Administration, Labour Inspection and  
Occupational Safety and Health Branch (LABADMIN/OSH)  
International Labour Organization
The Inter-African Association for the Prevention of Occupational Risks (Interafriquaine de la Prévention des Risques Professionnels) (IAPRP) is a voluntary, independent, non-profit association and network of OSH experts of 15 West and Central African countries. The association is legally subject to Mali legislation on associations. The IAPRP was founded in 1994 by the national social security organizations (NSSO) to work jointly and in solidarity towards the prevention of work-related injuries in French-speaking sub-Saharan Africa. The IAPRP federates and contributes to the development of institutional and human capacities in the broad area of OSH, and has largely contributed to the structuring of prevention services in its member NSSOs. The subregional meetings organized by the IAPRP and its members, and the activities carried out since its inception, offer opportunities for collaboration, sharing of experience, and mutual learning in Africa. Its achievements mobilize public decision-makers, energize existing structures, and encourage the structuring of prevention, in addition to contributing significantly to raising public awareness of the importance of prevention as an economic and social development issue.

The activities contribute to the strengthening of OSH technical capacities in the subregion. Achievements at this level, including the establishment of an observatory on occupational injuries and diseases, are contributing to the regional development of OSH. With almost 25 years of existence, and thanks to its collaborative spirit and its relatively large resources, the IAPRP has now entered a phase of consolidation of its many achievements. The strategic thinking envisaged in the programme as of 2018 should provide the key elements to guide its development in the coming years, and thus guide the prevention of work-related accidents and diseases in French-speaking sub-Saharan Africa.

1 Introduction

The IAPRP brings together the national social security organizations from 15 countries in West and Central Africa: Benin, Burkina Faso, Cabo Verde, Cameroon, the Central African Republic, Chad, Côte d’Ivoire, Gabon, Guinea, Guinea-Bissau, Mali, Mauritania, Niger, Senegal, and Togo. The network’s main orientation is the prevention of occupational safety and health risks, through the development and strengthening of national capabilities in developing safe working environments and the health of workers.

2 Official status and constitution

The IAPRP was created in 1994 in Bamako, Mali, where it has its headquarters. The IAPRP is a legally constituted, non-profit, interregional association. It is governed by Act N. 4-038 of Mali, originating from August 2004, concerning associations.
African and professional institutions, companies, and associations working in the field of occupational risk prevention, from any of these countries, may join the association (Annex1).

3 Mission and policies

The IAPRP was established with the primary mission of promoting the prevention of occupational risks in African countries. To this end, the association pursues the following objectives:

a) to promote and encourage cooperation and collaboration between OSH structures;
b) to improve collaboration between actors in the field of prevention;
c) to harmonize the frameworks for risk prevention at the inter-regional level;
d) to achieve a common strategy for risk prevention at the regional level (Africa); to promote research and training in risk prevention;
e) to promote the ratification and implementation of international labour standards in OSH, in particular of Convention 155 (C155), C161, and C187;
f) to develop and implement OSH education programmes for workers’ organizations; and
g) to implement the prevention-productivity-sustainable development (PP-SD) approach in companies and production units.

4 Strategy and programmes

The IAPRP strategy has four aims:

1. Organization of periodic subregional meetings to promote the sharing of experiences and good practices in occupational risk prevention.
2. Establishment of training centres and programmes to strengthen OSH practitioners’ skills, social security and welfare funds, and enterprises.
3. Establishment of specific and subregional observatories to enhance the reliability of the collection and use of OSH data, in order to assist decision-making.
4. Organization of promotional activities for broader communication on the prevention of occupational risks.

Each NSSO represents the IAPRP in its home country, and must appoint an IAPRP focal point to ensure a permanent liaison. They are asked to establish a national dialogue on OSH, and to contribute to the establishment of the following structures and efforts:

a) coordination of the efforts of employers' organizations at the national level, and by branch of activity, for setting up and facilitating OSH committees in companies;
b) inter-union OHS coordination, inclusive of organizations representing workers;
c) a network of journalists and media professionals supporting prevention;
d) a network of traditional communicators in support of risk prevention;

e) associations and NGOs supporting preventative actions, in particular the NGOs Preventers Without Borders and the African Coalition Against Occupational and Civil Risks and Nuisances; and

f) associations of OSH professionals.

The development of the IAPRP is gradually moving from collaboration and routine activities to a consolidation phase requiring strategic programming of the use of resources available to it. The programming is entrusted to the secretary-general, who submitted a proposal for the Programme of Activities 2017–18 at the General Assembly in March 2017. The programme proposal, called the Strategic Action Plan, has four priority areas:

1. Strengthening IAPRP structures.
2. Strengthening IAPRP's linkages and cooperation with research centres, subregional organizations, and other development partners.
3. Communication and documentation.
4. Capacity-building of human resources in OSH.

5 Structure, governance, and coordination

5.1 Structure

The IAPRP structure comprises four entities: the General Assembly; Bureau; General Secretariat; and specialized bodies.

5.1.1 General Assembly

The General Assembly (GA) is the supreme decision-making body of the IAPRP. It is composed of all members and must be held in regular session every year. The GA is chaired by the director-general of the NSSO for a period of one year, on a rotating basis, in alphabetical order of the names of the countries. The GA is responsible for the membership of the association and the validation of the association’s accounts. It also decides on the cessation of the activities of an existing specialized body, or the creation of other bodies.

5.1.2 Bureau

The Bureau is composed of the president and two vice-presidents, one of whom is the past president and the other is the next to assume the presidency of the association, according to the rotation principle described above. The role of the Bureau is to implement the decisions
of the General Assembly, and to design the budget and the progress report submitted to the Assembly. It is convened once every six months in ordinary session, but may also be convened on an exceptional basis depending on the circumstance.

5.1.3 General Secretariat

The General Secretariat (GS) is responsible for the permanence of the association, and carries out the regular administrative affairs. It coordinates all activities arising from decisions taken by the Bureau, in accordance with the guidelines given by the General Assembly. The GS may make proposals to the Bureau regarding the recruitment of support staff necessary for the conduct of the IAPRP activities. A technical manager and an accountant ensure the implementation of technical activities and the accounting and financial management of the association, respectively.

5.1.4 Specialized bodies

Specialized bodies (SBs) are created by the GA to implement the recurrent activities to promote the prevention of occupational risks. They operate under the supervision of the NSSO, for which permanent secretariats have been put in place. In addition, each NSSO that hosts an SB has to mobilize necessary resources to ensure its regular operation, in collaboration with the IAPRP. A total of five specialized bodies have been set up –

2. The Forum of OSH Committees, in Cotonou (CSST Forum)
4. The Yaoundé thematic workshops on the management of occupational risks in agroforestry (AGERPA).

The dynamism of these specialized bodies brings the IAPRP to life through the organization of regional activities.

5.2 Governance

In 2012, the IAPRP undertook a major reform, through the adoption of new statutes. Since then, the association has been run by three bodies: the GA of the members, the Bureau, and the GS. The strategic management of the association is ensured by the GA, which, at regular annual meetings, coordinates and encourages the IAPRP’s main orientation activities. All decisions, other than those reserved for the GA, are taken by the Bureau. It is at this level that financial commitments and the organization of activities (including the holding of the GA) are decided.
The Bureau also ensures the visibility and representation of the IAPRP with external partners, particularly when seeking or negotiating technical support or grants.

At the operational level, the secretary-general is responsible for the implementation of decisions taken by the GA and the Bureau. In particular, it is the responsibility of the Bureau to position the association in terms of occupational risks; to provide advice and support to the SBs; to disseminate and share information among the members; and to promote good practices in the prevention of occupational risks among the NSSO.

5.3 Coordination

The IAPRP’s activities are organized by the member NSSO according to a pre-established schedule, and held by the GS. For each SB, a permanent secretariat is appointed by the president of the IAPRP, upon the proposal of the director general of the umbrella NSSO.

6 Members

The members are the NSSOs of the 14 countries (Appendix 1). The total population of the countries is 184 million, of which about half constitute the working population. Typical for Africa, the informal workforce is substantially larger than that in formal employment, covering about 60–80 per cent of the total employment, which sets special challenges in social protection (IDRC, 2017; ILO, 2012).

7 Funding

The IAPRP has its own assets, which have been accumulated over the years by the surplus from annual contributions for the costs of carrying out its programmes and activities. While the statutes and regulations provide for various funding opportunities, experience shows that the association is mainly financed by contributions from the member NSSOs and by income generated from its activities. The activities organized by the SBs benefit from the IAPRP’s contribution of 25 million Western African francs (CFA), the subregional currency, (about US$46,555) and, occasionally, from external grants.

7.1 Contributions of member countries

Financial contributions from member countries represent the main source of funding for the IAPRP. A decision taken in 2012 at the Extraordinary General Assembly, held in Ouagadougou,

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1 The framework of this participation is fixed by an agreement between the IAPRP (represented by its president) and the administrative tutorship of the permanent secretariat of each specialized body.
increased the annual contribution of members from CFA francs 3 million ($5,586) to CFA francs 5 million ($9,310). However, the actual receipt of contributions has decreased since this change occurred, and conversely the arrears of payment have increased as well – in 2015 becoming larger than the amounts collected. The balance to be recovered from the NSSO contributions amounted to slightly more than one year of the annual contributions expected at the end of the financial year 2016, with some members accumulating up to three years of arrears.

The financial analysis also shows a significant decrease in operating expenses over the same period. Apart from 2013, marked by the organization of RALIPPR in Gabon and the holding of the GA, involving travel expenses (air fares, accommodation), the IAPRP disburses only part of the funds raised by the contributions from members. The main disbursements since 2014 have been mainly related to the design, hosting, and operation of the website, and bank charges. In 2016, the IAPRP disbursed only 11.3 per cent of the annual contributions effectively received, in particular to continue to set up its reserve fund.

Despite the delays of some members in meeting their obligations, the IAPRP’s liquidity has increased considerably since 2013, rising from CFA francs 185 million to more than CFA francs 330 million. This situation, attributed both to the increase in the annual contribution amount and to the slowdown in activities since then, enabled the IAPRP to double the value of its reserve fund to CFA francs 200 million by 2016, while retaining just over one-third of the available cash as working capital for current operations (an amount equivalent to almost two years of expected contributions). The IAPRP now has significant means to engage in larger projects.

In addition to the financial resources, the emoluments of the IAPRP staff are covered by the member NSSO that hosts the GS. This additional contribution represents an unrecognized amount. The same is true for the activities organized by the NSSO, which benefit from the efforts of their respective staff.

Finally, other financial contributions are added to the members’ contributions, such as those of companies, societies, associations, collectives of OSH professionals (CFA francs 250,000; $470), schools, research and training institutes (CFA francs 500,000; $931), and representative organizations of employers and workers (CFA francs 1 million; $1,862).

7.2 Revenues from the IAPRP’s activities and assets

The organization of recurring activities (e.g. forums, workshops, trade fairs) carried out by the member NSSOs sometimes generates financial surpluses for the IAPRP, insofar as the participants in these events have to pay a registration fee to attend. These contributions make it possible in some way to fill the deficits in terms of the NSSO contribution.
8 Activities and results

The achievements of the IAPRP since its creation in 1994 are presented according to the four main strategic axes mentioned above, namely: 1) the organization of subregional meetings; 2) the creation of training programmes and centres; 3) the establishment of observatories and development of guidelines; and 4) organization of promotional activities in the field of occupational risk prevention.

8.1 Organization of subregional meetings

The IAPRP has organized five major subregional meetings to create a framework for sharing experience and building stakeholder capacity in the multiple OSH-related areas (Table 1). These meetings should, in principle, be held every three years.

Table 1. Summary of subregional meetings organized under the auspices of the IAPRP

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Responsible NSSO</th>
<th>Venue</th>
<th>First edition</th>
<th>Last edition</th>
<th>Recurrence</th>
</tr>
</thead>
<tbody>
<tr>
<td>SYAPRO</td>
<td>NSSO Burkina Faso</td>
<td>Ouagadougou</td>
<td>1994</td>
<td>2015</td>
<td>8</td>
</tr>
<tr>
<td>CSST Forum</td>
<td>Benin</td>
<td>Cotonou</td>
<td>1996</td>
<td>2017</td>
<td>9</td>
</tr>
<tr>
<td>SAPRIP</td>
<td>Niger</td>
<td>Niamey</td>
<td>1997</td>
<td>2017</td>
<td>7</td>
</tr>
<tr>
<td>AGERPA</td>
<td>Cameroon</td>
<td>Yaoundé</td>
<td>2011</td>
<td>2018</td>
<td>2</td>
</tr>
<tr>
<td>RALIPRP</td>
<td>Gabon</td>
<td>Libreville</td>
<td>2014</td>
<td>2014</td>
<td>1</td>
</tr>
</tbody>
</table>

The NSSO members of the IAPRP have organized 27 major subregional meetings under the aegis of the association. These meetings are described below.

Audio visual Symposium for the Prevention of Occupational Risks in Ouagadougou

The Audio visual Symposium for the Prevention of Occupational Risks in Ouagadougou (SYAPRO) represents the most important specialized activity conducted by the IAPRP since its first edition in September 1994. This is a subregional event organized every three years by the National Social Security Fund (NSSF) of Burkina Faso, with the aim of promoting the use of audio visual techniques (posters, films, sports, etc.) in OSH communication initiatives and the prevention of occupational risks. Eight editions have been held since then, and have recorded an average participation of 12 countries in sub-Saharan francophone Africa. The number of participants continues to grow, reaching more than 300 people in the latest editions, compared to 150 in 1994.

SYAPRO meetings led to the establishment of the African Prevention Day (JAP), celebrated on 30 April each year in all IAPRP member countries; the establishment of the Occupational Health

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3 The JAP aims to promote OH AND OSH activities in IAPRP member countries. Twenty-two JAP editions were organized between 1999 and 2018, on topics chosen annually. Through the JAP, the IAPRP established the month of April as prevention month in its member countries. This initiative has led to prevention activities in the field (awareness-raising campaigns and caravans, CSST training, and round tables, etc.).
and Safety Award at the Pan African Film Festival of Ouagadougou (FESPACO); the creation of a Centre for Production and Training in Audio visual and Corporate Communication (CPFACE) in Ouagadougou; and a training centre for OSH practitioners in the Social Security Fund of Senegal.

Forum of OSH committees in Cotonou

The Forum of OSH Committees (CSST Forum) has been held biennially since 1996 in Cotonou, Benin, and, like SYAPRO, has seen an increase in the number of participants from 126 in 1996 to 327 in 2017. The organization of these meetings has contributed to the establishment and dynamic development of joint OSH committees through the organization of national campaigns to set up these dialogue mechanisms in workplaces in the subregion. New initiatives were launched from this event such as a project to set up a subregional observatory of occupational accidents and diseases in 2005. The purpose of this observatory is to collect information on work accidents and occupational diseases for all member countries (through the establishment of national observatories), in order to produce and disseminate reliable and harmonized statistics for the whole subregion.

African Trade Fair for the Prevention of Occupational Risks, in Niamey

The African Trade Fair for the Prevention of Occupational Risks, in Niamey (SAPRIP) has been organized every three years since 1997 in the city of Niamey in Niger, with the aim of promoting creativity, invention, and innovation in the prevention of occupational risks. Six SAPRIPs have been organized with a central focus on the presentation of works by African inventors for contribution to the improvement of OSH conditions on the continent. Several innovations contributing to the protection of the safety and health of workers have been rewarded, including a fume hood, fire detector, multi-use chair, radioactive dust protection system, and crawl spaces.

Yaoundé thematic workshops on the management of occupational risks in agroforestry

The Yaoundé thematic workshops on the management of occupational risks in agroforestry (AGERPA) was set up with the aim of promoting the prevention of occupational risks and the protection of the environment as factors for increasing productivity in agricultural and forestry activities. The first meeting was organized in November 2011 and the second in July 2018 in Yaoundé, Cameroon under the aegis of the National Social Insurance Fund of Cameroon. The latter brought together more than 140 participants from eight countries under the theme “Management of occupational risks in agriculture in Africa: Situational analysis, challenges and prospects”. As many as 150 participants from seven countries attended the first event.

4 From 1995 (first year of the prize) to 2017, ten film productions have received the "Special Prize for Safety and Health at Work" within FESPACO.

5 The CPFACE was created in 2003 within the National Social Security Fund of Burkina Faso, with the aim of producing audiovisual support, and training social security actors in communication techniques. The single session organized in 2006 enabled the training of eight audiovisual and communication technicians: three from Burkina Faso, three from the Republic of the Congo, and two from Guinea-Bissau.
The organization of such an event constitutes an incentive for the host country to engage decisive action for prevention. Thus, the government of Cameroon has revised the list and tables of compensable occupational diseases, including, for example, the inclusion of emerging diseases, and increasing the number of tables from 96 to 112. The National Social Insurance Fund (Caisse Nationale de Prévoyance Sociale – CNPS) has also increased visits to enterprises as part of OSH awareness and information campaigns, with 168 companies visited (including agroforestry companies) between 2015 and 2017, compared to 150 originally planned in its programme to improve safety at work.

African Meeting in Libreville on the Prevention of Occupational Risks in the Oil Sector

The first edition of the African Meeting in Libreville on the Prevention of Occupational Risks in the Oil Sector (RALIPRP) was held in Libreville, Gabon in February 2014 with the theme, “Systems and tools for prevention, productivity, and sustainable development (PP-SD) in the petroleum sector and related activities”. The meeting was attended by 220 participants from nine countries in the subregion. The main objective of the work was to develop a better social welfare system for workers in this sector. The implementation of the recommendations made at the Libreville meeting gave Gabon several results between 2014 and 2016, including:

- organization of a national awareness campaign on the installation of CSST; 926 companies were sensitized in nine provinces;
- ratification, on 28 July 2015, of the Occupational Safety and Health Convention No. 155 (1981) and Occupational Health Services Convention No. 161 (1985), with a commitment to continue efforts to ratify the Promotional Framework for Occupational Safety and Health Convention No. 187 (2006); and
- formulation of four OHS training modules and training courses for 125 companies, with a continuous training certificate from the National Social Security Fund.

8.2 Establishment of OSH centres and training courses

On the initiative of the IAPRP, three training centres have been set up, with Senegal and Burkina Faso being the first countries to have hosted these initiatives, with, respectively, CFCP and CFACE both created within the SYAPRO framework. However, these structures are no longer in operation. The NSSF of Benin also set up a centre to train members of the OSH committees of companies. This centre reportedly trained 120 people before it ceased operations.

Other countries have also developed OSH training courses. In Côte d’Ivoire, for example, the Ivorian Centre for the Training of Social Security Officers (CIFOCSS) provided a training course for

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6 Occupational diseases such as post-traumatic stress disorder, and musculoskeletal disorders (MSDs), are now included in the new tables.
7 Source: Contribution of the CNPS of Cameroon to the General Assembly of the IAPRP, Abidjan, March 2017.
prevention supervisors of the NSSO members of the IAPRP. Between 2004 and 2017, a total of 57 people attended the training. In Niger, the National Centre for Radiation Protection in Niamey (CRP) has developed a course on radiation protection for people working in environments where radiation sources are used or are present. Approximately 75 people from the customs, security, health, and industry sectors have benefited from this training. The success of this specialized training led to the opening in 2010 of a master’s degree course in radiation offered by the Institute of Radio-Isotope of the Abdou Moumouni University of Niamey.

8.3 Implementation of subregional OSH initiatives

The members of the IAPRP meeting in December 2007 decided to set up a subregional observatory of occupational accidents and diseases (OSRAT/MP) in Côte d’Ivoire, as a specialized body of the association. The purpose of this structure is to collect, process, analyse, produce, and disseminate reliable and harmonized statistics on workplace accidents and occupational diseases in the subregion, by exploiting the data collected and transmitted by the national observatories of the member countries. To date, ministerial orders or decrees have given official existence to national observatories in Benin, Côte d’Ivoire, Guinea, and Niger. More observatories will also be set up in Burkina Faso and Senegal, without a formal political decision that would establish them officially.

The aim is to provide decision-makers with current and prospective information for the formulation of subregional and national OSH policies. The development of a database was launched in 2013, and initial results were presented in 2017. In addition to the database on workplace accidents and occupational diseases, the observatory should also produce periodical publications through a directory on safety and health at work.

IAPRP members have also collaborated in the preparation of “subregional guidelines” on various aspects of OSH, such as risk management in the construction sector; the organization and functioning of the OSH committees; productivity and sustainable development in French-speaking African countries; the management of silvo-agro-hydro pastoral hazards; and the organization and operation of prevention structures in the NSSO.

9 Recent and ongoing projects

The IAPRP is working on the following projects on topics relevant to prevention:

a) establishment of a training course for prevention engineers, in collaboration with the National School of Social Security (ENSSS) of St Etienne in France;
b) organization of a subregional campaign for the set-up of OSH committees;
c) preparation of a new activity on risks in the construction sector (Chad); and
d) effective organization of the Second Training in Metrology of Technicians of IAPRP member institutions.
Integration of OSH into technical and vocational education and training

The IAPRP and the ILO have been working together since 2017 in the design of a large-scale technical cooperation project aiming to integrate OSH into technical and vocational education and training (TVET). The initiative aims to support collaboration among, and build the capacity of, relevant national institutions and organizations so that together they can adopt and implement, in a coordinated manner, a tailored action plan for integrating OSH into TVET.

Institutions participating in national projects will be supported in the development of an OSH management system. Trainers of professionals and collaborators will support the development of strengthened competencies for OSH prevention in priority sectors and occupations. The content of the training will be reviewed and improved to better address the notions of hazards, risks, and preventative measures, and to provide young people entering the labour market with the necessary benchmarks for preventative action. The project also foresees the development of curricula for the training of occupational therapists for the high-risk sectors for work-related accidents and diseases, particularly in the health, construction, and public works sectors, and in the exploitation and processing of natural resources, and the agri-food industry.

Publications


10 External collaboration

The IAPRP collaborates with the following partner institutions and organizations in the conduct of its occupational risk prevention activities within French-speaking African countries:
International Labour Organization

The ILO provides technical support to the IAPRP in the implementation of its recurrent activities, by participating in subregional meetings organized by member NSSOs. This collaboration also concerns specific projects. In 2010, the ILO, the IAPRP, the NSSO of Burkina Faso, and the International Union of Food and Allied Workers (IUF) collaborated in the implementation of a training project for representatives of workers in the agricultural, food, hotel, restaurant, and industry sectors.

This three-year project aimed to ensure the safety and health of workers, and to increase productivity in enterprises. Over the past decade, the ILO has been involved in leading training courses for health, safety, and working conditions in several countries, including Niger, Togo, and Benin, accompanying the IAPRP in the implementation of other activities such as workshops, technical seminars, and at the “General States of Safety and Health at Work” meetings organized in some countries.

Support was also provided for the implementation of promotional activities, in particular for a campaign to raise awareness of the prevention of workplace accidents and occupational diseases in French-speaking sub-Saharan Africa. A minimum grant from the ILO has thus made it possible to finalize the production of support materials and audio-visual media.

International Social Security Association

In 2007, the International Social Security Association (ISSA), in collaboration with the IAPRP, the ILO, and the French National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases (Institut national de recherche et de sécurité – INRS), launched a campaign on the prevention of occupational risks in sub-Saharan Africa, during the eighth edition of the JAP in Dakar, Senegal. This broad, five-year campaign aimed at raising awareness of work-related hazards, among the greatest number of people, focusing, for example, on the impact of workplace accidents and occupational diseases on family life and business.

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9 International Union of Food, Agricultural, Hotel, Restaurant, Catering, Tobacco, and Allied Workers’ Associations.
References


### ANNEX 1.
National social security organization members of IAPRP

<table>
<thead>
<tr>
<th>Country</th>
<th>NSSO designation</th>
<th>Mailing address</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>National Social Security Fund (CNSS)</td>
<td>390 Avenue Jean Paul II 01 BP 374 Cadjehouan Cotonou.</td>
<td><a href="http://www.cnssbenin.org">www.cnssbenin.org</a></td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>National Social Security Fund (CNSS)</td>
<td>01 B.P; 562 Ouagadougou 01 Burkina Faso.</td>
<td><a href="http://www.cnssbf.org">www.cnssbf.org</a></td>
</tr>
<tr>
<td>Cameroon</td>
<td>National Social Insurance Fund (CNPS)</td>
<td>BP 441 Yaoundé.</td>
<td><a href="http://www.cnps.cm">www.cnps.cm</a></td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>Instituto Nacional de Segurança Social (INSS)</td>
<td>Av. Domingo Ramos No 12 Apartado 62 1001 – Bissau Codex</td>
<td>NA +245 5291090 +245 6643036</td>
</tr>
<tr>
<td>Mali</td>
<td>Mali Social Security Fund (CMSS)</td>
<td>BP 484 Mali.</td>
<td><a href="http://www.cmssmali.org">www.cmssmali.org</a></td>
</tr>
<tr>
<td>Chad</td>
<td>National Social Insurance Fund of Thad (CNPS)</td>
<td>B P 749 Tchad.</td>
<td><a href="http://www.cnpstchad.com">www.cnpstchad.com</a></td>
</tr>
</tbody>
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## Abbreviations and acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUVA</td>
<td>Austrian Social Insurance for Occupational Risks</td>
</tr>
<tr>
<td>BAuA</td>
<td>Federal Institute for Occupational Safety and Health (Germany)</td>
</tr>
<tr>
<td>CIOP-PIB</td>
<td>Central Institute for Labour Protection – National Research Institute (Poland)</td>
</tr>
<tr>
<td>ENM</td>
<td>engineered nanomaterial</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>EU-OSHA</td>
<td>EU Occupational Safety and Health Agency</td>
</tr>
<tr>
<td>FIOH</td>
<td>Finnish Institute of Occupational Health</td>
</tr>
<tr>
<td>HSE</td>
<td>Health and Safety Executive (United Kingdom)</td>
</tr>
<tr>
<td>HSL</td>
<td>Health and Safety Laboratory (United Kingdom)</td>
</tr>
<tr>
<td>ICOH</td>
<td>International Commission on Occupational Health</td>
</tr>
<tr>
<td>IFA</td>
<td>Institute for Occupational Safety and Health of the German Social Accident Insurance</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organization</td>
</tr>
<tr>
<td>INAIL</td>
<td>Italian Workers’ Compensation Authority</td>
</tr>
<tr>
<td>INRS</td>
<td>National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases (France)</td>
</tr>
<tr>
<td>INSST</td>
<td>National Institute of Safety, Health, and Well-Being at Work (Spain)</td>
</tr>
<tr>
<td>IST</td>
<td>Institute for Work and Health (Switzerland)</td>
</tr>
<tr>
<td>MSD</td>
<td>musculoskeletal disorder</td>
</tr>
<tr>
<td>NFA</td>
<td>Det Nationale Forskningscenter for Arbejdsmiljø (National Research Centre for the Working Environment) (Denmark)</td>
</tr>
<tr>
<td>NRCWE</td>
<td>National Research Centre for the Working Environment (Denmark); old acronym, no longer in use</td>
</tr>
<tr>
<td>OH</td>
<td>occupational health</td>
</tr>
<tr>
<td>OSH</td>
<td>occupational safety and health</td>
</tr>
<tr>
<td>PEROSH</td>
<td>Partnership for European Research in Occupational Safety and Health</td>
</tr>
<tr>
<td>R&amp;D</td>
<td>research and development</td>
</tr>
<tr>
<td>SC</td>
<td>Steering Committee (PEROSH)</td>
</tr>
<tr>
<td>SME</td>
<td>small to medium-sized enterprise</td>
</tr>
<tr>
<td>SSG</td>
<td>Scientific Steering Group (PEROSH)</td>
</tr>
<tr>
<td>STAMI</td>
<td>National Institute of Occupational Health (Norway)</td>
</tr>
<tr>
<td>TNO</td>
<td>Netherlands Organization for Applied Scientific Research</td>
</tr>
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<td>WHO</td>
<td>World Health Organization</td>
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</table>
The profile of the Partnership for European Research in Occupational Safety and Health (PEROSH) is published as an appendix to the ILO Working Paper presenting the results of the multiple case-study analysis of six regional occupational safety and health (OSH) networks. The study was initiated in order to inform the modernization of the ILO portfolio of activities in OSH knowledge and information. It benefited from financial support provided under the Partnership Agreement between the Government of South Korea and the ILO 2015-2017 (GLO/15/50/ROK).

The study covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. The results allow a better understanding of how and why OSH agencies, institutions, organizations and experts collaborate with one another. They provide invaluable descriptive information covering the diversity of existing collaborative arrangements and key characteristics of productive regional OSH networks. They highlight similarities and differences in ways of organizing collaboration in OSH and provide new knowledge to support international cooperation which has always been and remains a key role of the ILO. They can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of the network.

This profile was prepared by Professor Jorma Rantanen as part of the multiple case-study analysis commissioned by the ILO LABADMIN/OSH Branch, with contributions from Mr Jan Michiel Meeuwsen and Dr Dietmar Reinert. Acknowledgements extend to the members of the network who provided comments at various stages of development and revision. To all we wish to express gratitude for their interest and support.

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International Labour Organization
Summary

The Partnership for European Research in Occupational Safety and Health (PEROSH) is a network of 13 European OSH research institutes, founded in 2003 with an agreement between the participant institutions. The aims of PEROSH are collaboration in OSH research; improvement of its quality; dissemination of research results for use in practices; work as a think tank; identification of contemporary and future research needs; and the facilitation of the use of research knowledge for development of healthy, safe, innovative and sustainable workplaces in Europe. PEROSH maintains a proactive dialogue with the European Union (EU) and other national and international OSH partners, and provides research evidence for support of the European OSH policies and good practices.

The highest governing organization is the PEROSH Steering Committee (SC), which consists of the general directors of the 13 PEROSH member institutes from 12 countries. The SC is responsible for the strategic management of PEROSH. Research collaboration and coordination is delegated to the Scientific Steering Group (SSG) of research and scientific directors of the 13 member institutes. Operational management belongs to the Executive Committee comprising the SC chairperson, vice-chairperson, chairperson of the SSG, and the manager of international affairs. The manager of international affairs supports the activities of the leadership together with a part-time secretary.

The PEROSH strategy draws from the foresight and future research of the network and from the EU- OSH and research policies. PEROSH has identified research priorities in a special Delphi study.

The network activities are financed through agreement-based fees by the member institutions, and the project funding from various sources, including competitive funding from external financers, and particularly from EU research programme funding.

PEROSH has numerous functions, covering: research; information; training; effective use of research resources through coordinated joint projects; provision of the scientific basis for the EU safety and health development policies and practices; creating foresight for the future; recognition of new risks; and development of methods for prevention.

The PEROSH network effectively utilizes modern media, its e-newsletter, Twitter, Facebook, and LinkedIn, in both internal and external communication between the members, collaborative partners, and other partners. Modern media are also used for the collection and dissemination of research information.

Due to well-planned and coordinated strategies and programmes, PEROSH can show good productivity, which is demonstrated in the continuous publication of high-quality research reports and articles with relevance to OSH policies and practices.
1 Introduction

The European OSH institutes started organized collaboration in the form of the Sheffield Group in 1989. In the last years of the first millennium, a need for more deepened collaboration among the institutions of the EU countries was recognized, and PEROSH was founded in 2003. The OSH institutes of Norway and Switzerland also joined the network. The idea was to strengthen the competitiveness of European OSH research; to strengthen the OSH fields’ possibilities to get EU support for OSH projects and programmes, to enable the generation of large research programmes, which would be impossible to implement by an individual country; and to ensure effective OSH research penetration, utility value, and impact. (PEROSH continues collaboration within the frameworks of the Sheffield Group on a broader geographical basis, including with OSH research institutes from Europe, the USA, Canada, Singapore, Japan and the Republic of Korea. Lately, first contacts were also established with OSH Africa).

2 Formal status and constitution

PEROSH is an independent and voluntary inter-institutional network of 13 national and leading OSH research institutions from 10 EU Member States and Norway and Switzerland. PEROSH collaboration is based on the Agreement for the Partnership of European Research in Occupational Safety and Health 2018–22.

3 Mission and policy

The overall mission of PEROSH is to contribute to healthy, safe, innovative, and sustainable workplaces in Europe. Within the PEROSH framework, the leading European OSH institutes collaborate and coordinate European research and development efforts for OSH. The network institutes all play key roles in their national affiliations to governments and authorities, and to social partners and health and accident insurance systems. PEROSH aims at synergies and efficient use of resources and knowledge from different countries, to improve the effectiveness of OSH research.

The PEROSH Agreement 2018–22 defines the objectives of the network as:

a) strengthening cooperation on OSH research, and accelerating the generation of knowledge in key areas of OSH;
b) disseminating and exchanging knowledge and information on OSH issues;
c) pooling of resources and sharing of knowledge;
d) Seconding of experts between member institutes by mutual agreement and according to law and regulations of each country;
e) realizing joint research and development (R&D) projects, and collaborating on EU funding programmes (at present the Horizon 2020 Programme or calls for proposals and tenders from the Commission and its agencies);
f) promotion of the partnership and its activities among European institutions and other OSH stakeholders, internationally and nationally;

g) work as a think tank for the EU to support OSH in European research calls;

h) cooperate with external research centres and OSH-related institutions and networks;

i) preparing conferences and publications on the topics of the joint R&D projects;

j) hold PEROSH research exchange meetings with senior and junior researchers on actual topics, every two years; and

k) exchange research results within the network.

PEROSH also maintains a proactive dialogue with the EU and other international and national OSH-partners, to explore paths to optimize the added value to Europe of the research, dissemination, and available human, technical, and financial resources. Important recent policy achievements are the strengthened collaboration with EU-OSHA, EUROFOUND and close contacts with the European Commission and the European Parliament. The PEROSH contact network is also extending to the rest of the scientific community in the form of collaborative partnerships, and through collaboration with the Sheffield Group of international OSH research institutions.

PEROSH aims to ensure quality and effective dissemination and use of research results. The strengths of PEROSH are the strong institutional support based on formal agreement; multidisciplinary collaboration between the member institutes; collaboration with third parties, internationally; and the shared EU research policy.

4. Strategy and programmes

The basis for PEROSH research strategies is laid down by the scientifically-based future foresight. The overall objective is, in line with the EU2020 Strategy, for smart, inclusive, and sustainable growth, to contribute through PEROSH research to the development of healthy, safe, innovative, and sustainable workplaces, and in keeping people healthy and longer at work. By using systematic expert forecasting methods, PEROSH has identified seven future priorities for OSH research, to enable research contribution to the EU strategy (2012).

These research challenges are also considered as the current research priorities in the PEROSH strategy:

1. sustainable employability to prolong working life;

2. disability prevention and reintegration;

3. psychosocial well-being in a sustainable working organization;

4. multifactorial genesis of work-related musculoskeletal disorders (MSDs);

5. new technologies as a field of action for OSH;

6. occupational risks related to engineered nanomaterials (ENMs); and

7. a safety culture to prevent occupational accidents.
This future foresight is further supported by the ongoing PEROSH joint project “Futures”, in which all the member institutions participate, as shown in Figure 1 below:

Figure 1. Prioritization of future challenges in the two-round Delphi study by PEROSH researchers

The joint research programmes are the core of the PEROSH activities and can be described as the PEROSH Research Programme. The present project portfolio contains seven simultaneously running joint projects. In some projects all the members take part, as in the Futures project. PEROSH has a rule in its statute that a member can be expelled if it does not contribute to the joint research projects for more than two years. A preliminary chart on connections in the joint projects is shown in Figure 2.

In June 2018, four new joint research projects have been approved by the Steering Committee of PEROSH during its last meeting in Bonn, Germany.

The four new projects are:

- Ergo fire fighter, coordinator CIOP-PIB
- Tonal noise, coordinator CIOP-PIB
- Prolonging Working Life, coordinator NFA
- Waste workers’ exposure to microorganisms, coordinator NFA
- Which brings the PEROSH research project portfolio currently to a total of eleven.
5 Structure, governance, and coordination

5.1 Structure

PEROSH has a strong institutional basis in its 13 national research institutes, in addition to the participants and representatives, plus researchers’ individual capacities. This ensures continuity and secures resources for the network. The structure is, as much as possible, horizontal, but still, distinct leadership has been organized with appropriate responsibilities and assignments, as shown in Figure 3.
**Steering Committee**

The highest governing organization is the PEROSH Steering Committee, which consists of the general directors of the 13 PEROSH member institutes from 12 countries. The SC is responsible for the strategic management of PEROSH.

**Scientific Steering Group**

The SSG consists of the research and scientific directors of the 13 member institutes of PEROSH.

**Office and secretariat**

The SC is supported in day-to-day operations by an Executive committee comprising the SC chairperson, SC vice-chairperson, chairperson of the SSG, and the manager of international affairs. The manager of international affairs supports the activities of the leadership together with a part-time secretary.

**5.2 Governance and coordination**

The SC makes decisions on specific knowledge-sharing initiatives, and the promotion of joint research and development projects. It also decides on the inclusion of new members, the appointment of the chairperson and the vice-chairperson, and the establishment and mandate of the SSG and working groups. The SC agrees on the annual budget, and approves the financial report with annual accounts of revenue and expenditures. The SC meets at least once a year, and its chairmanship rotates in two-year cycles (Figure 3 above). The tenures of the appointed officers also have a duration of two years, and they can be re-elected and reappointed once.

The Scientific Steering Group monitors the progress and outputs from agreed PEROSH joint projects. It discusses new research topics and cooperation and proposes decisions to the Steering Committee. The Scientific Steering Group meets at least once a year.

The Scientific Steering Group may take the initiative to invite PEROSH project coordinators to their meetings. The project leaders of the PEROSH joint projects meet at least once a year. This meeting is convened by the chairperson of the SSG and the PEROSH Manager International Affairs.

A PEROSH Secretariat staffed with a part-time assistant is located preferably in the member institute of the chairperson. The PEROSH Manager International Affairs is established by an independent contractor agreement between the institute hosting the Secretariat and a senior consultant/scientist with many years of experience in international OSH affairs. The PEROSH Manager International Affairs reports to the chairperson of the Steering Committee and shall be responsible for the coordination and networking for achieving the overall objectives of the network, and in particular:
• monitoring and support for the development of joint research projects
• communication and promotion of the partnership
• organisation of workshops and conferences

The chair of the SSG coordinates, follows up, and evaluates the research projects, and makes initiatives for new research projects and programmes.

6 Members

The membership of the PEROSH network is defined in the Agreement as key national players in OSH research, associated with ministries, social partners, or health and public accident insurance schemes. The members should carry out OSH research. There is one member per country, but there can be more if two-thirds of the existing members so decide. New members will be approved upon application by two-thirds of the SC. The current members are:

• Austrian Social Insurance for Occupational Risks (AUVA), Austria.
• Det Nationale Forskningscenter for Arbejdsmiljø (NFA) (National Research Centre for the Working Environment), Denmark.
• Finnish Institute of Occupational Health (FIOH), Finland.
• National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases (INRS), France.
• Federal Institute for Occupational Safety and Health (BAuA), Germany.
• Institute for Occupational Safety and Health of the German Social Accident Insurance (IFA), Germany.
• Italian Workers’ Compensation Authority – Research Area (INAIL), Italy
• Netherlands Organization for Applied Scientific Research (TNO), Healthy Living, The Netherlands.
• National Institute of Occupational Health (STAMI), Norway.
• Central Institute for Labour Protection – National Research Institute (CIOP-PIB), Poland.
• National Institute of Safety, Health, and Well-Being at Work (INSST), Spain.
• Institute for Work and Health (IST), Switzerland.
• Health and Safety Executive (HSE), United Kingdom.

7 Financing

The PEROSH Agreement stipulates the coverage of the costs of participation in PEROSH activities on an own-account basis. The collective costs and the costs of the secretariat and the manager of international affairs are covered by funding drawn from a bilateral financial agreement that each member makes with the host institute of the secretariat. The membership fee is equal for all partners.
The network’s budget will be approved by the SC, and the secretariat submits an annual financial report and statement to the SC for acceptance. PEROSH may apply for financing for joint research projects from the EU research fund or, when appropriate, from other sources.

8 Functions and activities

The tasks of the PEROSH network can be extracted from the three Agreement Document periods (2008–2013 and 2014–18 and 2018-22) as the following:

a) coordination and cooperation on European OSH research and development;
b) collaboration between the member institutes in OSH research, and dissemination of information based on research evidence (joint projects);
c) seconding of experts between member institutes by mutual agreement and according to law and regulations of each country;
d) collaboration in OSH research and dissemination with third parties;
e) participation in the implementation of EU research programmes (at present the Horizon 2020 Programme or calls for proposals and tenders from the Commission and its agencies);
f) improvement of the quality of research, and an increase in the EU-wide dissemination of results;
g) proactive dialogue with the EU and other OSH stakeholders, internationally and nationally; and
h) promotion of OSH research and PEROSH activities.

PEROSH has numerous functions, covering research, information, training, policy support, effective use of available support, provision of a scientific basis for safety and health development and practices, recognition of new risks, and the development of methods for prevention. The following activities constitute the core of PEROSH programme:

- The functions and activities are research-oriented and research-related. The objective is to facilitate the use of research results for the development of OSH in European working life.
- PEROSH focuses on future foresight activity to identify new trends in working life and to recognize research needs and priorities.
- The key activities are the joint research projects, in which each member is expected to participate (see below).
- The research clearinghouse activity serves for this purpose, to promote the use of evidence through high-quality systematic reviews. It is done by collecting systematic reviews on occupational health topics, and exchanging experiences on any aspect of systematic reviews (according to the principles of Cochrane collaboration) (http://www.perosh.eu/research-projects/perOSH-projects/occupational-safety-and-health-evidence-clearinghouse/database-of-OSH-evidence-systematic-review-clearinghouse/).
- An ambitious programme for the promotion of Zero Accident Vision (ZAV) and its follow-up. The objective is to identify success factors that contribute to accident prevention of

- **Network meetings.** The SC meets at least once a year, and the SSG at least once a year. The leaders of the PEROSH project groups also meet once a year. Numerous other meetings, both administrative and scientific, may be organized by PEROSH on its own or in collaboration with others. Numerous meetings will be organized by various working groups and project groups. The network meetings are well documented, and the information of the key decisions, agreements, and plans are thus informed. The minutes of the SC meetings are available within one month of the meeting. The meeting information covers the materials from the presentations in the meetings or associated seminars.

- Every two years there is a PEROSH research exchange meeting on an actual topic, to enable exchange between PEROSH senior and junior researchers. It is an internal meeting with guests as keynote speakers, and PEROSH researchers present their research and exchange experience. Networking is the key focus of these meetings, with 70 or 80 participants.

- **Newsletter.** PEROSH has so far published 16 newsletters (one to three issues a year) providing information on the PEROSH administration, scientific activities, EU news and events, important events and outputs in member institutions and their countries, international OSH events and activities, and news from other international organizations relevant for OSH (http://www.perosh.eu/newsletter/).

- **Social media.** PEROSH is present in Twitter, Facebook, and Linkedin.

- **Projects.** One of the key activities for PEROSH is joint research, for which the network was originally founded. PEROSH has taken a systematic approach to project activities, following the strategic choice of priorities and contributing, among other things, to EU research programmes. Recent strengthened collaboration with EU-OSHA and the consideration of EU future priorities has further strengthened these contacts. PEROSH’s present project portfolio is shown in Table 1.

## 9 Projects

### 9.1 Ongoing projects

PEROSH members currently cooperate in the following joint research projects, the topics of which are considered as priorities.
Table 1. Ongoing PEROSH joint projects, 2018

<table>
<thead>
<tr>
<th>Project</th>
<th>Project leader</th>
<th>Project participants</th>
<th>Aims</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development and validation of a practical monitoring and assessment tool (MAT) for injury prevention at workplaces.</td>
<td>IFA</td>
<td>INRS, AUVA, NFA, and CIOP-PiB</td>
<td>Development of tools to identify practical safety deficits at an early stage and ensure the long-term effectiveness of accident and injury prevention.</td>
</tr>
<tr>
<td>Dose-response relationships (DRR) for selected chemical substances.</td>
<td>IFA</td>
<td>CIOP-PiB, FIOH, INAIL, INSSBT, NFA, STAMI</td>
<td>Development of risk assessment and deriving DRRs for selected chemicals.</td>
</tr>
<tr>
<td>Health impact assessment for occupational respiratory diseases (ORDs).</td>
<td>HSE, TNO</td>
<td>BAuA, IFA, INRS, NFA</td>
<td>Study the health and economic burden of ORDs; validation of the impact assessment model; study the effect of potential interventions.</td>
</tr>
<tr>
<td>Futures project</td>
<td>INAIL</td>
<td>All PEROSH members</td>
<td>Analysis of future perspectives in OSH, in view of:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>a) demographic change;</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>b) globalization;</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>c) OSH research for safe new technologies; and</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>d) research into new occupational exposures.</td>
</tr>
<tr>
<td>Well-being and work</td>
<td>HSE/HSL</td>
<td>CIOP-PiB, INRS, NFA, INSSBT, TNO</td>
<td>Defining well-being at work, identifying methods for enhancement of well-being and preventing ill-health, and supporting return to work.</td>
</tr>
<tr>
<td>PEROSH recommendations for procedures to measure occupational physical activity and workload.</td>
<td>NFA</td>
<td>IFA, INSSBT, CIOP-PiB, INRS, STAMI, FIOH, TNO, INAIL, AUVA, HSE</td>
<td>Generating a common framework for technical measurements of physical work demands and physical activity and exposures.</td>
</tr>
<tr>
<td>Nano exposure and contextual information database (NECID)</td>
<td>IFA</td>
<td>CIOP_PiB, FIOH, HSE, INSSBT, INRS, NFA, TNO</td>
<td>Establishment of a nano database of exposures, supporting documentation, exposure measurement, research, exposure modelling, and scenario building and occupational exposure limits, (OELs).</td>
</tr>
</tbody>
</table>

Collaborating partners: University of Gävle (Sweden), Karolinska Institutet (Sweden), Lund University (Sweden), German Sport University Cologne (DSS)
9.2 Completed projects

PEROSH has completed numerous recent projects, including:

- indIR-UV – exposure of workers to indirect UV- and IR-radiation emitted by arcs, flames, and thermal radiators.
- Dimensional comparability of physical working conditions as covered in European monitoring questionnaires.
- Survey Development and Cross Culture Methodology.
- Exposure measurements and risk assessment of manufactured materials-nanoparticles (Nanodustiness project).
- Safety culture and accidents: Promotion of zero accident vision.
- Ageing of the workforce.
- Determination of Workplace Protection Factors for Respiratory Protective Devices.
- Hazard identification and engineered nanoparticles (NANoREG project).
- Concept of the integration of ambient intelligence solutions for safety and health, towards smart factories.

9.3 Project collaboration with third parties

PEROSH members are also active in a number of other projects with third parties:

- INCLUSIVE – Smart and adaptive interfaces for INCLUSIVE work environment
- InGRID-2 – Integrating Research Infrastructure for European expertise on Inclusive Growth from data to policy
- Back-UP – Personalised Prognostic Models to Improve Well-being and Return to Work After Neck and Low Back Pain
- WOW: Working hours, health, well-being and participation in working life
- Nordic Occupational Register: A tool for estimation of the potential of workplace and population level intervention
- Psychosocial Risk Management (Prima-et), Vocational education and training
- Scale-up Nanoparticles in Modern Papermaking (SUNPAP)
- The European Network on the Health and environmental Impact of nanomaterials (NanoImpactNet)
- A pan-European infrastructure for quality in nanomaterials safety testing (QNano)
- Safety Evaluation of Manufactured Nanomaterials by Characterization of Their Potential Genotoxic Hazard (Nanogenotox)
- Health impact of engineered metal and metal oxide nanoparticles: Response, bioimaging, and distribution at cellular and body level (Hinamox)
• Development of a novel and cost-effective range of nanotech improved coatings to substantially improve NIR (Near Infrared Reflective) properties of the building (COOL Coverings)
• Towards ECNIS Centre for Research and Education on Cancer, Environment and Food (ECNIS2)

10 Outputs

Examples of PEROSH publications


The PEROSH Well-Being Group. Physical Exercise and Sedentary Behaviour. Good Practice Check List

Development of a Nano Exposure and Contextual Information Database (NECID). Johannes Pelzer1, Wouter Fransman 2, Wiho Stöppelmann 1, Christian Schumacher 1, Derk Brouwer 2, Ismo Koponen 3, Delphine Bard 4, Olivier Witschger 5, Elzbieta Jankowska 6, Tomi Kanerva 7, Markus Berges 1

Concept of Integration of Ambient Intelligence Solutions for Safety and Health Towards Smart Factories. Project leader: BAuA, Project members: CIOP, DGUV, INRS, NRCWE, FIOH, TNO.
Health Impact Assessment for Occupational Respiratory Diseases. Project leader: TNO and HSL. Project members: BAuA, IFA, INRS, NRCWE. 


Priority setting for future European OSH research: From research challenges to research questions. 2014. Van den Heuvel SG1, Verbeek JH2, Nold A3, Fishta A4, Euler U5, Mattioli S6. PEROSH project OSH Evidence – Clearinghouse of systematic reviews. 

Success factors for the implementation of a zero accident vision (ZAV). Swetsloot et al. 27 Nov 2015. TNO Report 2015 R11506. 

http://ac.els-cdn.com/S0273230016301581/1-s2.0-S0273230016301581-main.pdf?_tid=7acf72d8-0d92-11e7-9d3d-00000aab0f27&acdnat=1490031023_f58d9c84a7.

PEROSH has contributed actively to numerous European and international research seminars and conferences.

PEROSH organises every two year its own research exchange seminars. Two were held up till now:

- The 1st PEROSH Research Exchange Warsaw, on 21 October 2015, in Warsaw, Poland: 
  http://www.perosh.eu/events/event/seminar-perosh-research-exchange/.
- Last year, the 2nd PEROSH Research Exchange meeting was organised, on 14 September 2017, in Sankt Augustin, Germany: 
  http://www.perosh.eu/events/event/2nd-perosh-research-exchange-meeting-on-14th-september-2017/.

11 Collaborative partners

According to the PEROSH Agreement, communities, societies, and individual researchers who wish to support PEROSH activities may be accepted as collaborative partners in PEROSH projects. The list below shows some examples of partners PEROSH collaborated with.

- University of Gävle, Gävle, Sweden
- Karolinska Institutet, Stockholm, Sweden
German Sport University Cologne (DSHS), Köln, Germany
Lund University, Skane Medical Services, Department of Laboratory Medicine, Occupational and Environmental Medicine, Lund, Sweden
French Alternative Energies and Atomic Energy Commission (CEA), France
Institute of Occupational Medicine (IOM), United Kingdom
European Foundation for the Improvement of Living and Working Conditions, (EUROFOUND), Ireland
University Dresden (Germany)
University Bologna (Italy)
The Occupational Safety Research Institute (VÚBP), Czech Republic. (http://www.vubp.cz/about-us)
Institut de Recherche Robert-Sauvé en Santé et en Sécurité du Travail (IRSST), Canada. (http://www.irsst.qc.ca/)
The National Institute for Occupational Safety and Health (NIOSH), USA. (https://www.cdc.gov/niOSH/about/)

Other partners

PEROSH has created policy and practical partnerships with several bodies:

European Commission, Directorate General Employment, Social Affairs and Inclusion. (http://ec.europa.eu/social/home.jsp)
EU-OSHA, Bilbao, Spain. (https://osha.europa.eu/)
European Foundation for the Improvement of Living and Working Conditions (Eurofound), Dublin, Ireland. (https://www.eurofound.europa.eu/)
The Sheffield Group – an international network of OSH research institutions, convening annually and including PEROSH members and respective institutions from the USA, Canada, Japan, Singapore, and the Republic of Korea.
12 Future challenges

PEROSH has identified seven key OSH challenges (2012 publication):

1. Sustainable employability to prolong working life.
2. Disability prevention and reintegration.
3. Psychosocial well-being in a sustainable working organization.
4. Multifactorial genesis of work-related MSDs.
5. New technologies as a field of action for OSH.
6. Occupational risks related to ENMs.
7. Safety culture to prevent occupational accidents.

Another activity is the PEROSH production of position papers. So far, three position papers have been produced:

2. “Leadership in Enabling and Industrial Technologies.”
3. “Health, Demographic Change, and Well-Being.”
ANNEX 1.
Members of the PEROSH network

The membership of the PEROSH network is defined in the PEROSH Statute as key national players in OSH, associated with ministries, social partners, or health and public accident insurance schemes. The members should carry out OSH research. There is one member per country, but there can be more if two-thirds of the existing members so decide. New members will be approved upon application by two-thirds of the SC. At present PEROSH has 13 members:

**Austrian Social Insurance for Occupational Risks, Vienna, Austria**

(Ahttps://www.auva.at/portal27/auvaportal/content?navigationalstate=JPBNS_rO0ABXcnABJzd
210Y2hDb250cmFzdE1vZGUAABA0cnVIAAdfX0VPI19f&viewmode=content&portal:
componentId=gtnc94c56bc-e53c-4f41-808e-96956e740f3a&switchContrastMode=true)

Austrian Social Insurance for Occupational Risks (AUVA) is the Austrian social security institution, providing social security services, occupational health services, and first aid, plus rehabilitation services for insured workers, aiming at successful returns to work and the promotion of work ability of employees. The AUVA also has a legal duty to carry out relevant research on safety and health at the workplace. Both aspects are equally represented, as are prevention of risks; health care; research on chemical substances and radiation; occupational workloads; heat, noise, and vibration, and new risks. An important topic is first aid and emergency medicine to support practical services in emergencies (a legal obligation of AUVA). AUVA participates in several research projects within the PEROSH framework and was leading the PEROSH project UV Indirect: Exposure of Workers to Indirect UV- and IR-Radiation Emitted by Arcs, Flames, and Thermal Radiators.

**National Research Centre for the Working Environment**
**(Det Nationale Forskningscenter for Arbejdsmiljø), Copenhagen, Denmark**

(http://www.arbejdsmiljoforskning.dk/en/om-os)

The National Research Centre for the Working Environment (NFA) is a national research institute under the Danish Ministry of Employment. Its mission is to carry out research and professional activities in order to provide consultancy services within the institute’s core areas:

a) to carry out research activities at the highest international level;
b) to communicate research-based knowledge to workplaces, authorities, social partners, and health and safety consultants;
c) to participate in the training of researchers, and in educational activities at universities within its core areas;
d) to perform tasks for the authorities;
e) to perform development work that has a clear social mission.
The NFA mission is also to provide training that will enable the development of a safe and healthy working environment in Denmark. The NFA has been an active PEROSH member since its foundation. Currently, the institute coordinates one PEROSH research project on the measurement of physical workload and is a participant in four other projects. Moreover, it will coordinate two new PEROSH research projects this year.

Finnish Institute of Occupational Health, Helsinki, Finland

(https://www.ttl.fi/en/)

The FIOH is one of the founding members of PEROSH. It is an independent legal entity in the jurisdiction of the Ministry of Social Affairs and Health. It is a multidisciplinary research institute that carries out research; disseminates information; provides expert services for government, enterprises, and institutions; and provides training for OSH specialists, employers, and workers. The institute’s mission covers the improvement of OSH in Finland at the level of individuals, the working population, enterprises, and society at large, through the development of safe and healthy working conditions, work environments, and work communities. FIOH currently participates in six out of eight PEROSH research projects.

National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases, Paris and Nancy, France

(http://en.inrs.fr/)

The National Research and Safety Institute for the Prevention of Occupational Accidents and Diseases (INRS) is an institution within the French social security organization, assigned for research, services, training, education, and information in OSH. The governance of the institute is bipartite – the French Employers’ Organization and five national federations of trade unions. The scope of the INRS is widely multidisciplinary, covering safety, toxicology, psychology, physiology, ergonomics, technical issues, and risk prevention. The headquarters, medical department, and information and training centres are in Paris; the technical departments and laboratories are in Nancy. The INRS is a founding member of PEROSH, and currently participates in five PEROSH projects.

Federal Institute for Occupational Safety and Health, Dortmund, Germany

(http://www.baua.de/en/Homepage.html)

The Federal Institute for Occupational Safety and Health (BAuA) is a public-law institution based in Dortmund with branches in Berlin and Dresden, plus a field office in Chemnitz. The BAuA is a federal authority, directly responsible to the Federal Ministry of Labour and Social Affairs (BMAS).

The BAuA serves as a major governmental research institution, and advises the Federal Ministry of Labour and Social Affairs in all matters of safety and health, and on the humane design of working conditions. As a federal institution with R&D functions, the institute operates at the interface between science and politics and renders transfer services from the science system
The BAuA is an active founding member of PEROSH and participates in two PEROSH research projects.

Institute for Occupational Safety and Health of the German Social Accident Insurance, Sankt Augustin, Germany

(http://www.dguv.de/ifa/index.jsp)

The Institute for Occupational Safety and Health of the German Social Accident Insurance (IFA) is an institute for research and testing of the German Social Accident Insurance. It is located in Sankt Augustin, near Bonn. The IFA is one of the main departments of the German Social Accident Insurance, DGUV. It supports the German Social Accident Insurance institutions and their organizations, particularly in solving scientific and technical problems relating to safety and health protection at work; with the following activities:

a) research, development, and investigations;
b) testing of products and material samples;
c) workplace measurements and advice;
d) participation in standardization and regulation setting bodies; and
e) technical information and expertise.

The IFA also works on behalf of manufacturers and companies within the framework of product testing and certification, and the certification of quality management systems.

The IFA’s competence areas cover a wide scope of work aspects, including information technology, risk management, chemical and biological hazards, physical hazards, ergonomics, epidemiology, accident prevention, and product safety.

The IFA is a founding member of PEROSH and is currently the chair for the whole PEROSH network. It is also coordinator of two PEROSH projects and a participant in four other PEROSH projects.
Italian Workers’ Compensation Authority, Rome, Italy

(https://www.inail.it/cs/internet/multi/english.html)

The National Institute for Insurance Against Accidents at Work (INAIL) is a public, non-profit entity that safeguards workers against physical injuries and occupational diseases. INAIL's objectives are:

a) to reduce the number of work-related injuries;

b) to protect workers who do hazardous jobs; and

c) to facilitate the return to work of people injured in the workplace.

The INAIL integrated system of protection ranges from preventative actions at the workplace to medical services and financial assistance, to the rehabilitation and reintegration of victims of workplace accidents or work-related diseases.

The insurance – compulsory for all employers hiring subordinate and para-subordinate workers in activities that the law defines as risky – protects workers and provides compensation for work-related accidents and occupational diseases. The insurance releases the employer from liability resulting from damage caused by employees.

In order to help reduce workplace accidents, INAIL also realizes some important initiatives aimed at continuous monitoring of employment and injury trends, providing training and advice to SMEs in the field of prevention, and funding companies that invest in security.

INAIL performs multidisciplinary research activity characterized by continuous updating, based on priorities and emerging risks. The research projects are mainly focused on injury prevention, workplace safety, health protection in living and working environments, training, and the promotion of a safety culture. It cooperates internationally with research institutions of other nations by promoting a common system of scientific and technical reference for the implementation of European Community policies.

INAIL is the Italian focal point of the European agency for workplace safety and health, and the Italian focal point for the WHO in the field of safety and health at the workplace. It provides the ICOH secretary’s office and was the National Occupational Safety and Health Information Centre (CIS) of the ILO. INAIL is an active PEROSH member, and coordinates one PEROSH project and participates in two other projects.

Netherlands Organization for Applied Scientific Research, The Hague, The Netherlands

(https://www.tno.nl/en/)

The Netherlands Organization for Applied Scientific Research (TNO) works for sustainable development of innovative industry and health, including OSH, defence, safety and security, urbanization, and energy.
The TNO is an institute of applied research and consultancy that aims to assist companies and governmental agencies in improving sustainable employability regarding:

a) psychosocial and physical workload, and the development of assessment tools and interventions;
b) vitality, engagement, and mental and physical health, including musculoskeletal disorders;
c) health management in companies, and strategies and controls for health care providers;
d) OSH, risk assessment, and work and health cataloguing;
e) monitoring, trend studies, future scenarios, and cost benefit analyses; and
f) knowledge on special topics such as postponing retirement, and older and chronically ill workers’ employability.

In the near future, TNO will focus on:

a) creating positive psychology – inspired and engaged;
b) tackling violence, harassment, and other occupational risks in the service economy;
c) sustainable employability and postponing retirement;
d) stimulating and promoting the integration of public and occupational health topics, policies, and services;
e) advising the government, employers, employers’ organizations, and others on sustainable employability policies, and monitoring trends in the Dutch workforce and in OSH, and doing policy research;
f) supporting partners – companies and public agencies – in developing and evaluating strategies and policies on sustainable employability;
g) supporting service providers in improving their quality, by organizing networks of expertise and by developing tools;
h) participating in national and international formal networks like PEROSH and Body At Work;
i) monitoring trends in working conditions in the Netherlands, for national government (the data being used for policy evaluation and for international comparisons);
j) carrying out scientific research by relating survey data to national register data, to get a deeper insight into the relationship between labour conditions, health, absenteeism, hospital admissions, and diagnoses, as well as labour productivity;
k) developing tools such as the “Happy Worker” game (serious gaming for management), ALERT (assessment of workload), DIX (assessment of sustainable employability), and the cost-effectiveness tool on harassment at the workplace; and
l) promoting the integration of public and occupational health by organizing a prestigious international conference sponsored by the WHO.

TNO is an active founding member of PEROSH and participates in several projects.
Central Institute for Labour Protection – National Research Institute, Warsaw, Poland

(https://www.ciop.pl/en)

The Central Institute for Labour Protection – National Research Institute (CIOP-PIB) is the main research institution in Poland, comprehensively dealing with improving working conditions according to human psychophysical abilities. The institute conducts research and development work, leading to new technical and organizational solutions in the field of labour protection, OSH, and ergonomics. It also carries out other tasks essential for reaching the goals of the state’s socio-economic policy in this field.

The key guideline for the institute’s activity is the strategic National Programme for Improvement of Safety and Working Conditions. The present Phase III is the continuation of phases I and II, approved by the Polish government. The results of phases I and II have been positively evaluated by the Ministry of Labour and Social Policy, and the Ministry of Science and Higher Education. The programme’s results are expected to significantly add to the reduction of occupational risk.

CIOP_PIB is an active, founding member of PEROSH, and participates in six PEROSH projects.

The National Institute of Occupational Health, Norway

(https://stami.no/en/)

The National Institute of Occupational Health (STAMI) is a multidisciplinary governmental research institute funded by the Ministry of Labour and Social Affairs. STAMI works to facilitate good working environments, and to prevent illness and promote good health. The institute has over 100 employees, who create and promote knowledge on occupational health. STAMI has an interdisciplinary research environment, consisting of experts from various professional backgrounds such as medicine, physiology, chemistry, biology, and psychology. STAMI participates actively in several PEROSH projects and is a founding member.

National Institute of Safety, Health and Wellbeing at Work
(Instituto Nacional de Seguridad y Salud en el Trabajo), Madrid, Spain

(www.insht.es/)

The National Institute of Safety, Health and Wellbeing at Work (Instituto Nacional de Seguridad y Salud en el Trabajo (INSSST)), founded in 1978, is the specialised scientific and technical institute in the field of OSH under the Ministry of Employment and Social Security. INSST comprises four National Centres, each one specialised in different fields of OSH research. The mission of INSST is the analysis and study of the health and safety conditions in the workplace, as well as their promotion and provide support for their improvement. To meet its objectives, it establishes the necessary cooperation with bodies of the Autonomous Communities (regions) and the State Administration involved with health and safety at work, as well as with social partners.
The INSST has, among others, the following functions:

- Concerning research, its primary mission is to analyse and study health and safety conditions at work, in order to determine the causes of occupational illnesses and injuries, and to recognise new and emerging occupational hazards to be able to prevent them. The INSST also promotes and coordinates a health and safety at work research network of public institutes.
- To provide the required specialised and differentiated technical support to public bodies, employers and employees organisations, as well as the necessary technical assistance in developing legal and technical regulations on the prevention of occupational risks, at both national and international level.
- To promote awareness of occupational risk prevention, acting as a driving force, and carrying out training, information, research, study and dissemination activities in the field of occupational risk prevention.
- To promote and support the integration of OSH training in all programs and educational levels, actively participating in specialised training in this field and developing support elements, training materials, and specialised documentation.

At the international level, the INSST collaborates with Governments and Institutions of other countries in the development of health and safety at work, and forms part of different European specialised networks – among others is the National Reference Centre for Institutions of the European Union. In addition to those already mentioned, the functions of the INSST are any others which may be necessary for the achievement of its end goals and which may be assigned to it within the scope of its competencies.

The INSST is active in PEROSH and participates in six PEROSH projects.

Health and Safety Executive, UK

The UK Health and Safety Executive (HSE) regulates workplace health and safety in Great Britain through a risk-based, goal-setting regulatory framework that has helped make Britain one of the safest places in the world to work. HSE’s scientists and analysts provide high-quality evidence that informs and underpins HSE’s regulatory regime, and are vital for ensuring effective and proportionate risk management that protects workers and safeguards the public while enabling productivity, innovation, and growth.

The HSE Science and Evidence Strategy is at the heart of the HSE’s approach to developing the evidence base in support of its regulatory policy. In this strategy, the HSE’s chief scientific adviser, Professor Andrew Curran, sets out the HSE research approach:

The UK Health and Safety Laboratory (HSL) is an in-house agency of the HSE. The HSL is a founding member of PEROSH. Its vision is “Using our brains to save and improve the lives of workers” and its mission is “To maximize our contribution to the health and safety system”. The HSL’s main role is to provide HSE with the scientific assistance it needs to meet its enforcement and other statutory duties. This covers a wide range of work activities including factories, farms,
hospitals, and the services sector, as well as chemical plants, refineries, and offshore gas and oil installations. Additionally, about 20 per cent of the HSL’s work is for other public- and private-sector organizations.

The HSL has three operating groups:

a) health improvement, which is focused on the health and safety of workers;
b) hazard reduction, which is focused on the safety of industrial plants; and
c) human factors, which is focused on individual human and social-group interactions that affect either workers or plant safety.

Within these three groups, research and development work is undertaken across a wealth of disciplines. Capabilities for work on occupational health and safety include: toxicology; microbiology; clinical activities; immunology; epidemiology; occupational hygiene; organic and inorganic measurement; psychology, including work on human and organizational factors; risk assessment; risk communication; ergonomics; personal protective equipment; noise and vibration; pedestrian safety; metallurgy and materials; fire and explosions; mechanical engineering; and “futures”.

Work undertaken includes:

a) understanding the causes of accidents and ill-health;
b) investigating accidents and ill-health;
c) informing policy-making activities;
d) informing the development of guidance and advice for industry and inspectors;
e) promoting health and safety through disseminating information to, and engaging with, stakeholders such as health and safety professionals; and
f) identifying new challenges to health and safety.

HSE participates in several PEROSH joint projects.

Institute for Work and Health, Lausanne, Switzerland

(http://www.i-s-t.ch/en/home/)
(http://www.i-s-t.ch/en/research/fields-of-research/)

The Institute for Work and Health (IST) is a foundation under Swiss private law, primarily supported by the cantons of Vaud and Geneva. The institute in practice is a national institute of occupational health, as its role in the promotion of occupational health in the country is so crucial. The missions are research, teaching, analysis, and consulting.

The foundation’s Board of Trustees is made up of prominent individuals from academia, professional bodies, and the private sector. Both supporting universities, Lausanne and Geneva, are represented. The Scientific Advisory Board is made up of world-renowned scientists in the field of occupational health. Its role is to assist the director and the Board of Trustees with any problematic issues concerning science.
The IST’s research is directed to the following priority areas covering exposure research, environmental engineering, medical research, and human factors. The institute carries out applied research in its principal fields of expertise on occupational health. The fields fall within the domains of exposure sciences, environmental engineering, occupational medicine, and the psychophysiology of emotions and performance in terms of human factors.

A part of the IST’s mission as a research organization is to disseminate information about occupational health, and to contribute to the scientific community’s research knowledge and data on OSH, including toxicology and occupational hygiene, occupational medicine, and occupational psychology. The IST also provides analytical and other services for regional and national authorities and other actors in the field of OSH and working environments. IST is one of the newest PEROSH members.
Profile of the South-East European Network on Workers’ Health

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## Abbreviations and acronyms

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<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ARD</td>
<td>asbestos-related disease</td>
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<tr>
<td>BCA</td>
<td>Biennial Collaborative Agreement</td>
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<tr>
<td>BOHS</td>
<td>basic occupational health services</td>
</tr>
<tr>
<td>BSN</td>
<td>Baltic Sea Network on Occupational Health and Safety</td>
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<tr>
<td>CME</td>
<td>continuous medical education</td>
</tr>
<tr>
<td>CPD</td>
<td>continuous professional development</td>
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<tr>
<td>EU</td>
<td>European Union</td>
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<tr>
<td>EU-OSHA</td>
<td>EU Occupational Safety and Health Agency</td>
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<tr>
<td>FYROM, FYR Macedonia</td>
<td>Former Yugoslav Republic of Macedonia</td>
</tr>
<tr>
<td>GDP</td>
<td>gross domestic product</td>
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<tr>
<td>ICOH</td>
<td>International Commission on Occupational Health</td>
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<tr>
<td>ILO</td>
<td>International Labour Organization</td>
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<tr>
<td>ISGUM</td>
<td>Ministry of Health, and Occupational Health and Safety Institute (Turkey)</td>
</tr>
<tr>
<td>MOU</td>
<td>memorandum of understanding</td>
</tr>
<tr>
<td>NDPHS</td>
<td>Northern Dimension Partnership in Public Health and Social Well-Being</td>
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<tr>
<td>NGO</td>
<td>non-governmental organization</td>
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<tr>
<td>OH</td>
<td>occupational health</td>
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<tr>
<td>OSH</td>
<td>occupational safety and health</td>
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<tr>
<td>PIACT</td>
<td>ILO Programme for the Improvement of Working Conditions and Environment</td>
</tr>
<tr>
<td>SEE</td>
<td>South-East Europe</td>
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<tr>
<td>SEEHN</td>
<td>South-Eastern Europe Health Network</td>
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<tr>
<td>SEENWH</td>
<td>South-East European Network on Workers’ Health</td>
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<tr>
<td>SEEWWA</td>
<td>South-East European Workplace Academy</td>
</tr>
<tr>
<td>SME</td>
<td>small to medium-sized enterprise</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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<tr>
<td>WHO/Europe</td>
<td>WHO Regional Office for Europe</td>
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Foreword and acknowledgements

The profile of the South-East European Network on Workers’ Health (SEENWH) is published as an appendix to the ILO Working Paper presenting the results of the multiple case-study analysis of six regional occupational safety and health (OSH) networks. The study was initiated in order to inform the modernization of the ILO portfolio of activities in OSH knowledge and information. It benefited from financial support provided under the Partnership Agreement between the Government of South Korea and the ILO 2015-2017 (GLO/15/50/ROK).

The study covers the statutes, roles, functions, governance modalities, financing and challenges of regional OSH networks from Europe, Latin America, Asia and Africa. The results allow a better understanding of how and why OSH agencies, institutions, organizations and experts collaborate with one another. They provide invaluable descriptive information covering the diversity of existing collaborative arrangements and key characteristics of productive regional OSH networks. They highlight similarities and differences in ways of organizing collaboration in OSH and provide new knowledge to support international cooperation which has always been and remains a key role of the ILO. They can be useful to a vast diversity of stakeholders, including policy-makers, expert groups and, of course, active members of the network.

This profile was prepared by Professor Jorma Rantanen and Professor Jovanka Karadzinska Bislimovska who also coordinated exchanges with the SEENWH member organizations and compiled comments at various stages of development and revision. Acknowledgements extend to all of them, with expression of our gratitude for their interest and support.

Claude Donald Loiselle
Coordinator – OSH network, knowledge and information management
Labour Administration, Labour Inspection and
Occupational Safety and Health Branch (LABADMIN/OSH)
International Labour Organization
Summary

During its 11 years of activity the South-East European Network on Workers’ Health (SEENWH) has demonstrated its viability and shown success in its key mission of strengthening national and subregional expertise and capabilities in OSH – an important asset for countries in social and economic transition to or towards EU membership.

The SEENWH has demonstrated continuity, visibility, and sustainability in its realized activities, and has demonstrated visible social capital as an expert community with high added value. It is now recognized among the experts and policy-makers in South-East Europe (SEE) as a key player in occupational health (OH) subregional collaboration, comparable to the Northern Dimension Partnership and the Baltic Sea Network on Occupational Health and Safety (BSN).

The SEENWH has contributed to cooperation with the WHO collaborating centres, national focal points, and international experts in the implementation of the WHO Global Plan of Action on Workers’ Health in the WHO/Europe region. It has also been instrumental in the formulation and implementation of the Biennial Collaborative Agreement (BCA) activities of the WHO Regional Office for Europe, in the area of occupational health in Albania, Croatia, the former Yugoslav Republic of Macedonia, Montenegro, Serbia, and Turkey.

With the support and participation of SEENWH members, an extensive survey of SEE occupational health systems was carried out in 2009 and 2010, covering the legislative structures, policy development, and strategies and capacity building in occupational health services in Albania, Croatia, the former Yugoslav Republic of Macedonia, Montenegro, Serbia, and the UN Administered Province of Kosovo.

It was vital to formulate a network policy, strategy and action plan (Programme), but equally important was documentation and making it available for members and visitors. The SEENWH met this requirement by drawing up a document in the founding meeting in December 2006, and particularly in the Bucharest Statement in July 2012 (the Bucharest Statement on Occupational Health in the SEE Subregion, adopted by the IX Meeting of the SEE Network on Workers’ Health, Bucharest, Romania on 13–14 July 2012).

The SEENWH has also been able to initiate and support the development of a regional centre for training and education – the South-East European Workplace Academy (SEEWA), a unique organization in the region.

The SEENWH has developed steps towards the next level of networking with the generation of networking of networks through collaborative memoranda of understanding (MOU) with the BSN, the South-East European Health Network, the WHO collaborating centres in occupational health network, and the respective Global Collaborating Centre Network.
1 Introduction

The SEENWH is a network of public health authorities and occupational health institutes from nine countries in the SEE subregion. It is supported by the WHO Regional Office for Europe. All members are recognized WHO collaborating centres for occupational health, WHO national focal points. It brings together experts from Albania, Bosnia and Herzegovina, Bulgaria, Croatia, FYR Macedonia, Montenegro, Romania, Serbia, and Turkey.

The total population of the SEENWH network member countries is around 120 million, the labour force 51.3 million, and the total geographical area 1.4 million square kilometres – corresponding to about a quarter of the population, a third of the geographical area, and a fifth of the labour force of the European Union (EU). The GDP per capita varies between USD 3,945 (Albania) and USD 11,593 (Croatia), i.e. between 12 per cent and 36 per cent of the EU average (European Commission, 2015, 2016; World Bank, 2015, 2017).

2 Formal status and constitution

The SEENWH is an inter-institutional and professional network of representatives from the WHO collaborating centres, occupational health institutes, and WHO national focal points from nine SEE countries.

It was established at the First International Workshop on “Strengthening the Health System to Address Occupational Health Risks in South-East Europe” on 18–19 December 2006, in Skopje, FYR Macedonia (WHO and IOH FYROM, 2006). The meeting was co-organized by the FYR Macedonian Institute of Occupational Health, the WHO Collaborating Centre in Skopje, the Occupational Health Programme of the WHO/Europe with the support of the WHO Country Office in FYR Macedonia, the South-East European Health Network (SEEHN), and the International Commission on Occupational Health (ICOH).

The participants were occupational health institutions and experts from Albania, Bosnia and Herzegovina, Bulgaria, Croatia, FYR Macedonia, Montenegro, Romania, Serbia, and Turkey (the Institute of Occupational Health in Skopje, FYR Macedonia, and the Occupational Health Programme of the WHO/Europe, 2006). The minutes of the meeting are the key constitutional document for the SEENWH. (WHO, 2006; Bilslimovska, 2014; Bislimovska, 2015).

3 Mission and policy

The SEENWH is a sustainable framework for strengthening occupational health systems in the SEE subregion. Its purpose as an expert information network is to provide peer-to-peer networking and collaboration of experts, institutions, and respective bodies in OH and OSH, between and within countries in the SEE subregion.
The goal of the SEENWH is to improve workers' health and well-being; to strengthen OH systems, policies, and services; and to build human and institutional capacities in the SEE region through international cooperation.

The policy aims at the implementation of relevant parts of WHO, ILO, and EU policies and programmes, particularly the WHO Global Plan of Action on Workers' Health, the new WHO European policy for health – Health 2020, and UN Agenda for Sustainable Development Goals 2030.

The key principles in the network’s collaboration are:

a) voluntary participation aiming at mutual benefits and the realization of the mission and strategic objectives of the network and of the participants, for the common good of workers’ health in the subregion;
b) peer-to-peer collaboration in continuous interaction in issues of inter-institutional and professional interest;
c) collaboration on an equal footing;
d) sharing of information through all channels available to the network members – mainly through the Internet, but also, if appropriate, print and other forms of documentation (e.g. videos);
e) learning from others, learning together, and training together (SEEWA);
f) long-term collaboration according to the guideline for the mission and the strategic objectives;
g) partnership in the implementation of all network activities, and support of peers in their missions and activities when needed, requested, and appropriate; and
h) trust and solidarity in the spirit of collegiality and friendship.

In July 2012, the SEENWH Network Meeting agreed upon a comprehensive policy document: the Bucharest Statement on Occupational Health in the SEE Subregion, adopted by the Ninth Meeting of the SEE Network on Workers' Health, Bucharest, Romania on 13–14 July 2012. This document defines the consensus among the whole network for the long-term implementation of policies and strategies. The statement includes the following main points:

a) development and expansion of occupational health service structures, content, and orientation, to provide OSH to workers in the SEE subregion;
b) development of institutional structures, facilities, financing, and staff, for occupational health services and other support services, and for research, training, information, and advisory services;
c) development of human resources for occupational health services, and upgrading their competencies;
d) development of occupational health interventions to underserved and vulnerable groups, for prevention of risks and promotion of health;
e) development of national systems for occupational health information, and registration of occupational accidents and diseases;
f) preparation of national asbestos profiles, and development of programmes for the elimination of asbestos-related disease;
g) development of programmes for occupational health for health workers; and
h) development of practical projects for research on emerging risks, including the impact of climate change and extreme weather events.

The statement calls for continuous support from the WHO Regional Office for Europe and the governments of SEE countries, and the participation of the health sector at large, as well as the labour sector, education, academia, social partners, and NGOs, for the achievement of these goals.

4 Strategy and programmes

The purpose of the SEENWH is to strengthen the workers’ health system and to address occupational health risks. Originally, the basic orientation was to ensure the best possible access to occupational health research and expert information for occupational health experts and institutions in the SEE subregion. The scope has since been expanded, with the further development of the network, to cover research in occupational health; training and education of occupational health experts; networking with other professional and inter-institutional networks; and advising on policy-making and practical programmes for workers’ health in the subregion.

The overarching strategic objective is to participate in and provide support for the implementation of the WHO Global Plan of Action on Workers’ Health, in the SEE subregion. The objectives of the SEENWH are:

a) to build up a sustainable framework for strengthening occupational health systems in the SEE subregion;
b) to provide a forum for the exchange of information and knowledge;
c) to organize a platform for transmitting and developing good practices;
d) to offer an institutional basis for developing programmes for training and education of OH and OSH professionals;
e) to stimulate members to joint bilateral and multilateral research and development projects;
and
f) to enable opportunities for the best possible use of resources available for workers’ health.

5 Structure, governance, and coordination

The organizational structure of the SEENWH is light and decentralized. The contacts between individual members depend on their project collaboration, and take place when needed. The network meetings are participated in corpore. The working groups (time limited) may be assigned by the network meeting to certain specific tasks, while the SEEWA is considered as a permanent activity.

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The highest decision-making body in the SEENWH is the network member countries’ representatives’ meeting – of senior leaders or officers of the member institutions. The meetings, convening once or twice a year, decide on the main forms of collaboration and the joint projects, as well as on the hosting and timing of future meetings on the basis of rotation. The activities of the network are evaluated at the meetings.

The practical day-to-day management, coordination of activities, individual operations, and logistics are assigned by the coordinator, elected by the network members-countries’ representatives. The projects and other practical operations are carried out by individual member institutions or groups of members on the basis of special assignments.

6 Members

The following 10 institutions participate in the SEENWH:

- Occupational Health Unit, Public Health Institute, Tirana, Albania.
- Department of Occupational Health, Medical Faculty, University of Tuzla, Bosnia and Herzegovina.
- The National Center of Public Health and Analyses, WHO Collaborating Centre for Occupational Health, Sofia, Bulgaria.
- Department of Environmental and Occupational Health, WHO Collaborating Centre for Occupational Health, School of Public Health, Andrija Stampar School of Medicine, University of Zagreb, Croatia.
- Department of Occupational Health, Medical Faculty of Podgorica, University of Montenegro, Podgorica, Montenegro.
- Serbian Institute of Occupational Health and Radiological Protection, Dr D. Karajović, Belgrade.
- University of Belgrade Faculty of Medicine, School of Public Health, Department of Occupational Health, Belgrade, Serbia.
- Institute of Research and Development of Occupational Health and Safety (ISGUM) Ministry of Labour and Social Security, Ankara, Turkey

Three network members are EU members, and the remaining six are in various stages in the application for EU membership, accession, or preparation and transposition of the EU *Aquis Communautaire* and its directives on OSH.¹ The member institutions’ profiles are presented in Annex 1.

7 Financing

No permanent special financing from national or external sources is available, although project- or event-specific support from the WHO/Europe Biennial Collaboration Agreements (BCA) funding has been available. The national institutions contribute in kind, and occasionally the organization of the network meetings is supported by national sources. It has been a strategy to locate the network meetings in connection with international or regional conferences, and thus economize the logistics and organization.

The lack of regular basic financing constitutes the most important obstacle for longer-term planning and implementation of SEENWH activities.

8 Functions and outcomes

SEENWH aims at providing a sustainable framework for strengthening occupational health systems in the SEE subregion. As a result of continuous joint work in the field, SEENWH has proposed recommendations for concrete actions including: prioritizing workers’ health at the policy-making level; developing the legislative framework providing for sustainable financing; establishment or strengthening of national OH institutes; supporting capacity-building and human resources; promoting a public health approach to OH; implementing the basic occupational health services (BOHS) concept for vulnerable groups; improving relevant information systems; and stimulating both national and international partnerships in the field of occupational health.

The network supports the practical implementation of the WHO and ILO conventions and recommendations, as well as the implementation of the principles of the EU directives on OSH. The network offers a forum for regional collaboration for OH experts in the south-eastern part of a more integrated Europe.

Network meetings

Once or twice a year, these meetings discuss and agree on guidelines and directions for improving the structure and content of international and national information, also from the technical point of view.

Through organizing annual meetings, and supporting and participating in different projects, including the SEEEWA programme for the training and education of OH professionals, the SEENWH is recognized as an essential body for enhancing partnerships and regional collaboration. The SEENWH most recent plenary meeting, the 10th Anniversary Meeting in 2016, was held in Belgrade, Serbia.

Newsletter

The SEENWH does not publish a newsletter but information about its activities are uploaded to the websites of the members’ institutions.
9 Projects

SEENWH carries out several practical research, development, training, and education projects (see below). The projects are implemented as special assignments by the network meeting, as collaboration between the SEENWH members, and with other organizations such as the partner networks like the BSN, SEEHN; international organizations (WHO, ILO and EU); and NGOs such as ICOH.

Examples of SEENWH projects:


- Towards the elimination of asbestos-related diseases in South-East Europe, 2012–17. Development of a National Profile and Programme for the Elimination of Asbestos-Related Diseases, WHO GPA, the WHO European Center for Environment and Health.

- The SEENWH has been instrumental in the formulation and implementation of the BCA and OH and OSH activities between the ministries of health and the WHO/Europe in Albania, Croatia, FYR Macedonia, Montenegro, Serbia, and Turkey.

- The SEEWA programme for training and education of occupational health professionals (see below).

South-East European Workplace Academy of the SEENWH

A special joint activity within the framework of the SEENWH is SEEWA, a joint activity of the SEENWH members, started in July 2011, for training and education of occupational health experts for the SEE subregion and beyond. The academy is hosted by the Department of Environmental and Occupational Health, WHO Collaborating Centre, School of Public Health, Andrija Stampar School of Medicine, of the Medical Faculty of the University of Zagreb, Croatia. SEEWA is a unique exercise for effecting the use of training resources, facilitating learning from peers, using international trainer resources as support to the regional and national ones, and for harmonizing the training content.
SEENWH educational events so far, are listed as the following:

- Healthy workplaces for health workers, Andrija Stampar School of Public Health, Medical Faculty, Zagreb, July 2011.
- Asbestos and asbestos-related diseases (ARDs), the Dragomir Karajovic Serbian Institute of Occupational Health, Belgrade, Serbia, June 2013.
- Meeting of the chairs for occupational medicine, medical faculties from the SEE countries, Institute of Occupational Health, Medical Faculty, Skopje, FYR Macedonia, November 2012.
- Participation in a PhD programme, postgraduate course for PhD students: “Aerosols, Fumes, and Dusts in the Aluminium Industry”, Medical Faculty, University of Tuzla, Bosnia and Herzegovina, 2014.

10 Outputs

Since its establishment, the SEENWH has conducted regular and continuous activities. The following are the most important events since December 2006:

- Second SEENWH Meeting, Dubrovnik, Croatia, November 2007. Turkey joined, and FYR Macedonia, was elected as a coordinator country.
- SEE Symposium: “Global Plan of Action on Health Care Workers’ Health in South-East Europe”, Tuzla, Bosnia and Herzegovina, May 2008
- Third SEENWH Meeting, Groznjan, Croatia, June 2008. “Workers' Health Protection: Strengthening the Occupational Health System”.
- Sixth SEENWH Meeting, “Strengthening of the Occupational Health Information System Based on Evidence-Based Indicators”, Groznjan, Croatia, June 2010.
- Seventh SEENWH Meeting, Tirana, Albania, September 2010. A plenary session was dedicated to the network during the Third International Congress on Rural Health in the Mediterranean and Balkan Countries.
• Eighth SEENWH Meeting, “Basic occupational health services for vulnerable groups in SEE countries – SEE Network’s Endeavours for Workers’ Health”, within the XIX World Congress on Safety and Health at Work, Istanbul, Turkey, 11 September 2010.


• SEENWH round table, “Universal health coverage of workers with OHS challenges and opportunities. Where is the SEE region in this process?” VII International Conference on Occupational Health and Safety, Istanbul, Turkey, 4 May 2014.


• South-East European Network on Workers’ Health Meeting. Satellite meeting to the Sixth Croatian Congress on Occupational Health, “Essentials for workers’ health protection”, Sibenik, Croatia, 2 October 2015.


• Joint Meeting of the Association of General Practice and Family Medicine of South-East Europe (AGP/FM-SEE) and SEENWH, 13th SEENWH Meeting “Workers’ health and primary health care – links and common actions, country and SEE perspectives”, Budva, Montenegro, 26 May 2017.

International activities

The SEENWH has actively participated in, and contributed to, international collaboration, particularly conferences and meetings:


Multiple Case Study on Six Regional Occupational Health and Safety Networks – Annexes

- Launching the European Network for Workers' Health: Joint Meeting of WHO Collaborating Centres and National Focal Points, Bonn, SEE Network on Workers' Health, Germany, 6–8 December 2010.
- The Sixth Croatian Congress on Occupational Health, “Essentials for workers' health protection”, SEE Network on Workers’ Health – one of the essentials in occupational health collaboration in the region, Plenary session, Sibenik, Croatia, 2 October 2015.

11 Collaborative partners

The WHO/Europe established the European Network of Collaborating Centres in Occupational Health at the end of the 1990s. The network attracts all the key occupational health institutions to collaborate in practice with the WHO and provide their outputs for others through the network, as well as supporting the national activities through the collaborating centres. The WHO collaborating centres are institutions such as research institutes, parts of universities, or academic bodies, which are designated by the WHO to carry out activities in support of the organization's programmes.

WHO European Centre for Environment and Health, Bonn, Germany


The SEENWH is recognized as a partner of the WHO Regional Office for Europe. The SEE Network is an international network of WHO collaborating centres for occupational health, and WHO
national focal points in South-East Europe that collaborate with the WHO/Europe on occupational health issues. The WHO European Centre for Environment and Health (ECEH) is the focal point for the WHO/Europe activities in occupational health. The Bonn centre was instrumental in the establishment of the SEENWH and has continuously supported the network activities in different ways, notably through technical and financial support.

South-Eastern Europe Health Network

(http://seehn.org/)

The South-Eastern Europe Health Network (SEEHN) is a political and institutional forum set up by the governments of Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Montenegro, the Republic of Moldova, Romania, Serbia, and FYR Macedonia to promote peace, reconciliation, and health in the region. In 2011, Israel became the 10th member of the network. WHO/Europe lends technical support to SEEHN’s various health projects, after having supplied its secretariat, along with the Council of Europe, from 2001 to 2009.

On 1 January 2010, SEEHN took over ownership of the regional cooperation for health and development under the auspices of the Regional Cooperation Council (RCC) and the SEE Regional Cooperation Process. The RCC’s main purpose is to provide leadership, sustain ownership by the member countries, and maintain the concerted health development action launched with the Dubrovnik Pledge (2001), and maintained through the Skopje Pledge (2005), and the Memorandum of Understanding (2008). The SEENWH signed an MOU on collaboration with the (SEEHN) in November 2014.

Baltic Sea Network

(http://www.balticseaosh.net/)

The BSN agreed on collaboration with the SEENWH by signing an MOU in July 2015. The Baltic Sea Network (BSN) network is a voluntary collaborative organization of northern European OH-OSH institutions and experts from ten countries around the Baltic Sea: Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Norway, Poland, north-western Russia, and Sweden. Like SEENWH, it has a decentralized architecture between fully autonomous national focal points located in the key OSH or OH institutions in each country.

European Agency on Health and Safety at Work


The European Agency on Health and Safety at Work (EU-OSHA) works to make European workplaces safer, healthier, and more productive – for the benefit of businesses, employees, and governments. It promotes a culture of risk prevention to improve working conditions. The EU-OSHA gathers and provides reliable and relevant information, analysis, and tools, to advance knowledge, raise awareness, and exchange OSH information and good practice. The vision is to be a recognized leader, promoting healthy and safe workplaces in Europe based on tripartism,
participation, and the development of an OSH risk prevention culture, to ensure a smart, sustainable, productive and inclusive economy. The EU-OSHA is the European Union information agency for OSH. Its work contributes to the European Commission’s Occupational Safety and Health Strategic Framework 2014–2020 and other EU strategies and programmes, such as Europe 2020.

ILO HQ and ILO Decent Work Technical Support Team and Country Office for Central and Eastern Europe, Budapest

(www.ilo.org)

The ILO is devoted to promoting social justice and internationally recognized human and labour rights, pursuing its founding mission that social justice is essential to universal and lasting peace. The ILO is the only tripartite UN agency, and brings together governments and employers’ and workers’ representatives of 187 Member States, to set labour standards, develop policies, and devise programmes promoting decent work for all women and men. Today, the ILO’s Decent Work agenda helps advance the economic and working conditions that give all workers, employers, and governments a stake in lasting peace, prosperity, and progress. The ILO has four strategic objectives at the heart of the Decent Work agenda:

a) to set and promote standards and fundamental principles and rights at work;
b) to create greater opportunities for women and men for decent employment and income;
c) to enhance the coverage and effectiveness of social protection for all; and
d) to strengthen tripartism and social dialogue.

The ILO Decent Work Technical Support Team and Country Office for Central and Eastern Europe (DWT/CO) provides advisory services, capacity development, and technical assistance to governments and to employers’ and workers’ organizations in areas related to the mandate of expertise of the ILO, including rights at work, employment creation, social protection, social dialogue, and gender equality. The SEENWH and its member organizations maintain relations with ILO HQ and DWT/CO-Budapest, notably through ILO National Coordinators posted in the region.

Other (national) partners

The SEENWH countries’ focal points have close working contacts with several national bodies, including:

a) the Ministry of Health in each country;
b) the Ministry of Labour in each country;
c) universities and medical faculties in each country; and
d) national associations or societies for occupational medicine or occupational health.
Publications and relevant documents


- Implementing the Global Plan of Action on Workers’ Health in the WHO European Region.


- The Belgrade Statement on the elimination of asbestos-related diseases in SEE was promoted at the 10th Jubilee Meeting of SEENWH, “Towards an improved environment and health in South-east Europe, reviewing progress in the elimination of asbestos-related diseases”, held in April 2015, Belgrade, back to back to the meeting organized jointly by the WHO Regional Office for Europe, the Regional Environmental Center for Central and Eastern Europe (REC), and the SEE Health Network. The Belgrade Statement was delivered at the WHO MTR Meeting in Haifa, Israel, at the end of April 2015.

- Report of the National workshop on Asbestos-Related Diseases on 12 October 2016 at the Medical Faculty of Ss. Cyril and Methodius University in Skopje, FYR Macedonia. The workshop was organized alongside the 12th SEENWH Meeting and the Second National Congress on Occupational Health, 12 October 2016.

- Road map on priority actions for the health and safety of vulnerable workforces in South-East Europe (vulnerable workers, underserved workers, and high-risk sectors). This document outlines planned activities of the SEENWH, and guidance for the joint work of SEENWH’s members for the period 2016–18, to ensure timely and effective
implementation of the Bucharest Statement focused on the priority – vulnerable workers, underserved populations, and high-risk sectors in South-East Europe. The road map identifies key objectives and priority actions, defining the roles of different cooperation and action channels for SEENWH members to follow up on priorities at international and national levels. Prepared by Professor Jadranka Mustajbegovic and Professor Jovanka Bislimovska, 2016.
References


ANNEX  SEENWH member institutions

Albania

**National Institute of Public Health, Tirana, Albania**
(www.ishp.gov.al)
(http://www.ianphi.org/membercountries/memberinformation/albania.html)
Dr Arben Luzati, MD PhD, arbenluzati@gmail.com
Dr Hajdar Luka, MD, hluka_6@yahoo.it

The National Institute of Public Health (NIPH), under the Ministry of Health, is the key institute for occupational health. Albania does not have a specialist institute of occupational health, but the Department of Occupational and Environmental Health of the NIPH provides services and supports research and the development of occupational health services.

The NIPH profile covers general public health activities plus occupational and environmental health. The ministry is responsible for health protection, particularly the prevention and control of infectious diseases, and the national vaccination programme, environmental health, and the monitoring of drinking water and air quality. It works mainly through the district public health services. Monitoring of food quality is a responsibility shared by the Ministry of Agriculture and the Ministry of Health. The Department for Health Education and Promotion coordinates health promotion activities, covering:

a) policy analysis;
b) health care surveys – health facility or community based;
c) access to hospitals and primary health care;
d) transition (demographic and social) of the country’s health system;
e) monitoring of child and adolescent health;
f) occupational health; and
g) population surveys, including epidemiology and biostatistics.

In part, the State Sanitary Inspection (SSI) carries out the functions of an institute of occupational health.

Bosnia and Herzegovina

**Department of Occupational Medicine, Medical Faculty of University Tuzla & Department of Occupational Pathology and Toxicology, Primary Health Care Centre, Tuzla, Bosnia and Herzegovina**
(http://medf.untz.ba/web/bs/)
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https://fmm.ba/tf-untz-ba
The only B&H developed Department of Occupational Medicine at Medical Faculty of University Tuzla was introduced in 1997 in curriculum of graduate study of Medical Faculty University of Tuzla, which organizes, implements, and promotes undergraduate and graduate university studies in medicine, nursing and safety at work, as well as postgraduate studies. Department of Occupational Medicine is a teaching and scientific student oriented education department and important part of postgraduate doctoral study programme "Scientific approach to Public Health". The Department school carries out research and professional work, and professional and scientific training of employees in science, health, and other institutions. The mission of the Department of Occupational Medicine is to develop experts, methods, and standards in the field of public health, with the aim of raising the level of health in the working population by means of scientific research and professional activity, graduate and postgraduate training, and continuous education programmes. The Department of Occupational Pathology and Toxicology (DOPT) is a teaching and clinical department of occupational medicine, whose main tasks are counselling work in making clinical decisions in the field of occupational pathology and toxicology, and implementing preventative health activities in workplaces. The DOPT's work includes: risk assessments and specific diagnostics; data collection of preventative measures in the workplace; general prevention measures; physical and mental rehabilitation measures; measures for professional rehabilitation; workplace adjustment; prevention measures for absenteeism and presenteeism (working while sick); opportunities to return to work; and preservation of work ability and performance at work. In its tasks, the DOPT uses: scientific methods; methods for detecting new hazards and hazards at work; methods for risk assessment and outcomes; methods for risk detection at work; methods for pharmaco-vigilance at work; salutogenic methods; methods for the promotion of workers’ health; screening; prognostic methods; methods for mediation, teaching, counselling, and education; and statistical methods for social research. Through the curriculum of the Department of Occupational Medicine of the Medical Faculty, the DOPT offers teaching to undergraduate and postgraduate students. The DOPT is the only body in Bosnia and Herzegovina that carries out complex scientific, teaching, and clinical tasks.

The DOPT attempts to identify new risks and dangers in the workplace, and detect early symptoms and signs of illness and trauma in workers, posed by risk at work – all with the aim of preserving the health and work ability of workers, the success and performance of healthy work organizations, and, indirectly, to reduce material costs and damage. The Department of Occupational Medicine at Medical Faculty of University Tuzla is active in international collaboration with the SEENWH, WHO in field of workers health and numerous professional organisations such as JRC EU, COST-EU, EASOM, and UEMS.

**Bulgaria**

The National Center of Public Health and Analyses, WHO Collaborating Center for Occupational Health, Sofia, Bulgaria


Associate Professor Katya Vangelova, PhD

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The National Center of Public Health and Analyses (NCPHA) is a body within the national health care system, and carries out activities to protect public health, prevent diseases, and provide information for health care management.
In conformity with its main activities of protecting and promoting health, the NCPHA: examines the population’s health status and the relationship with environmental and occupational factors and living conditions; conducts epidemiological surveys and evaluates risk factors for chronic non-communicable diseases; participates in the development, coordination, and performance of national programmes and action plans, and in international research programmes oriented to strengthen public health (including mental, reproductive, and sexual health); carries out intervention activities; holds training workshops; publishes information and methodical materials; assesses exposure and health risks from the impact of biological, chemical, and physical hazards in the ambient and working environments; conducts monitoring on nutrition and the nutritional status of the population; and develops manuals for nutrition in target population groups.

The NCPHA leads, controls, monitors, and coordinates information activities in healthcare, and develops and unifies medical and statistical documentation for population health status reports and for the resources and activities of hospitals. The mission of the NCPHA is to integrate these diverse activities into achieving good health benefits for the population.

The NCPHA is a WHO collaborating centre for occupational health, with the terms of reference available at: http://apps.who.int/whocc/Detail.aspx?cc_ref=BUL-16&cc_code=bul:.


The NCPHA is engaged in developing and carrying out several national programmes including the National Programme on Safety and Health at Work, a strategic document following the policy of the EU outlined by the European Commission in the priorities of the Europe 2020 Strategy for Smart, Sustainable, and Inclusive Growth, and the EU Strategic Framework for Health and Safety at Work 2014–2020, defining the priorities of the country and the commitments of state bodies and institutions, employers’ and employees’ organizations, and NGOs. The main objectives are to improve the implementation of health and safety legislation; to prevent occupational risks, including new and emerging risks; to prevent work-related and occupational diseases; and to draw up the national asbestos profile.

The NCPHA provides training in four medical specialities – occupational medicine, toxicology, nutrition and dietetics, and social medicine; trains PhD students and professionals in different public health topics; provides expertise at the national and international levels in all areas of competence; and publishes two journals – the Bulgarian Journal of Public Health and Health and Safety at Work (both available free on the NCPHA website) – as well as guidance and information papers on different topics of public health, including occupational health.

The Department of “Health at Work” coordinates research, training, and national and international collaboration in the field of health and safety at work for the NCPHA.

Recent research has been directed towards the investigation of ergonomic risk factors; visual and musculoskeletal complaints; stress; burnout and health among Bulgarian teachers; health and work ability of the ageing workforces; health and safety and occupational health care for agricultural workers; and testing and assessment of mineral fibers. Current studies include occupational
risk factors for the health and work ability of health care workers; and the effects of overtime and shiftwork, such as sleep deprivation, fatigue, and work-related diseases.

Croatia

Department of Environmental and Occupational Health, WHO Collaborating Centre for Occupational Health, School of Public Health, Andrija Stampar School of Medicine, University of Zagreb, Croatia. (http://ncpha.government.bg/index.php?lang=en) (http://mef.unizg.hr/en/about-us/organisation/school-of-public-health-andrija-stampar) Professor Jadranka Mustajbegovic MD PhD jadranka.mustajbegovic@snz.hr

The Andrija Štampar School of Public Health was founded in 1927 and today is a scientific and educational branch of the University of Zagreb School of Medicine (ZSM), which organizes, implements, and promotes undergraduate and graduate university studies in medicine and nursing, as well as postgraduate studies. The school carries out research and professional work, and professional and scientific training of employees in science, health, and other institutions, primarily in the field of public health. The mission of the Andrija Štampar School of Public Health is to develop experts, methods, and standards in the field of public health, with the aim of raising the level of health in the population by means of scientific research and professional activity, graduate and postgraduate training, and continuous education programmes.

The school scientifically and professionally supports the planning, development, and evaluation of public health programmes and policies in the governmental and non-governmental sector. International cooperation has been deeply embedded in the outlook of the Andrija Štampar School of Public Health since its founding. For years, the school has organized international programmes in the planning and management of health care in developing countries, and now runs international programmes in education and research in its area of expertise. After the death of its founder, Dr Andrija Štampar, the school took his name. Dr Štampar was one of the founders of the WHO, and an internationally recognized leader in the field of social medicine and public health. His principles, written back in 1926, are still valid and accepted in the international community.

Since 27 April 2009, the Department of Environmental and Occupational Health, the Andrija Štampar School of Public Health, the School of Medicine, the University of Zagreb, has been a WHO collaborating centre for occupational health. In 2008 and 2009, WHO/Europe supported Croatia in the preparation of a national action plan to implement the WHO Global Plan of Action on Workers’ Health. A national workshop was organized in Sinj in April 2009, with a focus on access to, and the quality of, OHS (objective 3 of the GPA).

In 2015 has been prepared by the Ministry of Health in cooperation with the WHO Collaborating Centre for Occupational Health in the Republic of Croatia, the Ministry competent for labour issues, and organizations responsible for the protection and improvement of occupational health and safety of persons employed in health care in the private and the public sector the National Programme on Occupational Health and Safety for Persons Employed in Health Care for the period 2015 – 2020 (https://zdravlje.gov.hr/programi-i-projekti/nacionalni-progrmani-projekti-i-strategije/ostali-programi/national-programme-on-occupational-health-and-safety-for-persons-employed-in-health-care-for-the-period-2015-2020/2194). It was done in line with the ILO and WHO
prepared the Joint Global Framework for National Occupational Health Programmes for Health Workers, in order to assist countries in the drafting of national programmes. The framework for the drafting of national programmes is compliant with the ILO Convention on Occupational Safety and Health (C No. 155), and the Promotional Framework for Occupational Safety and Health Convention, 2006 (C No. 187). The WHO European Regional Office has supported the development of occupational health programmes and training, through the biennial collaborative agreement (BCA).

As a contribution to the SEENWH training of occupational health professionals, SEEWA was founded in 2010, and is hosted by the Department of Environmental and Occupational Health, the WHO Collaborating Centre, School of Public Health (SPH), and the Andrija Stampar School. SEEWA has organized sub-regional courses on the prevention of needlestick injuries among health-care workers.

### The former Yugoslav Republic of Macedonia

Institute of Occupational Health, WHO Collaborating Centre for Occupational Health, Faculty of Medicine, the University of Sts. Cyril and Methodius, Skopje, FYR Macedonia

[https://www.imt.mk/](https://www.imt.mk/)


Professor Jovanka Karadzinska Bislimovska, MD, PhD

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The Institute of Occupational Health was founded in 1967 and has a multi-professional profile with a staff of 45. It is the top national organizer of health-related, methodological, educational, and scientific activities, and its main missions are research, education, training, advisory and practical services, and provision of information. It establishes criteria and methodologies, proposes and fulfils preventative and scientific programmes, and initiates and creates legislation and standards in the field of health and the work environment. The Chair for Occupational Medicine, within the Medical Faculty, University “Sts Cyril and Methodius”, Skopje is situated in the Institute.

The institute has well-established capacities for research and clinical practice in occupational medicine, and specialist training in occupational medicine and occupational health, and has been instrumental in renewing the national curriculum for specialist training in occupational health according to the EU principles. Interest among the young physicians in residence, training in occupational medicine and occupational health, is very high (currently 21 residents), and there is no shortage of trainees seeking experience in this field.

The institute serves as a national public health institution, and has adopted a unique, integrative approach for the protection and promotion of workers’ health, by providing methodological, educative, and scientific activities, and the coordination of private and public OHS work through the Occupational Health Network at the national level.

As a WHO collaborating centre in occupational health since 2003, the Institute has been active in international collaboration within the framework of the WHO global network of collaborating centres in occupational health, as well as in the corresponding European network, and in SEENWH.
The main activities of the institute are:


b) Development and expansion of OH and OSH infrastructure and methods; including public health intervention projects for vulnerable groups of workers (agricultural workers and unemployed) research, provision of information, and interventions in – psychological factors at work; risk assessment; occupational asthma, allergies, and aerobiology; prevention of hazards and protection of workers health; prevention programs for health care workers, child and adolescent workers; and occupational health and climate change;

c) Development of training programmes and modules aimed at increasing knowledge, the exchange of experience, capacity building among researchers and lecturers, the improvement of educational processes and communications, and strengthening contemporary approaches and attitudes in occupational health education; and

d) Communication of research-based information on occupational health, for a wide range of target groups, policy-makers, experts, employers, workers, and the public at large.

The institute is active in international collaboration, working closely with the WHO Regional Office for Europe, the WHO/HQ Workers’ Health Programme, the European and global networks of the WHO collaborating centres in occupational health, the SEENWH (which is coordinated by the representative of the Macedonian Institute of Occupational Health), and with numerous professional organizations such as EASOM, UEMS, ASPHER, and GA2LEN.

**Montenegro**

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Associated Professor Ljiljana Cvejanov Kezunovic MD, PhD
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The Department of Occupational Health of the Medical Faculty of Podgorica, University of Montenegro has played a key role in the development of national strategies, programmes, and research projects in occupational health. The department also serves as the key Montenegrin counterpart for international collaboration with the WHO, EU, professional associations, and research and expert communities.

Montenegro is particularly active in training medical experts in occupational health, from basic to postgraduate levels. The aim is to introduce occupational health, not only for OHS doctors, but also for family medicine and other clinical specialities. Montenegro has participated in the implementation of the WHO Global Plan of Action on Workers’ Health 2008–2017, and contributed to the implementation of the SEENWH Work Plan of Action (http://hdmr.hlz.hr/6kongres/pdf/6k-prez--Cvejanov--Implementation_of_Global.pdf).
Within the SEENWH, Montenegro has prepared a National Occupational Health and Safety Strategy (2010), with Plan of Action 2010-14, which was adopted by the Montenegrin Ministry of Health and Government. This was also requested by objective 3 of the Bucharest Statement: Development of human resources for occupational health services by making use of and upgrading the competences and capacities of the existing resources, particularly in occupational medicine, and by training the other professional groups for multidisciplinary expertise (Bucharest Statement on Occupational Health in the SEE subregion, adopted by the Ninth Meeting of the SEENWH, Bucharest, Romania 13–14 July 2012).

Romania

Ministry of Health
Public Health Directorate B. / Authority, Ministry of Health, Bucharest, Romania
(http://www.ms.ro/)
Dr Liliana Rapas, MD, PhD, occupational medicine expert for drawing up technical comments on the documents under discussion at Community level.
liliana.rapas@gmail.com

The Ministry of Health is the central administration body in the field of public health. With the Ministry of Labour and Social Justice, it is involved in regulations of the labour framework (insurance, inspection, and workers’ rights), and transposes into practice the governmental policies for the health care sector, both within the public health care system and in private medical units.

In the occupational health area, the Ministry of Health is drafting regulations for the medical sector, particularly for the development of health-at-work activities, in line with the EU legislation in force. At the same time, the ministry promotes the education of occupational medicine physicians at academic level, in collaboration with the Ministry of National Education, through occupational medicine clinics hosted by the biggest hospitals in the country.

The Ministry of Health is also elaborating and implementing adequate strategies and programmes through a network of directorates of public health, in particular the D.P.H. Bucharest, intended for assessment of working conditions for all main national occupation groups the improvement of health at the workplace, and the reduction and elimination of risk factors that may result in severe occupational diseases and significant costs in terms of human life and financial resources.

The ministry contributed to the production and implementation of the Bucharest Statement on occupational health in the SEE subregion, adopted in 2012 by the Ninth Meeting of the SEE network. The statement calls for continuous collaboration by members on the following topics:

a) the development of OH and OSH infrastructures;
b) strengthening institutions’ structure and support;
c) training of occupational medicine doctors and other professionals for a multidisciplinary expertise;
d) projects for vulnerable groups;
e) the development of national systems for occupational health information;
f) preparation of a national asbestos profile;
The National Strategy for Safety and Health at work 2018-2020” enforced in April 2018, brings together all stakeholders (ministries of labor and health, theirs institutional framework – directorates of public health, labor inspectorates, N.I.P.H., National pension house and social partners) and fulfills a convergence approach of the European Pillar of Social Rights, the strategic European framework for safety and health at work and the National Strategy for health 2014-2020, the ILO conventions, the WHO G.P.A. for workers’ health, the laws and Constitution: it refers to improvements of the laws, small and medium size enterprises, inspections campaigns, good practices, linking aging-risks-diseases, the management of statistical data, new committee for monitoring progress at national level, the new industries, new technologies, new fields – “green workplaces”

The Ministry of Health also coordinates the activity of the Public Health Institute, in charge of monitoring public health at the national level, including workplace-related diseases, and the evidence of occupational diseases. The Public Health Institute acts as a major workplace health promoter, and contributes to occupational health education and the improvement of working conditions in all sectors. The institute is also developing public health regulations, and substantiates to a large extent the national public and occupational health strategies and policies to be drawn up by the Ministry of Health and the Ministry of Labour and Social Justice. The Public Health Institute also develops and coordinates specific health services in the area of public health surveillance and occupational health promotion.

Serbia

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The Serbian Institute of Occupational Health, Dr Dragomir Karajovic, in Belgrade, is the national institute of Serbia. The institute works closely with the Chair of Occupational Health at the School of Medicine, University of Belgrade, and the Chair of the Occupational Health Section of the Serbian Medical Society.

The institute’s activities are:

a) acting as a reference institution for occupational health services for the working population;

b) carrying out methodological activities in the field of occupational health;

c) occupational medical care and the introduction of new methods in diagnostics, therapy, and rehabilitation in the field of occupational diseases and work-related diseases;

d) ensuring protection from ionizing and non-ionizing radiation for health care workers;
e) carrying out scientific and research projects; and
f) providing education and training in occupational health and related fields.

The institute has been internationally active during its whole history. It is a member of the European and global networks of WHO collaborating centres for occupational health, and has the following terms of reference:

a) implementation of priority objectives of the WHO Global Strategy on Occupational Health for All into the national agenda;
b) adoption of all relevant national legislation in the fields of OH and OSH, and their harmonization with the legislation of international and intergovernmental organizations (WHO, ILO, EU);
c) reconstruction and rebuilding of the OH and OSH system to be compatible with the reformed national health care system;
d) development of education and training courses for graduate and postgraduate students (masters of science, residents, and sub-specialists) in occupational health, work ability assessment, occupational toxicology, occupational epidemiology, clinical toxicology, radiological health, pulmonology, and work physiology, to cover and incorporate new occupational health hazards and problems, and new types of work organization;
e) scientific research in the various fields of occupational health related to major occupational health problems in the country;
f) regional collaboration with objectives to obtain capacity building (infrastructure and human resources) to improve environmental and occupational health; and
g) collaboration with other centres of the network on joint projects and exchange of information and know-how.

The projects for the WHO collaborating centres’ network for the period 2010–13 were:

a) the promotion of changes and updates to occupational health teaching in the basic curriculum in schools of medicine in Europe;
b) strengthening of the health system to address occupational health risks – and development of a national strategy on occupational health and safety; and
c) the Sustainable Waste Management Initiative for a Healthier Tomorrow (SWIFT) – a comprehensive, sustainable approach focused on the determinants of social exclusion, poverty, and health in the Roma population in Belgrade, Serbia.

The Institute is a founding member of the SEENWH and the SEEWA.

Turkey

Institute of Research and Development of Occupational Health and Safety
Ministry of Labour and Social Security, Ankara, Turkey
(http://www.isgum.gov.tr/)
Dr Buhara Onal, MD, PhD in occupational health
buharaonal@yahoo.com
Institute of Research and Development of Occupational Health and Safety (ISGUM) was founded in March 1969 by Decree No. 6/11568 of the Council of Ministers, following the ratification of the Pre-Implementation Agreement on Special Funds for Occupational Health and Safety, signed in 1968 by the representatives of the Republic of Turkey, the Special Fund Administration for the United Nations Development Programme (UNDP), and the ILO, within the scope of the Programme for the Improvement of Working Conditions and Environment (PIACT), aiming to meet OSH requirements in Turkey. In the years following its foundation, several attempts were made to strengthen the capacity of ISGUM through regional laboratories. In addition to the central institution in Ankara, ISGUM has regional laboratories in six provinces: Adana, Bursa, Istanbul, Izmir, Kayseri, and Kocaeli.

ISGUM is affiliated to the Directorate General of OSH under the Ministry of Labour and Social Security. It provides technical and laboratory support to workplaces, organizes training for safety and health professionals, and performs tests for the compliance of personal protective equipment to standards. Recently, the institute, following the enactment of a regulation on authorization for occupational hygiene laboratories, has started to authorize private institutions for occupational hygiene measurements, testing, and analysis. The institute conducts studies on research, measurement, analysis, and on-site activities, such as conducting risk assessments and health surveillance of employees, training activities (training of asbestos removal expertise is newly added), consultancy on OSH, and sampling of individual exposure and analysis. Several measurements are carried out, including on gases, dust, thermal comfort conditions, and noise and vibration.

ISGUM has two sets of mobile laboratories; each set consists of three vehicles – one for evaluation of heart and lung functions, the second for the measurement of medical and biological parameters, and the third for physical measurements. Mobile vehicles serve SMEs, in particular, to examine workers in their workplaces (reducing absenteeism), and to carry out measurements in the workplace.

ISGUM’s duties and responsibilities are to:

a) carry out activities for the prevention of work accidents and occupational diseases, at national and international levels;
b) ensure the prevention of harm from workplace hazards, or, if not possible, to minimize them to protect workers' health;
c) carry out measurements, analyses, tests, and risk assessment studies for workplaces;
d) carry out training programmes;
e) carry out studies to develop recommendations for legislation, standards, and norms;
f) develop projects and guides on a sectoral basis;
g) organize seminars, conferences, and meetings;
h) produce brochures, posters, and films, to increase the safety culture in the community;
i) collect data in its area of interest, and develop information for use by relevant institutions;
j) define strategies, targets, and activities, and follow their implementation; and
k) carry out other works given by the Directorate General of OSH.