



International  
Labour  
Office  
Geneva

# Independent evaluation of the ILO's strategy on occupational safety and health: Workers and enterprises benefit from improved safety and health conditions at work



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EVALUATION  
UNIT

**Independent Evaluation of the ILO's strategy on  
occupational safety and health: Workers and enterprises  
benefit from improved safety and health conditions at work**

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*Annexures – 3, 4 and 5*

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# Preface

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The High Level Evaluation of the ILO's global strategy on Occupational Health and Safety (Global Outcome 6) was based on seven country case studies and one on the ILO/CIS as one of the key elements of the methodology. The case studies provided scope for an in-depth analysis of the implementation of Outcome 6 at the country level with particular attention to achievement of planned results and to determine how these have contributed to national tripartite constituent's priorities and objectives aimed at strengthening national OSH policies & systems and knowledge and capacity building of government, employers and workers on OSH related issues. Specifically, the case studies sought to answer the ILO's OSH strategy in terms of :

- ▶ Introducing decent, safe and healthy working systems, through international harmonisation and good governance;
- ▶ Improving working conditions by reducing occupational accidents and diseases through the implementation of OSH management systems;
- ▶ Implementing the Global Strategy on OSH and the Plan of action (2010-2016) to achieve widespread ratification and effective implementation of the occupational safety and health instruments (Convention No. 155, its 2002 Protocol and Convention No. 187) in the countries, through access to international experience;
- ▶ Developing a sustainable national or regional OSH policy based on ILO Conventions No. 155 and No. 187 by consolidating and expanding the experience gained both at the national and international levels;
- ▶ Designing of training materials to support national and enterprise level action in the context of DWCP, technical cooperation projects and the ITC curricula.
- ▶ Supporting the development and consolidation of OSH management systems and preventive measures at enterprise level;
- ▶ Increasing OSH awareness through knowledge sharing, training and technical advice;
- ▶ Disseminating achievements and lessons learnt amongst regions in cooperation with governments, institutions and social partners.

Altogether eight case studies were developed in this process, five of which (Russia, Kazakhstan, Kyrgyz Republic, Vietnam, and Cambodia) benefited from direct interaction with regional offices, country teams and stakeholders at the national level. Case studies of India and Indonesia were based on desk reviews, while that on CIS used secondary literature as well as the survey results obtained under the evaluation.

These case studies were conducted by the evaluation team composed of Francisco L. Guzman, Lothar Lissner, and Mini Thakur.

# Case Study 1: Russia

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## 1. Introduction

The specific objectives of this case study were to assess:

1. The relevance of the ILO OSH strategy at the country level
2. The coherence value added of ILO's OSH global products and research at the country level
3. The effectiveness of the ILO's OSH instruments on the shaping of national policy and strategy
4. The efficiency of ILO organizational structure in supporting the application of the OSH strategy at the programme and project levels
5. The impact of ILO actions on the ground and determine the role of the ILO OSH strategy in achieving these impacts
6. The level of sustainability of the outcomes achieved

Based on this assessment the case study aimed to extract lessons regarding the application of the ILO strategy and tools at the country level and identify good practices from ILO activities that can be replicated or adopted to other countries in the Commonwealth of Independent States (CIS).

## 2. Background

The Russian statistics agency (Rosstat) reports that about 30 % of employees in Russia work in poor conditions which constitute a high risks for occupational accidents and diseases. This problem is also illustrated by a high mortality and absenteeism rates in the working age population. The mortality rate of the able-bodied population due to accidents, poisonings and injuries exceeds by 2.5 times that of the developed countries and by 1.5 times – of the developing ones. According to the forecast, during 2006-2015 the loss of able-bodied population may exceed 10 million.

The Russian Ministry of Economics estimated the decrease of the active working population exceeds by 2,5 times the decrease of Russia's total population and this tendency will remain stable within 10- 15 years. According to official statistics, one in six people work in dangerous and hazard conditions, and in certain branches of economy – one in two-three workers.

Against this backdrop, the ILO has been actively supporting efforts made by the tripartite constituents through dissemination of international good practices. The North-West District of Russia is no exception: the occupational accidents level in this region is some 30% higher than the average for the Russian Federation. This is why was one of the reasons why the North-West of Russia has been selected as the project

area. The overarching objective of the project was to strengthen safe work through social dialogue.

The performance indicators were:

- National OSH Profile and Programme
- Tri-partite modernization of the national OSH system
- An OSH management system (ILO-OSH 2001)
- An advisory approach, modernizing Labour Inspection including informal economy, migrants, HIV/AIDS.

The following Occupational Safety and Health Conventions are in force in the Russian Federation:

Convention	Date	Status
<b>C013</b> - White Lead (Painting) Convention, 1921 (No. 13)	10 Oct 1991	In Force
<b>C045</b> - Underground Work (Women) Convention, 1935 (No. 45)	04 May 1961	In Force
<b>C115</b> - Radiation Protection Convention, 1960 (No. 115)	22 Sep 1967	In Force
<b>C119</b> - Guarding of Machinery Convention, 1963 (No. 119)	04 Nov 1969	In Force
<b>C120</b> - Hygiene (Commerce and Offices) Convention, 1964 (No. 120)	22 Sep 1967	In Force
<b>C148</b> - Working Environment (Air Pollution, Noise and Vibration) Convention, 1977 (No. 148)	03 Jun 1988	In Force
<b>C155</b> - Occupational Safety and Health Convention, 1981 (No. 155)	02 Jul 1998	In Force
<b>C162</b> - Asbestos Convention, 1986 (No. 162)	04 Sep 2000	In Force
<b>C174</b> - Prevention of Major Industrial Accidents Convention, 1993 (No. 174)	10 Feb 2012	In Force
<b>C187</b> - Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187)	24 Feb 2011	In Force

## Legislation and Occupational Health and Safety Service

Russia has three types of control of compliance with established OSH policies. The first one involves trade union OSH inspectorates. The second type of control is carried-out by authorized persons (empowered persons), elected by the workers responsible for OSH issues in the relevant organization. And the third form of public control is employer's decision taken in coordination with the trade union organization, laid down by special Article 372 of Labour Code of the Russian Federation.

The Russian labour law is underpinned with the 1993 Constitution of the Russian Federation. In particular this constitution proclaims freedom of labour (Article 37), the right to form associations and unions (Article 30) as well as freedom of entrepreneurial and economic operations (Article 34). The key regulatory legal act of the Russian labour law which has practical importance is the Labour Code of the Russian Federation (LC RF) enacted on February 1 2002, as amended and modified from time to time most recent amendment and ratifications were in 2011). The labour Code has more than 400 articles; however it does not always reflect actual situation and practices regarding many OSH issues. There have been 46 modifications to the labour code during the period covered by this evaluation. For example, on July 18, 2011 the Russian President Dmitry Medvedev signed into law the modern definition of occupational risk, the occupational risk assessment and management system.

In addition there are many mandatory labour law regulations that are provided for in other laws, resolutions, orders and other regulatory legal acts. Generally the Russian labour law is very formal i.e. if the enterprise or employer is not in compliance with any requirements of the LC RF it would face legal difficulties and have a difficult time enforcing or protecting the entitled rights in court or in dealing with the Labour Inspection.

### 3. Labour protection

According to the Russian labour Code, the employer must ensure the following in the sphere of labour protection:

1. Safety of personnel during operation of buildings, structures or equipment and during production process;
2. Use of duly certified individual and collective personnel means;
3. Compliance with work and off hours prescribed in the labour law;
4. Training and safe working methods and procedures as well as in first aid treatment to personnel hurt in an industrial accident; labour safety briefing.
5. Non-admission to work of the personnel who have not duly gone through labour safety and training;

6. Certification of working places for compliance with mandatory working environment requirements, including subsequent certification of labour safety procedures;

In situations described in the law, mandatory preliminary (for new hires) and periodical (during the time of employment) medical examinations and mandatory psychiatric examinations arranged for employees. Preliminary and periodic medical examinations are mandatory for personnel employed in hard, harmful or dangerous jobs or jobs where employees' health conditions can be dangerous to the public i.e. in transport, in food industry, public catering and retail, in water supply, in health care and/or preventive treatment facilities.

Making the personnel aware of working requirements and labour safety rules, of the eventual health threats, available compensations entitlements and workers protection; investigations and reporting of occupational accidents and professional diseases.

#### **4. Labour safety**

A basic labour safety state policy is the state expert inspection of working conditions. During such and Enforcement of laws and regulations on Occupational Safety and Health is carried out by Labour Inspection and Territorial Centre of Federal Service on supervision in the sphere of consumers right protection and wellbeing of human being (ROSPOTREBNADZOR).

Over the last 10 years the Leningrad region has seen improvements in the OSH conditions in the state run system which is also reflected in the new economic conditions of the country and specifically of the NW Russia region. For example, a regulatory and legal framework on OSH has been developed and implemented; giving the state clear oversight and control over the issues connected with labour laws and OSH regulations.

However, the applicable system of state control over labour and OSH issues requires further improvements to ensure an effective and system. Despite the reported tendency towards a smaller number of occupational accidents and disease cases, a considerable amount of economic losses due to workplace related illnesses can still be traced.

An analysis of the progress made in the region with regards to OSH has indicated that stronger economic incentives, together with the administration, legal and organizational forms and approaches already in place, should be developed to encourage enterprises to invest on safety and health issues. There is a need to substantially enhance preventive emphasis in the field of OSH at all the stages and to develop and implement the state-of-the-art methods of forecasting the basic tendencies of occupational safety and health.

Current trade and commerce requirements makes it more imperative to focus on further improvements of existing safety and health system to comply international

norms and standards on which are basic requirements for accessing regional and global markets.

To this end, the regional Profile on OSH has been prepared in cooperation with the Committee for Labour and Employment of the Leningrad Region and DWT and CO Moscow pursuant to the «Outline for Compilation of OSH National Profile». This effort involved the «Institute for Industrial, Occupational Safety and Health and Social Partnership» and the Interregional Association «Federation of Trade Unions of Saint Petersburg and Leningrad Region».

## 5. ILO Support

The ILO 2001 OSH Guidelines are perceived as highly relevant to the Russian Federation and have had the most impact on the post-Soviet OSH system. In addition, ILO support has been mostly through the implementation of the three phases of the TC project “Developing and Implementing Occupational Safety and Health System in North-West Region of the Russian Federation to provide Decent and Safe Work”, and through direct technical advice at the national level on the implementation of the ILO 2001 Guidelines on OSH.

The ILO OSH activities (TC projects, Technical Assistance, and Information and Knowledge sharing) have contributed to the design and implementation of the ‘Programme of Cooperation between the International Labour Organization and the Russian Federation for 2010-2012’. These OSH activities contribute to Russia’s Country Programme Outcome (RUS130) on the improvement and further development of the national OSH system.

### Scope of the problem

ILO estimates are that over 2 million workers die each year from work-related accidents and diseases, and that globally this figure is on the increase. The ILO estimates that over 5 *million* workers suffer from work-related diseases. These estimates are supported by the national information. The Ministry of Health has announced that more than 2 million people die in Russia every year, about 600,000 of them are of working age and 480,000 are men. In recent years, every fifth person suffering from a work related disease has stopped working before reaching the age of 45. The premature deaths and diseases are seriously diminishing Russian working population and adding to the imbalance of the demographic structure.

The official statistic in Russia reports about 6000 fatal occupational accidents annually. However, it is important to point-out that the reporting system does not cover small and medium size enterprise.

The Russian Federation is transforming or re-building their national OSH systems from Soviet system which relied on compliance with little regard to prevention.

However, this transition has state of their economies is decreasing the resources available for OSH, while the demands on society for improved working conditions and accident compensation is increasing.

### **Safe Work**

The strategic objective of the ILO OSH programme in the Russian Federation has been to enhance the coverage and effectiveness of labour protection, aiming at safe and decent working conditions for all.

The targets of SafeWork are to assist the constituents

- to strengthen their occupational safety and health capacity through the application of ILO standards, codes and guides, as well as through improved information, statistical tools and methods on safety and health;
- to enhance national OSH systems by developing national OSH programmes and plans of action to implement safe working conditions.

Occupational accidents and diseases and poor working conditions cause economic havoc for whole families and is a major cost for the society. ILO estimates that 4 per cent of Gross Domestic Product (GDP) is lost due to accidents and work-related diseases. In the transition economies, the system of 2 compensating workers for working in sub-standard working conditions (hazard pays) is further adding to the waste of resources and adding to the burden of disease.

Safe working conditions are good business and a part of normal quality and production management. Providing adequate work is an investment in the human resources and skills of the work force at the enterprise, in quality and productivity. Sustainable and cost-effective improvement of working conditions has to be based on cooperation between employers and workers at the enterprise – social partnership in OSH, a crucial part of a coherent OSH management system.

ILO Moscow is implementing these policies jointly with ILO/Safe Work and the tripartite constituents in ten countries in Eastern Europe and Central Asia.

### **The fundamental components**

The fundamental pillars of occupational safety and health – awareness and commitment, information and knowledge, training and capacity building - are necessary to develop a national OSH strategy including a systematic approach to OSH management, in the end aiming at the creation of a national safety and health culture.

### **Awareness and commitment**

The ILO Safe Work long-term translation programme has overcome the language barrier and created an awareness and interest for cooperation among the OSH specialists and organisations across the language borders. The creation of general

public awareness as well as high level political commitment for effective implementation of national OSH systems is moving into a new phase with the new ILO mechanisms. Government organisations, the academic world and the social partners are engaged in the work.

The realisation that occupational accidents and diseases cost the society, the enterprise and the victims enormous amounts is the first step to eliminate the waste of national resources and commit business leaders to improved working conditions. General awareness raising is a crucial component in the long term work for a safety culture.

### **Information and knowledge**

The ILO OSH strategy in the Russian Federation has, for the last decade, been to assist in translating and publishing up-to-date OSH information in Russian. Over 20 000 pages of material are available in Russian, including the Encyclopaedia, IPCS chemical safety cards, ILO guidelines, manuals and code of practice. The Virtual Academy of Safe work ([www.safework.ru](http://www.safework.ru)), the portal for ILO and international information, Russian federal and regional information and the official Russian OSH information system RISOT, is an interactive, comprehensive and much used resource. The continuous publication of international material is supplemented with the development and dissemination of local OSH material. 3

ILO Moscow takes a high-tech approach utilising the rapidly expanding electronic dissemination inside the Russian Federation, to the neighbouring countries and to Russian speaking OSH specialist around the world. In addition to Internet, CD-ROMs, printed publications and the media (newspapers, magazines, radio, and television) is effectively utilised to spread information. The policy is to provide free access to ILO OSH information to all who need it in the electronic media.

ILO Moscow is, in particular, promoting the establishment and strengthening of physical network of national OSH information and training centres. Several centres have been established in the Russian Federation. Azerbaijan, Belorussia, Georgia and Uzbekistan have their own national centres; Kazakhstan, Kyrgyzstan and Tajikistan are in the process of establishing theirs. The upgrading of the established centres will require more emphasis.

ILO Safe Work is working towards harmonized methods for the collection and analysis of data on occupational accidents and diseases. Present underreporting and lack of data makes analysis erroneous and targeting of OSH resources inaccurate. Improved collection of statistics is linked with improved coverage of compensation. The work in ILO Moscow is in the beginning stage.

The information and knowledge component is an integral and continuous part of the strategy.

## **Training and capacity building**

The government, employers and workers need adequate capacity to develop, process and disseminate knowledge – concerning international standards, national legislation, technical guidance, methodologies, accident and disease statistics, best practice, educational and training tools, research or hazard and risk assessment data, everything in an understandable language.

The OSH specialists in the region have high education and long experience. The ILO's input is to provide information and experience and initiate discussions on OSH policies, methods and practical work in a market economy environment to overcome the transition period.

The ILO Mow is supporting local experts and organisations to produce pilot and modular training courses and packages utilising the training-of-trainers-approach. The present topics are social dialogue at the work places in OSH, economic costs of poor working conditions, monitoring of OSH at work places, etc. Future topics will be selected in cooperation with the constituents.

The national constituents are independently working on the adaptation and implementation of ILO standards, codes of practice and guidelines (such as OSH management systems, etc.) with ILO support and advice, where necessary. The ultimate goals are the ratification of ILO OSH conventions.

## **6. Relevance and Strategic Alignment**

The ILO's support through technical advice and technical cooperation activities reflect current trends in the on-going administrative reform of OSH management in Russia (i.e., adoption of a Russian regulation identical to the ILO OSH management systems guidelines/ ILO-OSH 2001). Moreover, ILO has been instrumental in initiating this trend by promoting ILO-OSH 2001 to be approved as an Interstate GOST 12.0.230-2007 (covering the CIS region) standard fully aligned with the ILO-OSH 2001 Guidelines.

The ILO Moscow OSH team has been promoting these amendments through the ILO Occupational Safety and Health Convention, 1981 (No 155), Promotional Framework for Occupational Safety and Health Convention, 2006 (No 187) and the Guidelines on occupational safety and health management systems, ILO-OSH 2001 for several years.

The main areas of work were:

1. Identification and determination of the scope of the OSH problem to facilitate the development of safety programmes
2. promotion of practical and informed social partnership in OSH at enterprise level

3. calculation and awareness raising of the economic costs of poor working conditions
4. development of OSH management systems at enterprises (improvement of OSH and quality management systems in a Russian context)
5. information and dissemination of experience from Finland and from joint projects
6. Baltic countries

### **What worked?**

The ILO interventions have been quite relevant to the administrative reform of OSH management in that has been on-going since 2008 in the Russian Federation (i.e., adoption of a Russian regulation identical to the ILO OSH management systems guidelines/ ILO-OSH 2001). The ILO project **ILO/RUS/04/M02/FIN** was instrumental in initiating this trend by promoting ILO-OSH 2001 to be approved as an Interstate GOST 12.0.230-2007 (covering the CIS region). ILO OSH projects have counted with strong political support from tripartite constituents.

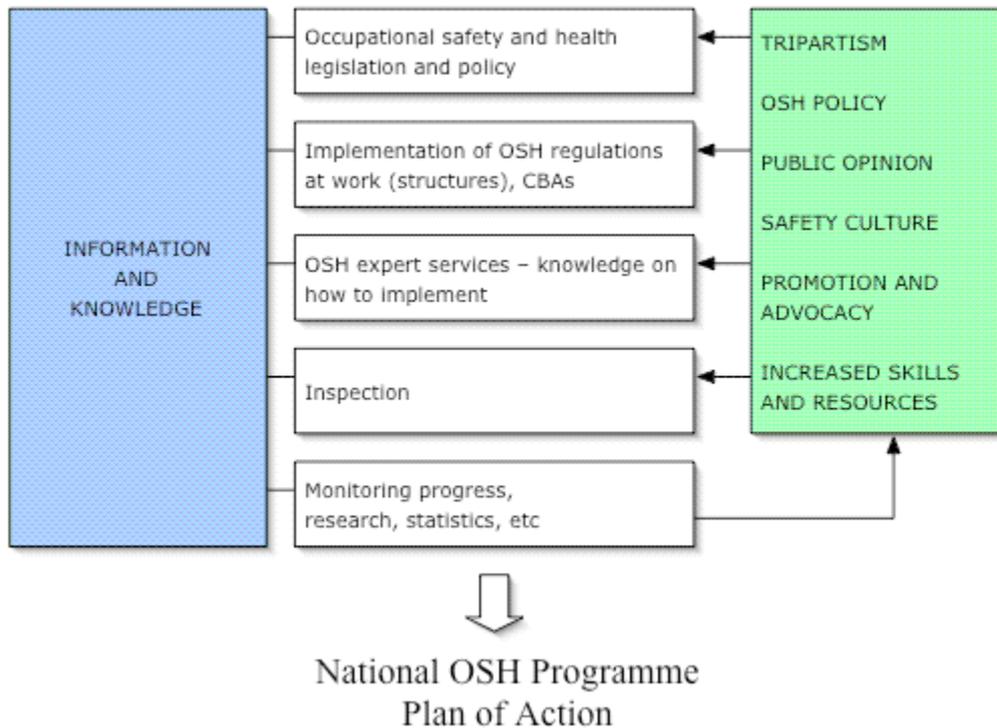
### **What needs improvement?**

Albeit ILO worked is perceived as being highly relevant to the national OSH reform process and much appreciated by national constituents', when responding to the evaluation team's question regarding how ILO could improve its performance on the field of OSH the following issues were listed as areas that need improvement:

1. More good practices and cases studies on international experiences dealing with developing and/or strengthening OSH legislation. Many constituents expressed the need practical information on experiences of other countries.
2. Almost all interviewees called for a more effective ILO CIS. This included the need for more practical and dynamic exchange of information.
3. Training materials need to be more tailored to country realities and needs. The one-size fits all approach to ILO/ITCU training is not viewed relevant or effective. ITCU training needs to be more practical and aimed at the needs of constituents on the ground.
4. Technical aspects of OSH should be incorporated in the core curriculum for inspectors' training curriculum.
5. Make better use of national research institutions. ILO OSH technical approaches are too Euro-centric.

To increase relevance of ILO products, these must be translated to Russian.

## National occupational safety and health (OSH) system



## 7. Coherence

All OSH activities at the country level are highly coherent and complementary to one another. Unlike the situation observed at Headquarters, at the Country Office level there is little compartmentalisation and there are evident synergies among the products of the various ILO activities.

This favourable well-coordinated and collaborative works of the CO OSH staff has transcended to the products of the various activities. The evaluation team and the national constituents found these products to be very coherent, demonstrating strong synergies.

### What worked?

1. DWT/CO-Moscow well-coordinated OSH work plans.
2. Involvement of national tripartite constituents in the development of Russian-specific OSH products
3. The overall strategy of ILO Moscow has been to link various fields of activities (including child labour, forced labour, HIV/AIDS, gender characteristics, migrant workers, small businesses the informal sector, etc) to improve the working conditions for the work force in general and, specifically, for vulnerable groups.
4. The ILO OSH 2001 has been translated and promoted in numerous conferences within Russia and other CIS countries. It links closely to social dialogue and a

preventive approach in the application of a systems approach to the management of national OSH systems.

5. The adaptation and integration of ILO OSH-MS into the former Soviet OSH system have developed systematic improvements of working conditions.
6. Materials from EU, Canada, UK, and Finland have been collected and used for elaboration of a Russian Methodology for estimation of costs of accidents at enterprises and a book on this item.
7. The SPB Institute of Labour Protection (The Branch of Moscow Social University) has prepared the first draft Methodology adapted for Russian conditions as well as the draft book “Labour Protection and Business” (see figure 2) that contains ILO Publications, Finnish materials and other publications on Economic aspects of OSH translated into Russian and adapted for Russian speaking specialists.

## **8. Effectiveness**

The OSH system improvement project for North-West Russia covering mainly the Karelia Republic of the Russian Federation which was also a pilot for extracting good practices and disseminate information on its activities and achievements to other entities of the Russian Federation and member countries of the Commonwealth of Independent States (CIS). The project objectives covered the following: determination of the scope of OSH problems in North-West Russia; promotion of practical and informed social partnership in OSH at enterprise level; calculation and awareness raising of the economic costs of poor working conditions; development of OSH management systems at enterprises; dissemination of OSH information across the language barrier; and international OSH cooperation in the Russian North-West region and Baltic countries. According to project report during produced during period of this evaluation, the objectives set out for all three phases of the project were all met.

### **What worked?**

1. The clustered approach to the OSH programme in Russia was based on SMEs and socially responsible enterprise restructuring. The objective of this cluster approach was skills development as a key component to employment generation.
2. In recent years, Russia has invested in modernizing the national OSH systems and Labour Inspection (LI). In the course of 2010-2012, the Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187), and the Prevention of Major Industrial Accidents Convention, 1993 (No. 174), were ratified. In 2011, the Labour Code was amended to introduce a new concept of occupational risk management. It was a pivotal point for the transition from a compensatory model of occupational safety and health and payments for hazardous working conditions to a modern system of occupational risk management applying a preventive approach to protect workers' health and reduce all types of costs

related to poor working conditions. These measures would ensure the protection of workers' health at work and contribute to the improvement of the country's demographic situation.

3. The Introduction of OSH management systems and modern risk assessments is a recent important development. RosTrud has taken the important initiative of setting up the Regional Alliance of Labour Inspections (RALI) for the CIS countries and Mongolia. This forum will be used to assist labour inspections in other countries. Russia is taking the lead, together with the International Association of Labour Inspection (IALI), in providing assistance to the development of labour inspections in the region.
4. In the field of international labour standards, the Russian Federation has ratified 68 ILO Conventions to date, including the eight fundamental ones. Eight Conventions were ratified over the past three years, including the Workers' Representatives Convention, 1971 (No. 135), the Collective Bargaining Convention, 1981 (No. 154), and the Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187). With its ratification of the Maritime Labour Convention, 2006 (No.186), Russia is among the first 30 countries to ratify, allowing the entry into force of that major instrument. Several further ratifications are being considered for the near future, including the Social Security (Minimum Standards) Convention, 1952 (No. 102) and the Maternity Protection Convention, 2000 (No.183).
5. Based on the effective work conducted by the ILO and its tripartite constituents within the previous Programme of Cooperation, significant results have been achieved in a number of key areas, including the ratification of several ILO Conventions and the promotion of some Recommendations; the improvement of the OSH legislation, the introduction of the OSH management system; the testing of entrepreneurial skills training methodology in a pilot region; the strengthening of the capacities of social partners, through a series of training programmes, workshops; and many other results.

#### **Key achievements:**

- a) ILO activities have been instrumental in boosting social dialogue on OSH in the pilot districts (regions) of North West Russia and at the pilot enterprises.
- b) The training module on Economic Efficiency successfully developed, tested and is in high demand among the regional partners and beyond.
- c) The project triggered the development of modern OSH management systems based on ILO OSH 2001 at the enterprises and contributed to the adoption of a new national standard on OSH.
- d) The project reached out to 69 enterprises organizations with 60,000 workers in total and provided training to over 1,200 representatives from the constituents' organizations and enterprises.

#### **What didn't work?**

- a) Reducing the gap between the federal policy-making level and practical implementation of policies at the regional/municipal/workplace level.
- b) Practical OSH matters are not being duly addressed by the policy makers, which correlates with the abolishment of the Ministry of Labour in 2004 and its merger with the Ministry of Health, resulting in the establishment of the Ministry of Health and Social Development.
- c) The Labour Code and other relevant laws do not specify in details the role of local administrations (local authorities) in providing safe working conditions. As a result, the majority of the enterprises operate in a “grey” zone, with no oversight from the local administration.
- d) Unions appear to be the weakest side in the tripartite partnership formula. They had difficulty in defining their role in OSH matters and could not define their contribution to the project objectives.
- e) There has been no involvement of St. Petersburg (one of the most significant hub academic and intellectual institutions) authorities into the project.

### **What remains to be done?**

Notwithstanding the accomplishments listed above, the tripartite constituents and ILO have identified the following areas of action for the 20013-16 Cooperative Agreement to build on these achievements in the field of OSH:

- a) Further modernizing the national occupational safety and health system: improving OSH legislation and policy and their harmonization with international labour standards and practices;
- b) Promoting the preventive approach to the improvement of working conditions: support to application of OSH management system in enterprises (on the basis of ILO-OSH 2001/GOST 12.0.230-2007); development of OSH services in enterprises; capacity-building for OSH specialists;
- c) establishing and ensuring the guaranteed minimum (minimum standards) of social security and social services as a basis for social protection, with special reference to the standards of Convention No. 102 and Recommendation No. 202;
- d) supporting the improvement of the legal framework for the pension insurance in the context of the implementation of the Strategy of Long-Term Development of Pension System of the RF.

## **9. Efficiency**

The project managed to multiply its resources by engaging a number of qualified volunteers from among the local experts, who offered substantial help in the implementation of the project work plan. However, detailed financial analysis is was not made available.

## **10. Impact**

ILO has been very effective in supporting on-going OSH system improvement in the North-West Russia region. Moreover, results from the NW region are being piloted in other entities of the Russian Federation and member countries of the Commonwealth of Independent States (CIS). Good practices from the Russia experience have been disseminated in Baltic and eastern European countries and considerable amount of synergy has been created through training and other materials.

An interstate Russian OSH management standard, based on the Guidelines on OSH management systems (ILO–OSH 2001), was developed and tested in selected enterprises in Karelia and the Leningrad region, then in Armenia and Georgia

## **11. Sustainability**

The core components of sustainability – broadly accepted policy frameworks aiming at comprehensive OSH coverage, a structurally integrated single labour inspection system, and effective, institutionalized, on-going tripartite social dialogue on OSH – have successfully been established through ILO TC projects and direct TA activities. Sustainability was also evident the North-West Russia project by effective dissemination and transfer of local strategies, tools and achievements to other regions of the Russian Federation and CIS members.

A key feature of the sustainability achieved by the North-West Russia/Finland project was the strategy to involve different government ministries and the Federation of Independent Trade Unions in the disseminated its publications and results throughout the Russian Federation. Another essential tool mentioned was the Internet Academy of Safe Work ([www.safework.ru](http://www.safework.ru)) where all available ILO–OSH material is published in Russian and regularly updated. This is an indispensable tool to spread the experience to all Russian language countries, leading to broad use throughout the CIS.

Requests for the Russian experienced have been received from Azerbaijan and Ukraine. The project actively supported Russian Federation-level cooperation with the ILO/CIS network. It also contributed to the Expert Group on Social Inclusion, Healthy Lifestyles and Work Ability created in the Northern Dimension Partnership on Health and Social Well-being, for the coordination and promotion of OSH matters among several countries.

A methodology to assess the real costs of accidents in enterprises and another for estimating official accident statistics were developed, also for implementation in other regions of the Russian Federation. The project thus achieved strong multiplier effects beyond its initially limited geographical coverage.

## **12. Findings and lessons**

1. Associating OSH improvements with productivity and quality gains, and combining that message with best-practice examples, is a powerful message, especially for SME entrepreneurs and farmers.
2. Using regional or local resources, both in human terms and in good examples, is a very effective way to ensure sustainability of results
3. The experiences of organizations and enterprises which have started from the same basis show that change and results are attainable, and, importantly, perceived as attainable.
4. Coherence among ILO products and initiatives can produce practical tools to promote ILO OSH strategy. An example of this can be found in use of WISE and WIND methodologies in the Finnish-funded projects in Armenia, Tajikistan and Uzbekistan as a result of the North-West Russia project.
5. Greater efforts must be made to ensure that national employers' and workers' organizations give higher priority to OSH. The Bureaux for Employers' and Workers' Activities are both committed to the importance of OSH issues. Better integration of these issues in employers' and workers' programmes would be an effective means of sensitization, at both national and local levels. Ultimately, the litmus test is whether technical cooperation activities actually make a change in the workplace.
6. Expanding labour inspectorates' approaches from mainly punitive to preventive (backed up by strategic use of sanctions) will likely ensure better cooperation with, and compliance by, employers.

### **13. Recommendations**

1. Define a '*culture*' which creates good OSH practices among workers and employers. This could be achieved through better use of ILO practical tools that are adopted to national circumstances. The publication of these tools in Russian is essential.
2. During the 2013-16 Programme of Cooperation between the Russian Federation and the ILO, the ILO Country Office must be more active in identifying good practice and integrate initiatives into a more '*holistic*' systems approach to OSH. This would require ensuring that ILO-Moscow can count with appropriate financial and technical resources.
3. Conduct an OSH needs assessment based on the objectives set-out in the 2013-16 Cooperation Programme. This should require commissioning research that involves tripartite constituents and national centres of excellence to key issues and develop strategies to addressing them.

4. Commission or partner with National and International OSH centres of excellence for research that identifies new hazards or looks at existing hazards in new ways, particularly being more aware of gender issues.
5. Review existing OSH legal framework using a gender and rights-based lens.
6. Continue to raise awareness of OSH and develop capacity building programmes to prepare members for taking on OSH issues in the workplace.

# Case study 2: Kazakhstan

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## 1. Introduction

The field evaluation mission had three specific objectives:

1. To Assess the relevance of the ILO OSH strategy at the country level
2. To assess the effect that the ILO's OSH strategy has had in the development and/or implementation of OSH systems at the country level
3. To assess the application of the ILO's policy and strategy at the project level

The specific objectives of the evaluation mission were to assess:

1. The application and use of ILO OSH global products and research
2. The effectiveness and efficiency of ILO organizational structure in supporting the application of the OSH strategy at the programme and project levels
3. The impact of ILO actions on the ground and determine the role of the ILO OSH strategy in achieving these impacts the level of sustainability of the outcomes achieved lessons regarding the application of the ILO strategy and tools at the country level and;
4. Identify good practices from ILO activities that can be replicated or adopted to other countries.

## 2. Development Status and Labour Market

Kazakhstan is an independent state and a member of the Commonwealth of Independent States (CIS) since 1991. The country is the 9th largest the world (2.7 m sq km), it is located in Central Asia between the Caspian Sea in the West and the Chinese border in the East, the Russian Federation in the North and four former Soviet Union states, namely Kyrgyzstan, Tajikistan, Uzbekistan and Turkmenistan in the South; only the south-eastern area is mountainous, the largest part of the country is plain steppe. In 1997 the capitol was moved from Almaty in the southeast to Astana closer to the geographical centre of the country.

Kazakhstan has a population of app 17.0 Mio people, less than 7% are older than 65, around 42% of the population is younger than 25.<sup>1</sup> In 2011 the life expectancy was 62 years for men and 72 for women, similar to the Russian Federation (63/75) or Kyrgyzstan (65/72).<sup>2</sup>

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<sup>1</sup> <https://www.cia.gov/library/publications/the-world-factbook/geos/kz.html>

<sup>2</sup> <http://apps.who.int/gho/data/node.main.688?lang=en>

Kazakhstan is classified by the World Bank as an ‘upper-middle income’ country<sup>3</sup>. The GDP per capita and year in 2012 was US \$ 9,730.<sup>4</sup> In 2012 approximately 5% of the population lived below the poverty line.<sup>5</sup>

26% of the working population is employed in agriculture, in industry work ca. 12% of the total workforce and in the service sector 62%.<sup>6</sup>

The main product from agriculture (covering more than 60% of the overall production value) is wheat. Kazakhstan possesses large fossil fuel reserves (oil and coal) and plentiful supplies of other minerals and metals, such as uranium, gold, nickel and rare earth metals.

The development indicators for Kazakhstan<sup>7</sup> show in many aspects a high level of development, e.g. the rate of adult literacy is over 99% and also more than 90% have access to ‘improved’ drinking water.

The economic data show in a stable and very positive development in the last decade. The GDP grew from 6,530 USD per capita in 2003 to 11,950 USD per capita in 2012; in the same period the life expectancy has risen from 60 to 66 years.

**Table 1: Economic Indicators, 2008-2012 Kazakhstan**

	2003	2004	2005	2006	2007
GNI per capita, PPP (current international \$)	6,530	7,230	7,880	8,690	9,550
Population, total	14,909,019	15,012,984	15,147,029	15,308,085	15,484,192
GDP (current US\$)	30,833,692,831	43,151,647,003	57,123,671,734	81,003,864,916	104,849,915,344
GDP growth (annual %)	9	10	10	11	9
Life expectancy at birth, total (years)	66	66	66	66	67

Source: World Development Indicators. Click on a metadata icon for original source information.

	2008	2009	2010	2011	2012
GNI per capita, PPP (current international \$)	9,720	10,060	10,530	11,180	11,950
Population, total	15,673,999	16,093,481	16,323,287	16,558,676	16,797,459
GDP (current US\$)	133,441,649,222	115,308,687,202	148,052,371,904	188,049,986,359	201,680,160,955
GDP growth (annual %)	3	1	7	8	5
Life expectancy at birth, total (years)	67	68	68	69	..

<sup>3</sup> Data and Statistics: Kazakhstan, World Bank, Washington, DC <http://www.worldbank.org/en/country/kazakhstan>

<sup>4</sup> <http://data.worldbank.org/indicator/NY.GNP.PCAP.CD>

<sup>5</sup> <http://www.adb.org/countries/kazakhstan/main>, and: Asian Development Bank: Kazakhstan - Fact Sheet

<sup>6</sup> <https://www.cia.gov/library/publications/the-world-factbook/geos/kz.html>

<sup>7</sup> These data were compiled by the Asian Development Bank

Kazakhstan became independent in 1991. The political situation is seen by many observers as fairly stable, the current president was in 2013 for 22 years in power.

### 3. The ILO in Kazakhstan

The ILO sub-regional office in Moscow is responsible for the ILO-activities in Kazakhstan; in the capitol Astana works a national ILO coordinator.

The ILO influences Kazakhstan by promoting its global political standards (conventions and recommendations), the field activities are supported via technical advice and technical cooperation. Main topics are the efforts to put into practice the ILO Promotional Framework for OSH Convention (Conv. No. 187). In line with this convention ILO is trying to introduce the OSH management system based on the Russian Federation/CIS standard GOST 12.3.230–2007. These are in practice the ILO OSH Management Guidelines). The other activities are focused on raising awareness, enhancing commitment, disseminate information, and train and build capacity in modern OSH management systems and risk assessment; in technical projects (see page 5-7) pilot programmes are implemented.

According to the country specific Decent Work Programme ILO is *“providing advice on the implementation mechanism of the newly adopted labour legislation on occupational safety and health. The audit of labour inspections organized by ILO will allow developing recommendations on improvement of the law.”*

Moreover, ILO provided advice to interested parties in achieving consensus on implementation and improvement of the OSH management system to ensure decent work and safe working conditions including training. ILO plans to expand the WIND pilot programme in Southern Kazakhstan, focused on migrant workers, and to the rural population in other regions.

Between 1999 and 2003 Kazakhstan ratified the eight fundamental ILO conventions and between 1996 and today the following conventions, related to OSH and tripartism.

**Table 2: ILO OSH related conventions – ratified by Kazakhstan**

**1. Labour administration and inspection**

C081 - Labour Inspection Convention, 1947, ratified July 2001, in Force

C129 - Labour Inspection Agriculture, 1947, ratified July 2001, in Force

**2. Occupational safety and health**

C148 - Working Environment (Air Pollution, Noise and Vibration) Convention, 1977, ratified 30 July 1996, in Force

C155 - Occupational Safety and Health Convention, 1981, ratified July 1996, in Force

C162 - Asbestos Convention, 1986 , ratified April 2011, in Force

C167 - Safety and Health in Construction Convention, 1988 , ratified June 2008, in Force

C183 - Maternity Protection Convention, 2000, ratified June 2012, in Force

**3. Tripartism**

C135 - Workers' Representatives Convention, 1971, December 2000, in Force

C144 - Tripartite Consultation (International Labour Standards) Convention, 1976 (No. 144), 13 December 2000, in Force

In cooperation with the ILO-Moscow office three cross-national projects were conducted in the CIS-States, which were dedicated to the improvement of OSH as one core element. Kazakhstan was included in all of these projects. These were specifically:

1. Improving Occupational Safety and Health (OSH) systems in Central Asia (financed by Korea) (2007-2012)
2. Occupational Safety and Health (OSH) in Central Asia (financed by Finland) (2009-11)
3. From the Crisis towards Decent and Safe Jobs in Southern Caucasus and Central Asia (financed by Finland) (2010-12)

10 May  
2004

**Box 1: Project 1 ‘Improving Occupational Safety and Health (OSH) systems in Central Asia’ (2007-2012)<sup>8</sup>**

Project Title	Improving Occupational Safety and Health (OSH) systems in Central Asia (in this text referred to as ‘the Korean project’)
Donor/Source of fund	Government of Korea
Key partners/ stakeholders	Constituents in the CIS Countries
Project Duration (start and end date)	1.01.2007 to 2012
Context of the project	<p>In 2007, phase I of the project focused on the study of the OSH situation and the development of national OSH profiles. Phase II concentrated on the national OSH profiles and aimed at the preparation of national OSH programmes, in accordance with the framework in ILO Convention No. 187. An OSH information centre was established. Labour inspection took an active part in the promotion of a modern OSH approach. Significant improvements in legislation of the Republic of Kazakhstan have led to the introduction of OSH Management Systems at large enterprises. Four detailed national standards for assisting in practical implementation have been approved. A National OSH Exhibition and Conference was organized in Kazakhstan for the first time ever, and linked to the World Safety Day in 2011.</p> <p>A General Agreement for 2012-2014 was signed in December 2011 between the Government of Kazakhstan and workers’ and employers’ associations to develop an OSH system in the country.</p>

**Box 2: Project 2 on ‘OSH in Central Asia’ (2009-11)**

Project Title	Occupational Safety and Health (OSH) in Central Asia (in this text referred to as ‘the Finnish OSH-project’)
Donor/Source of fund (TC, RBSA)	The Ministry of Foreign Affairs of Finland
Project Duration (start and end date)	1.01.09 to 31.12.11
Key partners/ stakeholders	External Implementing Partner in Kazahlstan; Kazakh OSH Institute; Kyrgyz Social partners
Brief Context of the project	This two-year regional project was aimed at ‘supporting social sustainable development and promoting the Decent Work Agenda focusing on the improvement of the working conditions and by introducing occupational accident and disease insurance (OADI) for men and women at work.’

<sup>8</sup> ILO (2012): Korea – ILO. Cooperation Results

	<p>The project approach was based on the balance of prevention and protection and therefore the elements of OSH, OADI and HIV/AIDS are effectively combined. The project approach inherently involved social dialogue and consensus building among the tripartite constituents.</p> <p>The project was managed by a team of DWT/CO Moscow specialists (Senior OSH Specialist, Senior Social Security Specialist, and HIV/AIDS Focal Point). The project implementation team included one programme assistant, one Moscow-based project coordinator and one coordinator in Tashkent/Uzbekistan.</p>
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**Box 3: Project 3 ‘From the Crisis...’ (2009-11)**

Project Title	From the Crisis towards Decent and Safe Jobs in Southern Caucasus and Central Asia (in this text referred to as ‘the Finnish Decent Work-Project)
Donor/Source of fund	The Ministry of Foreign Affairs of Finland
Countries	Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan
Project Duration (start and end date)	1.01.09 to 31.12.13
Link to DWCP Outcome/CPO/Global Outcome	<p>The project contributes to DWCP outcomes in countries that have Decent Work Country Programmes. Overall, it contributes to about 30 CPOs in the eight countries including Kazakhstan on three issues:</p> <ul style="list-style-type: none"> <li>• Employment,</li> <li>• OSH and</li> <li>• Social security.</li> </ul> <p>After the inception phase, the project objectives and log frame were adjusted to correspond with the latest DWCPs in the 5 countries and with the ILP P&amp;B outcomes.</p>

In the first and second phase of the Korean project) the preparation of National Profiles was promoted. In 2008 the ILO Moscow Office published a National Profile on Occupational Safety and Health for Kazakhstan.<sup>9</sup> The profile describes the OSH-legislation and in Kazakhstan before 2008. The profile contains conclusions illustrating the progress made in Kazakhstan between its independence in 1991 until 2007:

<sup>9</sup> ILO (2008): Occupational Safety and Health in Kazakhstan - National Profile

*“The Republic of Kazakhstan is making a robust effort to improve labour legislation. This year saw the introduction of the Labour Code of the Republic of Kazakhstan which regulates not only labour relations but the relations of social partnership.*

On future tasks it was stated:

*“A series of tasks are to be solved to achieve the goals set:*

- to improve the legal framework to ensure parity and equal responsibility of the employee and the employer irrespective of the sphere and sector of the economy;*
- to provide a mechanism of incentives to raise real wages through rational use of manpower, higher labour productivity, lower tax burden on organizations by reducing mandatory payments;*
- to develop social partnership at all levels (national, regional, sectoral) and through creating real mechanisms of collective bargaining in organizations; and*
- to introduce a system of economic incentives for the employer to allocate more funds for OSH..”*

For Kazakhstan exists an ILO Decent Work Country Programme between 2010 and 2012. The description of the current state of OSH shows the high relevance of this Decent Work aspect for Kazakhstan. In this DCWP facts were presented and statements were made related to crucial aspects of OSH as burden of disease, compliance, standards and future:

*“ A considerable focus is given to the improvement of working conditions and introduction of international safety and health standards at enterprises.*

*In 2009, a total of 2102 work-related accidents were reported which is 15% less than in the previous year (including 346 deaths compared to 404 in 2008).*

*Control of compliance with the labour law is implemented. As of January 1, 2010, a total of 100.6 thousand violations of the labour and social law were identified by labour inspectors in the course of 22.1 thousand reviews. The share of enterprises covered by the reviews was 9.0% of those in operation (245583).*

*With the purpose of improving labour administration and efficiency of public control, the Ministry proposed new approaches aimed at reducing the administrative burden on employers. A risk assessment system was developed which starting from 2010 will provide the main criteria to determine the periods of inspection of private entities.*

*The Eurasian Standards Council (EASC), a regional association of national standards bodies of the CIS countries, has adopted inter-state standard GOST 12.0.230-2007 "Management System for Occupational Safety and Health. General Requirements".*

*Kazakhstan voted in favour of its adoption. This standard is identical to ILO-OSH 2001 Guidelines on occupational safety and health management systems.*

*The Ministry of Labour and Social Protection is specifically focused to introduce inter-state GOST at enterprises and organizations. Efforts are taken to harmonize the OSH management system with international standards. It is necessary to take additional steps to improve the quality and efficiency of work of OSH specialists including government labour inspectors and trade union inspectors, further improve their training system, and introduce a systematic approach to OSH at small businesses. A special focus will also be given to elimination of the worst forms of child labour, addressing the issues related to HIV I AIDS at work and migrant labour.*

The DCWP specified two country specific outcomes, on legislation and on management systems. Both outcomes are supported by a number of ‘major steps’ to achieve these outcomes.

*Outcome 1.3: Occupational safety and health (OSH)-related legislation is improved and national OSH standards are developed in compliance with international standards.*

*Major steps:*

- *New terms and concepts on assessment and management of OSH-related risks are integrated into the Labour Code.*
- *Regulations on OSH are reviewed.*
- *Draft OSH standards "Enterprise OSH System Guidelines"; "Small Business OSH System Requirements and Guidelines", "OSH Management at Organizations. Main Requirements for risk assessment and management" and "OSH Management at Organizations. Inspection (Audit) Procedure" are developed.*

*Outcome 2.4: OSH management system is introduced and applied in specific high-risk sectors to ensure safe working conditions, including to migrant workers*

*Major steps:*

- *OSH management system complying with the Interstate standard GOST on "Occupational Safety and Health Management System. General Requirements" (ILO-OSH2001) is introduced at enterprises.*
- *OSH syllabus is developed and introduced by the National Occupational Safety and Health Institute as part of the systemic approach to improvement of training standards.*
- *Advisory Board is set up under the National Occupational Safety and Health Institute to consider and introduce findings of research to practical work of enterprises.*
- *Annual training of labour inspectors and social partners regarding a*

*methodology to introduce the "Occupational Safety and Health Management System. General Requirements" is organized.*

- *Multiplication of the WIND programme.*
- *Integration of HIV/AIDS workplace issues into the OSH management system.*

For 2010/ 11 and 2012/13 the ILO Moscow office surveyed the following targets for Outcome 6 and the connected Outcome 13:

Outcome 2010/11

*Outcome 6 - KAZ103 - Adoption of national OSH policies and programmes through introduction of related legislation and norms*

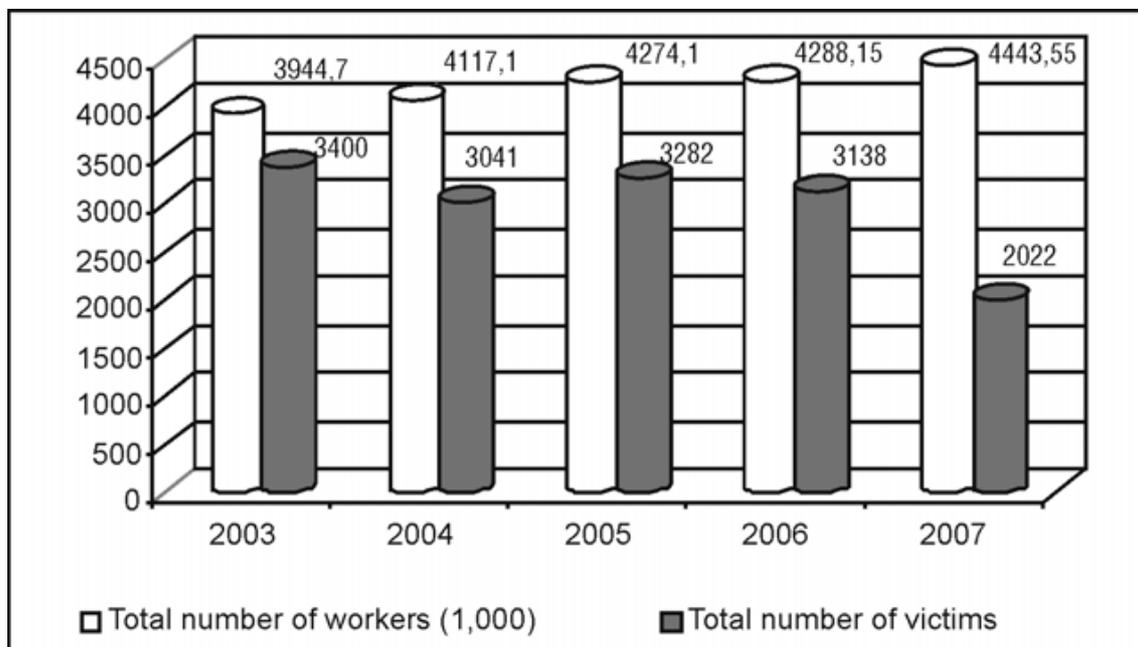
Outcome in 2012 / 13

*Outcome 06 - KAZ155 - Introduction of OSH management system at big enterprises and selected high-risk sectors to ensure safe working conditions.(target)*

There is no evaluation about the achievement of these targets available up to now.

**4. Occupational Safety and Health – Basic Data, Legislation and Infrastructure**

The basic data source is the national profile showing these data on accident and diseases.



In 2009, a total of 2102 work-related accidents were reported which is 15% less than in the previous year (including 346 deaths compared to 404 in 2008).<sup>10</sup>

In 2008 according to ILO figures the number of fatal injuries was 341 in total or 8.2 per 100,000 workers; 2,702 non-fatal injuries were counted (ILOSTAT), this corresponds with 65 injuries per 100,000 workers.<sup>11</sup>

The number of fatal injuries correlates well with comparable countries; the number of non-fatal accidents is much too low. The Kazakh figures on non-fatal injuries are unreasonable, when compared with data from countries of similar size, even those countries with much smaller dangerous sectors show much higher figures, e.g. Belgium, Hungary or Germany.<sup>12</sup>

The main reason for these low figures is that the obligation to register work related accidents and diseases covers only such injuries, that cause death or disability: *“Subject to be registered are work related damage to the health of workers which have led to disability or death.”*<sup>13</sup>

This is a very strict borderline for registration, the respective ILO Code of practice recommends registering occupational accidents with a lost time of more than three days.<sup>14</sup>

In May 2007 Kazakhstan adopted a new labour code.<sup>15</sup> The Labour Code provides guarantees of labour rights, social protection and decent working conditions of workers and contributes to improving labour productivity in and competitiveness of enterprises.

It introduced a new model of legal regulation of labour relations to better balance the interests of workers, employers and government. It was based on the experience of countries which managed to establish and ensure efficient operation of social partnership institutions shows that a dialogue and co-operation among workers,

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<sup>10</sup> Decent Work Country Programme of the Republic of Kazakhstan, 2010 – 2012, p4. The ILOSTAT figures are a little different: for 2008 341 fatal injuries are reported, not 404.

[www.ilo.org/ilostat/faces/home/statisticaldata/data\\_by\\_subject/subject](http://www.ilo.org/ilostat/faces/home/statisticaldata/data_by_subject/subject)

<sup>11</sup> <http://laborsta.ilo.org/STP/guest>

<sup>12</sup> Some examples: Hungary with 10 Mio citizens records 118 fatal injuries and more than 20,000 non-fatal injuries, 7 times the rate of Kazakhstan. Belgium - also 10 Mio citizens – reports 108 fatal injuries – and 93,000 non-fatal cases, 34 times more than Kazakhstan. Germany (with still some dangerous sectors) with five times more citizens than Kazakhstan reports in 2008 765 fatal injuries (two times the number from Kazakhstan) and 1,063,000 non-fatal injuries, almost 400 times the figure of Kazakhstan. In Germany accident victims of occupational accidents are specifically and mostly better treated, this leads to a low level of underreporting.

<sup>13</sup> ILO (2008): Occupational Safety and Health in Kazakhstan - National Profile, p89, and: Labour Code of the Republic of Kazakhstan, Chapter 37. INVESTIGATION AND RECORDING OF INDUSTRIAL ACCIDENTS AND OTHER HARM TO THE HEALTH OF EMPLOYEES IN CONNECTION WITH THEIR LABOUR ACTIVITIES, Article 322. General provisions on investigation and recording of industrial accidents: “2. Investigation and recording shall encompass industrial accidents, industrial injuries and other harm to the health of employees connected with fulfilment of their job duties or performance of other actions, on their own initiative, in the interests of the employer, resulting in disability or death, if they occur...”

<sup>14</sup> ILO (1996) Code of practice: Recording and notification of occupational accidents and diseases, Geneva

<sup>15</sup> <http://www.ilo.org/dyn/natlex/docs/MONOGRAPH/76433/82753/F982631364/Microsoft%20Word%20-%20ENG%20KAZ.76433.pdf>

employers and movement are beneficial to all parties to this dialogue, and provides a mechanism to arrive at mutually acceptable solutions and guarantee social stability.

A considerable focus is given to the improvement of working conditions and introduction of international safety and health standards at enterprises.

Kazakhstan has a far developed system of governmental bodies taking care of OSH issues<sup>16</sup>. This does not only include the institutions of the national government, like the Ministry of Labour and Social Protection (MoLSP), the National labour inspection but also a number of regional and sectoral organisations and branches being responsible for OSH-issues. A significant number of vocational training and research institutes provide OSH knowledge and education. Also the social dialogue is highly institutionalised based on the paragraphs on Social Partnership in the Labour Code of 2007 (Section 4. Social Partnership and Collective Bargaining Relations in the Labour Sphere), at the national level the high-level committee is the “Republican Tripartite Commission on Social Partnership and Settlement of Social and Labour Disputes (RTC)”, which is supported by similar sectoral and regional institutions.

In the national profile from 2009 the authors conclude their findings<sup>17</sup>:

*“The strong side is that the legal framework is in place. The main occupational safety and health standards have been determined. Permanent work will be conducted to improve the normative legal acts on the basis of scientific research and international standards.*

*The weak side is the low level of industrial culture, irresponsible behaviour of employers and employees at work and a lack of awareness of the allowable degree of risk, etc.”.*

## 5. Findings

The results of the meetings in the field are given in the next paragraphs A-F. Of particular interest was the ‘Workshop on Health and Safety Issues for the NIS region: Towards a genuine health and safety at work: better prevention and consultation of workers’ in June in Astana. It was in a methodological point of view a new way to collect information and gave a lot of insight concern topics such as working and safety culture, awareness and denial of euro centrism.

### *Relevance and Strategic Alignment*

#### **What worked?**

1. ILO support led to the preparation of a national profile and specific programmes

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<sup>16</sup> Ibid. p50

<sup>17</sup> Ibid. p116

2. The ILO 2001 OSH Guidelines have been implemented. OSH management system complying with the Interstate standard GOST "Occupational Safety and Health Management System. General Requirements" (ILO-OSH 2001) is introduced at enterprises.
3. The social dialogue is comparatively well developed, partly due to ILO Support. A tripartite Advisory Board is set up under the National Occupational Safety and Health Institute to consider and introduce findings of research to practical work of enterprises.
4. Annual training of labour inspectors and social partners regarding a methodology to introduce the "Occupational Safety and Health Management System. General Requirements" is organized
5. ILO support has been also through the implementation of projects in the CIS countries covering also Kazakhstan
6. The WIND programme seems to be relevant for the workforce in agriculture and is seen as success.

### **What needs improvement?**

1. Kazakhstan is a country with many high risk sectors which require strong and very sector-specific support, e.g. technical resources for the LI and measuring technologies.
2. Hazardous work is compensated by shorter working time and additional payments (partly more than 90% of the wage (info from the mentioned workshop). This reduces the motivation for preventive measures drastically.
3. Recording of accidents and diseases shows relatively low figures, which signals some underreporting (consider this remark)
4. Provides for the procedure of investigation, account and registration of occupational accidents and diseases
5. An updated national profile is needed in the next two years
6. To increase the uptake of best practice from other countries, information materials must be translated to Russian.

### *Coherence*

The major ILO OSH-Activities are done in close cooperation with the ILO-office in Moscow in projects, e.g. the common projects, the training.

What worked?

1. DWT/CO-Moscow prepares and submits well-coordinated OSH work plans. The ILO OSH 2001 has been translated and promoted in numerous conferences within Russia and other CIS countries.
2. The overall strategy of ILO Moscow has been to link various fields of activities in the DCWP

### *Effectiveness*

What worked?

ILO has a very good reputation in Kazakhstan: the orientation given by of conventions, the OSH management guidelines, the ILO training measures for LI and constituents were very effective and well known.

What didn't work?

- a) Strengthening of employers organisations
- b) Recording and monitoring system
- c) Introduction of specific sector related conventions

### *Efficiency*

An estimate of the efficiency was not possible, because the specific Kazakhstan share of ILO expenditures particularly in common projects cannot be calculated.

### *Impact*

Before any impact analysis can take place, the monitoring system for the notification of occupational accidents and diseases should be adapted to ILO standards

### *Sustainability*

The core components of sustainability – broadly accepted policy frameworks aiming at comprehensive OSH coverage, a sufficiently equipped labour inspection system, and effective, institutionalized, on-going tripartite social dialogue on OSH – have been successfully established. It looks that Kazakhstan will continue this positive development. A crucial next step is to measure reliably the impact, i.e. recording of occupational diseases and accidents.

## **6. Recommendations**

1. Support a proposal for an effective accident insurance
2. Raise OSH awareness at the employers' associations
3. Support developing an effective monitoring system (recording of accidents and diseases)
4. Update the national profile to the 2012 status. Treat the issue of compensation of hazards.
5. Support particularly enterprises (workers and employers) in the high risk sectors
6. Introduce the OSH Management systems specifically in high risk sectors and monitor the impact.
7. Organise a project with some selected pilot enterprises, together with employers
8. There should be information campaigns to the informal sector.

# Case Study 3: Kyrgyz Republic

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## 1. Background – Development status and labour market

The Kyrgyz Republic is an independent state and a member of the Commonwealth of Independent States (CIS) since 1991. The country is situated in the central part of Central Asia; most of its territory is mountainous.

The Kyrgyz Republic has a population of approximately 5.5 Mio people, less than 5% are older than 65, around half of the population is younger than 25.<sup>18</sup> Kyrgyzstan is classified by the World Bank as a low-income country<sup>19</sup>. The GDP per capita and year in 2012 was US \$ 990.<sup>20</sup> In 2012 approximately 38% of the population lived below the poverty line.<sup>21</sup>

48% of the working population is still employed in agriculture, in industry works 12.5% of the total workforce and in the service sector 39.5% (2005 EST.).

Main products from agriculture are cotton, tobacco, wool, and meat; industry products are gold, garments, mercury, uranium, electricity (from water resources), machinery and shoes.<sup>22</sup>

The ILO estimates the size of the informal sector being around 25%.<sup>23</sup> Although the income per capita is very low, the UN Development indicators for the Kyrgyz Republic<sup>24</sup> show a high level of development, e.g. the rate of adult literacy is over 99 % and also more than 90% have access to ‘improved’ drinking water.

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<sup>18</sup> <https://www.cia.gov/library/publications/the-world-factbook/geos/kg.html>

<sup>19</sup> Data and Statistics: Kyrgyz Republic, World Bank, Washington, DC

<http://www.worldbank.org/en/country/kyrgyzrepublic>

<sup>20</sup> <http://data.worldbank.org/indicator/NY.GNP.PCAP.CD>

<sup>21</sup> <http://www.adb.org/countries/kyrgyz-republic/main>

<sup>22</sup>

<sup>23</sup> Source: <http://kilm.ilo.org/KILMnetBeta/default2.asp>

<sup>24</sup> These data were compiled by the Asian Development Bank

The economic data show a positive development, although still on a comparatively low level.

**Table 1: Economic Indicators, 2008-2012**

<b>Economic Indicator</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>
Per capita GNI, Atlas method (\$)	770	860	840	900	...
GDP growth (% change per year)	8.4	2.9	(0.5)	6.0	(0.9)
CPI (% change per year)	24.5	6.8	7.8	16.6	2.8
Unemployment rate (%)	8.2	8.4	8.7	8.5	...
Fiscal balance (% of GDP)	0.0	(3.7)	(6.3)	(4.8)	(6.6)
Export growth (% change per year)	40.1	(9.6)	5.0	27.7	(13.1)
Import growth (% change per year)	43.6	(25.0)	5.9	32.0	26.2
Current account balance (% of GDP)	(13.7)	(2.2)	(7.2)	(6.1)	(20.9)
External debt (% of GNI)	87.8	88.6	95.3	98.2	...

( ) = negative, ... = data not available, 0.0 = value is less than half of unit employed, CPI = consumer price index, GDP = gross domestic product, GNI = gross national income.

Sources: ADB. 2013. *Asian Development Outlook 2013*. Manila; ADB staff estimates; economy sources; World Bank. 2013. *World Development Indicators Online*.

In 2010 a major political conflict took place – interpreted from policy observers as conflict between the Uzbeks and the Kyrgyz population, also as conflict between the poorer Uzbek South and the richer Kyrgyz North<sup>25</sup>. This led to significant changes in governmental policies, composition and structure. These political turbulences still have their impact on the current policies.

## 2. The ILO in the Kyrgyz Republic

The ILO sub-regional office in Moscow is responsible for the ILO-activities in the Kyrgyz Republic. A national ILO co-ordinator is located in the Kyrgyz capital Bishkek.

The ILO influences the Kyrgyz republic by promoting its global political standards (conventions and recommendations), the field activities are supported via technical advice and technical cooperation.

The Kyrgyz Republic **ratified the following OSH-related conventions:**

<sup>25</sup> Nationwide demonstrations in the spring of 2005 resulted in the ouster of President Askar AKAEV, who had run the country since 1990. Subsequent presidential elections in July 2005 were won overwhelmingly by former Prime Minister Kurmanbek BAKIEV. Over the next few years, the new president manipulated the parliament to accrue new powers for himself. In July 2009, after months of harassment against his opponents and media critics, BAKIEV won re-election in a presidential campaign that the international community deemed flawed. In April 2010, nationwide protests led to the resignation and expulsion of BAKIEV. He was replaced by President Roza OTUNBAEVA who served as president until 1 December 2011. An election was held in November and won by Almazbek Atambayev, leader of the Social Democratic Party, who is now the President.. Source: CIA –the World Factbook, available via <https://www.cia.gov/library/publications/the-world-factbook/geos/kg.html>

**Table 2: ILO OSH related conventions – ratified by the Kyrgyz Republic**

<p><b>1. Labour administration and inspection</b></p> <p>C081 - Labour Inspection Convention, 1947, ratified July 2000, in Force C150 - Labour Administration Convention, 1978, ratified Dec 2003, in Force C160 - Labour Statistics Convention, 1985, ratified 31 March 1992, in Force</p> <p><b>2. Occupational safety and health</b></p> <p>C045 - Underground Work (Women) Convention, 1935, ratified March 1992, in Force C115 - Radiation Protection Convention, 1960, ratified March 1992, in force C119 - Guarding of Machinery Convention, 1963, ratified March 1992, in force C120 - Hygiene (Commerce and Offices) Convention, 1964, ratified Mar 1992, in force C148 - Working Environment (Air Pollution, Noise and Vibration) Convention, 1977, ratified March 1992, in force C 149-Nursing Personnel Convention, ratified March 1992, C 184- Safety and health in Agriculture, ratified May 2004, in force</p>
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The Conventions 155 on Occupational Safety and Health and C 187 on a promotional Framework for OSH were not signed by Kyrgyzstan. Also the C176 - Safety and Health in Mines Convention - would be important due to the significant mining sector, but it was not signed either. Moreover, after 2008 no ILO conventions were ratified at all.

In cooperation with the ILO-Moscow office, **three cross-national projects** were conducted in the CIS-States, which were dedicated to the improvement of OSH as one core element. Kyrgyzstan was included in all of these projects. These were specifically:

1. Improving Occupational Safety and Health (OSH) systems in Central Asia (financed by Korea) (2007-2012)
2. Occupational Safety and Health (OSH) in Central Asia (financed by Finland) (2009-11)
3. From the Crisis towards Decent and Safe Jobs in Southern Caucasus and Central Asia (financed by Finland) (2010-12)

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**Box 1: Project 1 ‘Improving Occupational Safety and Health (OSH) systems in Central Asia’ (2007-2012) <sup>26</sup>**

Project Title	Improving Occupational Safety and Health (OSH) systems in Central Asia (in this text referred to as ‘the Korean project’)
Donor/Source of fund	Government of Korea
Key partners/ stakeholders	Constituents in the CIS Countries
Project Duration (start and end date)	1.01.2007 to 2012
Context of the project	<p>In 2007, phase I of the project focused on the study of the OSH situation and the development of national OSH profiles. Phase II concentrated on the national OSH profiles and aimed at the preparation of national OSH programmes, in accordance with the framework in ILO Convention No. 187.</p> <p>The ILO has been instrumental in the introduction of the 2001 ILO-OSH Management System (MS) guidelines as an interstate technical standard adopted by 11 CIS countries in June 2007. Kyrgyzstan has developed tripartite general agreements that include elements on OSH. An emphasis on capacity building was deemed necessary in phase III in order to ensure sustainability of the process.</p> <p>Phase IV of the project applied the experience gained from the analysis and the preparation process to continue strengthening the capacity building of OSH specialists (especially in Kyrgyzstan) and to introduce OSH management systems in model enterprises.</p> <p>Project activities under phase V are a coherent follow-up to the project activities of 2007-11. The results of previous phases indicated that the ILO systematic approach presented in Convention No. 187 has invigorated the development of OSH systems in Central Asia. Continuous support of all five phases has led to major changes in the political arena:</p> <p>The 5th phase of the Project was a coherent follow-up to the project activities during 2007-11. The evaluation of the situation in the countries indicates that the ILO systematic approach presented in Convention 187 has invigorated the OSH systems development process. Based on the situational analysis the fifth phase evaluated the progress and potential and design activities in each country individually, jointly with the local partners.</p>

<sup>26</sup> ILO (2012): Korea – ILO. Cooperation Results

	<p>The countries have been divided into two groups: target countries and participating countries. The target countries, <b>Kyrgyzstan</b> and Tajikistan, which <b>need substantial capacity development</b> (mainly training of OSH specialists, labour inspectors and social partners) to be able to prepare National OSH Programmes and introduce OSH MS at selected enterprises.</p> <p>Greater interest and readiness among employers' organizations (EO) to start introducing OSH MS in large enterprises, as a result of capacity building of tripartite constituents and representatives of large enterprises was noted. A meeting with the Guild of Directors (EO in Kyrgyzstan), with the aim to discuss possible cooperation on OSH has led to the establishment of five pilot enterprises from different sectors in order to introduce OSH MS. This work will be done in the second and third quarters of 2012.</p>
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**Box 2: Project 2 on 'OSH in Central Asia' (2009-11)**

Project Title	Occupational Safety and Health (OSH) in Central Asia (in this text referred to as 'the Finnish OSH-project')
Donor/Source of fund (TC, RBSA)	THE MINISTRY OF FOREIGN AFFAIRS OF FINLAND
Project Duration (start and end date)	1.01.09 to 31.12.11
Key partners/stakeholders	External Implementing Partners: Uzbek Centre for OSH and Normalisation; Kazakh OSH Institute; Kyrgyz and Tajik Labour Inspection; Social partners in countries of Project implementation
Brief Context of the project	<p>This two-year regional project was aimed at 'supporting social sustainable development and promoting the Decent Work Agenda focusing on the improvement of the working conditions and by introducing occupational accident and disease insurance (OADI) for men and women at work.'</p> <p>The project approach is based on the balance of prevention and protection and therefore the elements of OSH, OADI and HIV/AIDS are effectively combined. The project approach inherently involves social dialogue and consensus building among the tripartite constituents.</p> <p>The project was managed by a team of DWT/CO Moscow specialists (Senior OSH Specialist, Senior Social Security Specialist, HIV/AIDS Focal Point). The project</p>

	implementation team included one programme assistant, one Moscow-based project coordinator and one coordinator in Tashkent/Uzbekistan.
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**Box 3: Project 3 ‘From the Crisis towards Decent and Safe Jobs in Southern Caucasus and Central Asia’ (2009-11)**

Project Title	From the Crisis towards Decent and Safe Jobs in Southern Caucasus and Central Asia (in this text referred to as ‘the Finnish Decent Work-Project)
Donor/Source of fund	THE MINISTRY OF FOREIGN AFFAIRS OF FINLAND
Countries	Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan
Project Duration (start and end date)	1.01.09 to 31.12.13
Link to DWCP Outcome/CPO/Global Outcome	The project contributes to DWCP outcomes in countries that have Decent Work Country Programmes. Overall, it contributes to about 30 CPOs (and Regional SMO) in the eight countries on three issues- employment, OSH and Social security, identified as three pillars of the project. In the midterm evaluation it is stated that Occupational Safety and Health systems are not adequately developed.

In the first and second phase of project 1 (Korean project) the preparation of National Profiles was promoted. In 2008 the ILO Moscow Office has published a **National Profile on Occupational Safety and Health for the Kyrgyz Republic**.<sup>27</sup> The profile describes the OSH-legislation and political situation in Kyrgyzstan before 2008. The profile contains some concluding remarks illustrating the situation at that time between 1992 and 2007:

*“With the transition to market relations, the creation of enterprises and organizations of various forms of ownership, the system of occupational safety management was practically destroyed in the Republic. It is now beginning to be restored.....*

*The government ministries and agencies do not have occupational safety services that develop sectoral OSH policies. These functions as a rule are performed by an employee who has the status of Chief or Leading Specialist or works on a part-time basis.*

<sup>27</sup> ILO (2008): Occupational Safety and Health In the Kyrgyz Republic - National Profile

*To date there is no agency overseeing labour conditions in the OSH management system, although the creation of such agencies is envisaged under the law.”*

On Occupational Safety and Health it is stated:

*“Many experts at ministries and agencies and individual enterprises and organizations who deal with occupational safety issues lack the necessary skills and educational background. There is no national system for training occupational safety officers and specialists, and there is no occupational safety information training and methodological centre.”*

The Decent Work Country Programme 2006-09 for Kyrgyzstan identified OSH system improvement among its three priorities. Evaluation of DWCP for this period shows that the strategies under OSH were partially successful, as the ILO’s efforts to establish a Tripartite OSH council were not realised. However, during this period, OSH was included as a part of General Agreement, 2009.

The ILO DCWP for Kyrgyzstan 2006-09 contained three main priorities:

- *Priority A: Employment creation, skills and employability for women and men covers issues such as creating more job opportunities for both young women and men, including improving their work abilities, in order to increase their employability.*
- *Priority B: Improving the national Occupational Safety and Health (OSH) system focuses on upgrading policies, programmes and practices pertaining to the Kyrgyz national Occupational Safety and Health system.*
- *Priority C: Reducing the decent work deficit in the informal economy focuses on extending decent work reality and standards to other sectors of work, in particular the informal economy.<sup>1</sup>*

The DWCP evaluation also noted that the Labour Inspection training and training materials were highly appreciated by constituents. Similarly, LI international networking facilitated by the ILO with colleagues from CIS and IALI was also considered as a substantial contribution. In terms of OSH in agriculture sector, the DWCP evaluation noted that effective implementation of WIND had a multiplier effect and substantial implications including establishment of a new national Agriculture Employers’ Organization with over 700 local primary unions in 45 regions, boosting social dialogue at the sectoral level; and the adoption of a State Programme on OSH in Agriculture.

For 2010/ 11 and 2012/13 the ILO Moscow office has set the following **targets for Outcome 6** and the connected Outcome 13:

Outcomes in 2010/11

Outcome 6 - The OSH systems are further improved, including the labour inspection

Outcome 13 - The living and working conditions in agricultural sector are improved through applying WIND methodology and social dialogue

There is no evaluation about the achievement of these targets available up to now, the outcome report of ILO Moscow categorises the progress of indicator 6.2 as ‘pipeline’<sup>28</sup> (6.2. Number of member States in which tripartite constituents, with ILO support, implement programmes to promote improved safety and health at work). For outcome 13 also the status ‘pipeline’ is determined

For the period 2012 / 13 the following outcomes were defined

Outcome 06 - National OSH system is further developed in conformity with the ILO standards

Outcome 13 - The working conditions in selected economic sectors improved through social dialogue.

ILO Moscow states that the achievement of the Outcome 6 can be categorised as in ‘pipeline’, in Outcome 13 as target.

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<sup>28</sup> The current status of a CPO is either clarified as target or as pipeline (under preparation).

### 3. Occupational Safety and Health – Basic data, Legislation and Infrastructure

#### *Basic Data*

The national profile presents these data on accident and diseases.

#### 6.2. Main Occupational Accident and Disease Indicators

##### **Total Number of Occupational Accident Victims, including dead**

Years	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Number of victims	780	463	462	375	309	280	265	208	235	227	179

##### **Number of victims per 10,000 workers**

Years	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Coefficient	11.0	8.0	8.0	6.0	5.0	5.0	5.0	4.0	5.0	4.0	3.0

##### **Number of deaths in occupational accidents**

Years	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Number of dead	55	60	64	37	40	39	37	26	41	24	27

##### **Number of deaths in occupational accidents per 10,000 workers**

Years	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Coefficient	0.8	1.0	1.0	1.0	1.0	1.0	1.0	5.0	1.0	0.5	0.6

##### **Number of workers who contracted occupational diseases**

Years	2003	2004	2005	2006
Number of victims	3	13	26	8

In ILO-statistics these data are updated until 2008 but show no relevant changes.<sup>29</sup> According to ILOSTAT the rate of fatal injuries is 5 per 1,000,000 working hours.

Overall the data most likely does not include the informal sector and depend also in the formal sector on a well-functioning recording system. ILO Moscow writes about the current monitoring of occupational accidents in all CIS countries:

“The estimated fatal occupational accidents in the CIS countries are over 11,000 cases, compared to the 5,850 reported cases (information lacking from 2 countries). The gross underreporting of occupational accidents and diseases, including fatal accidents, is giving a false picture of the scope of the problem.”

<sup>29</sup> <http://laborsta.ilo.org/STP/guest>

This means that the data, even if available from the formal sector, does not reflect the actual situation, thus limiting the usefulness of analysis.

### *Legislation*

The Labour Code of the Kyrgyz Republic, introduced on July 1, 2004, has a larger section on occupational safety and health. In this section the Labour Code of the Kyrgyz Republic establishes the obligations of the employer to ensure occupational safety, state regulations on occupational safety and the duties of the employee in the field of OSH. The employee is guaranteed occupational safety, training and instruction, sanitary, welfare and medical services.

The Code also treats the issues of the creation and activities of the occupational safety services, investigation and record of occupational accidents and diseases, the award of benefits and compensations depending on the labour conditions.

The Kyrgyz Republic has regulatory legal Acts on occupational safety including:

- Regulations on Recording and Investigating Occupational Accidents;
- Regulations on Occupational Safety Service and Organization of Occupational Safety Work;
- Regulations and Instructions on Compensation of Damage from Occupational Accidents and Diseases; and
- Regulations on Training and Testing of Occupational Safety Knowledge

### *Infrastructure – governmental level*

The DWCP strategic intention for Kyrgyzstan after 2000 was to review and upgrade the national OSH-System in Kyrgyzstan. Being consistent in its approach, the ILO proposed to establish a Tripartite OSH Council.

For the first time in 2001 Kyrgyzstan adopted a **national programme** including OSH, named “Programme to Improve Occupational Safety and Labour Conditions and Secure the Life and Health of Employees for 2002-2005”. Under the decree of the Government of the Kyrgyz Republic of February 20, 2007 No.61 on the “Programme to Improve Occupational Safety and Labour Conditions in Agriculture for 2007-2009” the first **sectoral programme** was adopted.

This programme had been developed by social partners: the Ministry of Labour and Social Development of the Kyrgyz Republic, the State Labour Inspection, the Central Committee of the Agricultural Workers’ Union and the employers’ association.

OSH issues are discussed by the National Tripartite Committee, and OSH has been included as a part of the General Agreement in 2009. This General Agreement is agreed between the Government of the Kyrgyz Republic, the Trade Union Federation of Kyrgyzstan and the Republican Associations of Employers for 2009-2011. The agreement deals with nine OSH issues:

*In the field of occupational and environmental safety and protection of labour rights the*

*Parties undertake:*

*1. To ensure the implementation of the Programme to improve occupational safety and health in agriculture for 2009 approved by Decree of the Government of the Kyrgyz Republic No. 61 of February 20, 2007 On the Programme to Improve Occupational Safety and Health in Agriculture for 2007-2009.*

*2. To develop sectoral and inter-sectoral regulatory documents and model instructions on*

*Occupational safety and health, certificates and use the same as the basis for introducing the modular training principle.*

*3. The republican Tripartite Commission, at its annual meetings on the regulation of social and labour relations, to consider the state of occupational safety and health, the rate of occupational injuries and diseases and take the relevant measures to improve the situation in these departments.*

*4. To contribute to the creation of OSH services at all the enterprises and organizations pursuant to the law of Kyrgyz Republic On Labour Safety and the Statute on the OSH Service and Organization.*

*5. To secure the implementation of the National Programme of Actions of the Social Partners in eliminating the work of minors.*

*6. Provide free consultations and legal assistance to employees who have sustained occupational injuries or contracted occupational diseases and their families in timely and complete compensation by the employer of the harm caused to the worker by an injury or other impairment of health during the performance of his duties as well as lump sum benefit in accordance with the Kyrgyz Republic.*

*7. To contribute to preventing the spread of the HIV/AIDS epidemic, socially significant and dangerous infectious diseases, to ensure a favourable and safe working environment and labour hygiene. To conduct educational work in labour collectives and among the population on prevention of HIV/AIDS, socially significant and dangerous infectious diseases. To provide social guarantees and protection for people with HIV and AIDS and render effective assistance in overcoming the consequences of the disease.*

*8. To ensure prior claim to a job in the event of redundancy for workers approaching retirement age, single mothers and other socially vulnerable categories.*

*9. Make a short-term forecast of the development of pilot regions under the Local Economic*

*Development Programme and sign agreements with the local government bodies on further development of the region.*

An evaluation of the impact is not available.

The DWCP also aimed to strengthen and modernize Labour Inspection in Kyrgyzstan. Labour Inspection social partners' representatives were trained on a modern LI system in 2009. The ILO followed-up the training with regular technical consultations. In addition, a sub-regional seminar on LI was organized in September 2009 in St. Petersburg.

The labour inspection of the trade unions is still working and has kept its former staff capacities. After the political turbulences of 2010 and the subsequent reorganisation of the government, the labour inspection was merged with other supervision authorities and reduced to one third (from approx 60 to 20 posts). The training centre was also merged with other supervising agencies, e.g. for the environment.<sup>30</sup>

*Infrastructure – enterprise level*

As a result of the ILO efforts, an interstate GOST 12.0.230 (ILO-OSH) was approved at the CIS level. It created important pre-conditions for the changes at the national level. ILO OSH 2001 was approved as a Kyrgyz standard. Based on this, ILO/Moscow organized systematic capacity building activities with enterprises and conducted two or three seminars a year.

An OSH management system (ILO-OSH 2001) based on social dialogue was introduced to several selected enterprises. Participants learned how the tripartite approach provides the strength, flexibility and appropriate basis for the development of a sustainable safety culture in the organization. ILO voluntary guidelines on OSH management systems, which reflect ILO values and instruments relevant to the protection of workers' safety and health, were also presented.

The Guild of Directors (Employer organisation) interviewed during the evaluation mission expressed support for the approach and would like to introduce this system in five pilot enterprises.

In the agricultural sector, The Work Improvement in Neighbourhood Development (WIND) programme seems to play the role of a main driving force. The WIND programme was able to have a high impact with very modest resources. As an example, after a training of trainers for 120 participants, WIND was able to reach

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<sup>30</sup> Info from field mission, meeting with LI of the trade unions)

approximately 11,000 small farmers to bring improvements in their routine daily practices in villages around the country.

#### **4. Key findings on evaluation criteria**

The ILO's support through political activities, technical advice and technical cooperation activities resulted in political programmes and successful strengthening of the OSH-infrastructures. Until 2008 the Kyrgyz Republic ratified many substantial ILO Conventions, programs and policies to strengthen the state institutions and the social dialogue was introduced. From 2007, projects on OSH and labour inspection (Finland/ Korea) and OSH in Decent work were implemented in Kyrgyzstan.

The political turbulences round 2010 seem to have partly stopped the political activities related to OSH and also led to a shrinking of the state capacities for OSH. However, there are indications that the situation is now stable enough to start again activities towards national OSH policies. On a practical level there are still proactive developments going on:

- The labour inspection of the unions continues its work
- The employers ask for pilot enterprise and seminars.
- The WIND programme is still working on a high level
- Only recently in October 2012 the ministry announced to develop a new OSH-programme.

#### ***Relevance and Strategic alignment***

##### **► What worked?**

1. ILO support led to the preparation of national profile, two national programmes and ratification of conventions
2. The ILO 2001 OSH Guidelines are perceived as relevant to the Kyrgyz Republic
3. ILO support has been mostly through the implementation of projects covering Kyrgyzstan as one of the selected CIS-countries
4. The WIND programme seems to be relevant for the workforce in agriculture and is seen as success

##### **► What needs improvement?**

1. Political support of the stakeholders to bring back OSH on the political agenda
2. As stated in the Korean Project, Kyrgyzstan is a country that requires substantial capacity building support, e.g. technical resources for the LI and measuring technologies
3. There is no functional occupational accident / injuries insurance systems
4. Recording of accidents shows very low figures, which can only be explained by underreporting
5. An updated national profile is needed
6. Training measures to introduce the risk assessment methodology
7. Some pilot enterprises should be supported to start the introduction of the OSH-management guidelines

8. To increase relevance of ILO products, these must be translated to Russian.

### *Coherence*

The major ILO OSH-Activities are done in close cooperation with the ILO-office in Moscow in projects, especially as Kyrgyzstan has been part of large multi-country projects. The WIND-programme is a very positive example for co-operation with another UN-Organisation (UNIDO).

#### **What worked?**

1. DWT/CO-Moscow prepares and submits well-coordinated OSH work plans.
2. The ILO OSH 2001 has been translated and promoted in numerous conferences within Russia and other CIS countries.
3. The overall strategy of ILO Moscow has been to link various fields of activities in the DCWP.

#### **What needs improvement?**

Involvement of national tripartite constituents is difficult due to comparatively low level of association and consequently weak political influence and organisational structures of employers.

### *Effectiveness*

#### **What worked?**

ILO work can be seen as efficient when looking at the positive impact of the activities until 2009. The WIND program remains a great success, also during times of radical political change.

Acceptance of ILO guidelines and products, e.g. training modules is high. However, resources for implementation are missing.

#### **What needs improvement?**

- a) Strengthening of employers organisation
- b) Influence on high level politics
- c) Achieving the stability and activity level before the major political turbulences

### *Efficiency*

It is not possible to assess the efficiency because the budget spending specifically for Kyrgyzstan in common projects cannot be estimated.

### *Impact*

The monitoring system seems to have broken down after 2009 - no figures are available on accident and occupational diseases.<sup>31</sup>

### *Sustainability*

The core components of sustainability – broadly accepted policy frameworks aiming at comprehensive OSH coverage, a sufficiently equipped labour inspection system, and effective, institutionalized, on-going tripartite social dialogue on OSH – have not been established due to the overall political situation.

To achieve sustainability, Kyrgyzstan needs a larger capacity building programme between 5 and 10 years. It can build on motivated remaining state infrastructures like the LI, the trade union LI and some employers' associations and motivated enterprises and individuals.

## **5. Recommendations**

- Support the constituents to bring OSH again on the political agenda.
- Support developing an effective monitoring system (recording of accidents and diseases)
- Support a proposal for an effective accident insurance.
- Update the national profile to the 2012 status (five years after the last NP).
- Use the update of the national profile as a base for a national OSH-Policy or at least sector programmes.
- Conduct seminars and training with the main focus on risk assessment and good practice.
- Organise a project with some selected pilot enterprises, together with employers.
- Keep and even extend the cooperation with UNIDO in the WIND-programme.
- Labour inspection has to be strengthened again back to the situation before 2010.
- There should be information campaigns to the informal sector.

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<sup>31</sup> See the ILO Statistics for Kyrgyz Republic. <http://laborsta.ilo.org/STP/guest>

# Case Study 4: Cambodia

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## 1. Introduction

The specific objectives of this case study were to assess:

2. The relevance of the ILO OSH strategy at the country level
3. The coherence value added of ILO's OSH global products and research at the country level
4. The effectiveness of the ILO's OSH instruments on the shaping of national policy and strategy
5. The efficiency of ILO organizational structure in supporting the application of the OSH strategy at the programme and project levels
6. The impact of ILO actions on the ground and determine the role of the ILO OSH strategy in achieving these impacts
7. The level of sustainability of the outcomes achieved

Based on this assessment the case study aimed to extract lessons regarding the application of the ILO strategy and tools at the country level and identify good practices from ILO activities that can be replicated or adopted to other countries in South East Asian countries with similar socioeconomic, political, and institutional conditions.

## 2. Background

### **Socio-Economic conditions**

Cambodia joined the ILO in 1969, but due to political instability it did not benefit from its membership until after the 1993 election.

The country has transformed from a post-conflict to a market-oriented economy characterized by steady economic development. State building began from a very low base after many years of war, extreme loss of human life and capital, and widespread destruction of state institutions. Peace and political stability were re-established following the 1991 Paris Peace Agreement. The 1993 Constitution provides for liberal democratic development and a market economy. Economic performance has been impressive despite weaknesses in governance, especially with regards to labour administration systems.

Since 2004 Cambodia's growth has been fueled by the garment, construction, agriculture, and tourism sectors. GDP climbed more than 6% per year between 2010 and 2012. In 2005, exploitable oil deposits were found beneath Cambodia's territorial waters, representing a potential revenue stream for the government, if commercial

extraction becomes feasible. Mining also is attracting some investor interest and the government has touted opportunities for mining bauxite, gold, iron and gems. The tourism industry has continued to grow rapidly with foreign arrivals exceeding 2 million per year since 2007 and reaching over 3 million visitors in 2012.

The garment industry currently employs more about 400,000 people and accounts for about 70% of Cambodia's total exports. Cambodia, nevertheless, remains one of the poorest countries in Asia and long-term economic development remains a daunting challenge, inhibited by endemic corruption, limited educational opportunities, high income inequality, and poor job prospects. Approximately 4 million people live on less than \$1.25 per day and 37% of Cambodian children under the age of 5 suffer from chronic malnutrition. More than 50% of the population is less than 25 years old. The population lacks education and productive skills, particularly in the impoverished countryside, which also lacks basic infrastructure. Last year garment exports earned the country \$4.6 billion. Most were sent to the EU and the US.

The Cambodian government is working with bilateral and multilateral donors, including the IMF, the World Bank and the Asian Development Bank to address the country's many pressing needs; more than 50% of the government budget comes from donor assistance. The major economic challenge for Cambodia over the next decade will be fashioning an economic environment in which the private sector can create enough jobs to handle Cambodia's demographic imbalance.

Cambodia's economic growth continues to be narrowly based and highly vulnerable to shifts in external demand and capital flows –something no more acutely exposed than in the recent economic downturn. Although key economic pillars have contributed to employment growth, these have been insufficient alone to meet the needs of a young and fast growing labour force. This has led -among other things- to decent work deficits and continued high rates of informal and under-employment.

With the country now emerging from its worst recession in decades, policymakers are increasingly recognising the need to focus on broadening the country's growth base, diversifying existing sectors and nurturing the growth of others, as well as widening opportunities for the still-sizeable poor population to contribute to and reap the benefits of economic growth. A combination of more decent employment growth and enhanced social protection would enhance the welfare of millions of Cambodians while at the same time granting them better protection against future adverse shocks while improving health and safety condition at the workplace.

State building began from a very low base after many years of war, extreme loss of human life and capital, and widespread destruction of state institutions. Peace and political stability were re-established following the 1991 Paris Peace Agreement. The 1993 Constitution provides for liberal democratic development and a market economy. Economic performance has been impressive despite weaknesses in governance and transparency. Recent progress to strengthen governance includes the

adoption of the first National OSH Master Plan in 2009 and the Law on Anti-Corruption in 2010.

### **Constraints to growth**

A growth diagnostic carried out in 2008<sup>32</sup> and updated in 2010 identifies several constraints: (i) poor service by the finance sector for agriculture, agribusiness, and small and medium-sized enterprises (SMEs); (ii) coordination issues along value chains and between various economic participants; (iii) appropriation concerns relating to corruption and various types of uncertainty; (iv) weak labour force skills and (v) weak institutions.

### **Labour Scene**

Although Cambodia has emerged strongly from the recent recession, it faces manifold challenges to development and Decent Work creation. Despite rapid economic growth, the economy has not generated sufficient jobs to meet demand –a situation that is exacerbated by the lack of adequately skilled people entering the labour market. In part owing to this, the majority in Cambodia still work in informal and/or vulnerable employment, where wages are often low, long working hours, and respect for decent conditions and fundamental rights limited.

Owing in part to lack of social protection, many people cannot afford to be jobless for long, and this often makes them highly vulnerable when shocks to their income or circumstances occur. Specific groups face particular challenges too –notably women, who still face traditional barriers blocking equal access to education and employment, and youth, who make up the bulk of the unemployed, particularly in urban areas. Indigenous persons too face limitations in the labour market, many of which are linked to shrinking land ownership, discrimination and deficits in access to education and training.

Those of working-age, aged between 15 and older, number around 7.8 million among the 13 million Cambodian population. Of that workforce, 35.6 percent are in the manufacturing and services sectors. Garment making, tourism, construction and agriculture have been the drivers of the Cambodian economy. The garment, textile and footwear industries accounted for 89 percent of the growth in manufacturing between 2001 and 2006. These industries account for 76 percent of all Cambodian manufacturing. (During the same period, tourism grew at annual rate of between 10 percent and-20 percent.)<sup>33</sup>. In 2010, Cambodia's garment exports totalled US\$2.99 billion, a 26 percent increase on the US\$2.38 billion achieved in 2009, according to figures from the Garment Manufacturers Association of Cambodia.

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<sup>32</sup> World Bank. 2009. *Sustaining Rapid Growth in a Challenging Environment: Cambodia Country Economic Memorandum*. Washington, DC

<sup>33</sup> Noun & Serrano, 2010

In May 2011, the total value of all exports amounted to US\$352.23 million, an increase of 26.42 percent over the US\$278.61 million achieved in the previous year. Of that total, exports of clothing climbed by 15.92 percent -from US\$234.03 million to US\$271.28 million, while exports of shoes rose by 53.50 percent from US\$12.27 million to US\$18.84 million. According to the Ministry of Economy and Finance, export of other textile products jumped by 50.78 percent from US\$2.65 million to US\$4.00 million.

<b>Labor force:</b>
<b>7.9 million (2011 est.)</b>
<b>Labor force - by occupation:</b>
<b>agriculture: 55.8%</b>
<b>industry: 16.9%</b>
<b>services: 27.3% (2010 est.)</b>

## **Gender equity**

Women today are more able to exercise autonomy and independence; more than 25% of households are headed by women. While progress in gender equality has been made in primary and lower secondary school enrollment, gender gaps and gender stereotypes about what women can and cannot do remain challenges for Cambodian society. These include a 73% girl–boy ratio in upper secondary school, gender gaps in adult literacy (where rural women are the least literate), an off-track CMDG target for maternal mortality, ongoing incidences of violence against women, and low female participation in senior positions of the civil service. Only 16% of the female labor force is engaged in the services sector (with 75% in agriculture and 9% in industry, mostly garments). The National Strategic Development

Plan Update 2009–2013 (NSDP Update) calls for strengthened national capacity for gender analysis, awareness building, research, and advocacy.

Women from poor and disadvantaged backgrounds, particularly in rural areas, remain vulnerable to trafficking, domestic violence and forced labour. Meanwhile, in the formal economy, the special exposure of the garment sector to the global economic crisis meant young women in particular were particularly hard hit. Developing gender-responsive development programmes is a key priority of both the Cambodian government and the UN, in recognition both of the moral need for gender equality and the important role women can play as leaders of development processes. As it stands currently, Cambodia is lagging in its progress toward the achievement of MDG 3 on gender equality and women’s empowerment.

### 3. Legislation and Occupational Health and Safety Service

#### Occupational Safety and Health in Cambodia

The right to a safe and healthy working environment is at the heart of efforts to ensure full and productive employment, in conditions of security and human dignity.

Attention is drawn to this right in the ILO Constitution, and has been reaffirmed both in the 1944 Declaration of Philadelphia and the more recent Declaration on Social Justice for a Fair Globalization (2008). Although Cambodia is yet to ratify key ILO Conventions on the subject, protection of individual rights to occupational safety and health (OSH) are covered in the 1997 Labour Law (LL), which together with the general requirement for all workplaces to be safe, healthy and hygienic for workers, also sets out a number of special provisions relating to inter alia, workplace medical care, access to safe drinking water, noise levels, lighting, heat and ventilation. Many of these are supported by accompanying ministerial regulations, or prakas, which elaborate further on the responsibilities of the firm and the entitlements of the worker.<sup>34</sup>

The LL also seeks to define workplace accidents, as well as the responsibilities of the employer with regard to accident response and injury-related compensation.

Responsibility for OSH labour inspection lies with the Department of Occupational Health in the Ministry of Labour and Vocational Training (MoLVT).<sup>35</sup>

Cambodia is currently implementing its first OSH Master Plan, which came into force in April 2009 and covers the four-year period to 2013.<sup>36</sup> This plan sets out a vision for the labour market in the country under which it will seek to institutionalize a preventative health and safety culture in the workplace, as well as support enterprise-level initiatives and programmes both to raise awareness on OSH issues and develop practical systems for accident and injury prevention (in compliance with the labour law and OSH inspection requirements).

The Master Plan defines six areas for priority action: (1) Strengthen national OSH systems; (2) improve safety and health inspection and compliance with Labour Law; (3) promote OSH activities by employers' and workers' organizations; (4) implement special programmes for hazardous occupations; (5) extend OSH protection to small enterprises, and rural and informal economy workplaces; and (6) promote

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<sup>34</sup> These are mostly issued under the MoLVT. A full list of these regulations is available at:

[http://www.ilo.org/wcmsp5/groups/public/---ed\\_protect/---protrav/---safework/documents/policy/wcms\\_187746.pdf](http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---safework/documents/policy/wcms_187746.pdf)

<sup>35</sup> Inspection is geared toward inspecting conditions in the manufacturing sector and is less well adapted to other types of workplaces.

<sup>36</sup> The development and implementation of this plan is supported by the ILO.

collaborative actions with hazardous child labour and HIV/AIDS projects for stronger compliance.

In addition to this master plan, the Cambodian Royal Government has many other laws and regulations regarding the protection of workers as regards healthy and safety at work.

However, the implementation of these laws and regulations is still limited, and workers face many problems related to OSH.

### **Data on Occupational Accidents**

In its first step in implementing the Employment of Injury Insurance Scheme, the NSSF, beginning in late 2008 through 2010, registered 1,910 institutions and enterprises (1,810 are in operation now) and their more than 590,000 employees; employees in the garments and shoes sectors together accounted for more than 400,000. (NSSF, 2011). For those employees, occupational risks and incidents are reported to the NSSF. For all other workplaces, the data on OSH is unknown.

After the recent disaster in Bangladesh, in which more than 1,100 workers died in a building collapse, two factories in Cambodia also experiences structural collapses. The first occurred when a floor piled with heavy material collapsed in Cambodian sneaker factory; the accident killed 3 workers. A second incident was reported on 20 May 2013, where more than 20 workers were injured as a rest shelter outside a garment factory collapsed into a pond during lunch time.

These incidents have put the spotlight squarely on working conditions in the global industry. The Government is also looking to expand the role of OSH programmes in the workplace within the wider framework of ASEAN OSHNET, which encourages sharing of expertise and best practices from other countries in the region. Although national level figures remain absent, official data from Phnom Penh and seven of the twenty-four provinces suggest occupational injuries are on the rise, however it most noted that better reporting could account for this increase.<sup>37</sup> MoLVT records show such injuries have more than doubled each year since 2008, and that they reached a total of 7,611 in 2010. More than three-quarters of the victims (77 per cent) were men, although the proportion of injuries among women has also increased from 18.7 per cent in 2008 to 22.8 per cent in 2010.

The Better Factories Cambodia (BFC) is a unique programme of the International Labour Organization. It benefits workers, employers and their organizations. It benefits consumers in western countries and helps reduce poverty in one of the poorest nations of the world. BFC does this by assessing and reporting on working conditions in Cambodian garment factories according to national and international

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<sup>37</sup> These data refer only to those injuries reported to the National Social Security Fund (for claims under the Employment Injury Insurance scheme), which covers only registered, formal private sector workers in the capital and seven other provinces.

labour standards, by helping factories to improve working conditions and productivity, and by working with the Royal Government of Cambodia and international buyers to ensure a rigorous and transparent cycle of improvement.

The ILO BFC and ministries dealing with labour issues continuously monitor and investigate garment factories in Cambodia, but it seems to be ineffective as regards occupational safety and health. Those monitoring and carrying out the investigations are only good at observing the situation, but not at putting into practice and taking effective action, since it appears that thousands of more workers are fainting and collapsing on the job.

Workers' health also deteriorates and they get weaker, since they are working in unclean environments with plenty of chemical agents, which are not carefully checked. What is more, workers are getting low wages which are insufficient to feed themselves, so they have to work overtime. These incidents will increase if the government does not consider the level of wages and take effective action on safety and health protection for workers.<sup>38</sup>

### **An incomplete picture of OSH situation**

As with other countries in the region, OSH statistics are not clearly shown in the reports of government, ILO or other organizations in the labour movement. As mentioned above, OSH data is only published by the NSSF, with some minor reports coming from the Ministry of Labour and Vocational Training, and some NGOs. However, these data present just a part of the whole picture.

The accident data supplied by those institutions does not represent the total number of occupational accidents all over the country. In contrast, their employment injury data covers only the registered private, formal sector workers who are mostly located in Phnom Penh and a few neighbouring provinces, such as Kandal and Kampong Speu (NIS, 2010).

The number of reported accidents from the construction sector, and brick industry is still limited in spite of the fact that the construction and brickmaking industries are traditionally hazardous and accident prone occupations. Injured workers in those industries usually do not get fair compensation, since they do not understand the labour laws and other regulations. After receiving some compensation, the cases are closed, and there are no further reports or data from such cases.

While unreported cases are one major problem in OSH, another is the limited capacity of the Ministry of Labor and Vocational Training and other related public institutions, which are in charge of labour matters. A point of consensus among interviewees is that the government lacks staff, equipment and training. For instance, the labour inspectors are only available for assignment in Phnom Penh, but very limited in other

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<sup>38</sup> Coalition of Cambodian Apparel Workers Democratic Union (C.CAWDU) Press Release, 2011

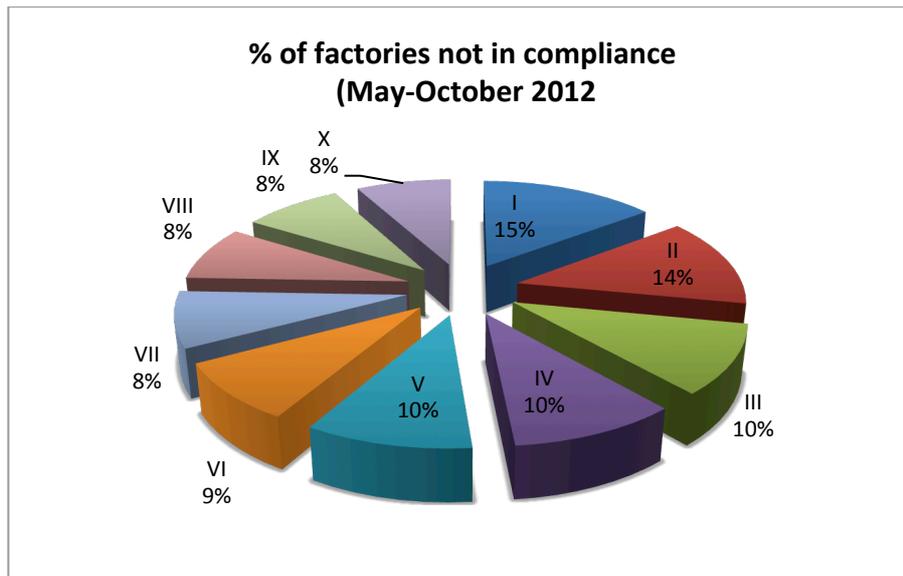
provinces. Thus, they cannot even control or check the occupational health and safety issues in the registered firms. From this situation, we can conclude that for those firms which are not registered, the information regarding the occupational safety and health risks is completely unknown and data is almost completely hidden. Thus, we can see that there is a need to strengthen accident reporting from all sectors, especially those which are as yet unregistered.

The twenty-ninth synthesis report on working conditions in the garment sector of Cambodia for the period covering 1<sup>st</sup> May 2012 through 31 October 2012 notes a worrisome decline in compliance in some key areas of occupational safety and health, or OSH<sup>39</sup>. One example given was the drops of 30% to 57% compliance on the maintenance of obstruction free access paths. The number of factories lacking a functioning joint management and worker OSH committee has increased by nearly 10% to 65 %. Workplace cleanliness has declined by 17%. The data also demonstrates significant drops in two of the most basic contributors to workplace health and hygiene, with 12% drops both in toilets that were properly functioning, and toilet doors working properly. The report also notes data indicating the percentage of factories found non-compliant with the following ten key areas of occupational safety and health:

- I. Exceptional overtime
- II. Overtime limited to 2 hours per day
- III. Heat levels in the factory
- IV. Medical staff working during operating hours
- V. Forming a functioning joint management/worker OSH committee
- VI. Unobstructed access paths
- VII. Providing cups or other sanitary means for drinking water
- VIII. Paying workers severance pay equal to at least 5% of the total wages paid under the contract when contracts expire or are terminated
- IX. Workers understanding calculation of wages
- X. Sufficient soap and water available near toilets

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<sup>39</sup> <http://betterwork.com/cambodia/wp-content/uploads/2013/04/Synthesis-Report-29th-EN-Final.pdf>



### Political aspects

*The existing systems, the absence of proper diagnosis, loopholes in the system, procedure to seek compensation, ineffective laws:*

The National Social Security Fund for private sector employees, enacted in 2002, provides those who work in private sectors a right to seek social benefits for work-related accidents and disability, old age and retirement. It is designed to be implemented in three stages which are firstly the employment injuries scheme (2007), following by the health scheme and finally, the pension scheme. In terms of the social security scheme, it is available based on the provision of labour law of the Royal Government of Cambodia, under the supervision of the Ministry of Labour and Vocational Training. The pension scheme is available to those who are retired, disabled due to the work-related accident and those who die on the job. As presented in Article 15 of the Labour Law, the occupational risk benefits cover medical care services, a daily allowance, disability allowance, funeral benefits and pension allowance for the designated beneficiary.

In addition, the policy developed by the Ministry of Labor and Vocational Training on 'healthy manpower, healthy labour productivity' is an ideal master plan for the improvement of safety and health of employees in the period of 2009-2013. This plan aims to prevent occupational accidents and diseases and ensure safe and healthy working environments. This first OSH master plan comprises six priority areas including strengthening the national OSH system, improving inspection and compliance, promoting OSH activities by employers' and workers' organizations, implementing special programmes for hazardous occupations, extending OSH protection to small enterprises and rural and informal economic workplaces and collaborating action regarding hazardous child labour and the AIDs project.

As stated in the Labor Law, the program and plan mentioned above, the workplace must follow the standards of health and safety so that the well-being of the worker is ensured. In

Cambodia, the Royal Government of Cambodia issued several sets of regulations since 2001, regarding occupational health and safety. Unfortunately, enforcement of the existing standard is inconsistent due to the lack of staff, equipment and training. The number of labour inspectors is insufficient to investigate the workplace of those registered companies, and the inspections made do not reach a proper standard yet. The number of inspectors working outside of Phnom Penh is very limited, with no more than four inspectors per province. Therefore, increasing the number of inspectors must be one of the first measures taken to reduce accidents in the workplace.

The procedure for compensation is stated clearly by the National Social Security Fund. However, only those whose company or enterprise has registered and paid the contribution to the National Social Security Fund will receive compensation. Compensation is paid according to the real situation of the employee's accident.

#### **4. The ILO's support on OSH**

The period under review has been covered guided by the priorities established with national tripartite constituents within the framework of two Decent Work Country Programmes (2008-10 and 2011-15).

**The 2008-10 DWCP** aimed to support national constituents improve OSH systems and capacity building through the identification and use of good practices in Cambodia as a practical means to expand protection, with the possibility of supporting a broader programme of action as part of the national social security and protection project:

Priority area 3: improving OSH conditions:

- Review (by involving workers and employers) the national OSH strategy to enhance OSH implementation
- Improve information collection on OSH to prevent and reduce accidents and disease
- Promote OSH culture at enterprise level, including setting the enterprise OSH systems (workers and employers)
- Develop specific SME OSH strategy
- Provide training in OSH (such as CAMFEBA, but subsidized by the Government)

DWCP Outcome	UNDAF outcome	Rectangular strategy	Programmatic relation
4. Increased social protection coverage for working men and women in the formal and informal sectors	3.1 Increased equitable access to and use of quality social services	Rectangular 4: Capacity building and human resources development, including enhancing health services	The DWCP supports the UNDAF and the Rectangular Strategy by providing assistance to Government and social partners for the establishment and implementation of social security schemes, on finalizing and implementing national OSH programmes and strengthening national OSH capacities; and on strengthening the capacities of tripartite constituents.
	3.2 Increased awareness and empowerment of the population, particularly women, children and youth to their rights and social services		

The 2011-15 DWCP has explicitly listed OSH as one of its outcomes. Outcome 3.2 *Improved institutional and legal mechanisms for the promotion of Occupational Safety and Health in the workplace.*

Building on past achievements in the field of OSH, the DWCP proposes supporting the tripartite constituents implementing “wholesale improvements” in the Cambodian national OSH system, particularly with regard to its legislative framework, compliance assurance (including inspection and the system of reporting on occupational accident and diseases), and advocacy and training in small enterprises, agriculture, and the construction sector. Strengthening national OSH capacities based on effective targeting and the development of a National OSH Programme will help both raise awareness of the importance of OSH in national policy spheres and improve the overall OSH situation at the workplace level.

<b>2011-15 DWCP Strategy</b>	
<ol style="list-style-type: none"> <li>1. Provide technical assistance to finalise and implement the Second National OSH Programme in Cambodia</li> <li>2. Reinforce national capacities in OSH through training of labour inspectors and technical support to improve the legal framework (for OSH protection) and better report OSH accidents and diseases.</li> <li>3. Launch pilot programmes to extend OSH provisions to underserved workplaces in key sectors (particularly small businesses, agriculture and construction).</li> <li>4. Provide technical assistance to develop national standards for recognition of industrial accidents and diseases, as well as relevant compensation schemes.</li> <li>5. Where possible and applicable, work with government and social partners to devise new technical assistance projects to further enhance national capacities to strengthen and broaden the coverage of OSH provisions in Cambodian workplaces.</li> </ol>	
<b>Performance indicators</b>	<b>Targets</b>
3.2.1. Second National OSH Programme is adopted and implemented	<p>By 2013, the 2nd National OSH Programme has been adopted and implementation is underway</p> <p><b>Status: by June 2013 it had not been finalized.</b></p>
3.2.2. Number of new OSH inspectors trained by MoLVT using ILO tools	<p>By 2015, there has been at least a 50% increase in both the number of OSH inspectors trained and the number of annual OSH inspections conducted.</p> <p><b>Status: by June 2013 there was no data on progress made in this indicator.</b></p>
3.2.3. Number of workers and employers in small enterprises, construction and agriculture that have received practical OSH training from local trainers	<p>By 2015, 1,500 workers and employers (combined) have received practical OSH training</p> <p><b>Status: by June 2013 there was no data on progress made in this indicator.</b></p>
3.2.4. Adoption of <i>prakas</i> on OSH for construction workers	<p>By 2013, the government has adopted <i>prakas</i> on OSH for construction workers</p> <p><b>Status: by June 2013 it was reported that prakas have been emitted.</b></p>
3.2.5. Proportion of enterprises registered on national OSH reporting system/database are reporting OSH data from their enterprise	<p>By 2015, 70% of registered enterprises have reported enterprise-level OSH data</p> <p><b>Status: by June 2013 there was no data on progress made in this indicator</b></p>

The ILO's 2011-15 programme strategy for improving Occupational Safety and Health centres on the provision of technical assistance to the government and social

partners to finalise and implement the second national OSH programme, in line with the ILO Plan of Action (2010-2016) and the ILO Global OSH strategy and promotional framework convention. Alongside this, the ILO will work to reinforce national OSH competencies through the training of labour inspectors, strengthening the OSH legal framework, and refining the system(s) for reporting on occupational accidents and diseases reporting systems. ILO will also launch initiatives (i.e. pilot projects and/or training of local trainers) with government and social partners to extend OSH protection to currently underserved workplaces in the SME, construction and agricultural sectors, and will help social partners to develop national standards for recognition of industrial accidents and diseases, together with relevant compensation schemes.

Much of this assistance is provided with the financial backing of the ILO/Japan bilateral programme, the continued support of which will help Cambodia to realise the effective implementation of OSH planning and its penetration to smaller workplaces across all sectors of the economy. In addition to this, a broader programme of action could be supported at the national level based on existing good OSH practices to extend the protection in the aforementioned target sectors. Practical mechanisms to strengthen the reporting system could come as part of a national social security and protection project.

The activities carried-out during the 2008-12 period can be characterized as practical and effective approaches to addressing OSH issues for formal and informal workplaces at various corresponding levels. At the workplace level, the easy-to-apply, but low-cost work improvement methods are disseminated, especially building on work improvement tools developed by ILO such as checklists, workplace visits and local good example photo sheets. Furthermore, the BFC has produced “Good Practice Sheets” and comic books on a wide range of topics such as health and safety, sick leave, which aim to educate workers about their rights and responsibilities.

At the institutional level, the ILO has carried-out activities aimed at building capacity of stakeholders in OSH and provided inputs in the development of OSH policies. Training of Trainers (ToT) and integration of OSH services in agricultural extension and labour inspection services have been key means of action. OSH training was also provided to employers’ associations, trade unions, NGOs and informal economy associations. Finally at policy level, support is given to formulation of National OSH Programme and Action Plan. The First OSH Master Plan was launched on 28 April 2009 on the National OSH Day.

The ILO has successfully introduced the participatory, action-oriented work improvement programmes in Cambodia known as WISH (Work Improvement in Safe Homes) – for home-based workers and small businesses, WIND (Work Improvement in Neighbourhood Development) – for agricultural workers and farmers, and WISCON (Work Improvement in Small Construction Sites) – for construction and brick workers. During the implementation report for the period covered under the first

DWCP reports that more than 200 government inspectors, workers' and employers' representatives, and NGO members were trained as participatory trainers to extend OSH protection to workplaces such as home workplaces, small construction sites, brick factories, farms, plantations and salt fields. These trainers have provided training on WISH, WIND and WISCON to more than 5,000 workers across the country.

The tripartite constituents recognize that these programmes have resulted in enormous improvements in the national OSH system as well as better workplace organisations within a short period of time after the training. Over 60% of the interviewees reported improvements in the safety, health and work conditions as result of these training programmes.

### **OSH and Better Factories Cambodia**

The rapid expansion of Cambodia's garment exporting industry owes much to the early special access to US markets, access which was conditional on Cambodia's willingness to improve labour standards in its export industries. Until the end of 2004 Cambodia was also assisted by the provisions of the Multi-Fibre Arrangement (MFA) on Textiles and Clothing which in effect restricted the amount that major producers such as China could export, thus providing a window of opportunity for smaller and newer entries into the market place such as Cambodia.

Against most predictions when the MFA ended the Cambodian garment industry continued to grow – with the exception of a period 2008-2009 when the country was hit by the global financial crisis, and suffered a downturn in terms of exports, number of factories working, and employment. Economists and scholars see many reasons for the continued growth of the Cambodian garment industry including relaxation of the EU's rule of origin<sup>40</sup> and the shift of orders from China and Vietnam to Cambodia; the government's Foreign Direct Investment (FDI)- friendly policy; and frequent dialogue amongst stakeholders including the government, industrial organizations, labour unions, buyers and the ILO.

Challenges remain in terms of high unofficial costs, and high costs for electricity and transport, frequent labour disputes, relatively low productivity of workers, and for the latter the still very modest minimum wage though this may be increasing in the current situation of labour shortage. The low labour costs have attracted many buyers and new factories to Cambodia which in turn has resulted in a perceived shortage of workers by some employers and a consequent increase in wages and benefits to attract workers. Other factories have re-located from the outskirts of Phnom Penh to rural areas nearer to where the workers have their homes.

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<sup>40</sup> According to the EU rule of origin policy in effect since the beginning of 2011 Lesser Developed Countries can export duty free to the EU even if the country only partakes in the processing of finished products as is the case for Cambodia which imports all its fabric for the garments exported.

A recent article in the New York Times<sup>41</sup> which is based inter alia on interviews with key donors and other stakeholders in Phnom Penh reflect the volatility of the garment industry globally and in the region. It reports that foreign companies are flocking to Cambodia for the simple reason that they want to limit their overwhelming reliance on factories in China where blue-collar wages have surged ‘quadrupling in the last decade as a factory construction boom has coincided with waning numbers of young people interested in factory jobs. Starting last year, the labor force has actually begun shrinking because of the “one child” policy and an aging population.’

In this situation whilst ‘wages and benefits often remain below levels needed to provide proper housing and balanced diets, the manufacturing investment — foreign direct investment in Cambodia rose 70 per cent last year from 2011 — is starting to raise millions of people out of destitution’ and ‘overall monthly compensation for industrial workers has jumped as much as 65 per cent in the last five years in Cambodia, although from such a low base that workers here remain among the poorest in Asia.’

According to the same article last year was the first time since comparable recordkeeping began in the 1970s that Cambodia received more foreign investment per person than China.’

Increasingly factories are ‘introducing employee benefits that were previously rare in Cambodia, like medical insurance, accident insurance, education allowances and free lunches. Cambodian workers sew 15 to 30 per cent fewer sleeves per day than their Shanghai counterparts, but productivity in Cambodia has been catching up and the cost is less than a third of China’s.

## 5. Conclusion

The general conclusion is that ILO support to strengthening OSH systems has had significant impact in the improvement of OSH conditions in Cambodia, through capacity building, awareness raising, technical assistance aimed at strengthening the national OSH systems, and through the BFC programme. While the government has made significant strides in advancing the legal framework for the protection of occupational safety and health in the workplace (a process that continues today), it recognises the on-going need to strengthen workplace level awareness –particularly in underserved sectors like small business and the informal economy- and to improve the quality and quantity of reporting and inspections so as to establish a more comprehensive knowledge base for preventative measures and a more conducive environment for the enforcement of OSH standards in the workplace.

Despite the central position garment manufacturing holds in Cambodia's economy, and the reputational risk should it suffer a Bangladesh-style disaster, the response of the government to systematic breaches of the law by factories has been weak.

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<sup>41</sup> New York Times (10/04/2013) ‘Manufacturers Jump Ship from China to Cambodia’

Interviewees from representing workers and even some government officials have reported that government inspectors are denied access to the factories or that their findings aren't enforced. This situation is particularly worrisome and threatening to worker safety, the government must act and ILO's Better Factories Cambodia must reassess its monitoring and reporting process and aim for greater transparency even at the risk of damaging its relations with the Cambodian government.

But, it must also be stated that the ILO OSH strategy in Cambodia must be improved if it is to have a lasting effect. Although ILO interventions such as BFC could turn Cambodia into an ethical sourcing option global buyers and consumers, the Office should continue to support governments with the ratification of OSH Conventions, the application of international best practice on OSH and implement and enforce the existing LL regulations. For this ILO must not lose the focus of its Global Strategy for OSH and most importantly of its normative mandate with regards to OSH especially standards and not only focus on low-hanging fruits (infractions) that are easier to detect. Unfortunately, unions continue to face difficulties in their collective bargaining activities; the minimum wage not only lags far behind current inflation rates, but also fails to meet the basic needs of workers and their families; workers are forced to work excessive overtime; they suffer severe health and safety problems which are most dramatically exemplified by the recent disastrous work place accidents.

Actual enforcement of labour laws is the task of the Ministry of Labour's inspectors. However, some interviewees expressed strong doubts about their effectiveness, mainly due to lack capacity and scarcity of financial and human resources. Some even alluded to the problem of corruptions as a key issue impeding effective enforcement of compliance.

One interviewee noted that it made little sense for ILO to use the government as the gate keeper for ILO contacts because unions "have no leverage over the government to push for needed changes". This interviewee went on to say that if the "Ministry sends its own Labour Inspectors to investigate factory conditions...they do not report the violation".

Anecdotal evidence from the garment sector suggests persistent health and safety concerns, in particular the ongoing incidences of fainting in garment factories. However, this sector also shows a number of good examples as regards the development of responsible practices for safer workplaces, many of which have been developed with the Better Factories Cambodia monitoring programme.

While factory monitoring under the right circumstances can lead to improvements regarding the more visible or physical problems there are a number of labour rights issues, which often go undetected by the auditors. This includes, for example, the

undermining of freedom of association and collective bargaining by managers; abusive attitudes towards workers on the part of supervisors; insufficient provision of medical care and sick leave, and discriminatory hiring practices. The BFC at least recognises that its program has a significant impact on child labour, forced labour and health and safety issues, while its impact on other – less visible – violations has been more limited.

Interviewees also pointed-out that BFC should involve buyers in matters of enforcement because buyers can decide which factories they select, given and this type of leverage could empower BFC to ensure better compliance. It was widely recognized ILO's contributions to the improvement of the national OSH system, but the need for greater direct awareness raising among workers and employers was underlined as one area of improvement.

## **6. Overall assessment of ILO's outputs and recommendations**

### **Relevance**

#### **What Worked?**

- ▶ The ILO's OSH strategy and global instruments have been quite relevant to the Government's work on the development of the First OSH Master Plan 2009-13
- ▶ ILO Global OSH strategy and instruments are highly relevant with the UNDAF and Rectangular strategy
- ▶ The ILO 2001 Guidelines on Occupational Safety and Health management systems and CO 187 were instrumental in the development of the National OSH Programme and strategy of the government's project for promoting strategies and national policies on occupational safety and health.

#### **What needs improvement?**

- ▶ ILO training materials are on demand by enterprises for training on occupational safety and health. The number of enterprises and labour force has increased manifold in the past decade in Cambodia making the need of OSH training materials and facilities more pressing.
- ▶ Improved capacity (manpower and financial) for the MoLVT OSH professionals and inspectors to effectively supervise and enforce OSH national directives.
- ▶ Although the law requires enterprises to have compliance officers, the plant visited with MoLVT did not have such officer and many safety infractions were observed.
- ▶ There is a lack of occupational safety and health training facilities and of criteria to define what an occupational safety and health facility is.

### **Coherence**

### **What needs improvement?**

- ▶ The existing organization of OSH administrative services is weak and lacks incentives (positive or negative) to promote compliance by factories.
- ▶ This lack of coherence in the national administrative system affects synergies among ILO projects as well as between ILO and other international organizations engaged in OSH activities.
- ▶ Coordination among Ministries and departments engaged in the current OSH system

### **Effectiveness**

#### **What worked?**

- ▶ ILO has been effective in supporting the government in the development of the first national OSH Master Plan 2009-13

#### **What remains to be done?**

- ▶ Establish effective enforcement mechanisms which could include incentives or sanctions

#### **Recommendation:**

- ▶ Use the ILO/BFC synthesis reports to publicize individual complaints emerging from the monitoring either from union representatives or from workers. This would allow to detect underlying patterns of abuse that are not as easily detected during scheduled inspections and to start a dialogue on how to deal with these patterns.

Finally, the BFC should monitor compliance with the Arbitration Council's rulings and refer to violators of these rulings in its synthesis reports. This would help increase its enforcement powers.

- ▶ Empower workers and trade unions through training for on-site monitoring and reporting

One of the primary goals of the ILO's OSH strategy in Cambodia is to increase to promote freedom of association and empower union members through social dialogue. However, workers who want to organize are often confronted with a factory's anti-union measures, such as discrimination, demotion or the termination of their contracts. The ILO clearly needs to follow-up on some of their earlier recommendations made by Trade Unions with a focus on protecting and

empowering unions and their members if it wants to seriously address the many problems that unions continue to face.

**Recommendation:**

- ▶ The ILO should make more effective use of both union leaders' and individual complaints to gain more insight into the practices of specific factories, and, in turn, gain more negotiating leverage.

Begin to seriously train potential union leaders so that they can better represent the workers. Improve the training sessions for worker on labour related issues.

- ▶ Expanding the scope of ILO work to the supply chain to ensure OSH compliance

The scope of BFC monitoring is restricted to factories registered with the GMAC and the Ministry of Commerce. This is problematic because manufacturers tend to use subcontracting factories to escape the monitoring process. These factories obviously fall outside the monitoring program's reach and thus provide an easy tactic for manufacturers to avoid BFC's monitoring system. To increase its effectiveness, the ILO BFC needs to:

**Recommendation:**

Expand the scope of BFC monitors to allow them to investigate whether a factory is using subcontractors by comparing a factory's production output to its production capacity and report factories that use subcontractors. The ILO could, for example, cooperate with the Ministry of Labour and Ministry of Commerce to get the names of other [subcontracting] factories.

- ▶ Improving the monitoring process by introducing OSH risk assessments mechanisms that would involve certified validation entities.

While the ILO monitoring methodology is comparatively strong there are a number of areas where inspections and monitoring processes can be improved. To truly get a better understanding of factory conditions, the ILO should:

**Recommendation:**

Expand its contacts to more NGOs, stakeholders, and corporations so that it can leverage enforcement even though it is not an enforcement agency. Additionally, they should report the name of the factory in the report.

- ▶ Improving transparency in monitoring and reporting processes within ILO/BFC

The ILO/BFC semi-annual synthesis reports include general compliance trends and progress made on improving the working conditions during the reported time and give an overview of working conditions in Cambodia without naming individual factories. There needs to be more transparency not only regarding the factories themselves, but also the government and international buyers. Transparency would enhance the credibility of the program and lead to increased compliance.

**Recommendation:**

This might require public disclosure of non-compliant factories and encourage the MoLVT to make its inspection reports public through its Web Page and issue quarterly reports of non-compliance. These actions could incentivize change and rapid responses from factory management, the Cambodian industry, buyers, and the Royal Government of Cambodia. If the government's findings aren't being enforced by the owners of the factories, then those owners should not be allowed to operate.

- ▶ Engaging buyers in the OSH monitoring processes to enhance their role in compliance enforcement.

The primary focus of the ILO/BFC's program lies with the manufacturers. While buyer participation is voluntary, the costs of compliance are mostly borne by the manufacturers. This is problematic because buyers can negatively impact working conditions through their sourcing and purchasing practices. For example, the problem of excessive working hours is closely related to (insufficient) pay rates, which, in turn, is hard to address if the prices that brands and retailers pay for their merchandise continue to fall. Therefore, buyers must begin to play a larger role in the BFC's program.

**Recommendation:**

Buyers must commit to a larger financial contribution to the BFC program. They should also support the BFC's other related activities, such as its factory-level training programs. The ILO/The BFC, in turn, should publicly differentiate between those buyers that are actively participating, and those that take very little initiative.

# Case Study 5: Vietnam

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## 1. Introduction

**The field evaluation mission had three specific objectives:**

1. To assess the relevance of the ILO OSH strategy at the country level
2. To assess the effect that the ILO's OSH strategy has had in the development and/or implementation of OSH systems at the country level
3. To assess the application of the ILO's policy and strategy at the project level

**The specific objectives of the evaluation mission were to assess:**

- the application and use of ILO OSH global products and research
- assess the effectiveness and efficiency of ILO organizational structure in supporting the application of the OSH strategy at the programme and project levels
- the impact of ILO actions on the ground and determine the role of the ILO OSH strategy in achieving these impacts
- the level of sustainability of the outcomes achieved
- lessons regarding the application of the ILO strategy and tools at the country level and;
- Identify good practices from ILO activities that can be replicated or adopted to other countries.

## 2. Country Background

Overall achievements. Vietnam has achieved rapid economic growth over the past two decades by continuously implementing market-oriented reforms. With average annual gross domestic product growth of 6.6% from 2007 to 2011, Viet Nam's gross domestic product per capita rose from \$843 in 2007 to \$1,409 in 2011. The country is now classified as a lower middle-income country (MIC). Its development has benefited from political and social stability. While this process has been effective, policy makers acknowledge that the growth impetus unleashed by early reforms is losing momentum, requiring that reform deepen and accelerate.

Millennium Development Goals. Vietnam is generally on track to achieve the Millennium Development Goals. It has already achieved the 2015 targets for under-5 and infant mortality. Net primary school enrolment reached 97% in 2009 with good

regional, urban–rural, and gender parity. Much progress has also been made in maternal health. Greater efforts are needed, however, to address geographical disparities related to the control of HIV/AIDS and other diseases, as well as to environmental sustainability. This will require effective development planning to appropriately target public resources and improve the efficiency of social expenditures.

**Poverty reduction.** Viet Nam has made good progress in reducing poverty, lowering the incidence of poverty from 58.1% in 1993 to 14.5% in 2008. However, the incidence of poverty varies significantly across regions. It is low in the southeast, Red River and Mekong deltas, and south central coast but high in the northern mountains, north central coast, and central highlands. While ethnic minority groups account for less than 15% of the total population, they make up more than half of the poor. The large difference between the proportion of the population living on less than \$2 per day (43.4% in 2008, based on purchasing power parity) and \$1.25 per day (16.9% in 2008) suggests that many households remain vulnerable to even a small external or internal shock pushing them back into poverty.

**Gender equity.** Viet Nam has made considerable progress toward gender equity by narrowing gender gaps in education and health and expanding economic opportunities for both genders.<sup>3</sup> Women’s participation in the labour force is high. The gender gap in earnings is much narrower than in many other Asian countries. Women are 25.8% of National Assembly representatives, which is one of the highest rates in the region. However, significant challenges remain regarding the high incidence of gender-based violence, low women’s participation in public decision making, the highly gender-segregated labour market, and rising male sex ratios at birth. Gender disparities are more marked in rural areas and among ethnic minorities.

Along with its rapid economic development, Viet Nam faces increasing challenges and risks of occupational accidents and diseases. According to MOLISA statistics in recent years, the number of occupational accidents occurring in the field of mining always accounted for high proportion (about 18 per cent of total cases). One notable thing is that the serious fatal occupational accidents in recent years mostly occurred in the quarrying sector. In addition, the number of occupational diseases in the quarry also accounted for high proportion of the current occupational diseases in Vietnam (about 5-6 per cent). Accordingly, in particular, they are silicosis and noise-induced deafness. According to the Ministry of Health, by the end of 2011, the number of occupational diseases in Vietnam was 27,246 people, of which 74.49 per cent had silicosis, 16 per cent occupational deafness.

### **3. The OSH System in Vietnam**

#### **OSH Administration**

The OSH administration system in Vietnam consist of basically, four types of organisations are related to the OSH administration: the Ministry of Labour, the Ministry of Health, the Trade Union (Vietnam General Confederation of Labour: VGCL), and Ministries of particular industries (Ministry of Transportation, Ministry of Mining, etc).

The Ministry of Labour is principally responsible for occupational safety. It promulgates various regulations about OSH matters and various safety standards in workplaces in collaboration with the Ministry of Health, and also conducts safety inspections. However, these inspections do not have the mandate to enforce compliance and lack the resources to conduct regular and effective inspections that would improve the working conditions.



The Ministry of Health is concerned with occupational hygiene and health. It offers clinical services for the workers through its peripheral branches. Usually, there is a health station in each factory, where there is few medical staff to offer clinical services-that is, and periodical health check-ups of the workers, general consultations, and first aid. If they find a suspected case of occupational disease, the case would be referred to the Division of Occupational Medicine in district or provincial hospitals, where specialists in occupational diseases work. The Ministry of Health also conducts environmental inspections in each factory, but there are insufficient materials and human resources to complete these.

The Vietnamese State set up several ministries responsible for particular industries, such as railways, mining, forestry, electricity, etc. Each ministry also has organized specific branches responsible for OSH activities. The main purpose of these branches

is to establish guidelines for conducting inspections and prevent occupational accidents and diseases.

The trade union also participates in OSH activities. Article 10 of the Constitution states that the function of a trade union is as follows: "The Trade Union, being the socio-political organisation of the working class, joints State organs, economic and social bodies in looking after and safeguarding the rights and interests of workers; it participates in State administration and social management, in the control and supervision of the activities of State organs and economic bodies; it educates workers to work well for national construction and defence."

The union organises a variety of OSH activities that deal with occupational health and safety. It organises educational seminars on OSH issues and publishes periodicals in which OSH matters are often discussed. When a case of occupational disease or an occupational accident is reported, the union has a right to investigate it. Furthermore, the union acts as the representative of workers to protect the workers' health.

### OSH System

As a socialist country, the emphasis has been put on OSH activities. However, as the Vietnamese OSH administrative system is too fragmented, and each fragment has its own power structure, managerial efficiency is always questioned. Because information is rarely shared, quite often several ministries are doing the same thing at the same time. The lack of coordination among different departments is the most important weakness of the Vietnamese OSH administration system.

**Figure 1. National OSH system in Vietnam**

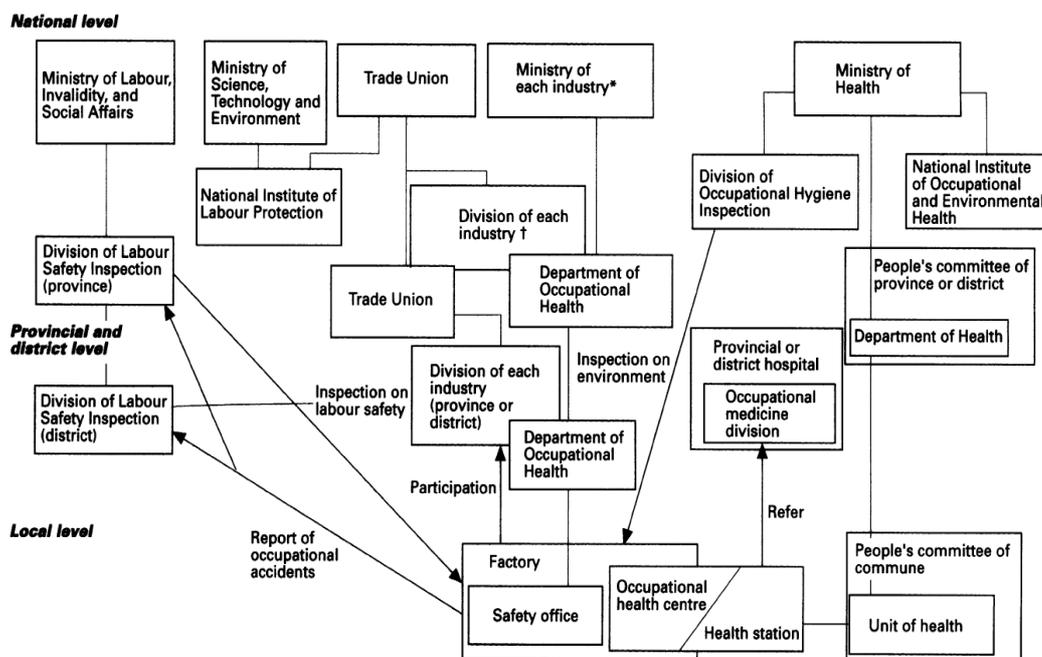


Figure 1 Administrative system of occupational safety and health in Vietnam. There exists a Department of Occupational Health under the ministry of each industry (transport, mining, etc). †There are 23 divisions at the national level.

Occupational safety and health (OSH) is a state socio-economic policy which carries enormous significances to human resource preservation. Documents of National Delegate Congress of the Viet Nam Communist Party showed that it was a must to improve working conditions, ensure occupational safety and health, and prevent working accidents and diseases for workers. Viet Nam's approval of the Occupational Safety and Health Convention, 1981 (No. 155) in 1994 has made a firm commitment to establish the National Policies on Occupational Safety and Health aiming at preventing occupational accidents and diseases at workplace.

In 2006, Viet Nam developed the National Programme on Labour Protection, Occupational Safety and Occupational Health up to 2010, approved by the Prime Minister in Decision No. 233/2006/QD-TTg. Although the regulation of OSH in Viet Nam is fairly developed and Viet Nam has ratified the relevant ILO Convention, this was the first time that a specific National Programme had been developed in the field of workplace health and safety and represented a significant milestone for Viet Nam.

A second phase of the Programme was approved by Prime Minister in Decision No. 2281/QD-TTg dated 10 December 2010 for the period 2011-15. The National Programme covers a number of areas including:

- Special support to improve working conditions in small enterprises, agriculture and handicraft commune;
- reducing occupational accidents in sectors of construction using electricity and mining;
- capacity building of management systems on Occupational Safety and Health;
- training in occupational safety and health and information dissemination; and reducing new cases of occupational diseases

#### 4. Legislation and Occupational Health and Safety Service

The following Occupational Safety and Health Conventions are in force in the Vietnam:

Convention	Date	Status
C045 - Underground Work (Women) Convention, 1935 (No. 45)	03 Oct 1994	In Force
C120 - Hygiene (Commerce and Offices) Convention, 1964 (No. 120)	03 Oct 1994	In Force
C155 - Occupational Safety and Health	03 Oct 1994	In Force

## **Legal Framework**

OSH activities in Vietnam are controlled by two basic instruments: the Constitution and the Labour Code.

The Constitution- Article 56 of the Constitution clarifies the responsibility of the State for occupational safety and health. It says, "The State shall enact policies and establish regulations for the protection of labour." Article 61 states the State's responsibility for the health protection of its citizens. It says: "The citizen is entitled to a regime of health protection."

The Labour Code- For duties of the State mentioned in the Constitution to materialism, the government enacted the Ordinance of Labour Protection in 1992. This ordinance has been included in the new Labour Code 282

In this Code, chapter IX (articles 95-108) is allocated to OSH activities. Article 95 defines four groups in charge of OSH activities: employers, employees, the State, and the Vietnam General Federation of Labour (trade union).

Article 96 states that the Ministry of Labour and the Ministry of Health are responsible for establishing a list of machines, equipment, materials, and substances which may damage workers' health. Article 97 mentions the responsibility of employers to comply with the environmental standards in the workplace and to conduct a periodic measurement of environment.

Article 99 clarifies the right of workers to refuse to work or to leave their work place when the working conditions are apparently dangerous. Article 101 and 102 define the duties of employers to protect workers' health. They have to supply personal protective equipment for workers, to organise OSH training seminars, to inform workers of OSH Regulations, and to organise a periodic health check up. Employers have to pay for these services.

Articles 105-108 are related to occupational accidents and occupational diseases. If a worker becomes a victim of an occupational accident or disease, he has a right to receive compensation. To manage this compensation system, the State has had a social security scheme since January 1995. In this scheme, an employer has to pay the equivalent of 15% of the total salary of each worker, and a worker also has to contribute 5% of his salary to the fund. There is no differentiation between workers' compensation and medical care insurance, that is, the fund assures compensation for all occupational accidents and diseases, assistance for medical expenditures, retirement pension, and death compensation.

Other regulations- Aside from the two basic regulations already mentioned, there are other legal documents about OSH matters:

(1) Article 34 in the Law on Foreign Investments in Vietnam defines the investor's responsibility regarding environmental protection.

(2) Article 4 in the Ordinance on Foreign Technology Transfer in Vietnam clarifies the obligation of the owner of a factory to ensure the safety and environmental protection.

(3) The Law on Public Health Protection has a variety of articles defining the rights and duties of citizens, public organizations, and enterprises to ensure occupational safety and health at workplaces (articles 1, 4, 9, 10, 12, 14, and 18).

(4) The Law on Environmental Protection defines that environmental protection should always be considered when importing and exporting technology, machinery and equipment (articles 19 and 29). Although the Vietnamese government has established many OSH regulations, these are not adequately obeyed. There are many reasons for this: the lack of a uniform system among different regulations, inadequate dissemination of regulations for the public, low awareness of employers for OSH matters, and others.

### **OSH statistics**

As the OSH information system has not been adequately implemented in Vietnam, the availability of data is very limited. Table 1 shows the national data of occupational diseases and occupational accidents. At the end of 1994, there were 7495 cases of occupational diseases registered at the national level.<sup>2</sup> Among them, silicosis was the most serious (6507 cases: 86.8%), followed by noise induced hearing loss (840 cases: 11.2%). Among the cases of silicosis, 28.7% were workers in coal mines, of which 70% were working underground.<sup>1</sup> So far as occupational accidents are concerned, it is estimated that 200 to 300 fatal occupational accidents and around 20 000 injuries occur annually. Apparently, these statistics were underreported. For example, according to the results of a sample survey in 48 factories employing 3150 workers, conducted by Thung and Trinh, the rate of occupational accidents was 17.6 per 1000 workers and the prevalence of occupational diseases was 6.7. When considering that their study was based on data from relatively large factories, the real situation must be rather worse.

## **5. ILO OSH activities in Vietnam (2008-2013)**

## List of OSH (Outcome 6) Projects from 2008 to date in ILO Hanoi Office

No.	Project name	Duration	Budget	Donor
1	ILO/Luxembourg project for enhancing capacity of occupational safety and health training in Vietnam (OSH Training)	August 2006 – December 2008	US\$ 530,000	Government of Luxembourg
2	Project on Effective Implementation of National OSH Programme for Improving Safety and Health at the Workplace in Vietnam	January 2009 - December 2011	US\$ 891,156	Japanese Government
3	Project on Occupational Safety and Health in hazardous work in Vietnam	January 2012- December 2014	US\$ 720,000	Japanese Government

### What is working?

Since its launch in 2009, the ILO/MOLISA/Japan OSH Project achieved a number of successes at both national and provincial levels, such as the project supporting national efforts in effectively implementing the first National OSH Programme, developing and adapting a number of training materials for SMEs (WISE), for farmers (WIND) and for home-based workers (WISH), organising a number of training courses in three areas to train core trainers in the four target provinces (Thai Nguyen, Dong Nai, Thanh Hoa and Thua Thien Hue) and five extended provinces (Hanoi, Hai Phong, Ninh Binh, Bac Ninh and Hai Duong).

The ILO has supported both the Government of Viet Nam and social partners to promote better OSH standards and working conditions in Viet Nam through various technical cooperation projects. These integrated initiatives focus on labour inspection, capacity building for OSH, and effective implementation of national OSH programmes. Practical experiences from the ILO-designed WIND (Work Improvement in Neighbourhood Development for agricultural households), WISCON (Work Improvement in Small Construction Sites) and WISE (Work Improvement in Small Enterprises) programmes have been scaled up and replicated throughout the country using local resources.

In addition, with ILO technical support, national OSH programmes have been developed and implemented to enhance OSH efforts, especially by promoting a “prevention culture” at enterprises, focusing on small and medium enterprises in the informal economy and in the agriculture sector. An ILO OSH management system has been promoted as a key to enhance further productivity and improve working conditions and health standards in those enterprises. Viet Nam is recognized by the

ILO as a good example of OSH in Asia and has recently been selected by ASEAN to coordinate information and experience sharing among national OSH programmes in ASEAN countries.

Previously, on 16 December 2010, the Provincial People’s Committee (PPC) of Quang Nam acknowledged the efforts of the ILO (under One UN Initiative in Viet Nam) and its project partners in creating better job opportunities and enhancing employability of young people in the province. The UN project ‘Youth Employment through Local Economic Development in Quang Nam’ executed by the ILO as part of the One UN Initiative was only launched in the beginning of 2010. Yet it was chosen by the Provincial Peoples Committee to receive two awards in 2010 for contributions to the socio-economic development of the Quang Nam Province.

Most recently, the ILO Country Office in Hanoi started a phase two of this project to address occupational safety and health (OSH) in hazardous industries in Viet Nam, strengthen national OSH systems in line with the on-going national OSH programmes, and improve OSH standards at workplace level.

### Results reported

	<b>Measurement Criteria (Must meet at least one)</b>	<b>Results achieved What changed in terms of policies and institutions/capacities, consistent with the measurement requirements</b>	<b>ILO Contribution Outputs delivered by the Office at large (field office, HQ Units, Turin Centre) to achieve the reported results</b>
X	The member State has incorporated OSH concerns into national development frameworks or similar national policy documents.	<p>The second national OSH programme for 2011-2015 has been implemented for one year, with focusing on highly hazardous sectors (mining, construction, chemical production, use of electricity, metal production).</p> <p>The Decision 207/QD/TTg issued on 17 February 2012 by the Prime Minister of Vietnam has assigned the Ministry of Labour, Invalids and Social Affairs (MOLISA) as the Chair Ministry to develop the first</p>	The ILO has assisted to prepare and publish the National Guideline on OSH-MS.

		<p>draft of OSH law. This law is tentatively planned to submit to the National Assembly by early 2015.</p> <p>The Vietnamese Government has committed to increase annually by an average of 2,000 SMEs which apply effectively the OSH management system (OSH-MS).</p>	
X	<p>A national tripartite mechanism for OSH is established or revitalized so that it functions effectively (meeting regularly and making recommendations to government).</p>	<p>The Government (Ministry of Labour, Invalids and Social Affairs, and other related ministries), employee's organizations (Vietnam General Confederation of Labour), employer's organizations (Vietnam Chamber of Commerce and Industry, Vietnam Cooperatives Alliance) are required to participate and coordinate to implement the second national OSH programme for 2010-2015.</p>	<p>The ILO has promoted tripartite participant through series of workshops, meetings and trainings in order for its partners to realize the important of tripartite involvement in the process of policy, law, regulation development as well as implementation.</p> <p>The ILO has assisted to prepare the National Guidelines on OSH Committee</p>
X	<p>OSH information, awareness-raising, and training strategies are designed and implemented by the government, employers, and workers' organizations, to help give effect to programmes targeting improvement of OSH conditions, as documented by a schedule and budget allocation for, and reports of, activities.</p>	<p>The Vietnamese Government has committed the followings on OSH information, awareness raising and training strategies:</p> <p>(i) Provide annually OSH training to an average of more than 40,000 people who are working with strict OSH requirement jobs; 10,000 people who are doing hard, hazardous and/or dangerous jobs; 40,000 OSH officials in enterprises.</p> <p>(ii) Disseminate appropriate</p>	<p>ILO provides technical advice to the Government, workers' and employers' organization through series of capacity building workshops and training of trainers to support the institutionalization of these training courses and the ILO tools (WISCON, WIND, WISE) into the existing Government-run programmes.</p>

		OSH information to more than 1,000 craft villages, 5,000 cooperatives and 30,000 SMEs by 2015.	
	Labour inspection services carry out more effective and efficient inspections to help ensure application of OSH standards, as documented through evidence in annual reports. A register and analyses, with sex-disaggregated data, of occupational accidents and diseases are established or upgraded and maintained at national level by the competent authority.		

### **Promoting Global Standards on OSH through Better Work**

Through Better Work Vietnam (BW-VN), an IFC/International Labour Organization initiative, the ILO has been promoting OSH awareness raising and improving standards in the garment and footwear industries. In Vietnam, the clothing sector directly affects as much as 10 per cent of the population. To help ensure that this vital sector remains competitive, IFC and the International Labour Organization launched the Better Work program to improve the working conditions and productivity of factory workers so that global brands like Adidas, Levi Strauss & Co., and Nike will continue to buy from them. For factories, Better Work’s monitoring system reduces the costs of compliance audits demanded by international buyers. Factories can pay for one audit instead of hiring expensive third-party auditors to assess their operations for each brand that buys from them. The savings can then be spent on improving benefits for workers. Better Work also provides management training to factory supervisors so that they can improve relations with workers and avoid costly production disruptions due to conflicts.

In recent years, Vietnam’s garment industry has had remarkable growth rate of about 20 per cent per year with export accounted for 15% of national exports. The impressive growth of the garment industry has contributed to help Vietnam become one of nine largest garment exporting countries in the 153 exporters of textiles and garment worldwide. Up to now, the number of garment workers in Vietnam is around two million people. However, disease situation of these garment workers has been alarming particularly in the South. The main reasons were: overtime working, stress,

lack of useful playground...that made 93% of the workers tired after work. The mission was only allowed to visit one helmet manufacturing enterprise, For this reason the following statistics collected by the Hospital of Nurses-Rehabilitation-Occupational diseases in HCM city, among 1,700 garment workers examined there were nearly 1,000 cases of mental, joint-muscle-skeleton, cervical spondylitis, backbone spondylitis<sup>42</sup>; 50% of patients were in the manufacturing industries.

A recent survey of Institute of Hygiene and Public Health of HCM city on 1,000 garment workers aged from 25-35, in 3 enterprises in Binh Duong, Dong Nai provinces and Ho Chi Minh city showed that 93% of workers felt tired after work of which whole body fatigue holds 47%; heavy head, headache holds 16.7% ; being exhausted holds 15.1%; joint- muscle- skeleton pain in lower back, neck and shoulders holds over 80%, etc.

In fact, the rate of workers doing monotonous works being tired is higher than workers doing diverse works. Direct workers such as: fixed sitting or in industrial lines are usually more tired than indirect workers as technical staffs or managers. Monotonous work easily causes stress, loss of concentration, etc which can lead to work-related accidents and diseases.

Garment workers are exposed to and inhale variety of jute, hemp, cotton fibres...in the manufacturing process so they have highly risk of lung diseases. Clinical symptoms of lung diseases caused by inhaling jute, hemp, cotton fibbers are thoracic tightness, shortness of breath and cough.

Although many workers were suffered from occupational diseases and there were regulations requiring enterprises to organize periodical health examination for workers at least once per year, to detect symptoms of occupational diseases, the enterprises have not really paid attention on working environment and occupational safety and health and do not comply with these regulations.

Participating factories have reported up to 10 percent higher productivity. In Vietnam, the program has been expanded to cover workers' health, safety, and compensation, leading to a 33 per cent improvement in the application of health and safety regulations.

## **6. Prevailing OSH issues in Vietnam**

Notwithstanding the reported outcomes above, the OSH system in Vietnam is theoretically well organised. The government has established fundamental laws for OSH matters and has organised the OSH system from the central to the grassroots level. To make this system work adequately, it is necessary to have the political tools such as information, inspection activities, and penalties enforced by law.

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<sup>42</sup> The degenerative process of spondylosis (spinal osteoarthritis) may impact the cervical, thoracic, and/or lumbar regions of the spine.

In the current situation, however, there is no adequate OSH information system and no adequate inspection activities, with the result that penalties defined in the law are **applied. There are many reasons for this situation. The shortage of manpower and materials and inadequate awareness of workers and employers due to the strong incentives for economic development are two of them.**

The complicated OSH administrative system makes the situation worse. Because different administrative bodies are insular (compartmentalized), information is rarely shared, and the duplication of programmes also occurs. Under the current situation, where there is a severe shortage of human and financial resources for OSH activities, this kind of duplication causes a great waste of time and resources. It is, therefore, strongly recommended that the ILO work with the Vietnamese government to ensure a more fluid organisation of the OSH administrative system to established value added and synergies among the different OSH players.

Also, the realisation of reorganization of the administrative system to allow for direct contact between among workers and employers organizations and the other ministries involved in the OSH system was evaluated by the tripartite constituents interviewed as the most important strategy to solve various OSH problems. However, it is the most difficult task to be realised in the short term, because the reorganization of the system is too much of a political issue.

According to the results of the interviews conducted for this case study, the education of employers and workers was evaluated as the second most important strategy. After the introduction of a new market policy, the incentive for higher productivity has become very strong among workers and employers. Thus, OSH problems have reverted to second place. Education is the most important strategy to solve these problems at the local level. Especially strategies with worker participation seem to be most suitable to enlighten workers and employers about the importance of OSH matters. It has been reported that this type of strategy has been very useful in improving working conditions in developing countries. As the Labour Code of Vietnam clarifies the role of the trade union in OSH activities, this strategy of worker participation will be suitable and effective.

Finally, to improve working conditions in Vietnam, one must know the actual situation more precisely. Currently, it is impossible to introduce a nationwide OSH information system within the next few years. Therefore, research activities will be very important in studying the situation. It is especially necessary to organise epidemiological research and environmental measurement studies. Respondents indicated that although there are many qualified Vietnamese OSH researchers, their knowledge and skills are often not aligned to international best practices, mostly because of the lack of up to date information. In this regard, interviewees felt that ILO CIS needs to become a more practical in the collection of international good practise and more timely in its dissemination. The National Institute for Labour Protection, a CIS member, expressed concern over the relevance of the CIS.

Furthermore, they lack the financial resources and materials to conduct research both in laboratories and in the field. I think that assistance in the field of research is the most timely target for international cooperative programmes. Through the collaborative research programmes, we shall be able to share knowledge and skills, and shall be able to train personnel in this field. It is expected that several OSH research programmes will be incorporated into the international cooperative programmes in Vietnam.

## 7. Evaluation of Priorities for Future

In addition to the national constituents interviewed in Hanoi, the missions also had a group discussion with members of the National Institute of Labour Protection to assess the contributions of the ILO OSH policy in the development of the National OSH Programme and capacity building efforts. The questions of the interviews focused on the relevance, coherence, effectiveness, efficiency and sustainability of ILO sponsored OSH activities and identified issues that need further attention. The results of these interviews and discussions have been organized according to the analytical hierarchy process to evaluate priorities among future OSH strategies.

There were about 20 interviews conducted in the COs, DWT and HQ, including OSH specialists from the National Institute of Labour Protection, WHO, MOLISA.

Four factors associated with the prevailing OSH issues in Vietnam were evaluated:

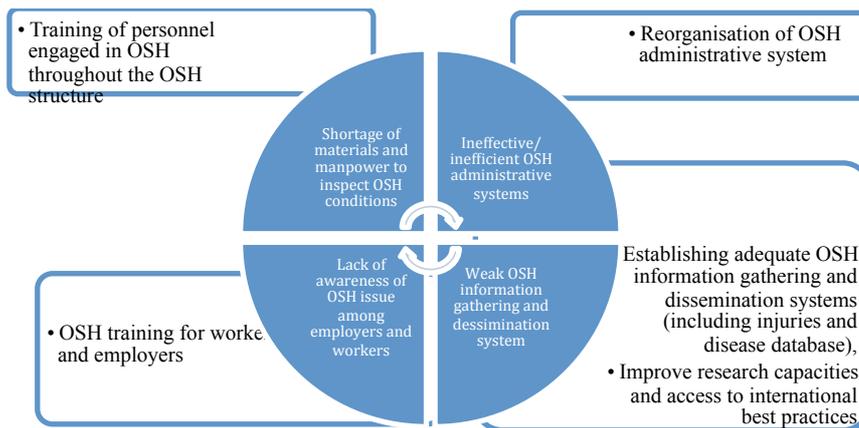
- (i) shortage of materials and manpower,
- (ii) inadequate OSH information system,
- (iii) inappropriate OSH administrative system,
- (iv) low awareness of workers and employers of OSH issues.

To solve these problems, the following five strategies were identified as plausible options for action:

- (i) training of personnel in OSH services,
- (ii) reorganisation of OSH administrative system,
- (iii) OSH education for workers and employers,
- (iv) establishment of an adequate OSH information system, and
- (v) Improvement of OSH research activities.

The first step was to structure the identified OSH issues and strategies as shown in figure below:

### **OSH issues and strategies in Vietnam**



All four factors associated with the OSH problems in Vietnam were assessed by evaluating and checking the consistency of judgements. After evaluating the validity of this scheme, the identified factors and strategies were put through a pair wise comparison between each criterion. The scale for comparison is based on a five point rating of degrees of preference: 1= equal importance, 3= moderate importance of one factor over another, 5= strong or essential importance, 7= very strong importance, and 9= extreme importance. Ratings 2, 4, 6, and 8 are the values for inverse comparison.

Table 1 shows weights of each problem calculated by the comparison matrix. A low awareness of employers and workers about OSH problems was detected as the most important problem, followed by a shortage of materials and manpower, an inadequate OSH information system, and an inappropriate (insular) OSH administrative system.

**Table 1. Comparison of factors associated with problems with OSH in Vietnam**

	F1	F2	F3	F4	Priorities
F1	1.00	1.53	0.73	1.17	0.26
F2		1.00	0.73	0.88	0.20
F3			1.00	1.57	0.32
F4				1.00	0.22

*F1= shortage of materials and manpower for inspections. F2=inappropriate OSH administrative system. F3= inadequate awareness of workers and employers. F4=inadequate OSH information system*

Table 2 shows the matrix of weights which represent the relative importance of each strategy in solving these problems. For example, to solve the problem of low consciousness of employers and workers about OSH problems, reorganisation of the OSH administrative system was evaluated as the most effective remedy, followed by the other four strategies, OSH education of workers and employers, improvement of

research activity in the field of OSH, and establishment of an adequate information system.

**Table 2: Comparison of suggested strategies to overcome the factors associated with OSH problems in Vietnam**

	Shortage of materials and manpower						Inappropriate OSH administration system					
	S1	S2	S3	S4	S5	Priorities	S1	S2	S3	S4	S5	Priorities
<b>S1</b>	1.00	0.85	1.00	1.66	0.90	0.21	1.00	0.59	1.03	0.92	1.08	0.17
<b>S2</b>		1.00	1.34	1.41	1.11	0.24		1.00	1.80	1.53	1.41	0.29
<b>S3</b>			1.00	1.45	1.05	0.20			1.00	1.41	1.14	0.19
<b>S4</b>				1.00	0.90	0.15				1.00	1.14	0.18
<b>S5</b>					1.00	0.20					1.00	0.17
	Inadequate awareness among workers and employers						Inadequate OSH information system					
	S1	S2	S3	S4	S5	Priorities	S1	S2	S3	S4	S5	Priorities
<b>S1</b>	1.00	0.60	0.81	1.21	1.21	0.18	1.00	0.59	1.31	0.69	0.79	0.17
<b>S2</b>		1.00	1.14	1.34	1.41	0.25		1.00	1.80	1.53	1.41	0.29
<b>S3</b>			1.00	1.62	1.34	0.23			1.00	0.73	0.83	0.15
<b>S4</b>				1.00	1.00	0.16				1.00	1.45	0.25
<b>S5</b>					1.00	0.16					1.00	0.20

*S1=training of personnel in the OSH services, S2=reorganization of OSH administrative services to end silo structure, S3= OSH capacity building for workers and employers, S4= establishing adequate OSH information systems, and S5=improve OSH research activities*

Table 3 shows the relative importance of the five strategies calculated by the analytical hierarchy process method. Reorganisation (end of silo structure of the present system) of the OSH administrative system was considered to be the most important strategy to improve OSH conditions in Vietnam. This strategy was followed by capacity building of workers and employers about OSH, training of personnel in OSH system, improvement of research activities in the field of OSH, and establishment of an adequate information system.

**Table 3 Composite priorities to solve pending OSH issues in Vietnam**

	<b>F1</b>	<b>F2</b>	<b>F3</b>	<b>F4</b>	<b>Composite Priorities</b>
	<b>0.26</b>	<b>0.20</b>	<b>0.32</b>	<b>0.22</b>	
<b>S1</b>	0.21	0.17	0.18	0.17	0.18
<b>S2</b>	0.24	0.29	0.25	0.23	0.25
<b>S3</b>	0.20	0.19	0.23	0.15	0.20
<b>S4</b>	0.15	0.18	0.16	0.25	0.18
<b>S5</b>	0.20	0.17	0.17	0.20	0.18

## 8. Overall Assessment of ILO's Outputs

### Relevance

#### *What Worked?*

- ▶ The ILO's OSH strategy and global instruments have been quite relevant to the Government's work on the development of the two National OSH Programmes
- ▶ ILO Global OSH strategy and instruments are highly relevant with the objectives of the national socio-economic development plans 2006-2010 and 2011-15
- ▶ The ILO 2001 Guidelines on Occupational Safety and Health management systems and CO 187 were instrumental in the development of the National OSH Programme and strategy of the government's project for promoting strategies and national policies on occupational safety and health.

#### *What needs improvement?*

- ▶ ILO training materials are on demand by enterprises for training on occupational safety and health. The number of enterprises and labour force has increased manifold in the past decade in Vietnam making the need of OSH training materials and facilities more pressing.
- ▶ Improved capacity (manpower and financial) for the MOLISA OSH professionals and inspectors to effectively supervise and enforce OSH national directives.
- ▶ Although the law requires enterprises to have compliance officers, the plant visited with MOLISA did not have such officer and many safety infractions were observed.
- ▶ There is a lack of occupational safety and health training facilities and of criteria to define what an occupational safety and health facility is.

### Coherence

### ***What needs improvement?***

- ▶ The existing organization of OSH administrative services is complex and fragmented, it does not allow for effective coordination and complementarities among the different organs of the OSH system. This lack of coherence in the national administrative system affects synergies among ILO projects as well as among ILO and other international organizations engaged in OSH activities.
- ▶ Coordination among Ministries and departments engaged in the current OSH system

### **Effectiveness**

#### ***What worked?***

- ▶ ILO has been effective in supporting the government in the development of the two national OSH Programme
- ▶ ILO has effectively assisted to prepare and publish the National Guideline on OSH-MS

#### ***What remains to be done?***

- ▶ Assist the government in developing an implementing effective OSH capacity building strategy.
- ▶ Support the government strengthen OSH data collection for better tracking of occupational accidents and diseases. This is currently being done through reports from Social Security system; however, only 14.5 per cent of the work force is covered by social security.

# Case Study 6: India

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**Country Office and DWT:** ILO DWT/CO New Delhi

**Regional Office:** The ILO Regional Office for the Asia-Pacific (ROAP)

**ILO/CIS centre in India:** Directorate General, Factory Advice Service and Labour Institutes (DGFASLI), Ministry of Labour and Employment (MoLE)

## 1. Context

India classified as a lower middle-income country had a GDP of \$1.842 trillion in 2012 with a total population of 1.237 billion. Almost 60% of this population is in the working age group, i.e. 15 – 59 years. More than a quarter of the population is below the national poverty line and almost a quarter is illiterate. The life expectancy at birth is 65 years while the GNI per capita in PPP terms is \$3,285. The country is ranked at 136 in the HDI.

India's complex character is further reflected in the fact that more than 93% of the work force is in informal sectors. Women, 48.3 per cent of the population, comprise of only 26.1 per cent of the employed workforce. Only 25 to 30 per cent women in rural and 15 to 18 per cent in urban areas participate in labour market.

## 2. OSH System: Governance and Legislation

The comprehensive safety and health statutes for regulating OSH at work places exist only for four sectors namely, mining, factories, ports, and construction.

As Labour is a subject in the concurrent list in India, both the Central and the State Governments are empowered to ratify legislations in this regard. In terms of List I under the seventh schedule of the constitution, the Central Government is exclusively authorized to make laws and regulations of labour and safety in mines & oilfields (vide Item No.55 in the list). In the list on Concurrent Subjects welfare of labour including conditions of work (vide No.24 in the list) have been included.

The Central Government reviews the statutes of OSH, which is allocated to the Ministry of Labour & Employment (MOLE). Overall, MOLE and the Labour Departments of the States and Union Territories are responsible for OSH.

### 3. Legislative Framework

The Constitution of India provides guidance regarding the government's responsibility in ensuring occupational safety and health of all workers. The relevant sections of the Constitution highlight the following:

- Article 24 prohibits employment of child below 14 years for work in any factory or mine or in any hazardous employment.
- Article 39 requires the State to direct its policy to ensure that the health and strength of workers, men and women, and the tender age of children are not abused. The State should ensure that citizens are not forced to take up vocations not suitable to their age or strength due to their economic conditions.
- Article 42 directs the State to make provision for securing just and humane conditions of work and maternity relief.

Within MOLE, the Industrial Safety and Health (ISH) Division is entrusted with administration of the key and subordinate legislations, which are as follows:

Key legislations	Subordinate legislations
<ul style="list-style-type: none"><li>• Mines Act, 1952.</li><li>• Factories Act, 1948.</li><li>• Dock Workers (Safety, Health and Welfare) Act, 1986</li></ul>	<ul style="list-style-type: none"><li>• Mines Rules, 1955.</li><li>• Coal Mines Regulations, 1957.</li><li>• Metalliferous Mines Regulations, 1961.</li><li>• Oil Mines Regulations, 1984.</li><li>• Mines Creche Rules, 1966.</li><li>• Mines Vocational Training Rules 1966.</li><li>• Mines Rescue Rules, 1985.</li><li>• Dock Workers (Safety, Health and Welfare) Rules and Regulations 1990.</li></ul>

The ISH division of MOLE is also the apex administrative division for :

- All matters connected with the Model Rules etc. under the Factories Act.
- Accident analysis and setting up of Courts of Inquiry etc. concerning Accidents/occurrences in Mines.
- Occupational health and safety matters in organized sectors.
- General Legislation on occupational safety and health.
- Establishment, Administrative & Financial matters in respect of Directorate General, Factory Advice and Labour Institutes (DGFASLI) and Directorate General of Mines Safety (DGMS)
- Administration of P.M's Shram Awards, Vishwakarma Rashtriya Puraskars, National Safety Awards (Factories) and National Safety Awards (Mines).
- National Safety Council, Mumbai.

The Ministry is supported by two technical organizations in the area of occupational safety and health of workers- A. Directorate General of Factory Advice Service & Labour Institutes (DGFASLI) and B. Directorate General of Mines Safety (DGMS) for manufacturing and mining sectors respectively.

#### **A. OSH Governance for Factories and Docks**

##### **Directorate General, Factory Advice and Labour Institutes (DGFASLI), Mumbai, Maharashtra**

DGFASLI functions as a technical arm of the MOLE for the OSH matters in factories and ports/docks. It assists in formulation and review of policy and legislation; maintains a liaison with Factory Inspectorates of States and Union Territories in regard to the implementation and enforcement of legislative provisions and renders technical advice; and provides training mainly in the field of industrial safety and health including diploma and certificate courses. The Director General, DGFASLI is also Chief Inspector of Dock Safety under the Dock Workers (Safety, Health and Welfare) Act, 1986 in respect of major ports. The Dock Safety Division of DGFASLI coordinates with the Dock Safety Inspectorates regarding enforcement activities and also for bringing about amendments in statutes concerning dock work.

Further, DGFASLI is supported by five Labour Institutes for its capacity building activities. The Central Labour Institute is located at Mumbai and Regional Labour Institutes at Chennai, Kanpur, Kolkata and Faridabad. These institutes also engage in OSH related research and consultancies.

##### **State Factory Inspectorates**

In each State, an Inspectorate of Factories is established and Factory Inspectors are appointed at local and district levels. The Inspectorates of Factories are also staffed with specialists in the field of occupational health and industrial hygiene at headquarter to extend support to field inspectors.

#### **B. OSH Governance for Mines**

**Directorate General of Mines Safety (DGMS), Dhanbad, Jharkhand:** DGMS administers the Mines Act, 1952 and the rules and regulations framed thereunder to regulate the objective of Safety, Health and welfares of workers employed in the mines. Other subordinate legislations administered by DGMS include- Coal Mines Regulations, 1957; Metalliferous Mines Regulations, 1961; Oil Mines Regulations, 1984; Mines- Rules, 1955; Mines Vocational Training Rules, 1966; Mines Rescue Rules, 1985; Mines Crèche Rules, 1966.

Apart from the two apex technical organisations for OSH, there are national Level autonomous bodies/organizations connected with Occupational Safety & Health. The three key institutions are:

**i. National Safety Council (NSC)**

The NSC was set up in 1966 with the objective to generate, develop and sustain a voluntary movement of Safety, Health & Environment at the national level. The NSC conducts specialized training programs, conferences, seminars, workshops, safety audits, safety awareness, survey and other consultancy services. It also brings out various publications on OSH such as periodicals, industrial safety chronicles, technical manuals/booklets, etc.

**ii. Central Board of Workers Education (CBWE)**

CBWE, an autonomous body under the MOLE, was started in 1958 with objectives of creating and increasing awareness and educating the workforce. CBWE conducts various training programmes for the workers of formal and informal sectors at national, regional and unit levels through a network of 49 Regional and 09 Sub-Regional Directorates spread all over the country and an apex Training Institute viz. Indian Institute of Workers Education (IIWE) at Mumbai.

**iii. National Institute of Occupational Health (NIOH)**

The NIOH's specific objective is to carry out research in the field of epidemiological and environmental monitoring and corollary toxicological studies in hazardous occupations for recognition and evaluation of risk factors; development of tools for early detection of health impairment and design of appropriate intervention measures for the prevention of hazards at work places. They also carry out education through university and orientation courses.

**OSH governance for unorganized sector**

There does not exist any OSH cover for unorganized sector workers who comprise of almost 93% of the country's workforce.

- ▶ **Agriculture Sector:** This sector employs more than half of the country's workforce. Agriculture is one of the most hazardous occupations and in India they are related to use of hand-tools and implements, farm machinery, chemical agents such as pesticides, fertilizers, strong weed killers, climatic agents such as high temperature, heavy rain, humidity, high velocity wind/storm, lightening, electricity, animal/snake bites, other agents such as dust, solar radiation, and psychological stress due to socio-economic problems. The relevant Acts are Insecticides Act, 1968 and The Dangerous Machines (Regulation) Act, 1983.
- ▶ **Construction Sector:** In 2001, the construction industry in India employed about 31 million persons and is considered to be the second largest industry after agriculture in terms of employment generation. Considering the construction boom in the country in the last decade, it is expected that this sector must have added significant number of additional workers.

Construction workers are one of the most vulnerable segments of unorganised labour and are exposed to a wide variety of serious OSH hazards. Building & Other Construction Workers (Regulation of Employment and Conditions of Services) Act, 1996 provides guidelines for protection and welfare of construction sector workers although the practical guidelines for its application have been largely lacking. The Chief Labour Commissioner (Central) is entrusted with the task of enforcement of this Act and the Central Rules.

- ▶ **Shops and Establishments:** There are a huge number of shops and establishments, which employ around 6 million persons. The sector is covered by the Shops and Establishments Act ratified by various State Governments. State Labour Commissioner or the Local Authorities are responsible for implementation of the OSH measures. The Acts cover the issues of cleanliness, ventilation, lighting, and precautions against fire and first aid.
- ▶ **Beedi and Cigar Manufacturing:** A traditional agro-based industry which employs over 4.1 million workers of which about 90 percent are “home based” and majority of them are women. The other 10 percent are employed by factories, which form part of the organized sector where the Factories Act, 1948 is applicable. The Beedi and Cigar Workers (Conditions of Employment) Act, enforced by the State Commissioners of Labour, has provisions relating to cleanliness, ventilation, overcrowding, drinking water, latrines and urinals, crèches, first aid, canteens, working hours, etc. which are applicable only to the ‘industrial premises’ whereas mentioned above only 10 per cent workers are employed.
- ▶ **Eating Places:** By rough estimates, around one million persons are employed in this sector and are largely covered by the Shops and Establishments Act. The provisions of this Act are insufficient to address the hazards to eating places and demand for specific guidelines.
- ▶ **Waste Management:** Waste management is a function of urban local bodies. Union Ministry of Urban Development and Poverty Alleviation and the State Governments deal with the legislation governing waste management in urban areas. Local civic authorities in some States deal with collection and disposal of wastes. However, these laws are by no means comprehensive. A new set of rules, Municipal Solid Waste (Management & Handling and Trans boundary) Rules 2008 was promulgated by the Ministry of Environment and Forests. These rules cover the urban local bodies of the country and have fixed the responsibilities of the State Governments, Central Pollution Control Board, State Pollution Control Boards and Municipal authorities. Epidemiological studies show that the workforce engaged in waste management services are exposed to high health risks and frequently suffer from respiratory tract infections, gastro- intestinal problems, worms, etc. Indian domestic waste contains human excreta, bio-medical waste and sometimes other toxic and hazardous wastes.
- ▶ **Domestic Work:** Traditionally, there are many types of ‘domestic work’

being carried out for centuries. As per rough estimates, there would be around 3.5 million employed in this sector. Currently, there is no legislation providing OSH coverage for domestic work.

#### 4. OSH Conditions and Statistics

In India, there is no single comprehensive database available for OSH. Based on the governance, the databases are available for OSH in Factories and Mines separately; however, the database for workers in unorganized sector is absolutely absent.

Different studies have reported major occupational risks as accidents, pneumoconiosis (especially silicosis), musculoskeletal injuries, chronic obstructive lung diseases, pesticide poisoning, byssinosis, asbestosis, and noise induced hearing loss and workplace stress. Increasing proportion of females in the workforce adds to traditional OSH issues. It is reported that agriculture, mining and construction have high levels of accidents and diseases.

As per DGFASLI, there were about 1,509 fatal and 33,093 non-fatal injuries in 2009 in registered factories, which employ less than 7% of total workforce. Few other studies suggest that these official figures may be grossly underestimated. Statistics of **factories** as reported by DGFASLI is given in the table below:

OSH Statistics of Factories at a Glance: 2009	
Registered Factories	324,761
Working Factories	270,294
Employment	
Total	13,100,129
Men	11,340,366
Women	1,759,763
Inspectors of Factories	938 –Sanctioned 608 –In position
Safety Officers	2,642
Welfare Officers	3,096
Factory Med. Officers	6,809
Total Injuries	33,093
Fatal Injuries	1,509

In India, 89 minerals are being produced through 569 coal mines, 67 oil and gas mines and 1770 non-coal mines (which are submitting returns) and many more small mines, may be more than a lakh, which are very small in size, capacity and infrastructure. The total direct employment in mining industry in India is about 1 million on a daily average basis. The trend of fatal accidents and fatality rate per thousand persons employed at ten yearly average is declining. The average number of

fatal accidents in coal mines which was 162 during 1981-90 and 140 during 1991-2000 has reduced to 86 during 2001-2010 i.e. it has come down from three digits to two digits. Similarly, the fatality rate in coal-mines has also declined from 0.34- 0.33 during 1981-90 and 1991-2000 to 0.27 during 2001-2010.

#### **National Policy on Safety, Health and Environment At Work Place, 2009**

The policy states that building and maintaining national preventive safety and health culture is urgently required. The policy therefore states following as **goals**:

- Provide a statutory framework on OSH and Health in respect of all sectors of industrial activities including the construction sector, designing suitable control systems of compliance, enforcement and incentives for better compliance.
- Provide administrative and technical support services.
- Provide a system of incentives to employers and employees to achieve higher health and safety standards.
- Provide for a system of non-financial incentives for improvement in safety and health.
- Establish and develop the research and development capability in emerging areas of risk and providing for effective control measures.
- Focus on prevention strategies and monitoring performance through improved data collection system on work related injuries and diseases.
- Develop and provide required technical manpower and knowledge in the areas of safety, health and environment at workplaces in different sectors.
- Promote inclusion of safety, health and environment, improvement at workplaces as an important component in other relevant national policy documents.
- Include safety and occupational health as an integral part of every operation.

The policy seeks to bring the national objectives into focus as a step towards improvement in safety, health and environment at workplace. The **objectives** are to achieve:-

- Continuous reduction in the incidence of work related injuries, fatalities, diseases, disasters and loss of national assets.
- Improved coverage of work related injuries, fatalities and diseases and provide for a more comprehensive database for facilitating better performance and monitoring.
- Continuous enhancement of community awareness regarding safety, health and environment at workplace related areas.
- Continually increasing community expectation of workplace health and safety standards.
- Improving safety, health and environment at workplace by creation of “green jobs” contributing to sustainable enterprise development.

## 5. Challenges and Constraints as per GoI in the Factories and Dock sector<sup>43</sup>

1. *Non-implementation of the National Policy on Occupational Safety, Health & Environment:* The policy adopted in 2009 is still in its infancy with regards to implementation.
2. *Absence of an apex body on OSH and no agency for unorganized sector:* Currently there is no apex body to look at the issues of OSH comprehensively while the unorganized sector is left ungoverned. The Working Group suggested formation of a National Commission on Occupational Safety & Health.
3. *Limited capacities of the enforcement and DGFASLI officials:* The current capacities of the officials are not in tune with the rapid changes in industrial sector due to liberalization and technological advancement. Further the infrastructure available with the DGFASLI, Labour Institutes and the State Factories Directorates are outdated and are unable to deliver quality services.
4. *Lack of skilled OSH officials:* The officials like Safety Officers, Competent Supervisors, Factory Medical Officers, Occupational Health Nurses, Fire Personnel, Industrial Hygienists, Members of Emergency Response Group, Safety Committee Members, Union Representatives are not skilled and there is absence of a positive safety culture in the industry.
5. *Absence of a comprehensive National Data Base on OSH:* There is a back log of at least five years in publication of injury statistics due to delay in sending the latest statistics with complete details from all the states and union territories. A significant amount of injury statistics is missing as it is completely unreported by States. During 2003 - 2007 injury statistics like Frequency Rate and Incidence rate for 18 states and Union Territories did not figure in the national statistics. According to the Working Group, there is an urgent need to identify and solve the problems to ensure data transfer from the states which may require an on-line data transfer facility for national data-base with standardized OSH data system in line with the National Policy on Safety Health and Environment at Workplace .
6. *Absence of OSH Management Systems in Industry:* In order to attain sustainability, the Working Group has highlighted the need for integration of ILO Occupational Safety and Health Management System (OSH-MS) 2001 Guidelines with IS: 1801:2000 at the industry level.

The working group for the upcoming 12<sup>th</sup> Five Year plan made a number of suggestions for consideration by the government which also reflects the priority concerns of MoLE with regards to Occupational Safety and Health. The priority areas identified by the working groups, *inter alia*, includes:

- ▶ Immediate measures to *implement the National Policy*

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<sup>43</sup> As per the working paper on OSH submitted to Planning Commission for 12<sup>th</sup> National Five Year Plan.

- ▶ Developing a *National Safety and Health Profile and Occupational Disease profile*
- ▶ Developing a *national network system on OSH*, prioritizing key issues for action, conducting national studies or surveys or projects
- ▶ Developing *appropriate standards, codes of practice manuals* consistence with international standards and their implementation by the stakeholders.
- ▶ *Strengthening of Enforcement System* at the factory, State or national level by creating a reliable and fast database and strengthening of Infrastructure as well as the capabilities of the enforcement officials and other key human resources in the industry.
- ▶ Developing suitable *accreditation machinery* to recognise institutions, professionals and services relating to OSH for uniformity, greater coverage and to certify safe management systems;
- ▶ Developing research by innovative methods including computer based *risk assessment tools*
- ▶ To set up *Risk Observatory Mechanisms* or Risk Observatory Cells in DGFASLI and Regional Labour Institutes with appropriate hardware and software.
- ▶ *Strengthening of DGFASLI* by providing adequate human resources, upgradation of its various laboratories etc

Other suggestions include developing the Regional Labour Institute Faridabad, as Centre of Excellence in MSME and Chemical Process Units; revamping the institution of Factory Inspector to play an advisory role besides their enforcement functions; setting up of testing facilities for personal protective equipment (PPE) in Regional Labour Institutes; training and awareness raising on OSH issues among stakeholders through active involvement of Labour Institutes; incorporating suitable teaching inputs in schools, technical, medical, professional and vocational courses and distance education programmes; and amendment in existing legislations (the Factories Act, 1948 and Dock Workers (SHW) Act, 1986)

## 6. Ratification of ILO Conventions

Of the 13 Conventions framed by the ILO on OSH issues, India has so far ratified two, viz. Radiation Protection Convention (No. 115) and Benzene Convention (No. 136). The table below lists the ILO conventions signed by India so far.

### Occupational safety and health

Convention	Date	Status
C045 - Underground Work (Women) Convention, 1935 (No. 45)	25 Mar 1938	In Force
C115 - Radiation Protection Convention, 1960	17 Nov 1975	In Force

(No. 115)		
C127 - Maximum Weight Convention, 1967 (No. 127)	26 Mar 2010	In Force
C136 - Benzene Convention, 1971 (No. 136)	11 Jun 1991	In Force
C174 - Prevention of Major Industrial Accidents Convention, 1993 (No. 174)	06 Jun 2008	In Force

#### **Social security**

Convention	Date	Status
C018 - Workmen's Compensation (Occupational Diseases) Convention, 1925 (No. 18)	30 Sep 1927	In Force
C019 - Equality of Treatment (Accident Compensation) Convention, 1925 (No. 19)	30 Sep 1927	In Force
C042 - Workmen's Compensation (Occupational Diseases) Convention (Revised), 1934 (No. 42)	13 Jan 1964	In Force
C118 - Equality of Treatment (Social Security) Convention, 1962 (No. 118)	19 Aug 1964	In Force
Has accepted Branches (a) to (c)		

#### **Dockworkers**

Convention	Date	Status
C027 - Marking of Weight (Packages Transported by Vessels) Convention, 1929 (No. 27)	07 Sep 1931	In Force
C032 - Protection against Accidents (Dockers) Convention (Revised), 1932 (No. 32)	10 Feb 1947	In Force

## **7. The ILO's interventions on OSH in India (2008 -12)**

The ILO's initiatives in the last five years with regards to OSH included both policy level inputs and work-place level interventions with constituent partners. While projects/interventions directly linked to Outcome 6 (OSH) were limited, a number of projects with components linked to OSH were implemented during the previous DWCP. A brief description of key achievements and gap areas in these interventions are provided below:

<b>Projects or interventions directly linked to</b>	<b>Projects not directly linked to outcome 6 but positively contributing to OSH</b>
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outcome 6	practices at enterprise/worker level
<ul style="list-style-type: none"> <li>▶ Strengthening Labour Inspection services (GLO552)</li> <li>▶ Support for formulation of a National Policy and Plan of Action on OSH (India DWCP 2007-12 results Framework)</li> <li>▶ Support for ratification of at least one Convention on OSH and progress made towards ratification process on Promotional Framework Convention on Occupational Safety and Health (India DWCP 2007-12 results Framework)</li> </ul>	<ul style="list-style-type: none"> <li>▶ Sustaining Competitive and Responsible Enterprises in India (SCORE) (IND102)</li> <li>▶ Prevention of HIV/AIDS in the World of Work (IND130)</li> <li>▶ Expanding HIV/AIDS interventions amongst the migrant workers in the Construction Sector in India (IND 126)</li> <li>▶ Preparatory assistance for development of a program on mitigation and HIV program (IND 126)</li> <li>▶ ILO/USDOL/PEPFAR HIV/AIDS Workplace Education Project (IND126)</li> </ul>

### ▶ Strengthening Labour Inspection services

This was a multi-country project in which India was one of the countries. India received USD 325,000 from Norway for this project. The project had the overall objective of strengthening labour inspection systems. The strategies included modernization of the procedures and capacity building of the labour inspection staff at both Central and State Government levels.

In India, a national training strategy was developed and discussed with the Ministry of Labour and Employment (MoLE), the Chief Labour Commissioner (CLC), the Directorate General for Factory Advice and Labour Institutes (DGFASLI), the Directorate General for Mines Safety (DGMS) and V V Giri National Labour Institute in addition to States such as Bihar and Maharashtra. The strategy aimed at upgrading labour inspectors' skills and the adjustment of the ILO training manual for labour inspectors to the Indian context. The project received good support from ILO and national stakeholders including government and State level government of Bihar and Maharashtra.

In Maharashtra, the project provided assistance in the preparation of a labour inspection policy and guidelines; assistance for the introduction of inspection planning; development of new forms, checklists and report forms for inspection; and in the preparation of a desk manual for labour inspectors. Around 220 labour inspection officials were trained and the momentum and awareness generated by the project led to recruitment of 70 new labour officers. The project also outlined a strategy for involving social partners in the labour inspection process for more effective compliance with labour laws. A road map for strengthening Maharashtra's labour inspection system and operations in the medium and longer term was also provided.

In Bihar, the modernization process focused on the labour inspectorate to expand its scope to the informal economy and to create a favorable investment climate to promote investments under decent work conditions. The project organized workshops and training programs in which a total of 180 labour inspectors were trained and 40 new officers were recruited. The project also built the capacities of State Labour Government officials by facilitating their participation in international conference, seminars and exposure to international best practices. Some of the key achievements were:

- ✓ Successful delivery of the training strategy in a sustainable manner in Bihar.
- ✓ A new framework developed for more effective labour inspection system which included a labour inspection policy; labour inspection planning; labour inspection guidelines and checklists and training materials.
- ✓ Initiation of South-South cooperation related to experience sharing and networking with Brazil and other Asian countries.
- ✓ Training in safety and health/safety and health inspection in port for Dock Safety Inspectors and social partners.

In terms of the gap areas, the project was considered too short and resource constrained given the context, scale and expectations. In absence of national project manager, the Sector Specialist (DWT) had to manage the project. Short duration and delays in formal launching affected time efficiency of the project and partner selection was ad-hoc due to lack of clear strategy. However, concentrating efforts at state level helped in efficient use of time and financial resources.

#### ▶ **Work Improvement in Small Enterprises (WISE)**

A pilot demonstration models on Work Improvement in Small Enterprises (WISE) in industrial clusters in Pune was executed with the participation of the constituents in 2011. The project resulted in the inclusion of elements of WISE approaches in the statutory returns filed by the small entrepreneurs in Maharashtra.

#### ▶ **Support for formulation of a National Policy and other policy level inputs**

The ILO provided support to the MOLE in developing this policy which was ratified in 2009. The India DWCP Evaluation and Regional Evaluation recognized the Country Office's role in this regard.

The regional evaluation also notes the following in this aspect:

- At the request of MOLE, a draft strategy for implementation was developed in April 2011, which highlighted the need for some clarification e.g. time frame, targets to be achieved etc. MOLE may further invite Country Office to suggest some concrete proposals for implementation.
- ILO provided inputs to the first round of the exercise which has the objective to amend Factories Act initiated in 2011.

#### ▶ **SCORE - India**

SCORE India is part of SCORE Global project which is an integral part of ILO's Sustainable Enterprise Programme currently active in 7 countries<sup>44</sup> including India and supports small and medium sized enterprises (SMEs) to grow and create more and better jobs by improving their competitiveness through better quality, productivity and workplace practices. The SCORE programme is funded by the Swiss State Secretariat for Economic affairs (SECO) and the Norwegian Agency for Development Cooperation (NORAD). In India the project is being implemented in the light engineering sector in the three clusters of Ahmednagar, Faridabad and Chennai.

SCORE, a next generation training and capacity building product, has largely benefited from the FIP and has also integrated elements from the ILO's other productivity improvement products, i.e. SIYB, WISE and Better Work.

The training module has a complete module dedicated on Safety and Healthy at Work which focuses on productivity, identifying risks to health and safety, building health and safety systems, establishing a joint workplace health and safety committee and Setting standards and implementing policy. The project is still operational.

#### ► HIV/AIDS related programmes and project

The Indian Network of People Living with HIV/AIDS endorsed the ILO Code of Practice on HIV/AIDS and the World of Work as a key tool for reducing stigma and discrimination and protecting the rights of People Living with HIV (PLHIV) at workplaces. With the ILO's assistance, the V.V. Giri National Labour Institute (VVGNI) has integrated HIV training in its programmes for labour administrators, trade unions, enterprises and NGOs.

National AIDS Control Organisation (NACO) endorsed the ILO Code of Practice for use in HIV/AIDS policy and programmes in the world of work in India. Further, the ILO programme collaborated with selected State AIDS Control Societies and supported them in engaging a dedicated staff for coordinating workplace programmes, developed some enterprises based interventions in partnership with SACS; and shared its knowledge products.

As part of the Joint UN technical support to NACO, the project worked in Coal and Construction sectors. In the coal sector, ILO mobilised the Coal India Ltd in developing policy and programme in all subsidiary companies. In the construction sector, ILO undertook a research study and supported intervention through trade unions with support from UNAIDS.

ILO worked closely with NACO and MOLE in developing strategies of working with migrant workers in selected economic sectors following different models, including public private partnerships.

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<sup>44</sup> The other six countries where SCORE is being implemented are Colombia, Ghana, South Africa, Indonesia, Vietnam and China.

The project developed an advocacy and training package for HIV/AIDS for employers' and workers' organizations wherein the nodal persons were trained.

ILO's led the HIV in the world of work agenda in India through continued work with tripartite constituents, national and state level institutions, and enterprises. Knowledge products, research and training materials and awareness generation at all levels were some of the key factors that contributed to the ILO's HIV portfolio in India.

▶ **Micro insurance Innovation Facility and Micro finance for Decent Work (MF4D)**

The facility, supported by the Bill & Melinda Gates Foundation, was administered by the Social Finance Programme, and had more than 15 projects in India supporting both profit and not-for-profit organizations in delivering innovative products and services to the vulnerable sections of the workforce. Under MF4D, the programme supported BASIX – BSFL, a leading micro-finance institution, to increase productivity and workplace safety through participatory safety education. The ILO helped BASIX to adapt and use (Work Improvement in Neighbourhood Development (WIND), the ILO action-oriented training approach.

## **8. Emerging Directions**

The Asia Pacific OSH review by the ILO Region Office for Asia Pacific (ROAP) notes that there is a positive environment towards ratification of Convention 155 (Occupational Safety and Health). It also notes that while the MoLE has shown interest in aligning the OSH standards with international standard norms and practices, there are capacity gaps at the level of individual departments and constituent partners. Lack of credible and robust data on OSH, and limited success with specific departments (such as DGFASLI) were noted as some of the challenges for the ILO in India.

With OSH specialist in place in DWT New Delhi, there is an increased scope for providing needs specific TA. Implementation of the national OSH policy, capacity building, strengthening national OSH institutions, national OSH profile and comprehensive database on OSH (identified as priority areas by the government) are potential areas where ILO's assistance could concentrate in the coming years.

Moreover, as the experiences from strengthening LI services have shown, interventions in India need to be longer term and with adequate resources to respond to the TA needs expressed by constituents. Large scale studies, specifically relating to OSH in unorganized sector and SME sector are also probable areas of support as implementation of the national OSH policy gains ground in the new five year plan.



# Case Study 7: Indonesia

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**Country Office:** ILO CO Jakarta (also responsible for Timor-Leste)

**Current DWCP:** ILO DWCP for Indonesia 2012-15

**ILO-CIS centre:** Employers' Association of Indonesia

**ILO Regional Office:** Regional Office for Asia Pacific (ROAF), Bangkok

## 1. Background

Indonesia is the largest archipelago in the world, consisting of some 17,500 islands. With 242 million inhabitants<sup>45</sup>, it is the world's fourth most populated country. About one-third of Indonesia's population is below the age of 18 years. Per capita income in Indonesia is 4154 USD and as per the central bureau of statistics and Human Development Report 2012, poverty rate stands at 11.66%.

The Gross Domestic Product (GDP) of Indonesia has seen steady growth of 4-6 percent per year in the last decade and the country is counted among Middle Income Countries. During this period, Indonesia's economy has been stable and is one of the nations least affected by the recent global financial crisis. According to McKinsey Global Institute's report (The archipelago economy, September 2012) Indonesian economic growth has remained least volatile compared to any OECD (Organisation for Economic Co-operation and Development) or BRIC (Brazil, Russia, India, and China) and South Africa economy. The economic growth is attributed to high demand of its export commodities as well as a strong and growing domestic market.

Petroleum and natural gas, textiles, footwear, mining, cement and chemical fertilizers are key industries in the country<sup>46</sup>. Fisheries, agriculture, and tourism are the key contributors to the GDP although share of agriculture in GDP has decreased. Service sectors have witnessed maximum growth including in terms employment share. Export products include oil and gas, electrical appliances, plywood, textiles, rubber.

Despite the steady growth in GDP, Indonesia faces social development challenges. While literacy in younger cohort (15-24 yrs) has reached about 98%, infant mortality is 307 (against the MDG target of 105 by 2015) and it is estimated that the MDG goal of reduced maternal mortality and access to improved sanitation may not be met by 2015. Moreover, more than two-third of the workforce is in informal sector. Insufficient infrastructure, unemployment and underemployment, and labour unrest over wages are some of the major challenges faced by the Indonesian government as

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<sup>45</sup> As in 2011

<sup>46</sup> TradeExpo Indonesia (TEI) 2013

it implements its second medium term plan<sup>47</sup> (2009-14), known as RPJMN. Social dialogue and stronger industrial relations system to promote entrepreneurship and decent employment opportunities have been given priority in the current RPJMN. In the context of the decentralized governance since 2000, the RPJMN also emphasizes developing synergies between central and local Government's development programmes.

## 2. OSH Issues in Indonesia

With the ratification of core conventions and priority conventions, the Indonesian government has shown commitment to adhering international norms and standards set by the ILO. Subsequent to ratifications, a number of laws, regulations and decrees have been formulated to provide legal and implementation framework within the country. In the past decade, the national government, with the ILO's support has progressed towards norms and standards relating to OSH. However, as mentioned earlier, informal economy, inadequate infrastructure, inter province co-ordination and lack of trained human resource remain major challenges in realizing the goals and commitments of the government.

In terms of OSH issues, sector specific approaches are still nascent and especially challenging is the task of having a comprehensive database that could give empirical understanding of the OSH scenario in Indonesia. While the government, through tripartite involvement, has adopted national OSH programmes and profile, reliable and consistent data on OSH is still not available.

Available data shows decline in number of total reported cases of occupational injuries from 99,023 in 2005 to 10,034 in 2009. Also, the number of fatal occupational injuries decreased from 2,045 in 2005 to 66 in 2009. Per 10,000 registered workers, this represents a fall from 1.6 per cent to 0.05 per cent<sup>48</sup>. Decline was also noted in non-fatal occupational injuries, which came down to 9968 in 2009 from 96978 in 2005 (from 6.4 per cent to 1.0 per cent based on non-fatal injuries per 10,000 registered workers). This decline was noted in all types of non-fatal injuries. However, the data, especially in case of non-fatal injuries needs to be taken with caution as substantial gaps remain in recording and reporting of injuries.

More recently, there were 4,777 cases of work accidents, 87 of work-related diseases and 47 of poisoning in first semester of 2011<sup>49</sup>. Also, out of a total of 4,057 companies inspected, 3,517 were given warning letters by inspectors to bring their practices into compliance with the law. This indicates that adherence to the measures specified through laws and regulations are still weak and needs substantial awareness and capacity building measures. According to the available reports on OSH, Indonesia

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<sup>47</sup> Indonesia has a long-term development plan for the period 2005-25, divided into five medium term plan. Medium term plans have their own priorities as per the macro-environment.

<sup>48</sup> Decent Work Country Profile, Indonesia, ILO 2011

<sup>49</sup> ILO CO Jakarta

still records high numbers of accidents and injuries with substantial expenditure on compensation and health care. Apart from accidents and injuries at work, occupational health concerns also include HIV and infectious diseases such as influenza.

The apex administrative body for labour inspection in Indonesia is the DG of Labour Inspection. The key challenges towards strengthening labour inspection system include inadequate coordination between the central and regional governments on labour inspection, inadequate training for labour inspectors, poor infrastructure and lack of technical equipment, the changing nature of employment relationships, and the need to extend protections to vulnerable workers in the informal economy<sup>50</sup>. The most significant challenge however is the shortage of labour inspectors while the number of registered works has been increasing. As per the ILO CO Jakarta, there were 1,468 active labour inspectors at the end of 2010 at the provincial and district/city levels, with an additional 124 inspectors at the national level for a total of 1,592 labour inspectors. Moreover, the distribution of labour inspectors is uneven with high concentration in Java and Sumatra region while about 150 districts/cities are without labour inspectors.

Indonesia provides an employment injury benefit (Jamsostek) through a law of 1992 as a social security scheme to compensate injured workers. In 2006, the Government tried to extend Jamsostek (social security) coverage to self-employed workers and to provide injury benefits particularly for workers in informal employment.

The Committee of Experts on the application of Conventions and Recommendations has in its comments hinted to points of weakness in the labour inspection system, amongst others a lack of coordination by a central authority following a decentralization process of the labour inspection system, and lack of communication between the local governments, under which the labour inspectors operate, and the central authority.

### **3. Labour Administration and Legal Framework**

The labour portfolio is governed by the Department of Manpower and Transmigration (DOMT), Indonesia. DOMT consists of seven (7) Directorate Generals and supporting units. Each Directorate General consists of several Directorates and is supported by a Secretariat. The supporting units include a Secretariat General, Inspectorate General, Board of Research, Development and Information, and Assistants to the Minister. The seven (7) Directorate Generals (DG) are:

- ▶ DG of Training and Productivity
- ▶ DG of Domestic Employment Placement
- ▶ DG of Overseas Employment

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<sup>50</sup> Fact Sheet on Labour Inspection in Indonesia, Ministry of Manpower and Transmigration, Govt of Indonesia and the ILO 2011

- ▶ DG of Industrial Relations and Workers Social Security
- ▶ DG of Labour Inspection
- ▶ DG of Settlement Preparation and Transmigration Placement
- ▶ DG of Transmigration Community and Regional Development

Apart from the DGs and supporting units, there are tripartite consultative bodies viz., National Tripartite Body; National Wage Council; National Productivity Council; National Training Council; and National Occupational Safety and Health Council. Following the Law on Decentralisation in 2000, the Government of Indonesia delegated the responsibility to enforce occupational safety regulations to local governments. In 2007, the government enforced zero accident tolerance and formed the National Occupational Safety and Health Council (NOSHC), which is a tripartite body consisting representatives from employers, trade unions, related government ministries, and experts from universities and research institutions. NOSHC is mandated to advise the MOMT on issues related to occupational safety and health. It also facilitates safety audits and conducts a safety campaign through zero accident competition.

The major national labour laws with corresponding implementing regulations, includes the following:

Act No. 3 of 1951 concerning Labour Inspection	Act No. 21 of 2000 concerning Trade Unionism
Act No. 1 of 1970 concerning Occupational Safety	Act No.13 of 2003 regarding Manpower mandating all enterprises to apply OSH management system to protect workers' safety and optimal productivity
Act No. 7 of 1981 concerning Company Obligation to submit Annual Company Report	Act No.2 of 2004 concerning Industrial Relations Dispute Settlement
Government Regulation No. 8 of 1981 concerning Wage Protection	Act No. 39 of 2004 concerning Overseas Employment
Act No. 3 of 1992 concerning Workers Social Security	Act No. 40 of 2004 concerning National Social Security.
Act No. 11 of 1992 concerning the Pension Scheme	The Ministry Regulation (PER.05/MEN/1996) for OSHMS implementation, including audit (for enterprises with 100 or more workers and/or high workplace risk).

#### 4. International Labour Standards in Indonesia

Indonesia has ratified eighteen (18) ILO Conventions including the eight (8) ILO Core Conventions and two (2) Priority Conventions, an indication of ILO’s close coordination and the national government’s commitment to international norms to attain decent work conditions. The list of ILO conventions ratified by Indonesia is listed in the table below:

Indonesia: Ratified ILO Conventions
<p><b>Core Conventions</b></p> <p>C087: Freedom of Association and Protection of the Rights to Organize</p> <p>C098: Right to Organize and Collective Bargaining</p> <p>C029: Forced or Compulsory Labour</p> <p>C105: Abolition of Forced Labour</p> <p>C100: Remuneration for men and Women Workers for Work of Equal Value</p> <p>C111: Discrimination in Respect of Employment and Occupation</p> <p>C138: Minimum Age for Admission to Employment</p> <p>C182: Prohibition and Immediate Action for the Elimination of Worst Forms of Child Labour</p>
<p><b>Priority Conventions</b></p> <p>C081: Labour Inspection</p> <p>C144: Tripartite Consultations to Promote the Implementation of International Labour Standards</p>
<p><b>General Conventions</b></p> <p>C019: Equality of Treatment for national and Foreign workers as regards Workmen’s Compensation for Accident</p> <p>C027: The Marking of the Weight on Heavy Packages Transported by Vessels</p> <p>C045: The Employment of Women on Underground Work in Mines of All Kinds</p> <p>C069: The Certification of Ships’ Cooks</p> <p>C088: Employment Service</p> <p>C106: Weekly Rest in Commerce and Offices</p> <p>C120: Hygiene in Commerce and Offices</p> <p>C185: Seafarers Identity Documents Convention (Revised) 2003</p>

The Decent Work Country Programme for Indonesia 2006-10 defined application of labour standards, including strengthened labour administration as a programme strategy. The current DWCP (2012-15), under its outcome ‘Labour administration provides effective services to improve working conditions and environment’ aims at

improving quality of labour inspections at the national and provincial levels and providing effective technical assistance to the national government towards developing knowledge products, including National OSH profile for better implementation of OSH at workplace. BWI, SCORE, ILO/Norway Gender Mainstreaming project, ILO/Norway project on improving labour administration, and ILO/Korea supported project on OSH are among some of the means of action towards this outcome.

## **5. The ILO in Indonesia**

The ILO CO Jakarta works closely with MOMT and tripartite constituents, through the National OSH Council. The National OSH Council, known as DK3N, developed national programme on OSH in 2007 wherein it outlines its commitment towards harmonization of laws, regulations and standards towards OSH including support towards ratification of C187.

## **Program of National Occupational Safety and Health (OSH) 2007 – 2010, Indonesia**

**Vision:** The coming into being of Occupational Safety and Health (OSH) culture in Indonesia

### **Missions:**

- Enhancing synergistic coordination among stakeholders in occupational safety and health
- Improving the independence of the world of business in applying occupational safety and health
- Increasing competition among and the competitiveness of OSH workers

### **Policies**

1. Enhancing coordination based on mutually supportive partnership.
2. Empowering entrepreneurs, workers and the government so that they are able to apply and enhance occupational safety and health culture.
3. The government plays a role as both facilitator and regulator.
4. The application of OSH management system (SMK3) as an inseparable part of the company's management.
5. Understanding and application of sustainable occupational safety and health norms.

### **Strategies**

1. Increasing the commitment of employers and workers in the field of OSH.
2. Enhancing the roles and functions of all sectors in the implementation of OSH.
3. Enhancing the employer and the worker's ability, understanding, attitude, and behavior in relation to occupational safety and health culture.
4. Implementing occupational safety and health through risk management and the management of risky behavior.
5. Developing occupational safety and health assessment system (OSH system audit) in the world of business.
6. Accompanying and strengthening micro, small and medium enterprises (UMKM) in applying and enhancing occupational safety and health culture.
7. Improving the application of an integrated occupational safety and health information system.
8. Instilling understanding on occupational safety and health from early age to higher education.
9. Enhancing the role of professional organizations, universities, practitioners and other components in society in improving the understanding, ability, attitude, [and] behavior associated with OSH culture.
10. Enhancing the integration of occupational safety and health in all scientific disciplines.

*Source: Vision, Mission, Policy, Strategy and Program of National Occupational Safety and Health (OSH) 2007 – 2010, The National OSH Council (DK3N), Indonesia*

The ILO's health and safety mandate in Indonesia includes supporting national tripartite constituents in developing and applying a preventive safety and health culture. Ratification of the ILO convention on labour inspection (C81) in 2004 serves as an important milestone, following which a number of steps have been taken by the national government towards strengthening labour inspection services with active involvement of workers' and employers' organisations.

ILO's support in the country also includes helping workers, employers and governments respond to the challenges created by HIV/AIDS and by influenza pandemic through its HIV and AIDS programme and Avian Influenza and the Workplace project. The ILO's key programmes and activities relating to OSH in Indonesia are as follows:

Programme/Activity	Description
<p>Avian Influenza and the Workplace in Indonesia</p> <p>January 2008 - December 2009</p>	<p>Supported by UN Central Fund for Influenza Action, the project aims to promote awareness on preventing the spread of Avian Influenza in the workplace and preparedness measures on occupational safety and health issues to reduce risks and impact of any outbreaks or pandemic. This includes providing a map of informal economy and assessing workers knowledge, attitude and practices (KAP); developing action oriented training methods using best practices and standard measures to prevent the spread of transmissible diseases in the workplace; and strengthening tripartite constituents' institutional involvement and capacity to support project implementation.</p>
<p>Business Continuity in Time of Pandemic - Protecting workers and businesses through preparedness measures</p> <p>9 months (July 2010 – March 2011)</p>	<p>Supported by Central Fund for Influenza Action (CFIA), this USD 127421 project aimed to raise awareness, share information and promote good practices on OSH issues relating to workers' rights and protection through existing network of trainers, to help prevent the spread of Animal and Human Influenza in the workplace, and promote capacity building for businesses, notably SMEs, to enhance preparedness in the face of the current and future waves of pandemic, and to devise strategies to reduce its possible impact and to promptly recover.</p>
<p>JILAF-KSPI POSITIVE Programme in Indonesia</p>	<p>Promotes action-oriented training in OSH by trade union initiative in industrially developing countries. The training disseminates knowledge among the unions on OSH, and know-how to improve the work conditions especially at the plant level.</p>
<p>Strengthening labour administration and labour inspection services in selected countries (GLO/10/59/NOR)</p>	<p>IDN 151 linked to P &amp; B 2010-2011 under outcome 11, indicator 11.2: strengthening labour inspection systems in line with international labour standards and the Strategic Policy Framework 2010- 15.</p> <p>The project is a follow up on the CEACR recommendations and aimed at improvement of reporting and communication within the labour inspection system, the design of an enforcement policy and the design of a training strategy for inspectors in addition to capacity building. The total budget assigned to Indonesia in this multi-country project is US\$ 84 275</p>
<p><b>IDN 803: OSH profile</b></p>	<p>National OSH profile and Programme: The national programme 2009-15 is currently underway and the national OSH profile is due to be</p>

Programme/Activity	Description
and programme	launched in Sept-Oct 2013.
Better Work Indonesia (BWI)  5 years programme, starting July 2011.	Better Work Indonesia combines independent assessment with advisory and training services to support practical improvement through workplace cooperation. Using a specially designed online information management system, factories can share assessment and remediation information with their buyers. The main aim is to reduce duplication of auditing, allowing buyers to reduce their own auditing and redirect resources to fixing problems and focusing on sustainable solutions.

Apart from these, programmes aimed at workplace improvement measures such as SCORE and WISE also positively contribute to awareness and practices on improved OSH conditions and social dialogue.

In the recent past, the ILO has supported capacity building of labour inspectors and has provided technical assistance to the government in implementing the 2010 Presidential Decree on improving the promotion and coordination of labour inspection services in the country. A tripartite consensus on Labour Inspection was reached in October 2011, which will help workers' and employers' organizations to engage in labour policy and consequently promote compliance with labour legislations.

The current National Programme on OSH 2009-2014, which envisages a strengthened safety and health culture by 2015, along with the OSH legislations, forms the current national OSH framework. This is further supported by the National Commitment to the Implementation of OSH measures, which was signed in October 2011 by tripartite constituents and other key national partners.

Providing relevant and timely OSH services to small-scale businesses, within a collaborative framework involving social partners at both national and provincial levels is one of the challenges identified under the current DWCP. Strengthening promotional and outreach OSH capabilities (through enterprise level initiatives and through the inclusion of OSH curricula into vocational education systems) are also envisioned in the DWCP of Indonesia.

## 6. Key Achievements

Some of the recent developments (2010-13) in OSH through ILO support are as follows<sup>51</sup>:

- ▶ MOMT is implementing the national OSH programme 2009-2014, which envisages a safety culture by 2015 (MOMT). Ministry of Health also has its programme on occupational health.
- ▶ The National tripartite constituents along with professional associations signed the National Commitment to OSH in October 2011. The national constituents also signed a declaration on labour inspection in 2011.
- ▶ Substantive training on labour inspection in 2010-11 (LAB/ADMIN), primarily on general inspection while OSH inspection is being integrated in the programme since 2012;
- ▶ Indonesia in cooperation with Singapore organized ASEM conference in October 2011 (EU-ASEAN)
- ▶ Training for labour inspectors e.g. WISE and chemical safety carried out under ILO/ Korea programme;
- ▶ Workers' organization advocated for revision of Act No. 1 (Work Safety Act) as well as highlighted the need for initiatives to strengthen OSH in mining and construction;
- ▶ In April 2012, the Directorate General of Labour Inspection of the Indonesia Ministry of Manpower and Transmigration established the country's first ever tripartite Labour Inspection Committee. The Committee is governed by Ministerial Decree No. 10 of 2012 and is designed to strengthen the labour inspection system in Indonesia through the use of social dialogue.
- ▶ National OSH profile is prepared and will be launched towards the end of 2013.
- ▶ Ratification of C187 anticipated towards the end of 2013
- ▶ Indonesia emerges as one of the strong members of ASEAN OSHNET with potential of positively influence other member nations of ASEAN.

## 7. Issues and Concerns

In light of the 2000 decentralization of OSH responsibilities to local government, awareness creation among the tripartite groups and OSH-related institutions at the local levels would be the highest logical priority.

Lack of institutional capacity, especially among labour inspectors emerges as a key issue.

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<sup>51</sup> Briefing Note, OSH and related issues in Asia and the Pacific, 2012, ILO ROAP; and ILO DWCP Indonesia 2012-15

The low national institutional capacity to enforce OSH regulations coupled with the lack of human and financial resources, especially among inspectorates is a major barrier in assuring adherence to the laws and protocols.

The third important issue relates to the lack of OSH information gathering and reporting systems. This is of particular importance to properly ensure workers employment injury benefits.

Finally, low awareness of OSH issues among workers and employers, as evident from inspection records (more than 85 % enterprises were issued warning letters) on low adherence is a definite area of concern.

## 8. Future Directions

ILO's close collaboration with the Ministry of Manpower and Transmigration has resulted into a number of positive and long lasting results in the area of OSH in Indonesia. Strategic collaboration with DG-LI and National OSH council has also strengthened tri-partite involvement in developing legal framework for OSH and its implementation. This, coupled with a number of enterprise level capacity building activities on OSH and related issues, provides a significant ground for good practices and lessons for future interventions on OSH. The recent advances in area of OSH in Indonesia, however, also open up a number of challenges and opportunities. Some of the emerging priority areas where substantial efforts are required by the office are:

- i. **Strengthening OSH database:** Reliable and consistent data on accidents, injuries, occupational diseases, social security expenditure and loss of person- days due to OSH issues is one of the most challenging areas in Indonesia given the fact that a large number of enterprise and occupations are in the informal sector and there are regional disparities in terms of available human and technological resources required for recording and reporting such database. Nonetheless, absence of empirical data will render the national profile tentative and can adversely affect planning and resource allocation.

*Plausible options for action for advancing OSH agenda in Indonesia:*

- i. Training of tripartite constituents at the local and national levels with special attention given to the needs of the National Occupational and Safety Council members.
- ii. Capacity building for national and local government officials working on OSH related issues on OSH monitoring and reporting protocols and systems. Particularly attention should be given to the capacity building needs of national and local inspectors.
- iii. Support national efforts to strengthen OSH information systems, starting with collection and dissemination of occupational-related injuries and diseases.
- iv. Raise workers and employers awareness through practical training materials and knowledge products.

- ii. **Mapping of priority sectors and geographical regions for maximizing impact/ Advancing sectoral approaches in OSH:** Advancing the current OSH portfolio, the ILO CO needs to focus in terms sector as well as geography. Substantial knowledge and experiences gained during the past decade should be used to prioritise areas where the ILO could focus its assistance in near future (for instance high-risk sectors, SMEs, informal sectors, agriculture, fisheries etc). Similarly, given the vast geographical spread, mapping of clusters for focussed intervention should be done for pilot interventions and replication of successful approaches.
- iii. **Gender mainstreaming in OSH:** The gender aspect in OSH has remained rather under-represented although a number of TC interventions have focussed on sectors predominated by women workers. Gender concerns in OSH in the context of Indonesian socio-economic realities needs to be assessed and utilised for specific advocacy and programming.
- iv. **Strengthening national level expertise and institutions:** Lack of institutional and technical capacity is one of the key challenges in realising the OSH goals in Indonesia. Sustained and cost-effective capacity building requires strengthening national level institutions and pool of resources. It is understood that the MOMT has already requested for technical assistance to strengthen in-house capacity to provide better OSH services to SMEs. As elaborated in the current DWCP, the ILO is also making efforts towards strengthening the national capacity to promote OSH (e.g. through targeting safety officers at enterprise level, mainstreaming OSH into education system etc). Considering that capacity building measures are substantial and require rapid adaptation depending on the economic scenario, the ILO may consider supporting national institutions, professional bodies, and trainers through a concrete strategy in the coming years.
- v. **Supporting tripartite constituents to elicit resource commitments by the national government and international donors:** Capacity building measures, however substantial, cannot compensate for inadequate financial and human resources at the national level. The ILO, through tripartite involvement should advocate for resource allocations towards strengthening labour administration and OSH measures during formulation of national plans.
- vi. **Strengthen implementation of ratified conventions and assistance towards ratification remaining critical OSH conventions:** Indonesia ratified C081 in 2004 and will hopefully ratify Convention 187 by the end of 2013. The ILO should have clearly defined areas of technical assistance for implementation and review of progress on these conventions and subsequent legislations/regulations. Building upon the positive collaboration among the tripartite constituents, the ILO in Indonesia should support the government in ratifying relevant conventions (relating to particular branches of economic

activity and protection against specific risks).

vii. **Documentation and dissemination of good practices and lessons learned:**

Despite implementing a number of TC and TA interventions, documentation (process and results) and dissemination has remained weak. The ILO CO should consider comprehensive documentation and reporting of its achievements and challenges for the benefit of other countries who face similar OSH situations. As a learning measure, evaluation of OSH related CPOs might also be considered by the CO or ROAP.

# Case Study 8: International OSH Information Centre (ILO-CIS)

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## 1. Background

Founded in 1959, CIS is the knowledge management arm of SafeWork<sup>52</sup> of the International Labour Organization (ILO). It was initially founded as a joint endeavor of the ILO, the International Social Security Association (ISSA), the European Coal and Steel Community (one of the predecessors of the European Union) and occupational safety and health institutions in 11 European countries. Over time, CIS has expanded its reach to include members from all regions of the world. Currently it covers 110 countries and has 04 National, 2 Regional and 44 Collaborating Centres.

Its goal is to ensure that workers and everyone concerned with their protection have access to the facts they need to prevent occupational injuries and diseases.

The **purpose**<sup>53</sup> of CIS is

*“to contribute to the promotion of the health, safety and well-being of workers in all branches of economic activity by systematically collecting, scanning and abstracting all useful data, and by making the results of this analysis available in suitable form to all concerned”*

-Marcel Robert, Founder and First Head of the CIS

The task of CIS is to collect new, reliable and significant information published around the world dealing with OSH; to index and summarize this information in order to make it more easily usable; and to disseminate it in the most accessible form possible. This is done through a number of well established initiatives including OSH Encyclopedia; CISDOC (repository of OSH literature); LEGOSH-Legislative texts on OSH from around the world; and CIS Network. As evident, updation of databases is done through information sharing by the CIS network and collaborating institutions from different regions/countries. By virtue of being a knowledge management hub for OSH issues, Workers and Employers Organisations, enterprises, OSH researchers & practitioners, academia and governments are the key clients of CIS databases.

CIS continuously monitors world literature on occupational safety and health through its contacts with publishers and with about 150 centres at the national and regional

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<sup>52</sup> SafeWork is the programme within the International Labour Office (ILO) devoted to occupational safety and health (OSH) matters.

<sup>53</sup> As quoted in CIS Fifty years of history, International Labour Office, Geneva, 2009

level around the world. In addition to covering up-to-date OSH literature, CIS also provides a basic reference service to its worldwide users by delivering information on conferences and educational opportunities in the OSH field, as well as in maintaining directories of various kinds.

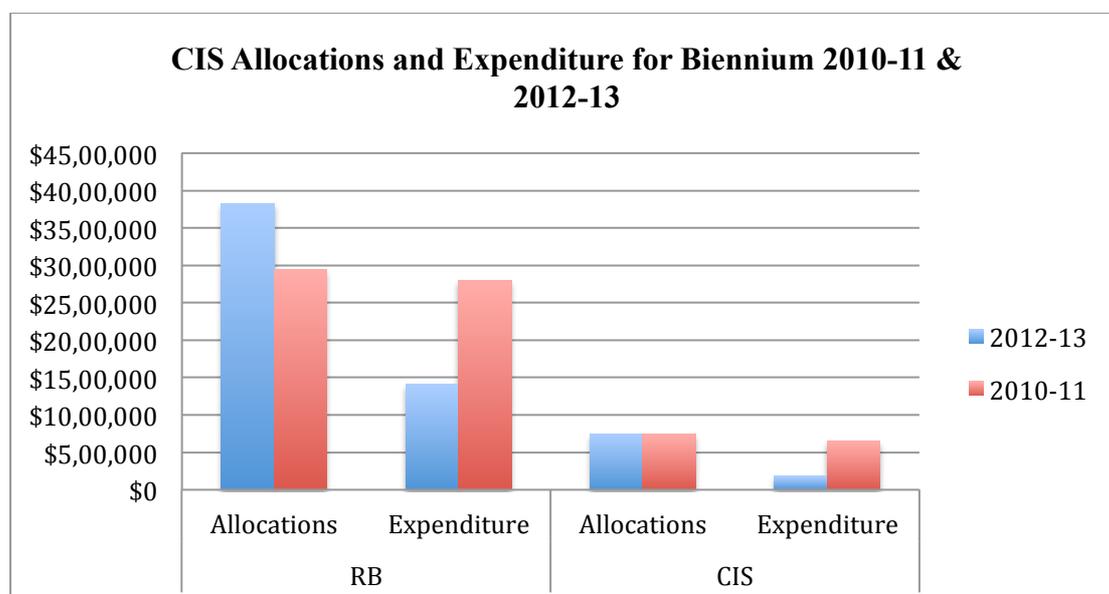
Most dissemination of CIS resources is through internet (primarily through the SafeWork website) while CIS also organises/participates in OSH related knowledge events. The management of information on OSH is an essential basis for the establishment and implementation of OSH policies and programmes at the national and enterprise levels.

The network of CIS Centres contributes to the exchange of information among persons responsible for the establishment and implementation of national policies and programmes.

## 2. CIS Institutional and Financial Arrangements

With the approval of establishing CIS in May 1959, the Governing Body allocated funds for its initial operations. Additional funding was subsequently provided by the European Steel and Coal Community, one of the precursors of the European Union.

At the beginning, the Head of CIS was responsible to the Director-General of the ILO. Part of CIS's budget is approved by the Governing Body, to whom a report of its activities is presented every biennium.



Since its establishment in 1959, CIS has been submitting its programme and budget proposals directly to the GB and functioned rather as an autonomous institution although tied to the main OSH unit. In 2007, CIS was brought under direct supervision of SafeWork. Under the current arrangement, the programme and budget

proposals of CIS are directly under the SafeWork. While CIS is still viewed as an institution in itself, the practical aspects of planning, budgeting and co-ordinating with other Technical Units are now routed through SafeWork. Under the new structure, SafeWork comes under the Governance and Tripartism department of the Policy portfolio. The implications of this changed arrangement on CIS's functioning are not clear, although one may assume that it can potentially curtail the flexibility enjoyed by CIS in decision making and collaborating with other technical programmes of the ILO.

Reference points here could be the model of ITC and/or the 'mainstreaming model' where CIS functions as a cluster within SafeWork and also coordinates with other units contributing to OSH outcomes. In either case, the administrative, programmatic and financial planning and reporting lines need to be clearly delineated, including at P&B level. The proposed institutional rearrangements, where OSH may be treated as a cross cutting theme within the ongoing programmes (especially DWCPs), the positioning of CIS vis-à-vis SafeWork and other Technical Units needs to be clear. Resource implications for CIS also need to be taken into account since its functions are unique in many ways.

### 3. Issues facing CIS

**Keeping up with Technological Advancements:** Evidences suggest that since its establishment until 1980s, CIS has used the latest available technologies in collecting, managing and disseminating information. The in-house expertise, in terms of these techniques was at par with the global standards. However, with the advent of web based technologies and subsequent advancements in internet based repositories, the Centre needs to constantly compete with other available sources of OSH information. A lot of it has to do with content formats, access options, navigation options, constant monitoring of hits/serfs, and interaction with users for seeking feedback. It also means that relevant technical (IT) competency needs to be built within the Centre.

**Business model/Financial sustainability:** CIS, considered as an administrative entity, is allocated biennial budgets through GB approval under RB and special account (account 63). While it is assumed that some revenue will be generated through marketing/sales of its products and subscriptions, these sources of revenue have not been reviewed seriously in the recent past. Unlike other ILO divisions, CIS has not worked towards TCs in the area of OSH knowledge management services. The Centre was granted large sum for revival in late 90s. However, following the current biennia, and especially with the restructure on anvil, the business model will need to be reviewed. CIS may need to target revenue generation through sales, service fee for knowledge management services and possibly through TCs.

**Lack of evidences (assessments) to showcase relevance, quality and user-friendliness of available resources:** While all the key products of the CIS i.e. the OSH Encyclopedia, LEGOSH and CISDOC are unique in nature, sufficient reviews have not taken place to build a case for continuing, revising, or discontinuing these resources. This is not to challenge the usefulness of these resources. However, it is also important to build a business case for generating resources and retaining the lead position in the information market. Low revenues from the 4<sup>th</sup> edition of Encyclopedia is an example of how lessons were not drawn from its failure to generate expected revenues and impacted the later attempts to update the encyclopedia (*refer section on respondents' feedback for more on relevance, effectiveness and accessibility of OSH knowledge resources*).

**10 key challenges for CIS:**

1. Adopting a need-based approach
2. Mobilizing available expertise in OSH
3. Establishing a scientific advisory committee (SAC) for guiding overall knowledge products development
4. Investing strategically in technological support systems (e.g. Encyclopaedia)
5. Achieving sustainability through adequate funding
6. Reviewing the CIS network structure and governance modalities
7. Targeting low and middle income countries
8. Facilitating international cooperation on OSH knowledge and information
9. Building institutional capacity to manage knowledge and info in OSH at country level
10. Assessing the impact and benefit of OSH knowledge-based

*(Based on the CIS Director's presentation during 50<sup>th</sup> Meeting of CIS Network, Geneva, November, 2012*

**Networking Model of the CIS.** Internal review and annual meeting records show that there are membership and outreach issues with the current networking model. By CIS's own admission, the directory of Network Centres is not updated and there are issues of outreach, especially in LMI countries. Part of this is attributed to the outdated model of networking (where many centres are members by virtue of their being preferred centres by national governments while their contribution to CIS remains unquestioned) while many new generation dynamic institutes working on OSH issues at local level are left out. The other factor is related to shortcomings in defining the model of interaction between CIS and its network centres. It appears that this relationship is based on understanding rather than concrete commitments.

**Functional priorities.** CIS is conceptually and functionally the knowledge management arm of SafeWork/ILO. Internal reviews, however, show that the Centre

could benefit from more dynamic interaction with other ILO units, constituent partners, and network members. Currently, CIS is functioning like a repository of OSH related data and literature rather than a knowledge management agency. In addition, submission from members during annual meetings also shows that partners expect CIS to review the current system of networking (membership criteria; defined roles and responsibilities of partners in enriching and disseminating CIS resources; capacity building of partners for accessing CIS resources). As mentioned earlier, while the core competency of managing OSH resources is available at CIS, expertise in the area of information technology is an obvious shortcoming. As such, CIS may need to review and set priorities in the following areas:

- ▶ Core functions in areas of data and knowledge management
- ▶ Building relationship with other ILO units (at HQ, regional, and when needed, at national levels)
- ▶ Expanding the network to include more dynamic and accessible partners.
- ▶ Managing regular communication with network and constituent partners
- ▶ Use of updated technology for managing and disseminating available information
- ▶ Setting up regular monitoring mechanism for products, their access and usage.

In addition, other global initiatives on OSH (such as EU-OSHA's initiative OSH-wiki) need to be taken into account to avoid duplication of efforts.

#### **4. Feedback on CIS' Effectiveness**

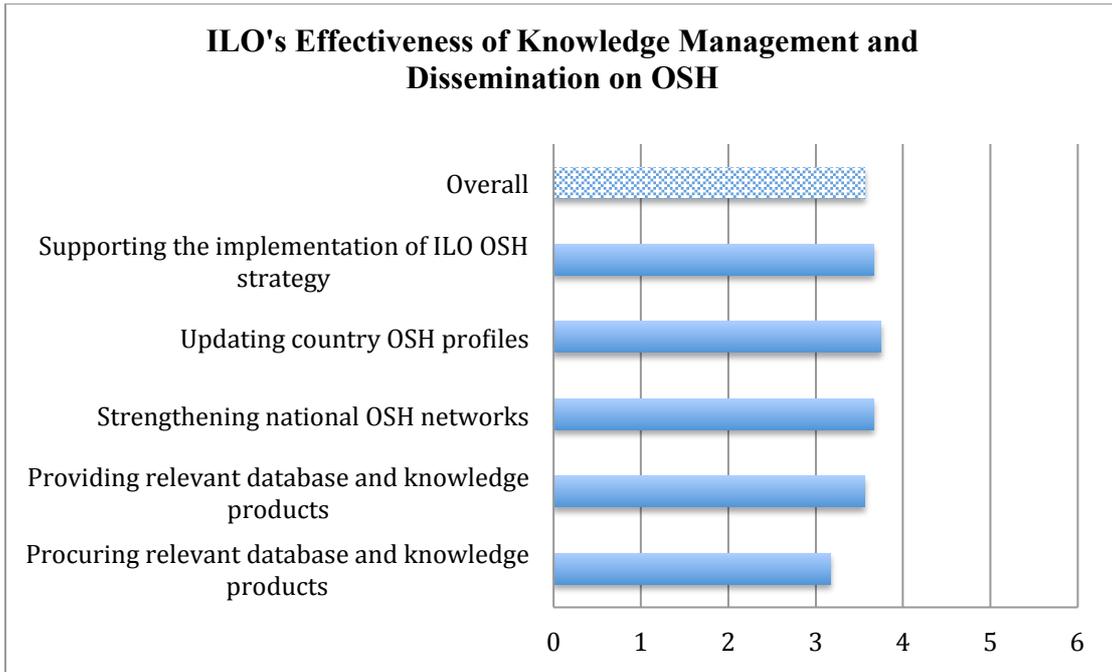
This section presents some of the insights shared by country offices; tripartite constituents; and external experts/institutions associated with CIS. The responses were collected through customized surveys sent to the aforementioned respondents groups.

The survey sought to assess respondents' perspectives on ILO's effectiveness in terms of knowledge management and dissemination on OSH, relevance and effectiveness of CIS as OSH knowledge hub, and suggestions for improving it.

Overall, ILO's effectiveness as knowledge management and dissemination on OSH<sup>54</sup>, was rated as 'somewhat satisfactory. Procuring relevant database and knowledge products (from countries) received particularly low ratings. This was also reiterated during evaluation mission wherein constituents and experts noted inadequacy of resources/products relevant to middle and low-income countries.

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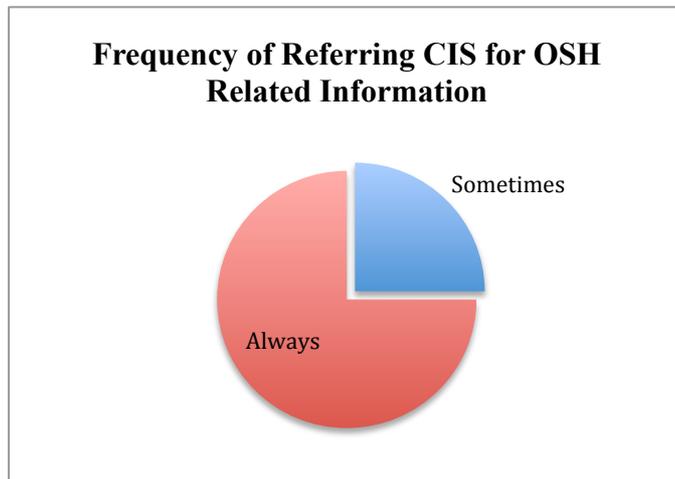
<sup>54</sup> These ratings are entirely based upon the survey results and do not include evaluators' scores.

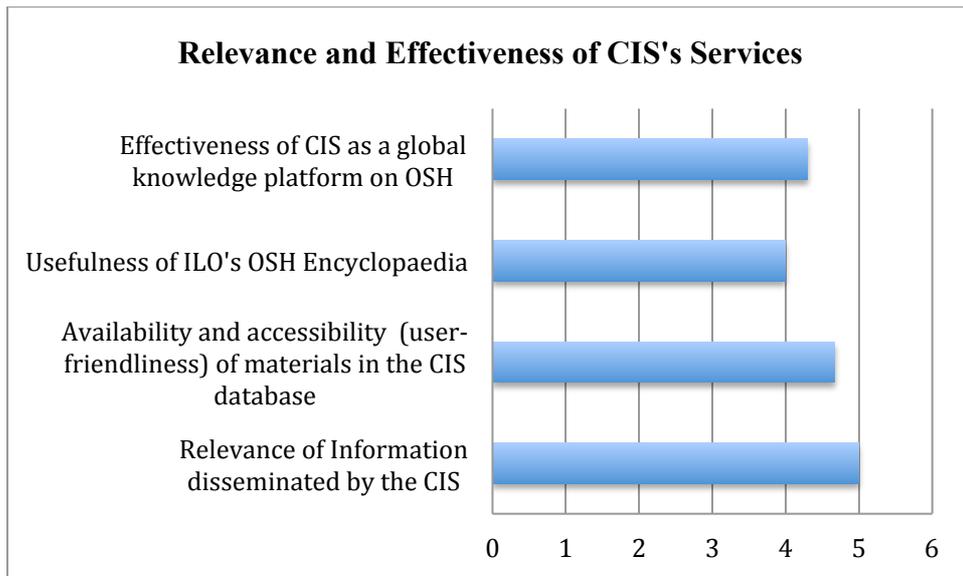


*Based on 6- point scale: 1- Very Unsatisfactory; 2- Unsatisfactory; 3- Somewhat Unsatisfactory; 4- Somewhat Satisfactory; 5-Satisfactory; 6 -Very Satisfactory*

However, OSH experts regularly access CIS for OSH information in their work at the national level. Other most accessed sources of information on OSH are WHO, NIOSH, OSHA, CCOHS, IARC, ACGIH, IOSH, ASSE, NSC.

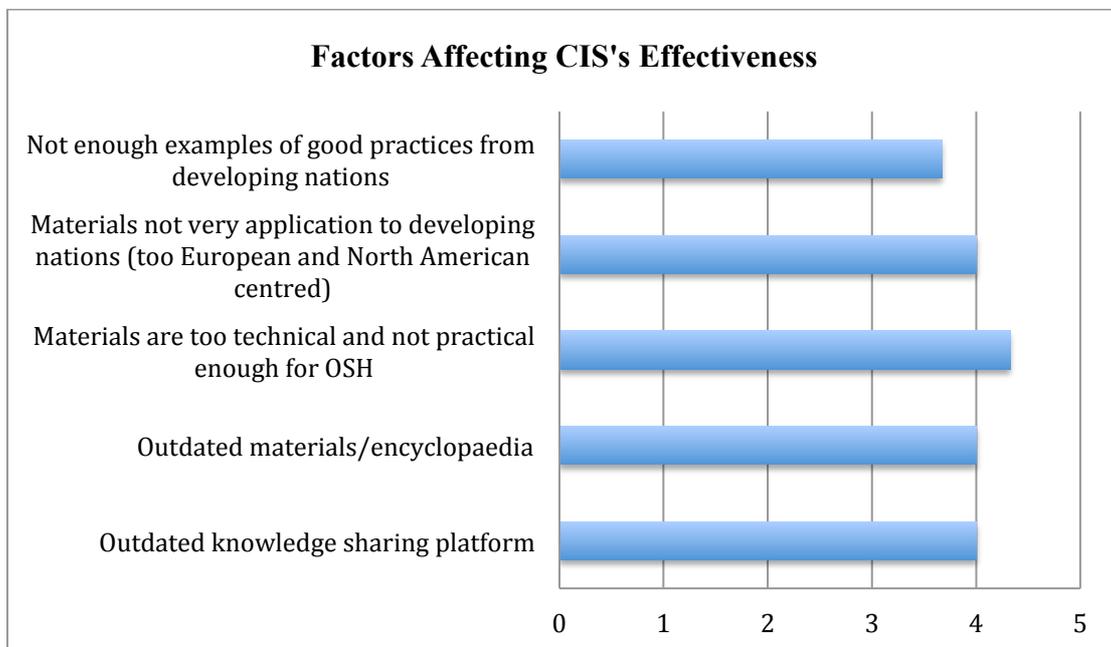
Relevance of information disseminated through CIS and effectiveness of CIS as a global knowledge platform on OSH was rated satisfactory. Availability and accessibility of materials in the CIS database was also rated satisfactory. However, usefulness of OSH encyclopedia is considered 'somewhat satisfactory'.





*Based on 6- point scale: 1- Very Unsatisfactory; 2- Unsatisfactory; 3- Somewhat Unsatisfactory; 4- Somewhat Satisfactory; 5-Satisfactory; 6 -Very Satisfactory*

Some of the most pressing barriers to effectiveness of services being provided by CIS include lack of practical tools (materials being too technical for wider reference), knowledge products being European/American centered affecting their applicability in low resource settings. It seems that reference materials and the knowledge-sharing platform available through OSH need to be updated as per the need of various user categories.



*Based on 5-point scale: 1-Not Important; 2-Slightly Important; 3-Moderately Important; 4- Very Important; 5-Extremely Important*

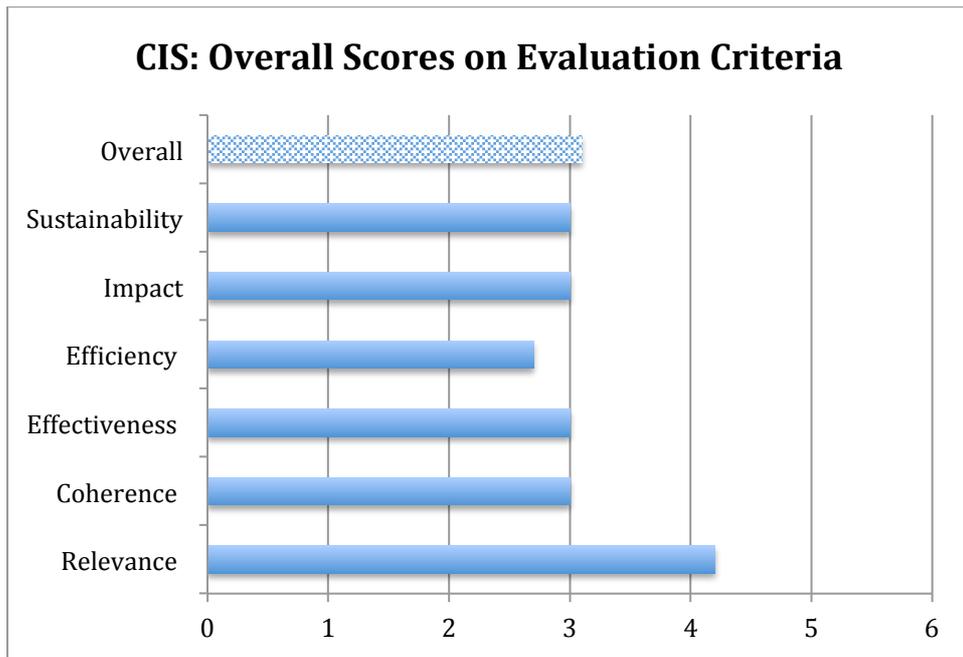
The survey indicates that enhancing CIS' visibility as OSH knowledge hub at the country level is an important consideration. The second most common suggestion is

regarding making relevant database and practical tools available and accessible to potential users. Respondents across the categories also point to the need of making CIS more interactive and user-friendly.

Suggestions for CIS	
By enhancing its visibility as OSH knowledge hub at the national level	100%
By establishing links to practical tools developed by OSH networks worldwide and making them accessible	61%
By maintaining database of relevant knowledge products accessible to users	59%
By developing user-friendly knowledge sharing platforms	54%
By having more effective interaction with national OSH networks	48%
By developing/updating database on national legislations	39%
By expanding membership of OSH networks and institutions affiliated to CIS	14%

Based on the feedback received from country offices; DWTs; constituents; external OSH experts and institutions; as well as evaluators' own assessments on evaluation criteria, the overall composite score for CIS is rated as 'somewhat unsatisfactory'.

The analysis shows that while the relevance of CIS is recognised, coherence with OSH initiatives at the national levels is not up to the desired levels. Similarly, efficiency in terms of competitiveness, resource generation and resource use (for instance high investment in publishing the OSH encyclopaedia, without reviewing its actual usage) is also rated 'unsatisfactory'. Effectiveness, described in terms of procuring and disseminating national database, updating OSH profiles, supporting implementation of ILO OSH strategy, and co-ordination with national networks borders on being 'somewhat unsatisfactory'



*Based on 6- point scale: 1- Very Unsatisfactory; 2- Unsatisfactory; 3- Somewhat Unsatisfactory; 4- Somewhat Satisfactory; 5-Satisfactory; 6 -Very Satisfactory*

## 5. Recommendations and Way Forward

CIS in its proposed revised strategy ‘Knowledge for Prevention Initiative 2013-17<sup>55</sup>’ has laid out five objectives for itself. These are: Mobilize and facilitate sharing of OSH knowledge and information; Enhance OSH Knowledge and information networking activities; Observe and report on the development and sharing of knowledge in OSH globally; Build institutional capacity to acquire and use OSH knowledge and information; and Consolidate the governance of CIS within the ILO. Review shows that most of the issues identified by evaluators and stakeholders have been echoed during the CIS discussion on the ILO OSH Knowledge and Information Strategy, November 2011 (refer Annex IV) wherein participants emphasised the need of making the web-site more user-friendly and target available information to specific beneficiary group. Participants also brought up the issue of defined expectations (roles) of network members and enhancing visibility through use of social media.

Based on the assessments and feedback from various respondents groups, following priority areas emerge for the CIS:

- i. **Clearly define CIS’s position as Knowledge Management Institution on OSH:** Positioning of CIS as OSH knowledge management centre would require a fair assessment of other agencies in the field and also the way CIS ought to interact with other relevant units with ILO. Enhanced co-ordination with other ILO Technical Units (ACT/RAV; ACT/EMP; Gender; LAB/ADMIN; SECTOR; ITC), particularly those working in close co-

<sup>55</sup> A summary of the Knowledge for Prevention Initiative 2013-17 is provided in the annexure I

ordination with Workers' and Employers' organisations is a definite area where CIS needs to focus in order to be relevant and responsive to ground level OSH data and information requirement. Areas of collaboration in this regard need to be defined along with a robust progress tracking mechanism.

- ii. **Establish mechanism to engage experts, including IT experts:** While OSH expertise is present within the ILO and CIS, the Centre needs to work out mechanisms to engage external experts, specifically those with proficiency in using IT for knowledge management.
- iii. **Greater visibility and direct interaction at regional and country levels:** Most stakeholders feel that CIS's low visibility at the national level is a barrier to optimal usage of the available OSH information. The database needs to be more user friendly and interactive. At the same time, the current portfolio of information needs to be revisited to suit the needs of middle and low income countries who expressed desire to have more relevant information (such as best practices, practical tools and guidelines customized for low resource settings).
- iv. **Define roles and responsibilities of network members:** Effective updating and knowledge sharing would require greater sharing of good practices, research, and updation of OSH related data/ information from network partners. The current membership model leaves most of the responsibility of updating/upgrading OSH data on CIS with no clear roles and responsibilities of network partners. Moreover, CIS also needs to take into account the emerging OSH institutions/professional networks in member states that could be effectively linked to the benefit of CIS.
- v. **Define the business and operational model (funding and revenue sources):** As ILO's knowledge management wing for OSH, CIS plays an indispensable role in contributing to the Global Outcome on OSH. As such, the business and revenue models of CIS need to be explored and better defined. With the new organizational restructuring, it is all the more important for CIS to be cost-efficient and explore funding opportunities based on its current strengths and future potential. At the same time, opportunities for collaboration with emerging institutions on OSH related database and information also needs to be identified and explored for leveraging resources and enhancing visibility and outreach. Measures towards cost-effectiveness may include shifting most of the data sources (including the OSH encyclopaedia) to electronic forms and enhancing users' access. Other potential channels of dissemination (such as web-links to most accessed OSH sites) need to be considered in near future.
- vi. **Developing robust monitoring and reporting system:** The proposed strategy ' Knowledge for Prevention Initiative' has defined objectives and

outputs for the duration 2013-17 which may provide the basis for monitoring progress by CIS. However, taking into account the new organizational positioning, CIS needs to consider a more comprehensive results framework with defined linkages to the overall OSH outcomes and indicators for OSH. The ILO's RBM guideline can provide a sound basis for developing such framework with pre-defined indicators and milestones. A sound results framework can also enhance potential for exploring financial resources and collaboration opportunities.

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## **Annex 4. Survey tools used in the evaluation survey**

### **CONTENT**

- 4.1 Survey tool used for HQ level staff
- 4.2 Survey tool used for DWT
- 4.3 Survey tool used for Country level staff
- 4.4 Survey tool used for Constituents
- 4.5 Survey tool used for OSH Institutions and Experts

# HQ Staff Survey Tool - Independent Evaluation of OSH Strategy

This survey is being conducted in the context of a high-level Independent Evaluation of the ILO's Strategy for Occupational Safety and Health: Workers and enterprises benefit from improved safety and health conditions at work. The evaluation report will be presented to the Governing Body in October 2013.

We are interested in your assessment and perceptions of how the ILO can improve the relevance, coherence, effectiveness, efficiency and sustainability of the outcomes aimed at supporting national tripartite constituents' efforts to create safer and healthier work environments as one of the key elements of the decent work agenda. To this end we would like to ask you to complete a short survey. The survey is anonymous and results will be collected and analysed by independent evaluation team. Please complete this questionnaire by **Monday, June 17, 2013**.

Thank you.

Evaluation Team

This information is being collected for analysis purposes and will be treated as confidential. All questions with an asterisk (\*) are mandatory. You will need to answer them in order to progress to the next page.

## \*1. Designation in the ILO office

- Safe Work Specialist
- Specialist from other Units contributing to Outcome 6

## \*2. What is your area of expertise?

- Employment economist
- OSH management
- Medical Doctor
- Occupational Health
- Occupational Safety
- Micro-economist
- Industrial relations
- Labour Law
- HR administration
- Development economist
- Gender and non-discrimination
- SME development
- Sociologists
- Other (please specify)

## \*3. Funding source of your position:

- Regular Budget (RB)
- Technical Cooperation (TC)

# HQ Staff Survey Tool - Independent Evaluation of OSH Strategy

## \*4. Grade of your position:

- D1
- P5
- P4
- P3

## \*5. How long have you worked in the ILO?

- Less than 1 year
- 1-5 years
- 5-10 years
- 10-15 years
- 15-20 years
- 20-30 years

## \*6. How long have you been working exclusively on OSH related activities?

- Less than 1 year
- 1-5 years
- 5-10 years
- 10-15 years
- 15-20 years
- 20-30 years

## \*7. How many times have you rotated between the Field and HQ?

- Never rotated
- Have had 1-3 rotation assignments
- Have had more than 3 rotation assignments
- Not Applicable

## \*8. What areas of OSH do you backstop ?

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Occupational Safety and Management Systems | <input type="checkbox"/> International OSH Information Centre | <input type="checkbox"/> Norms and Standards |
| <input type="checkbox"/> Workers' Health Promotion and Well-being   | <input type="checkbox"/> Global TC project (CTA)              | <input type="checkbox"/> Not Applicable      |
| <input type="checkbox"/> Occupational and Environmental Health      | <input type="checkbox"/> Working Conditions                   |  |

## HQ Staff Survey Tool - Independent Evaluation of OSH Strategy

**\*9. Please check all the areas from the list below that you technically backstop and/or contribute to OSH related activities. Please check all that apply if more than one.**

- HIV/ AIDS
- NORMS
- GENDER
- GREEN JOBS
- ACTRAV
- ACTEMP
- SECTOR (Outcome 13)
- LAB ADMIN
- ENTERPRISE
- BETTER WORK
- Not Applicable

**\*10. Please indicate how many OSH related CPOs, directly linked to Outcome 6, do you technically backstop and/or provide technical advise to?**

- 0
- 1
- 2
- 3
- 4
- More than 4

**\*11. Please indicate how many OSH related CPOs, not directly linked to Outcome 6, do you technically backstop and/or provide technical advise to?**

- 0
- 1
- 2
- 3
- 4
- More than 4

## HQ Staff Survey Tool - Independent Evaluation of OSH Strategy

### \*12. In your opinion, what are the main challenges in achieving the Country Programme Outcomes (CPOs) linked to Outcome 6? (please select all that apply)

- Institutional
- Legal
- Cultural
- Political
- Financial
- Workers' commitment to OSH CPO principles
- Employers' commitment to OSH CPO principles
- Weak OSH management systems
- ILO organizational structure and support
- Other\*

\*Please specify:

### \*13. In your opinion, what are the main challenges in achieving the Global Products linked to Outcome 6? (please select all that apply)

- Institutional
- Legal
- Cultural
- Political
- Financial
- Workers' commitment to OSH CPO principles
- Employers' commitment to OSH CPO principles
- Weak OSH management systems
- ILO organizational structure and support
- Other\*

\*Please specify:

Please rate the ILO's overall performance in your region/project on the following strategic areas on a scale of 1 to 6, where 6 indicates highly satisfactory and 1 indicates highly unsatisfactory.

1 - Highly unsatisfactory: when expected outcomes have not been attained, and there have been important shortcomings, and the resources have not been utilized effectively and/or efficiently;

2 - Unsatisfactory: when the expected outcomes have not been attained and the level of performance show major shortcoming and are not fully considered acceptable in the view of the ILO national tripartite constituents, partners and beneficiaries;



# HQ Staff Survey Tool - Independent Evaluation of OSH Strategy

**\*16. Please rate the efficiency of the implementation of the OSH Global products and/or CPOs you have backstopped/managed based on the following criteria: (Check the box that corresponds most closely to your opinion. If you are unable to respond, please select N/A).**

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat Satisfactory	Satisfactory	Highly Satisfactory	N/A
Use of technical resources offered by the ILO's organizational structure (HQ SafeWork and other technical units, Regional Offices, DWTs)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use of financial resources according to established milestones of the programme/project?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Timely delivery of established outputs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**\*17. Please check the box that corresponds most closely to your opinion. If you are unable to respond, please select N/A.**

	High unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
How would you rate the ILO's effectiveness in mainstreaming Occupational Safety and Health into the national policies, decent work programmes, UNDAFs and/or joint programmes?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate the current ILO organizational structure (technical, organizational and administrative support) for the efficient execution of activities that contribute to Global Products and CPOs that contribute to Outcome 6?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate existing capacities to monitor and track achievements and results of OSH activities?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate the adequateness of resource allocation to support ILO's range of activities (M&E missions, policy advice, technical service, advocacy, training, tools and guidance, capacity building, etc.?)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate the adequateness of the distribution of RB and RBTC funds among technical outputs and administrative support?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate SafeWork's capacity to manage risks that could affect the outcomes of the ILO's OSH strategy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate the effectiveness of SafeWork's/CIS knowledge management activities?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate SafeWork/CIS existing capacity to gather and disseminate state of the art approaches related to OSH?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate the relevance of ILO's OSH approaches and instruments to national socio-economic, political, realities?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How would you rate COs efforts to promote OSH as a key component of the Decent Work Agenda?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**\*18. Is there a Monitoring & Evaluation framework for tracking the implementation and achievements of Global Products and CPO's linked to Outcome 6?**

- Yes
- No
- Don't know

# HQ Staff Survey Tool - Independent Evaluation of OSH Strategy

## 19. How many OSH technical support missions did you participate in the following years?

2008-2009

2010-2012

2012-2013

Please select an answer  
from the drop-down menu.

Thank you very much for having taken the time to complete this questionnaire.

If you should have any questions, please feel free to contact Francisco Guzman ([guzman@ilo.org](mailto:guzman@ilo.org)).

# DWT level Survey Tool - Independent Evaluation of OSH strategy

## INTRODUCTION

This survey is being conducted in the context of a high-level Independent Evaluation of the ILO's Strategy for Occupational Safety and Health: Workers and enterprises benefit from improved safety and health conditions at work. The evaluation report will be presented to the Governing Body in October 2013.

We are interested in your assessment and perceptions of how the ILO can improve the relevance, coherence, effectiveness, efficiency and sustainability of the outcomes aimed at supporting national tripartite constituents' efforts to create safer and healthier work environments as one of the key elements of the decent work agenda.

To this end we would like to ask you to complete a short survey. The survey is anonymous and results will be collected and analysed by independent evaluation team.

Please complete this questionnaire by Friday, July 5, 2013.

Thank you.

Evaluation Team

## The Questionnaire

**\*1. Please highlight key OSH concerns in the countries covered by your DWT. (Word limit: 200 words)**

**2. Please list the main challenges in ensuring effective implementation of ILO's OSH strategy in the countries covered by your DWT.**

- Political will of the national Governments
- Constituents' involvement and ownership
- Lack of capacity among tripartite constituents
- Availability of financial resources to implement OSH related CPOs
- Availability of technical expertise at the national levels
- Lack of technical support from the ILO headquarters
- Lack of resources at the national level to sustain results

Other (please specify)

## DWT level Survey Tool - Independent Evaluation of OSH strategy

### 3. Please list the mitigating actions you have taken to overcome the challenges you have stated above.

- Assisted mainstreaming OSH concerns into national development frameworks/UNDAFs
- OSH concerns reflected in DWCP priorities and outcomes are coherent with those in national plans
- Strengthened national level OSH networks and institutions
- Assisted development of OSH specific work plans with tripartite constituents in countries being covered under your DWT
- Supported tripartite constituents in strengthening dialogue among on OSH issues
- Provided technical assistance for developing national database and reporting on OSH issues
- Assisted advocacy towards ratification/implementation of relevant conventions and labour standards
- Provided technical advise to strengthen regional OSH networks/forums
- Assisted development/adaptation of adapted knowledge products according to local (country) needs

Other (please specify)

## RATING OF ILO'S OVERALL PERFORMANCE AGAINST THE KEY STRATEGIC AREAS

Please rate the ILO's overall performance in your region on the following strategic areas on a scale of 1 to 6, where 6 indicates highly satisfactory, whereas 1 indicates highly unsatisfactory.

1 - Highly unsatisfactory: when the findings related to the evaluation criterion show that expected results have not been attained, and there have been important shortcomings, and the resources have not been utilized effectively and/or efficiently;

2 - Unsatisfactory: when the findings related to the evaluation criterion show that the objectives have not been attained and the level of performance show major shortcoming and are not fully considered acceptable in the view of the ILO national tripartite constituents, partners and beneficiaries;

3 - Somewhat unsatisfactory; when the findings related to the evaluation criterion show that the objectives have been partially attained and the level of performance show minor shortcoming and are not fully considered acceptable in the view of the ILO national tripartite constituents, partners and beneficiaries;

4 - Somewhat satisfactory: when the findings related to the evaluation criterion show that the objectives have been partially attained and there that expected level of performance could be for the most part considered coherent with the expectations of the national tripartite constituents, beneficiaries and of the ILO itself ;

5 - Satisfactory: when the findings related to the evaluation criterion show that the objectives have been mostly attained and the expected level of performance can be considered coherent with the expectations of the national tripartite constituents, beneficiaries and of the ILO itself;

6 - Highly satisfactory: when the findings related to the evaluation criterion show that ILO performance related to criterion has produced outcomes which go beyond expectation, expressed specific comparative advantages and added value, produced best practices.

# DWT level Survey Tool - Independent Evaluation of OSH strategy

## \*4. How effective is the ILO's global OSH strategy and Action Plan in addressing the concerns you mentioned as reply to Question 1?

If you are unable to respond, please check N/A

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

## \*5. Application of ILO Instruments:

If you are unable to respond, please check N/A.

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Progress towards ratification/strengthened implementation of OSH conventions (C 155, its 2002 protocol and C187)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

Adoption of national legislations/legislative reforms	<input type="radio"/>						
Rationale	<input type="text"/>						

Adoption of national policies and programmes on OSH	<input type="radio"/>						
Rationale	<input type="text"/>						

Developing national OSH profiles	<input type="radio"/>						
Rationale	<input type="text"/>						

Progress towards national OSH systems in line with ILO norms and standards	<input type="radio"/>						
Rationale	<input type="text"/>						

Gender mainstreaming in OSH portfolio at the regional level	<input type="radio"/>						
Rationale	<input type="text"/>						

# DWT level Survey Tool - Independent Evaluation of OSH strategy

## \*6. Technical Assistance and Co-operation:

If you are unable to respond, please check N/A.

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Responding to TA needs of constituent partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Effective resource mobilisation at national levels for OSH activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Collaboration with other UN and technical agencies/networks in the region on addressing OSH concerns of constituents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

## \*7. Knowledge Management and Sharing:

If you are unable to respond, please check N/A.

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Strengthened OSH knowledge database	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Application and use of ILO global products related to OSH	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Developing customised knowledge products (research, training materials, manuals, guidelines)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# DWT level Survey Tool - Independent Evaluation of OSH strategy

## \*8. Capacity Building:

If you are unable to respond, please check N/A.

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
National capacity development on OSH (developing pool of experts/consultants/trainers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identification of capacity building needs (on OSH issues) of Tripartite constituents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Co-ordination with/support from ITC on OSH trainings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rationale

## \*9. OSH Promotion, Awareness raising and Advocacy:

If you are unable to respond, please check N/A.

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Reflection of OSH concerns in DWCP priorities, outcomes and CPOs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Awareness raising on OSH issues among workers and employers at the enterprise level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in hazardous sectors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in SME sector	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in informal sector	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in agriculture sector	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# DWT level Survey Tool - Independent Evaluation of OSH strategy

**10. Please list the countries in your regions, which include OSH as a DWCP outcome.**

## Performance of CPOs against Global Outcome 6 in your region

**\*11. Please rate the achievements in terms of their effectiveness in each of the main objectives of the ILO's Plan of Action. If you are unable to respond, please check N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
1. Promote and support the development of a preventive safety and health culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
2. Promote and support the ratification and implementation of key OSH instruments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
3. Reducing the implementation gap in respect of ratified conventions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
4. Improving OSH conditions in SMEs and in the informal economy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
5. Other action to support the impact of OSH measures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# DWT level Survey Tool - Independent Evaluation of OSH strategy

**\*12. Please rate the relevance; coherence, effectiveness, efficiency, impact and sustainability of results achieved under Outcome 6 in your country. In doing so, the following criteria questions should guide the analysis:**

**(If you are unable to respond, please check N/A)**

Highly Unsatisfactory    Unsatisfactory    Somewhat unsatisfactory    Somewhat satisfactory    Satisfactory    Highly satisfactory    N/A

Relevance: How would you rate the CPO(s) linked to Outcome 6 in terms of relevance to the ILO global strategy and to the OSH situation facing the national tripartite constituents?

Rationale

Coherence: How would you rate the CPOs linked to Outcome 6 in terms of their coherence and complementarity to other 18 outcomes of the ILO's Strategic Framework?

Rationale

Effectiveness: How would you rate the design and implementation of CPOs linked to Outcome 6 in terms of their effectiveness in helping promote fundamental principles of OSH?

Rationale

Efficiency: How would you rate the implementation of CPOs linked to Outcome 6 in terms of efficiency in the programming and delivery?

Rationale

Impact: How would you rate the CPOs linked to Outcome 6 in terms of their impacts on capacity building, necessary tools and policy improvements needed to work towards the development, implementation and enforcement of OSH Norms and local laws and regulations

Rationale

## DWT level Survey Tool - Independent Evaluation of OSH strategy

Sustainability How would you rate the design and implementation of CPOs linked to Outcome 6 in terms of the sustainability of their results?

Rationale

### 13. Which of the following global outcomes have had a significant contribution towards implementation of OSH related activities in your region for the period 2008 - 13?

- Outcome 1: Employment promotion
- Outcome 2: Skills development
- Outcome 3: Sustainable enterprises
- Outcome 4: Social security
- Outcome 5: Working conditions
- Outcome 7: Labour migration
- Outcome 8: HIV/AIDS
- Outcome 9: Employer organisations
- Outcome 10: Workers' organizations
- Outcome 11: Labour administration and labour law
- Outcome 12: Social dialogue and industrial relations
- Outcome 13: Decent work in economic sectors
- Outcome 14: Freedom of association and the right to collective bargaining
- Outcome 15: Forced labour
- Outcome 16: Child Labour
- Outcome 17: Discrimination at work
- Outcome 18: International Labour Standards
- Outcome 19: Mainstreaming decent work

### \*14. Did CPOs linked to Outcome 6 have implementation strategies to ensure involving tripartite constituents and development partners to establish synergies that could enhance impacts and sustainability?

- Yes
- No
- Cannot answer

# DWT level Survey Tool - Independent Evaluation of OSH strategy

**\*15. Please rate International OSH Information Center's (CIS) engagement in knowledge management and dissemination on OSH in your region using the following criteria.**

**(If you are unable to respond, please check N/A)**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Procurement and updation of OSH related data from countries/regions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Providing relevant database and knowledge products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Strengthening national OSH networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Updating country OSH profiles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Supporting the implementation of ILO OSH strategy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

**\*16. How would you rate the technical and operational support received from SafeWork in the last five years.**

**If you are unable to respond, please check N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

## DWT level Survey Tool - Independent Evaluation of OSH strategy

**17. What key lessons emerge from the recent experiences in realizing the key objectives of the ILO's OSH strategy in your region? What could we do differently? (Reference period 2008-13).**

**(Word limit: 200 words)**

**18. List key technical backstopping products provided by the regional office/DWT over the last five years (2008-2013).**

**19. Please list the current CPOs and Global Products from the countries covered by your DWT under Outcome 6.**

### THANK YOU!

Thank you very much for having taken the time to complete this questionnaire.  
If you should have any questions, please feel free to contact Francisco Guzman ([guzman@ilo.org](mailto:guzman@ilo.org)).

# Country level Survey Tool - Independent Evaluation of OSH strategy

## INTRODUCTION

This survey is being conducted in the context of a high-level Independent Evaluation of the ILO's Strategy for Occupational Safety and Health: Workers and enterprises benefit from improved safety and health conditions at work. The evaluation report will be presented to the Governing Body in October 2013.

We are interested in your assessment and perceptions of how the ILO can improve the relevance, coherence, effectiveness, efficiency and sustainability of the outcomes aimed at supporting national tripartite constituents' efforts to create safer and healthier work environments as one of the key elements of the decent work agenda.

To this end we would like to ask you to complete a short survey. The survey is anonymous and results will be collected and analysed by independent evaluation team.

Please note this survey has been extended till Friday, July 5, 2013.

Thank you.

Evaluation Team

## The Questionnaire

### 1. Has your country, with ILO support, developed/adopted the following:

- National OSH profiles
- National Occupational Safety and Health programs
- Policies for implementation of national OSH plan

### 2. Are these national instruments in line with conventions nos 81, 129, 155 (and its 2002 protocol), and 187?

- Yes
- No

### 3. In what ways has the ILO provided direct support to Tripartite constituents in promoting safety and health at work?

- Supported constituents in incorporating OSH concerns in national development frameworks
- Supported establishment of Tripartite mechanisms for OSH with specific functions and requirements
- Supported awareness raising and/or developing training strategies to help improve OSH conditions

Other (please specify)

# Country level Survey Tool - Independent Evaluation of OSH strategy

## 4. Please list the main challenges to effective implementation of ILO's OSH strategy in your country.

- Political will of the national Government.
- Constituents involvement and ownership
- Lack of capacity among tripartite constituents
- Lack of financial resources to implement OSH related activities (under CPOs directly/indirectly linked to global outcome 6; and as visualised in DWCP priorities and outcomes)
- Availability of technical expertise at the national level
- Lack of technical support from the ILO headquarters
- Lack of resources at the national level to sustain results

Other (please specify)

## 5. Please list all the mitigating actions you have taken to overcome the challenges you have stated above.

- Assisted mainstreaming OSH concerns into national development framework/UNDAF
- OSH concerns reflected in DWCP priorities and outcomes are coherent with those in national plan
- Developed OSH specific work plans with tripartite constituents
- Supported tripartite constituents in strengthening dialogue on OSH issues
- Provided technical assistance for developing national database and reporting on OSH (accidents, injuries, occupational diseases etc)
- Advocacy and facilitation towards ratification/implementation of relevant conventions and labour standards
- Strengthened national OSH networks and institutions
- Strengthened regional OSH networks/forums
- Supported strengthening labour inspection (LI) services) in the country
- Developed/adapted knowledge products according to local needs

Other (please specify)

## RATING OF ILO'S OVERALL PERFORMANCE AGAINST THE KEY STRATEGIC AREAS

Please rate the ILO's overall performance in your country on the following strategic areas on a scale of 1 to 6, where 6 indicates highly satisfactory, whereas 1 indicates highly unsatisfactory.

1 - Highly unsatisfactory: when the findings related to the evaluation criterion show that expected results have not been attained, and there have been important shortcomings, and the resources have not been utilized effectively and/or efficiently;

2 - Unsatisfactory: when the findings related to the evaluation criterion show that the objectives have not been attained and the level of performance show major shortcoming and are not fully considered acceptable in the view of the ILO national tripartite constituents, partners and beneficiaries;

3 - Somewhat unsatisfactory; when the findings related to the evaluation criterion show that the objectives have been

## Country level Survey Tool - Independent Evaluation of OSH strategy

partially attained and the level of performance show minor shortcoming and are not fully considered acceptable in the view of the ILO national tripartite constituents, partners and beneficiaries;

4 - Somewhat satisfactory: when the findings related to the evaluation criterion show that the objectives have been partially attained and there that expected level of performance could be for the most part considered coherent with the expectations of the national tripartite constituents, beneficiaries and of the ILO itself ;

5 - Satisfactory: when the findings related to the evaluation criterion show that the objectives have been mostly attained and the expected level of performance can be considered coherent with the expectations of the national tripartite constituents, beneficiaries and of the ILO itself;

6 - Highly satisfactory: when the findings related to the evaluation criterion show that ILO performance related to criterion has produced outcomes which go beyond expectation, expressed specific comparative advantages and added value, produced best practices.

IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A

# Country level Survey Tool - Independent Evaluation of OSH strategy

## \*6. Application of ILO Instruments

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Progress towards ratification/strengthened implementation of OSH conventions (C 155, its 2002 protocol and C187)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Adoption of national legislations/legislative reforms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Adoption of national policies and programmes on OSH	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Developing national OSH profiles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Progress towards national OSH systems in line with ILO norms and standards	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Gender mainstreaming in OSH portfolio at the regional level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Strengthening national labour inspection (LI) system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Strengthening data collection on OSH (accidents, injuries, occupational diseases, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# Country level Survey Tool - Independent Evaluation of OSH strategy

## \*7. Technical Assistance and Co-operation

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Responding to TA needs of constituent partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Effective resource mobilization at the national level for OSH related activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Collaboration with other UN and technical agencies/networks in the country on addressing OSH concerns of constituents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

## \*8. Knowledge Management and Sharing

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Strengthened OSH knowledge database	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Application and use of ILO global products and instruments related to OSH	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Developing customised knowledge products (research, training materials, manuals, guidelines)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# Country level Survey Tool - Independent Evaluation of OSH strategy

## \*9. Capacity Building

Highly Unsatisfactory    Unsatisfactory    Somewhat Unsatisfactory    Somewhat satisfactory    Satisfactory    Highly satisfactory    N/A

National capacity development on OSH (developing pool of experts/consultants/trainers)

Rationale

Identification of capacity building needs of Tripartite constituents

Rationale

Tripartite involvement and capacity building on OSH issues

Rationale

Co-ordination with/support from ITC on OSH trainings

Rationale

# Country level Survey Tool - Independent Evaluation of OSH strategy

## \*10. OSH Promotion, Awareness raising and Advocacy.

	Highly Unsatisfactory	Unsatisfactory	Somewhat Unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Reflection of national OSH concerns and priorities in DWCP priorities, outcomes and CPOs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Awareness raising on OSH issues among workers and employers at enterprise level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in hazardous sectors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in SME sector	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in informal sector	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Promoting OSH in agriculture sector	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

## 11. Please list the CPOs directly linked to Outcome 6 from your country

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

# Country level Survey Tool - Independent Evaluation of OSH strategy

**\*12. Did CPOs linked to Outcome 6 have implementation strategies to ensure involving tripartite constituents and development partners to establish synergies that could enhance impacts and sustainability?**

- Yes
- No
- Cannot answer

**\*13. Please rate the achievements under CPOs, directly linked to Global Outcome 6, in terms of their effectiveness in realising the main objectives of the ILO's Plan of Action. IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
1. Promote and support the development of a preventive safety and health culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
2. Promote and support the ratification and implementation of key OSH instruments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
3. Reducing the implementation gap in respect of ratified conventions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
4. Improving OSH conventions in SMEs and in the informal economy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
5. Other action to support the impact of OSH measures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# Country level Survey Tool - Independent Evaluation of OSH strategy

**\*14. Please rate the achievements under CPOs, NOT directly linked to Global Outcome 6, in terms of their effectiveness in realising the main objectives of the ILO's Plan of Action. IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
1 Promote and support the development of a preventive safety and health culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
2. Promote and support the ratification and implementation of key OSH instruments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
3. Reducing the implementation gap in respect of ratified conventions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
4. Improving OSH conventions in SMEs and in the informal economy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
5. Other action to support the impact of OSH measures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# Country level Survey Tool - Independent Evaluation of OSH strategy

**\*15. Please rate the International OSH Information Centre's (CIS) engagement in knowledge management and dissemination on OSH in your country using the following criteria. IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Procuring relevant database and knowledge products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Providing relevant database and knowledge products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Strengthening national OSH networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Updating country OSH profiles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Supporting the implementation of ILO OSH strategy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

**16. How do you think the International OSH Information Centre (CIS) can contribute better to the OSH related measures being undertaken in your country by the office (ILO) and constituent partners?**

- By developing/updating database on national legislations
- By establishing links to practical tools developed by OSH networks worldwide and making them accessible
- By developing user-friendly knowledge sharing platforms
- By maintaining database of relevant knowledge products accessible to users
- By having more effective interaction with national OSH networks
- By expanding membership of OSH networks and institutions affiliated to CIS

Other (please specify)





# Country level Survey Tool - Independent Evaluation of OSH strategy

Rationale

Impact: Impacts with reference to ILO's and national OSH priorities.

Rationale

Sustainability: How would you rate the design and implementation of these CPOs (not directly linked to Outcome 6) in terms of the sustainability of their results?

Rationale

**20. List key technical advise products provided by the country office over the last five years (2008-2013).**

**21. Please list the Global Products from your country under Outcome 6 over the past five years (2008-2013).**

**THANK YOU!**

Thank you very much for having taken the time to complete this questionnaire.  
If you should have any questions, please feel free to contact Francisco Guzman ([guzman@ilo.org](mailto:guzman@ilo.org)).

# Constituent Level Survey Tool - Independent Evaluation of the OSH

## INTRODUCTION

This survey is being conducted in the context of a high-level Independent Evaluation of the ILO's Strategy for Occupational Safety and Health: Workers and enterprises benefit from improved safety and health conditions at work. The evaluation report will be presented to the Governing Body in October 2013.

We are interested in your assessment and perceptions of how the ILO can improve the relevance, coherence, effectiveness, efficiency and sustainability of the outcomes aimed at supporting national tripartite constituents' efforts to create safer and healthier work environments as one of the key elements of the decent work agenda.

To this end we would like to ask you to complete a short survey. The survey is anonymous and results will be collected and analysed by independent evaluation team.

Please complete this questionnaire by Friday, July 5, 2013.

Thank you.

Evaluation Team

## The Questionnaire

### 1. Has your country, with ILO support, developed/adopted the following:

- National OSH profiles
- National Occupational Safety and Health programs
- Policies for implementation of national OSH plan

### 2. Are these national instruments in line with conventions nos 81, 129, 155 (and its 2002 protocol), and 187?

- Yes
- No

### 3. Please list the main challenges to effective implementation of ILO's OSH strategy in your country.

- Inadequate focus on OSH issues in national development framework
- Lack of capacity among constituents
- Availability of technical expertise at the national level
- Lack of technical support from the ILO
- Lack of resources at the national level to sustain results

Other (please specify)

# Constituent Level Survey Tool - Independent Evaluation of the OSH

## 4. Please list all the mitigating actions that you have taken, with ILO's support, to overcome the challenges you have stated above.

- Assisted mainstreaming OSH concerns into national development framework/UNDAF
- OSH concerns reflected in DWCP priorities and outcomes are coherent with those in national plan
- Strengthened national OSH networks and institutions
- Developed OSH specific work plans
- Advocacy and facilitation towards ratification/implementation of relevant conventions and labour standards
- Strengthened national OSH networks/forums
- Supported strengthening labour inspection (LI) services) in the country
- Awareness raising on OSH issues among workers and employers at enterprise level

Other (please specify)

## \*5. Please rate the International OSH Information Centre's (CIS) engagement in knowledge management and dissemination on OSH in your country using the following criteria. IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Procuring relevant database and knowledge products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Providing relevant database and knowledge products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Strengthening national OSH networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Updating country OSH profiles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Supporting the implementation of ILO OSH strategy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

# Constituent Level Survey Tool - Independent Evaluation of the OSH

## 6. How do you think the International OSH Information Centre (CIS) can contribute better to the OSH related measures being undertaken in your country by the office (ILO) and constituent partners?

- By developing/updating database on national legislations
- By establishing links to practical tools developed by OSH networks worldwide and making them accessible
- By developing user-friendly knowledge sharing platforms
- By maintaining database of relevant knowledge products accessible to users
- By having more effective interaction with national OSH networks
- By expanding membership of OSH networks and institutions affiliated to CIS

Other (please specify)

## \*7. How would you rate the technical and operational support received from the ILO on OSH issues in the last five years. IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.

Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rationale

# Constituent Level Survey Tool - Independent Evaluation of the OSH

**\*8. Please rate the relevance; coherence; effectiveness; efficiency; impact; and sustainability of results achieved under the ILO's Global Outcome 6 (Occupational Health and Safety), in your country. In doing so, the following criteria questions should guide the analysis.**

**IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Relevance: To the national OSH concerns.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Coherence: With your mandate and activities relating to OSH issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Effectiveness: In promoting fundamental principles of OSH?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Efficiency: In terms of time and resource efficiency in the ILO's programming and delivery?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Impact: On capacity building, necessary tools and policy improvements needed to work towards the development, implementation and enforcement of OSH Norms and local laws and regulations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Sustainability: How would you rate the sustainability of the results achieved by the ILO under OSH?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						

**THANK YOU!**

Thank you very much for having taken the time to complete this questionnaire.

# Constituent Level Survey Tool - Independent Evaluation of the OSH

If you should have any questions, please feel free to contact Francisco Guzman ([guzman@ilo.org](mailto:guzman@ilo.org)).

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

## INTRODUCTION

This survey is being conducted in the context of a high-level Independent Evaluation of the ILO's Strategy for Occupational Safety and Health: Workers and enterprises benefit from improved safety and health conditions at work. The evaluation report will be presented to the Governing Body in October 2013.

We are interested in your assessment and perceptions of how the ILO can improve the relevance, coherence, effectiveness, efficiency and sustainability of the outcomes aimed at supporting national tripartite constituents' efforts to create safer and healthier work environments as one of the key elements of the decent work agenda.

To this end we would like to ask you to complete a short survey. The survey is anonymous and results will be collected and analysed by independent evaluation team.

Please complete this questionnaire by Monday, July 15, 2013.

Thank you.

Evaluation Team

## The Questionnaire

### 1. In which of following regions is your institute/association located?

- Europe
- Central Asia
- North America
- Central America
- South America
- Arab
- Africa
- Asia Pacific

## A: Overall Assessment of the ILO OSH-Activities

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

## 2. Based on your familiarity with the ILO, please rate the ILO's most significant contribution in the area of OSH, using the scale given below.

	Not important	Slightly important	Moderately important	Very important	Extremely important	N/A
OSH related Conventions	<input type="radio"/>					
Establishing global Codes of practice and Protocols	<input type="radio"/>					
Developing Global Strategy on OSH (2003)	<input type="radio"/>					
Positioning OSH as integral to the decent work framework	<input type="radio"/>					
Supporting national governments in developing OSH management systems	<input type="radio"/>					
Technical assistance for developing and/or reforming OSH related legislations at the national level	<input type="radio"/>					
Maintain and provide knowledge products as per the needs of national constituents	<input type="radio"/>					
Gathering and disseminating international best practices related to OSH legislation and implementation	<input type="radio"/>					
Building capacities at the national level among tripartite constituents and OSH experts	<input type="radio"/>					

## 3. What is ILO's comparative advantage in the field of OSH compared to other national and international organisations?

## 4. To what extent do you think the ILO has used its comparative advantage to add value to OSH work in the field? (reference period 2008-13)

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

**\*5. How would you rate the effectiveness of the following ILO instruments, in terms of their value added to the establishment of national OSH systems.? IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.**

	Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
Guidelines on OSH Management Systems, ILO 2001	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Global Strategy on Occupational Health and Safety, ILO 2003	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Strategic Policy Framework 2010–15: Making Decent Work Happen, ILO 2009	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						
Plan of Action (2010-2016) to achieve widespread ratification and effective implementation of the occupational safety and health instruments (Convention No. 155, its 2002 Protocol and Convention No. 187), ILO 2010	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rationale	<input type="text"/>						



# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

constituents

Rationale

Awareness generation on OSH issues among workers and employers

Rationale

Gathering and disseminating international best practices related to OSH legislation and implementation

Rationale

Building capacities at the national level among tripartite constituents and OSH experts

Rationale

**7. What suggestions would you like to make for strengthening the ILO's OSH strategy and work in your country/region? (If the Question is not applicable to your country/region, please go to Q 8)**

1

2

3

4

5

## Collaboration with ILO

**\*8. Have you or your organisation/association collaborated with the ILO (reference period 2008-13) in the development of OSH technical materials?**

- Yes
- No

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

## 9. On what issues/action areas have you collaborated with the ILO in the past five years (2008-13)?

- ▶ Development/adaptation of knowledge products on OSH
- ▶ Trainings on OSH
- ▶ Developing OSH related database
- ▶ OSH related research in the country
- ▶ Global Conference participant/ presenter

Other (please specify)

## \*10. On which of the following areas of action under its OSH strategy should the ILO place more emphasis? Please rate their level of importance based on the following scale:

**IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.**

	Not important	Slightly important	Moderately important	Very important	Extremely important	N/A
Standard setting and ratification of OSH Conventions	<input type="radio"/>					
Rationale	<input type="text"/>					
Policy formulation	<input type="radio"/>					
Rationale	<input type="text"/>					
Awareness raising among workers and employers on OSH issues	<input type="radio"/>					
Rationale	<input type="text"/>					
Strengthening OSH inspection mechanisms	<input type="radio"/>					
Rationale	<input type="text"/>					
Strengthening OSH data and information systems at the national level	<input type="radio"/>					
Rationale	<input type="text"/>					

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

## 11. Are you aware of the functions of ILO International Occupational Safety and Health Information Centre (CIS)?

- Yes
- No

If yes, in what capacity

## 12. How often do you refer to CIS for OSH related information?

- Always
- Sometimes
- Never

## 13. How would you rate the relevance of the information disseminated by the CIS? IF YOU ARE UNABLE TO RESPOND, PLEASE CHECK N/A.

Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rationale

## 14. How would you rate the availability and accessibility (user-friendliness) of materials in the CIS database?

Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rationale

## 15. How useful do you find the ILO's Encyclopaedia of Occupational Safety and Health for OSH related information?

Not Useful at all	Slightly useful	Moderately useful	Very useful	Extremely useful	N/A
<input type="radio"/>					

## 16. Please list your suggestions for making the ILO's Encyclopaedia of OSH more relevant and useful for OSH practitioners.

1.
2.
3.
4.

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

## 17. How would you rate the effectiveness of CIS as a global knowledge platform on OSH?

Highly Unsatisfactory	Unsatisfactory	Somewhat unsatisfactory	Somewhat satisfactory	Satisfactory	Highly satisfactory	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rationale

## 18. Which of the following factors do you think are affecting the relevance and availability of information gathered and disseminated through CIS? Please rate their level of importance on the following scale:

	Not important	Slightly important	Moderately important	Very important	Extremely important	N/A
▶ Outdated knowledge sharing platform	<input type="radio"/>					
Rationale	<input type="text"/>					

▶ Outdated materials (i.e the encyclopedia)	<input type="radio"/>					
Rationale	<input type="text"/>					

▶ Materials are too technical and not practical enough for OSH practitioners.	<input type="radio"/>					
Rationale	<input type="text"/>					

▶ Materials are too European and North American centred. Not very applicable to developing nations	<input type="radio"/>					
Rationale	<input type="text"/>					

▶ Not enough examples of good practices from developing nations	<input type="radio"/>					
Rationale	<input type="text"/>					

# OSH Institutions Level Survey Tool - Independent Evaluation of OSH

## 19. How do you think the International OSH Information Centre (CIS) can contribute better to the OSH related measures being undertaken in your country by the office (ILO) and constituent partners?

- By updating and making accessible database on national legislations
- By maintaining a user-friendly database on practical tools developed by OSH networks worldwide
- By enhancing its visibility as OSH knowledge hub at the national levels
- By expanding its membership to include effective and emerging OSH networks and institutions among member states
- By making the database more user-friendly and accessible
- Not Applicable

Other (please specify)

## 20. Which other sources, apart from CIS, do you access for OSH related information?

## THANK YOU!

Thank you very much for having taken the time to complete this questionnaire.  
If you should have any questions, please feel free to contact Francisco Guzman (guzman@ilo.org).

## Annex 5. Analysis of OSH related Conventions and P&B

### 5.1 ILO-Conventions directly and indirectly related to OSH

#### ILO and OSH-Conventions

The ILO's mandate for work in the field of occupational safety and health dates from 1919, when the Member States agreed on the Preamble to the Constitution of the International Labour Organization:

*“And whereas conditions of labour exist involving such injustice hardship and privation to large numbers of people as to produce unrest so great that the peace and harmony of the world are imperilled; and an improvement of those conditions is urgently required; as, for example, by the regulation of the hours of work including the establishment of a maximum working day and week ... the protection of the worker against sickness, disease and injury arising out of his employment ...”*

This mandate was renewed in the UN-Philadelphia conference, 1944, dealing with the tasks of different UN-institutions:

*“The Conference recognizes the solemn obligation of the International Labour Organization to further among the nations of the world programmes which will achieve: ... (g) adequate protection for the life and health of workers in all occupations; ...”*

The most used indicator in ILO documents for the **current relevance of OSH for ILO** is **the share of ILO conventions related to OSH to all ILO conventions**.<sup>1</sup> However, this rate varies significantly between official ILO documents. Looking at different ILO publications, the mentioned number of conventions varies between 19 (ILO Conventions website<sup>2</sup>), nearly half (ILO-OSH website<sup>3</sup>) or close to 80% (Committee of Experts, see next para).

In the process of evaluation of the ILO's Strategy for Occupational Safety and Health it is important background information, how relevant OSH still is for ILO measured by the number for OSH related indicators.

The purpose of this annex to the evaluation of the ILO's Strategy for Occupational Safety and Health is to calculate and assess the rate of OSH-related conventions for a more thorough analysis of the indicator. It is still only an approximation but intends to

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<sup>1</sup> Other indicators could be share of the OSH related budget of the total budget or share of staff working on OSH issues. These indicators are to my knowledge not used to determine relevance of ILO-policies.

<sup>2</sup> <http://www.ilo.org/dyn/normlex/en/f?p=1000:12000:0::NO::> , Subtitle: Occupational Safety and Health

<sup>3</sup> Quote from the ILO-OSH website: “Nearly half of ILO instruments deal directly or indirectly with occupational safety and health issues.” See: <http://www.ilo.org/global/standards/subjects-covered-by-international-labour-standards/occupational-safety-and-health/lang--en/index.htm>

present a realistic and evidence based approximate share of OSH-related ILO-convention. The proposed categorisation is a preliminary proposal, as further discussions would be required for details. Moreover, the analysis is not comprehensive in the sense that not every para of every convention was studied.

In the tables of the directly OSH-related conventions, the number of ratifications per convention is also presented. This data gives additional information about the relevance of ILO-OSH conventions for the member states.

### Share of OSH conventions in ILO Publications

ILO defined in the Global Strategy 2003<sup>4</sup> altogether **21 conventions as OSH-related** (excluding recommendations and protocols).

As already mentioned, the **current website** on conventions lists **19 OSH-related conventions**; the total number of conventions is 189. Two conventions of the Global Strategies 2003 related to Labour Inspection (C No. 81 and C No. 129) are placed on the website under the subtitle ‘Labour administration and labour inspection.’

**Table: OSH related conventions according to the ILO Website ‘Conventions by subject’**

<b>Instrument – Status - Ratifications</b>
1. White Lead (Painting) Convention, 1921 (No. 13), To be revised, 63
2. Underground Work (Women) Convention, 1935, Interim status (No. 45), 97
3. Safety Provisions (Building) Convention, 1937 (No. 62), 30
4. Radiation Protection Convention, 1960 (No. 115), Up-to-date instrument, 50
5. Guarding of Machinery Convention, 1963 To be revised (No. 119), 52
6. Hygiene (Commerce and Offices) Convention, Up-to-date instrument 1964 (No. 120),51
7. Maximum Weight Convention, 1967 (No. 127) To be revised, 29
8. Benzene Convention, 1971 (No. 136), To be revised, 38
9. Occupational Cancer Convention, 1974 (No. 139), Up-to-date instrument, 39
10. Working Environment (Air Pollution, Noise and Vibration) Convention, 1977 (No. 148), Up-to-date instrument, 45
11. Occupational Safety and Health Convention, Up-to-date instrument 1981 (No. 155) 60
12. Occupational Health Services Convention, Up-to-date instrument 1985 (No. 161), 31
13. Asbestos Convention, 1986 (No. 162), Up-to-date instrument, 35
14. Safety and Health in Construction Convention, Up-to-date instrument 1988 (No. 167), 24
15. Chemicals Convention, 1990 (No. 170) Up-to-date instrument, 17
16. Prevention of Major Industrial Accidents Convention, 1993 (No. 174) 9 Up-to-date instrument, 18
17. Safety and Health in Mines Convention, 1995, Up-to-date instrument (No. 176), 20
18. Safety and Health in Agriculture Convention, Up-to-date instrument 2001 (No. 184), 15
19. Promotional Framework for Occupational Safety and Health Convention, (no. 187), 23

Both lists of OSH related conventions – i.e. the current ILO-website and the Global Strategy from 2003 – still **present a very limited picture** of the relevance of OSH for ILO. The current ILO counting of OSH related convention in the Global Strategy 2003

<sup>4</sup> ILO (2003): Global Strategy on Occupational Safety and Health. Conclusions adopted by the International Labour Conference at its 91st Session, 2003, Geneva, p12/13

or on the ILO Convention website might lead to an underestimation of the importance of OSH issues.

Already in 2009, the Committee of Experts on the Application of Conventions and Recommendations wrote in its ‘General Survey concerning major Occupational Safety and Health conventions’:<sup>5</sup>

*“A significant body of international instruments has been developed by the ILO in the area of occupational safety and health (OSH) over the past 90 years and **close to 80 per cent of all ILO standards and instruments** are either wholly or partly concerned with issues related to OSH. A large number of ILO activities such as child labour, the informal economy, gender mainstreaming, labour inspection, specific sectors of economic activity, HIV/AIDS and migration, **include an OSH or OSH-related component**. This underlines the continued importance for the tripartite constituents of this very complex area.”*

### **OSH related categories of conventions**

To get a holistic view and a clearer picture of the importance of OSH in ILO-Conventions, two revised lists of conventions have been compiled by the evaluator.

In the current list of 19 conventions, three categories of conventions can be distinguished:<sup>6</sup>

- Conventions dealing with desirable **OSH policies**, related to national OSH-systems and infrastructures (Three conventions: C 155, C 161, C 187)
- Conventions dealing with the **protection against specific risks**, e.g. against chemicals in general and against some specific chemicals, protection of women in underground work, major accidents and working environment factors (Twelve conventions: C 13, C 45, C 62, C 115, C 119, C 127, C 136, C139, C 148, C 162, C 170, C 174)
- Conventions covering **OSH in four sectors** (commerce and offices, mines, construction, and agriculture, but not sectors like dock work or fishermen) (Four conventions: C 120, C 167, C 176, C184)

A more precise estimate of the relevance of OSH for ILO should include those conventions, which have as their essential purpose to ensure safety and protect the health of workers.

These are conventions related to:

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<sup>5</sup> ILO (2009): International Labour Conference 98th Session, 2009 Report III (Part 1B) General Survey concerning the Occupational Safety and Health Convention, 1981 (No. 155), the Occupational Safety and Health Recommendation, 1981 (No. 164), and the Protocol of 2002 to the Occupational Safety and Health Convention, 1981 Third item on the agenda: Information and reports on the application of Conventions and Recommendations Report of the Committee of Experts on the Application of Conventions and Recommendations (articles 19, 22 and 35 of the Constitution), p1

<sup>6</sup> On the ILO website “List of instruments by subject and status” the OSH related conventions, recommendations and protocols re separated into three groups: ‘General provisions’, ‘Protection against specific risks’, ‘Protection in specific branches of activity’

See: <http://www.ilo.org/dyn/normlex/en/f?p=1000:12030:0::NO::>

- Conventions protecting **vulnerable groups** (children, young workers etc.). Such conventions are related to the protection of vulnerable groups and have the health of these groups as their basic purpose. The protection of vulnerable group is also the main objective of the two fundamental conventions on child labour. In Convention 182 about the “Worst Forms of Child Labour” from 1999 it is stated in Article 3: “... *the term **the worst forms of child labour** comprises: ....d) work which, by its nature or the circumstances in which it is carried out, is likely to harm the health, safety or morals of children.*” Conventions related to the protection of vulnerable groups have the health of these groups as the crucial background.
- Conventions guaranteeing health and safety in **other specific risk sectors** (currently covered in different areas e.g. under plantation workers, domestic workers)
- Conventions guaranteeing health and safety in **high risk occupations** (now covered under headings such as dockworkers, seafarers, fishermen, or ‘specific categories of workers’, e.g. nurses),
- Conventions dealing with **good governance in OSH** (currently covered under labour administration) public social security measures, particularly against occupational accidents and injuries (currently covered under social security), public supervision of working conditions (currently covered under labour inspection).
- Conventions covering **unhealthy working time arrangements** (e.g. night work).

**Conventions mainly dealing with wage issues, general working time arrangements, documents, overall labour administration and the rights of associations were excluded** from the categorisation as OSH-relevant. There is an OSH relevance also in these conventions, but this can be seen as minor in comparison to other objectives of these conventions such as freedom of associations and justice of the wage policies and practices.

### **Conventions including OSH as core element (A-Lists)**

The **first set of lists** (called A-Lists) **contains those conventions which have health and safety issues as their core reason**, they are directly related to OSH; the **second list (B-Lists) allocates** those conventions which include health and safety as a **core element, at least in one essential article**.

The compilation is firstly based on the criteria applied for the **19 OSH-conventions** from the **current ILO-Conventions website**:

1. Desirable **policies**, LIST A1
2. Protection against **specific risks** and prevention measures, LIST A2
3. Protection in **specific sectors**, LIST A3

and moreover on six broader criteria of OSH-relevance:

4. Health and safety in other specific sectors, LIST A4

5. Health and safety in other occupations, LIST A5
6. Good governance in OSH, LIST A6
7. Vulnerability (vulnerable groups), LIST A7
8. Unhealthy working time arrangements, LIST A8
9. Compensation of work-related diseases, LIST A9

The first **19 OSH-Conventions** were in average ratified by 39 countries, varying between 97 ratifications for the Underground Work (Women) Convention (No. 45, 1935, Interim status) and 15 ratifications for the Safety and Health in Agriculture Convention (No. 184, 2001, Up-to-date instrument).

<b>LIST A1: ILO CONVENTIONS OSH – DESIRABLE POLICIES</b> (Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C155 - Occupational Safety and Health Convention, 1981	60
C161 - Occupational Health Services Convention, 1985	31
C187 - Promotional Framework for Occupational Safety and Health Convention, 2006	23
<b>Total number of conventions: 3</b>	<b>Average: 38</b>

All three conventions have been adopted after 1980. The period from the adoption date to today is short compared to many other conventions.

<b>LIST 2: ILO CONVENTIONS OSH – SPECIFIC RISKS AND PREVENTION MEASURES</b> (Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C013 - White Lead (Painting) Convention, 1921	63
C045 - Underground work (Women) Convention , 1935	97
C062 - Safety Provisions (Building) Convention, 1937	30
C115 - Radiation Protection Convention, 1960	50
C119 - Guarding of Machinery Convention, 1963	52
C127 - Maximum Weight Convention, 1967	29
C136 - Benzene Convention, 1971	38
C139 - Occupational Cancer Convention, 1974	39
C148 - Working Environment (Air Pollution, Noise and Vibration) Conv., 1977	45
C162 - Asbestos Convention, 1986	35
C170 - Chemicals Convention, 1990	17
C174 - Prevention of Major Industrial Accidents Convention, 1993	18
<b>Total number of conventions: 12</b>	<b>Average: 43</b>

The conventions against specific risks have a slightly higher rate of ratification. It seems also that the chance that a convention gets ratified depends also on its specificity: as more specific and consequently also as more limited to a certain risk, the conventions are as more likely to be ratified. E.g., the Chemicals convention with 17 ratifications is less specific than the conventions on white lead, benzene or asbestos. In this list the highest rate of ratifications is for a double specified risk, specified on one hand by the type of work (underground work) and on the other hand by the sex of the protected group (women).

The sector oriented conventions have the lowest rate of ratifications. One reason may lie in that the implementation of OSH in a sector probably requires much more political and financial efforts in comparison to the regulation of a specific risk.

<b>LIST A3 ILO CONVENTIONS OSH – SPECIFIC GROUPS</b> (Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C120 - Hygiene (Commerce and Offices) Convention, 1964	51
C167 - Safety and Health in Construction Convention, 1988	24
C176 - Safety and Health in Mines Convention, 1995	27
C184 - Safety and Health in Agriculture Convention, 2001	15
<b>Total number of conventions: 4</b>	<b>Average: 29</b>

The following tables A4 to A9 show those conventions which are **not included on the ILO-Conventions website under OSH** but have a clear and direct relation to OSH.

<b>LIST A4 ILO CONVENTIONS OSH – RISK IN SPECIFIC SECTORS</b> (Not Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C110 - Plantations Convention, 1958 (No. 110)	12
C137 - Dock Work Convention, 1973 (No. 137)	24
C152 - Occupational Safety and Health (Dock Work) Convention, 1979	26
C172 - Working Conditions (Hotels and Restaurants) Convention, 1991	15
C177 - Home Work Convention, 1996	10
C184 - Safety and Health in Agriculture Convention, 2001	15
C188 - Work in Fishing Convention, 2007 (No. 188)	4
C189 - Domestic Workers Convention, 2011 (No. 189)	8
<b>Total number of conventions: 8</b>	<b>Average: 14</b>

The key aspect for some conventions is not the sector but the type of work or the occupation. The average ratification rate is at a comparable level as for specific groups in the first list of specific groups (List A3). Again it might be an explanation that regulation according to a convention on a certain occupation might be easier than for a whole sector.

<b>LIST A5 ILO CONVENTIONS OSH – SPECIFIC OCCUPATIONS OR TYPE OF WORKERS</b> (Not Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C143 - Migrant Workers (Supplementary Provisions) Convention, 1975	23
C149 - Nursing Personnel Convention, 1977	41
Total number of conventions: 2	Average: 32
<b>SEAFARERS</b> (step by step replaced by MLC Convention from 2006) (Not Part of ILO-Conventions website under the subtitle OSH)	
C134 - Prevention of Accidents (Seafarers) Convention, 1970 (No. 134)	19
C147 - Merchant Shipping (Minimum Standards) Convention, 1976	35
Total number of conventions: 2	Average: 29
<b>Total number of conventions: 4</b>	<b>Average: 30</b>

The two conventions related to **labour inspections** (No. 81 - Labour Inspection Convention) from 1947 and (No. 81) and Labour Inspection (Agriculture) Convention (No. 129) from 1969 have been ratified by 144 member States res 52 member States. These conventions are supported by a number of labour inspection **recommendations** for specific areas as e.g. mines, health services or building.<sup>7</sup>

Two labour inspection conventions have a fairly high rate for ratification, two a very low. The reason for this might be that many member States believe that an overall Labour inspection convention is a sufficient instrument and no further specific conventions are needed (see LIST A6).

<b>LIST A6 ILO CONVENTIONS OSH – GOVERNANCE - LABOUR INSPECTION</b> (Not Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C081 - Labour Inspection Convention, 1947	144
C085 - Labour Inspectorates (Non-Metropolitan Territories) Convention, 1947	11
C129 - Labour Inspection (Agriculture) Convention, 1969	52
C178 - Labour Inspection (Seafarers) Convention, 1996	15
<b>Total number of conventions: 4</b>	<b>Average: 56</b>

The next list A7 covers conventions protecting **vulnerable groups**. Sometimes a double specification is applied (e.g. women and night work, minimum age and fishermen). Many of these conventions show a high number of ratifications.

A particularly high level of protection is demanded for children. Thus, two conventions on child work are fundamental conventions, in these cases the ratification rate is far over average (166 and 177 ratifications).

<b>LIST A7 ILO CONVENTIONS OSH - VULNERABLE GROUPS</b> (Not Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C010 - Minimum Age (Agriculture) Convention, 1921 (No. 10)	55
C041 - Night Work (Women) Convention (Revised), 1934 (No. 41)	38
C058 - Minimum Age (Sea) Convention (Revised), 1936 (No. 58)	51
C059 - Minimum Age (Industry) Convention (Revised), 1937 (No. 59)	36
C060 - Minimum Age (Non-Industrial Employment) Convention (Revised), 1937	11
C079 - Night Work of Young Persons (Non-Industrial Occup.) Convention, 1946	20
C089 - Night Work (Women) Convention (Revised), 1948 (No. 89)	67
C090 - Night Work of Young Persons (Industry) Convention (Rev.), 1948 (No. 90)	51
C112 - Minimum Age (Fishermen) Convention, 1959 (No. 112)	29
C123 - Minimum Age (Underground Work) Convention, 1965 (No. 123)	41
C183 - Maternity Protection Convention, 2000	28

<sup>7</sup> The lists includes: Up-to-date instruments, Instruments with interim status, Instruments to be revised. They do not include: Outdated instruments, Shelved conventions and Withdrawn instruments

Total number of conventions: 11	In average: 39
C138 - Minimum Age Convention, 1973	166
C182 - Worst Forms of Child Labour Convention, 1999	177
Total number of conventions: 2	In average: 173
<b>Total number of conventions: 13</b>	<b>In average: 59</b>

Overall more than twenty conventions on **working time** exist. In the A-Lists only one convention is included which covers particularly unhealthy night time arrangements. Conventions dealing with the regulation of working hours, weekly rest etc. are included under the B-Lists.

<b>LIST A8 ILO CONVENTIONS OSH – Working time</b> (Not Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C171 – Night Work Convention, 1990 (No. 171)	11
<b>Total number of conventions: 1</b>	<b>In average: 11</b>

Some social security policies are closely connected to OSH, particularly the **compensation for work related accidents and diseases**.

<b>LIST A9 ILO Conventions OSH – Governance – Compensation</b> (Not Part of ILO-Conventions website under the subtitle OSH)	<b>Ratifications</b>
C017 - Workmen's Compensation (Accidents) Convention, 1925 (No. 17)	74
C042 - Workmen's Compensation (Occup. Diseases) Convention (Revised), 1934	53
C121 - Employment Injury Benefits Convention, 1964 [Schedule I amended in 1980]	24
C130 - Medical Care and Sickness Benefits Convention, 1969 (No. 130)	15
<b>Total number of conventions: 4</b>	<b>Average: 42</b>

The **total number of conventions according to the nine List A conventions** is 55, the total number of ratifications is 2152, the average ratification rate 42 which is very close to the overall ratification rate of 44.

Altogether the A-lists contain approximately **three times more conventions** than currently displayed on the website (55 compared to 19).

<b>Category LIST A</b> <b>(All lists)</b>	<b>Number</b>	<b>Total number</b> <b>of Ratifications</b>	<b>Average</b> <b>number of</b> <b>ratifications</b>
1. Desirable policies	3	114	38
2. Protection against specific risks and prevention measures	12	513	43
3. Protection in specific sectors	4	117	29
4. Health and safety in other sectors	8	114	14
5. Health and safety in other occupations	4	118	30
6. Good governance in OSH	4	222	56
7. Vulnerability (vulnerable groups)	14	777	59
8. Unhealthy working time arrangements	1	11	11
9. Compensation of work –related diseases	4	166	42
<b>Total</b>	<b>55</b>	<b>2152</b>	<b>39</b>
<b>Share of all conventions</b>	<b>29,1%</b>	<b>27,2%</b>	

## **Conventions with strong OSH elements (B-Lists)**

The second set of B-Lists contains regulations with a **very clear connection to health issues of workers**. Social security and working time regulations have a very clear link to health, i.e. the most convincing reason to restrict the working time is health. Sickness insurance and occupational accident insurance is also clearly linked to occupational health. Excluded from these lists are only those conventions which deal with general social dialogue, freedom of association issues, with wages, documents, and overall social insurance and protection conventions.

The list contains four categories of OSH-conventions with strong OSH-elements:

- 1) Governance - Social security, LIST B 1 (10 Conv.)
- 2) Working time, LIST B2 (20 Conv.)
- 3) Medical Examination, LIST B3 (6 Conv.)
- 4) Miscellaneous, LIST B4 (7 Conv.)

**Total: 43 Conventions**

The number of ratifications and average counting is not displayed for these four categories, because too many other non OSH related factors might influence the degree of ratifications.

There are strong links between social security issues and work related health issues, e.g. for invalidity pensions, early pension, health insurance, basic standards,

<b>LIST B1 ILO CONVENTIONS – GOVERNANCE – SOCIAL SECURITY</b>	
C024 - Sickness Insurance (Industry) Convention, 1927	
C025 - Sickness Insurance (Agriculture) Convention, 1927	
C056 - Sickness Insurance (Sea) Convention, 1936	
C055 - Shipowners' Liability (Sick and Injured Seamen) Convention, 1936	
C102 - Social Security (Minimum Standards) Convention, 1952	
C117 - Social Policy (Basic Aims and Standards) Convention, 1962	
C128 - Invalidity, Old-Age and Survivors' Benefits Convention, 1967	
C150 - Labour Administration Convention, 1978	
C159 - Vocational Rehabilitation and Employment (Disabled Persons) Conv. 1983	
C160 - Labour Statistics Convention, 1985	
<b>Total</b>	<b>10</b>

There exist a large number of **specific working time** conventions.

<b>LIST B2 ILO CONVENTIONS - WORKING TIME</b>
C001 - Hours of Work (Industry) Convention, 1919 (No. 1)
C014 - Weekly Rest (Industry) Convention, 1921 (No. 14)
C020 – Night Work (Bakeries) Convention, 1925 (No. 20)
C030 - Hours of Work (Commerce and Offices) Convention, 1930 (No. 30)
C031 - Hours of Work (Coal Mines) Convention, 1931 (No. 31)
C046 - Hours of Work (Coal Mines) Convention (Revised), 1935 (No. 46)
C047 - Forty-Hour Week Convention, 1935 (No. 47)

C049 - Reduction of Hours of Work (Glass-Bottle Works) Convention, 1935 (No. 49)	
C051 - Reduction of Hours of Work (Public Works) Convention, 1936 (No. 51)	
C057 - Hours of Work and Manning (Sea) Convention, 1936 (No. 57)	
C061 - Reduction of Hours of Work (Textiles) Convention, 1937 (No. 61)	
C067 - Hours of Work and Rest Periods (Road Transport) Convention, 1939 (No. 67)	
C076 - Wages, Hours of Work and Manning (Sea) Convention, 1946 (No. 76)	
C093 - Wages, Hours of Work and Manning (Sea) Convention (Revised), 1949 (No. 93)	
C106 - Weekly Rest (Commerce and Offices) Convention, 1957 (No. 106)	
C109 - Wages, Hours of Work and Manning (Sea) Convention (Revised), 1958 (No. 109)	
C114 - Fishermen's Articles of Agreement Convention, 1959 (No. 114)	
C153 - Hours of Work and Rest Periods (Road Transport) Convention, 1979 (No. 153)	
C175 - Part-Time Work Convention, 1994	
C180 - Seafarers' Hours of Work and the Manning of Ships Convention, 1996 (No. 180)	
<b>Total</b>	<b>20</b>

<b>LIST B2 ILO CONVENTIONS – MEDICAL EXAMINATION</b>	
C073 - Medical Examination (Seafarers) Convention, 1946 (No. 73)	
C077 - Medical Examination of Young Persons (Industry) Convention, 1946 (No. 77)	
C078 - Medical Examination of Young Persons (Non-Industrial Occupations) Convention, 1946 (No. 78)	
C113 - Medical Examination (Fishermen) Convention, 1959 (No. 113)	
C124 - Medical Examination of Young Persons (Underground Work) Conv., 1965	
C164 - Health Protection and Medical Care (Seafarers) Convention, 1987	
<b>Total</b>	<b>6</b>

Some of the conventions cannot be clearly subsumed under one of the former categories and are listed under LIST B 4 ‘Miscellaneous’.

<b>LIST B4 ILO CONVENTIONS – MISCELLANEOUS</b>	
C075 - Accommodation of Crews Convention, 1946 (No. 75)	
C092 - Accommodation of Crews Convention (Revised), 1949 (No. 92)	
C114 - Fishermen's Articles of Agreement Convention, 1959 (No. 114)	
C126 - Accommodation of Crews (Fishermen) Convention, 1966 (No. 126)	
C133 - Accommodation of Crews (Supplementary Provisions) Convention, 1970 (No. 133)	
C163 - Seafarers' Welfare Convention, 1987 (No. 163)	
MLC - Maritime Labour Convention, 2006	
<b>Total</b>	<b>7</b>

<b>LIST B 1-4: ILO CONVENTIONS Strong connection to OSH-issues</b>
Total number of conventions: 43

The total sum of the B-Type is 43 conventions.

Both lists A and B together make up for 98 conventions; this is a little more than half of the 189 conventions. 55 of them are directly related and 43 indirectly related.

### **Analysis - limits and extensions**

A pure counting of conventions is in general a rough quantitative approximation and of course not a qualitative analysis. Other factors like outdated status, integration of diverse single conventions in one large convention (many Seafarers convention are now covered by the MLC) show the limitation of this pure quantitative approach.

Still there is a value in such pure quantitative figures. Even when taking the limitations into account, the use of the numbers from the official ILO-sources – e.g. of the Global Strategy 2003 or the Convention website indicate significantly lower importance of OSH issues.

An extended analysis could look at the number of workers in countries with and without OSH-related ratifications, setting the coverage of conventions as an indicator. Very probably much less than 50% of the world work force would work in countries with ratifications. Like in the majority of all conventions the world wide coverage of workforce by conventions highly depends on the three largest countries and their ratification status (China, economically active population 790 Mio, India 400 Mio, US 155 Mio). China and the US have ratified comparably few conventions (China 25, US 14), India however is with 44 close over the average of 42 ratifications per country, which is the average of ratification for all ILO Conventions.

### **Conclusions**

The quantitative share of OSH related conventions is an important fact in policy making and decision taking for ILO. The rate should be sufficiently substantiated. Our estimate is 55% or a little more than half; an appropriate wording could be ‘more than half’.

There seem to be some major influence factors for the number of ratifications. A general rule is: as earlier a convention was adopted and as more specific it is, as more ratifications it has. Other factors like high need for protection (as e.g. of children), and the visibility of risks and unhealthy working conditions (construction, mines, dockwork) also play a role.

## 5.2 Analysis of Programming and Budget documents

### Introduction

ILO uses an outcome based work planning and a results based management system. An important step in the implementation chain of ILO strategies and policies is the internal planning and budgeting procedure (P+B). So-called ‘Programme implementation’ reports summarise the results from the past biennium and the ‘Programme and Budget’ documents contain the planning data (baselines and targets) for the implementation in the next biennium - structured according to the outcomes.

The analysis of P+B-data is one way to assess the progress made towards the targets for each outcome, measured by defined indicators. Outcome 6 is (“Workers and enterprises benefit from improved safety and health conditions at work”) is defined in the Strategic Policy Framework 2010–15.<sup>8</sup> For this outcome two indicators with<sup>i</sup> different measuring criteria have been defined.

The purpose of this annex is to justify and corroborate the conclusions of the main report, particularly of chapter 3.3 on ‘Operational Objectives and Indicators’.

### Outcome 6 – indicators and measurement criteria

The **progress towards Outcome 6 is measured** with a set of **two indicators**, accompanied by measuring criteria.

The first indicator refers to the ‘*Number of member States that, with ILO support, adopt policies and programmes to promote improved safety and health at work*’. This indicator can be regarded as achieved res ‘*be counted as reportable*’, if certain measurement criteria are fulfilled. (Measurement criteria see Box 1).

#### **Box 1: Outcome 6 – Indicator 6.1 – Measurement criteria**<sup>9</sup>

1. *The member State has adopted legislation, a national or sectoral profile, a policy or programme targeted at improving OSH conditions in line with ILO–OSH and labour inspection standards, particularly Conventions Nos 81, 129, 155 and 187.*
2. *Development of the laws, profiles, policies or programmes is based on tripartite consultation, as documented by written statements of opinion by the social partners or by records of their participation in national tripartite mechanisms for OSH development.*

The second indicator refers to the ‘*Number of member States in which tripartite constituents, with ILO support, implement programmes to promote improved safety and health at work*’. This indicator can ‘be counted as reportable’, if one of five following measurement criteria is fulfilled (see Box 2).

#### **Box 2: Outcome 6 – Indicator 6.2 – Measurement criteria**<sup>10</sup>

<sup>8</sup> ILO (2009): Strategic Policy Framework 2010–15. Making decent work happen, Geneva, p14

<sup>9</sup> ILO (2009): Programme and Budget for the Biennium 2010–11, p39

1. *The member State has incorporated OSH concerns into national development frameworks or similar national policy documents.*
2. *A national tripartite mechanism for OSH is established or revitalized so that it functions effectively (meeting regularly and making recommendations to government).*
3. *OSH information, awareness-raising, and training strategies are designed and implemented by the Government, employers' or workers' organizations, to help give effect to programmes targeting improvement of OSH conditions, as documented by a schedule and budget allocation for, and reports of, activities.*
4. *Labour inspection services carry out more effective and efficient inspections to help ensure application of OSH standards, as documented through evidence in annual reports.*
5. *A register and analyses, with sex-disaggregated data, of occupational accidents and diseases are established or upgraded and maintained at national level by the competent authority.*

### **Current targets in the SPF from 2010 to 2015**

There are **quantitative targets set** which should be achieved in 2015 (see Graphic 1). In the year 2015 as “*a result of ILO policy guidance, at least 30 ILO Member States should have adopted national OSH profiles, programmes or policies and/or started to implement measures based on the programmes to improve safety and health at work*”.

This means, that per biennium 2010/11, 2012/13 and 2014/15 in average 10 ILO Member States (30 states divided by three biennia) had to start and implement activities connected to the ILO demands.

### **Graphic 1 (Screenshot): Target of Outcome 6 (6.1 and 6.2) until 2015<sup>11</sup>**

Indicator 6.1: Number of member States that, with ILO support, adopt policies and programmes to promote improved safety and health at work.		
Baseline: To be established based on 2008–09 performance.		
Target 2010–11: 10, across all regions	Target 2012–13: 10	Target 2014–15: 10
Indicator 6.2: Number of member States in which tripartite constituents, with ILO support, implement programmes to promote improved safety and health at work.		
Baseline: To be established based on 2008–09 performance.		
Target 2010–11: 10, across all regions	Target 2012–13: 10	Target 2014–15: 10
Position to be reached by 2015: As a result of ILO policy guidance, at least 30 member States have adopted national OSH profiles, programmes or policies and/or started to implement measures based on the programmes to improve safety and health at work.		

### **Outcome 6 – change of the results framework in 2010**

Between the biennia 2008-09 and 2010-11 the ILO results framework was changed. The new results framework was founded in the Strategic Policy Framework 2010–15; in comparison to the former outcomes it was simplified and contains now 19 outcomes.

<sup>10</sup> Ibid.

<sup>11</sup> ILO (2009a): Strategic Policy Framework 2010–15. Making decent work happen, Geneva, p14

The former Strategic results framework for 2006–09<sup>12</sup> was structured by **14 intermediate outcomes and 34 immediate outcomes** with a total of 78 indicators. Although this change causes difficulties in the comparison of the results from 2008-09 to the biennia 2010-11 and 2012-13, the results can be interpreted.

For the biennium 2008-09 the programme and budgeting system worked with one **intermediate outcome and one immediate related to OSH**, combined with **three indicators**<sup>13</sup>:

- **Intermediate outcome 3b:** Safety and health and working conditions in workplaces are improved
- **Immediate outcome 3b.1:** Increase constituent capacity to develop or implement policies and programmes on improving working conditions and safety and health at work
  - Indicator 1 of 3b.1:**
    - Number of member States in which constituents apply ILO knowledge or tools to develop policies on improving working conditions, safety and health
  - Indicator 2 of 3b.1:**
    - Number of member States that, with ILO technical assistance, ratify Conventions or strengthen the application of ILO standards on safety and health, labour inspection and working conditions
  - Indicator 3 of 3b.1:**
    - Number of member States in which constituents with ILO technical assistance develop programmes; establish regulatory bodies or tripartite bodies; strengthen regulatory bodies or tripartite bodies; strengthen employers' or workers' organizations; or strengthen workplace-oriented support services to facilitate the implementation of programmes

Table 1 illustrates the results for each indicator:

**Table 1: P&B indicators 2008-09 for Immediate outcome 3b.1**

P&B indicators 2008-09 for Immediate outcome 3b.1	Target <sup>14</sup>	Reported result <sup>15</sup>	%
Indicator 1	<b>20</b>	17 <sup>16</sup>	85%
Indicator 2	<b>50</b>	42 <sup>17</sup>	84%
Indicator 3	<b>30</b>	23 <sup>18</sup>	77%

<sup>12</sup> ILO (2004): Strategic Policy Framework (2006-09) (and preview of the Programme and Budget proposals for 2006-07) Making decent work a global goal, Geneva

<sup>13</sup> Report of the Director-General: ILO Programme Implementation 2008-09, International labour conference 99th Session 2010, p43 ff

<sup>14</sup> Ibid., p43

<sup>15</sup> ILO (2010): Report of the Director-General: ILO Programme Implementation 2008–09, International Labour Conference, 101st Session 2012, p75-79

<sup>16</sup> Ibid., p75

<sup>17</sup> Ibid., p76

<sup>18</sup> Ibid., p78

The targets weren't fully achieved. This was partly due to an unclear indicator definition.

The confusing indicator definition and the inadequateness of indicators were also noted by the program planning staff resp. the authors of the implementation report. Under "Challenges, lessons learned, implications for the future" they noted: <sup>19</sup>

*"Another major challenge stemmed from the indicators set out in the strategic framework for 2008–09. Throughout the biennium they proved to be confusing and inadequate for measuring results. In addition, the targets were much too high, and this led to underachievement and to somewhat limited interventions. These problems have been taken into account in the strategy for 2010–11, which will focus on in-depth interventions in a smaller number of member States in order to achieve a significant impact on working conditions. "*

### **Biennium 2010 / 2011 and 2012/2013**

In the new Strategic Framework from 2010 to 2015 the target was set that in 2015 as "a result of ILO policy guidance, at least 30 ILO Member States have adopted national OSH profiles, programmes or policies and/or started to implement measures based on the programmes to improve safety and health at work". That meant, that per biennium 2010/11, 2012/13 and 2014/15, in average 10 ILO Member States start activities connected to the ILO demands.

In the program and budget documents from 2010 and 2011 the **definition of indicators changed as a consequence of the new Strategic Framework**. The baseline for the new targets was established on the 2008/9 performance. For both indicators 6.1 and 6.2 the target was set to 10 to reach finally the number of 30 Member states in three biennia until the end of 2015 as stated in the Strategic Framework for this period.

The report on the implementation of 2010 -11<sup>20</sup> showed these figures:

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<sup>19</sup> Ibid., p74

<sup>20</sup> ILO (2012): Report of the Director-General: ILO Programme Implementation 2010–11, International Labour Conference, 101st Session 2012

**Graphic 2 (Screenshot): Indicators, targets and results for Outcome 6 - according to the Implementation Report for 2010-11<sup>21</sup>**

Results by indicator and by region							
Indicators	Target	Result					
		Total No.	Africa	Americas	Arab States	Asia–Pacific	Europe– Central Asia
6.1 Number of member States that, with ILO support, adopt policies and programmes to promote improved safety and health at work	10 member States, across all regions	8 member States, across 3 regions	Zambia			China, Lao People's Democratic Republic, Thailand, Viet Nam	Albania, Kazakhstan, Republic of Moldova
6.2 Number of member States in which tripartite constituents, with ILO support, implement programmes to promote improved safety and health at work	10 member States, across all regions	13 member States, across 4 regions	Benin, Mauritius, Niger, Zambia	Barbados, Mexico		Lao People's Democratic Republic, Thailand	Albania, Azerbaijan, Kazakhstan, Republic of Moldova, Russian Federation

The target was set at 10 member States, in line with the new Strategic Framework. As a result for indicator 6.1 a total of 8 member States was reported (80% achievement) and for indicator 6.2 a result of 13 member States (130% achievement).

These figures from the implementation report were obviously not used or not available when the baselines for the planning document for the next biennium 2012 and 2013 was prepared.<sup>22</sup> The baseline was set for indicator 6.1 to 13 member States, according to the Implementation Report for the former biennium it was only 8 member States.

**Graphic 3 (Screenshot): Outcome 6, indicator 6.1, baselines and targets according to the Programme and Budget for 2012-13<sup>23</sup>**

<b>Indicator 6.1:</b> Number of member States that, with ILO support, adopt policies and programmes to promote improved safety and health at work	
<b>Measurement</b> To be counted as reportable, results must meet the following criteria:	
<ul style="list-style-type: none"> <li>■ The member State has adopted legislation, a national or sectoral profile, a policy or programme targeted at improving OSH conditions in line with ILO–OSH and labour inspection standards, particularly Conventions Nos 81, 129, 155 and 187.</li> <li>■ Development of the laws, profiles, policies or programmes is based on tripartite consultation, as documented by written statements of opinion by the social partners or by records of their participation in national tripartite mechanisms for OSH development.</li> </ul>	
<b>Baseline</b>	<b>Target</b>
13 member States, across 4 regions	9 member States, of which 1 in Africa, 4 in the Americas, 1 in Arab States, 2 in Asia, 1 in Europe

At the end of 2013 a total of 22 member States should have been counted as fulfilling the criteria for indicator 6.1.

For indicator 6.2 the baseline was set to 5 member states instead of 13 as according to the Implementation Report for 2010 and 2011.

<sup>21</sup> Ibid., p53

<sup>22</sup> ILO (2011): Programme and Budget for the Biennium 2012-13

<sup>23</sup> ILO (2011): Programme and Budget for the Biennium 2012-13, p41

**Graphic 4 (Screenshot): Outcome 6, indicator 6.2, baselines and targets according to the Programme and Budget for 2012-13<sup>24</sup>**

<b>Indicator 6.2:</b> Number of member States in which tripartite constituents, with ILO support, implement programmes to promote improved safety and health at work	
<b>Measurement</b> To be counted as reportable, results must meet at least one of the following criteria: <ul style="list-style-type: none"> <li>■ The member State has incorporated OSH concerns into national development frameworks or similar national policy documents.</li> <li>■ A national tripartite mechanism for OSH is established or revitalized so that it functions effectively (meeting regularly and making recommendations to government).</li> <li>■ OSH information, awareness-raising and training strategies are designed and implemented by the government, employers' or workers' organizations, to help give effect to programmes targeting improvement of OSH conditions, as documented by a schedule and budget allocation for, and reports of, activities.</li> <li>■ Labour inspection services carry out more effective and efficient inspections to help ensure application of OSH standards, as documented through evidence in annual reports.</li> <li>■ A register and analyses, with sex-disaggregated data, of occupational accidents and diseases are established or upgraded and maintained at national level by the competent authority.</li> </ul>	
<b>Baseline</b>	<b>Target</b>
5 member States, across 2 regions	8 member States, of which 3 in Africa, 1 in the Americas, 2 in Asia, 2 in Europe

Target and baseline for indicator 6.2 sum up to 13 member States.

**Biennium 2012 / 2013 and 2014/2015**

The current figures as presented in the P&B docs for 2014-15<sup>25</sup> show that these targets have not been achieved. The baseline is set to 13 member States, the target from the former P+B for 2010-11 was 22, just 59% (13 of 22) was achieved.

**Graphic 5 (Screenshot): Outcome 6, indicator 6.1, baselines and targets according to the proposals for Programme and budget for 2014-15<sup>26</sup>**

<b>Indicator 6.1:</b> Number of member States that, with ILO support, adopt policies and programmes to promote improved safety and health at work	
<b>Measurement</b> To be counted as reportable, results must meet the following criteria: <ul style="list-style-type: none"> <li>■ The member State has adopted legislation, a national or sectoral profile, a policy or programme targeted at improving OSH conditions in line with ILO-OSH and labour inspection standards, particularly Conventions Nos 81, 129, 155 and 187.</li> <li>■ Development of the laws, profiles, policies or programmes is based on tripartite consultation, as documented by written statements of opinion by the social partners or by records of their participation in national tripartite mechanisms for OSH development.</li> </ul>	
<b>Baseline</b>	<b>Target</b>
13 member States, across 4 regions	10 member States, of which 3 in Africa, 2 in the Americas, 1 in Arab States, 2 in Asia–Pacific, 2 in Europe–Central Asia

In the P&B proposals for 2014 and 2015 the target plus the baseline accounts for 23 Member States (Outcome 6.1)

For indicator 6.2 the baseline should be 13 according to the P+B-documents for the former biennium (5 baseline plus 8 target). But it is set at 5 member states, which is

<sup>24</sup> ILO (2011): Programme and Budget for the Biennium 2012-13, p42

<sup>25</sup> ILO (2013): The Director-General's Programme and Budget Proposals for the Biennium 2014–15, Governing Body 317th Session, Geneva, 6–28 March 2013

<sup>26</sup> Ibid., p35

less than half. The target for the end of 2015 is set at 15 member States. This is exactly 50% of the envisaged target in the strategy.

**Graphic 6 (Screenshot): Outcome 6, indicator 6.2, baselines and according to the proposals for Programme and Budget for 2014-15<sup>27</sup>**

Indicator 6.2: Number of member States in which tripartite constituents, with ILO support, implement programmes to promote improved safety and health at work	
<p><b>Measurement</b></p> <p>To be counted as reportable, results must meet at least one of the following criteria:</p> <ul style="list-style-type: none"> <li>▪ The member State has incorporated OSH concerns into national development frameworks or similar national policy documents.</li> <li>▪ A national tripartite mechanism for OSH is established or revitalized so that it functions effectively (meeting regularly and making recommendations to government).</li> <li>▪ OSH information, awareness-raising and training strategies are designed and implemented by the government and employers' or workers' organizations to help give effect to programmes targeting improvement of OSH conditions, as documented by a schedule and budget allocation for, and reports of, activities.</li> <li>▪ Labour inspection services carry out more effective and efficient inspections to help ensure application of OSH standards, as documented through evidence in annual reports.</li> <li>▪ A register and analyses, with sex-disaggregated data, of occupational accidents and diseases are established or upgraded and maintained at national level by the competent authority.</li> </ul>	
<b>Baseline</b>	<b>Target</b>
5 member States, across 2 regions	10 member States, of which 1 in Africa, 3 in the Americas, 1 in Arab States, 2 in Asia–Pacific, 3 in Europe–Central Asia

This means that even if the targets for 2014/15 can be achieved, at the end of 2015 there will be a gap to the targets (both 30) of 7 countries for Outcome 6.1 (or 27% less than expected) and of 15 countries for Outcome 6.2. Only 73% of the target 6.1 or 50% of the target of Outcome 6.2 would have been reached.

However, the fact that the planning introduces in its ‘baselines’ other figures than the achieved ‘targets’ in the implementation report of the former biennium raises difficulties for the assessment.

**Progress report of the Plan of Action**

The ILO reports the progress towards the objectives periodically. For this purpose specific Progress Reports are prepared. The PLAN OF ACTION (2010-2016) covers the ILO activities to “achieve widespread ratification and effective implementation of the occupational safety and health instruments (Convention No. 155, its 2002 Protocol and Convention No. 187)”, basically two conventions and one protocol.

The first progress report on the Plan of Action-indicators was published in the end of 2011.<sup>28</sup> This progress report describes mostly well measurable indicators. The measurability and quantification is as better as closer it comes to conventions and recommendations and protocols. This might be a consequence of the organised and administered follow up of Conventions (also Recommendations and Protocols) by NORMES and the Committee of Experts on the Application of Conventions and Recommendations (CEACR).

<sup>27</sup> Ibid., p36

<sup>28</sup> ILO (2011): Improvements in the standards-related activities of the ILO Progress report on the implementation of the interim plan of action for the standards-related strategy, Geneva

**Table 2: Progress – Plan of Action indicators**

<b>Plan of Action – Indicators</b> <i>(Numbering by the author)</i>	<b>Progress Report November 2011</b>
1. Number of ratifications of C No. 155, its 2002 Protocol and C No. 187;	<b>10 ratifications in this period:</b> C No. 155: Belgium, Prot. to C No. 155: Australia; Portugal; Slovenia. C No. 187: Austria; Bosnia and Herzegovina; Canada; Chile; Germany; Russian Federation
2. Number of ratifications of other up to date OSH Cs;	<b>12 ratifications</b> C No. 127: India. C No. 139: Ukraine. C No. 161: Belgium; Ukraine. C No. 162: Australia; Kazakhstan; Morocco. C No. 174: Slovenia; Ukraine. C No. 176: Slovenia; Ukraine. C No. 184: Ghana
3. Number of countries which have developed and adopted a national OSH profile;	<b>3 cases of adopted profiles:</b> Cambodia, Ukraine and Zambia <b>4 ongoing:</b> Dominican Republic, Ghana, Ukraine and Zambia 47 countries (2002–09)
4. Number of countries which have developed and adopted a national OSH policy and programme;	<b>6 cases of adopted policies:</b> Argentina, Côte d’Ivoire, Ethiopia, Gabon, Republic of Korea and Pakistan <b>8 draft policies</b> initiated and under way: Bangladesh, Chile, Côte d’Ivoire, Estonia (revised policy), Mauritius, Montenegro, Seychelles and Sri Lanka A strategy for collecting data on national programmes is being developed.
5. Number of countries tabling or adopting national legislation necessary for ratification or implementation;	<b>5 cases of adopted legislation:</b> Ethiopia, Peru, Seychelles, Thailand and Zambia <b>14 cases of draft legislation initiated and under way:</b> Albania, Antigua and Barbuda, Bahamas, Benin, Burundi, Cambodia, Grenada, Kenya, St Vincent and the Grenadines, Sierra Leone, Thailand, Vanuatu, Viet Nam and Zimbabwe
6. Number of communications by member States of decisions to take steps for the effective application of C No. 155, its 2002 Prot and C No. 187 and of other OSH instruments;	<b>4 cases of plans to ratify C No. 155</b> declared during the period: Bangladesh, Benin, Chile and Dominican Republic <b>2 cases of plans to ratify C No. 187</b> declared during the period: Dominican Republic and Oman
7. Number of requests for assistance for the purpose of ratification or implementation of C No. 155, its 2002 Prot and C No. 187 and of other OSH instruments;	<b>CEACR:</b> Albania (C No. 174); Antigua and Barbuda (C No. 155); Armenia (C No.174); Plurinational State of Bolivia (C No. 45); Bosnia and Herzegovina (Cs Nos 119, 136, 139, 148, 155, 161 and 162); Burkina Faso (Cs Nos 161 and 170); Cameroon (C No. 162); Colombia (C No. 161); Cuba (Cs Nos 45 and 155); Ecuador (Cs Nos 115, 119, 136 and 148); Egypt (Cs Nos 45 and 62); Ghana (Cs Nos 115 and 119); Guatemala (C No. 45); Honduras (C No. 62); Kyrgyzstan (C No. 148); Mexico (C No. 176); Peru (C No. 139); Portugal (C No. 155); Rwanda (C No. 62) <b>Requests:</b> Chile (Cs Nos 155, and its 2002 Prot, 176 and 187); Comoros (C No. 13); Dominican Republic (Cs Nos 155, and its 2002 Prot, 176 and 187); Ethiopia (C No. 155)
8. Number of countries which have set up, or substantially improved, national systems for recording and notification of occupational accidents and diseases;	<b>1 case of improved systems:</b> Tunisia <b>2 cases of plans to improve recording and notification system:</b> Benin and Botswana
9. Number of countries that have developed a methodology for and use specific OSH indicators;	A strategy for collecting data is being developed
10. Number of requests for assistance for purposes of ratification or implementation of the OSH instruments, notably requests from national authorities for legal opinions	<b>3 cases:</b> France, Republic of Korea and Russian Federation, all concerning C No. 161

or advice necessary for ratification;	
11. Number of countries which apply the ILO Guidelines on occupational safety and health management systems (ILO-OSH 2001);	--
12. Number of cases of improved implementation as reflected by positive comments (expression of interest or satisfaction) by the ILO supervisory bodies on the application of C No. 155, its 2002 Prot and C No. 187 and other OSH Cs;	<b>2 cases of satisfaction</b> concerning C No. 155, and its 2002 Prot, and C No. 187 <b>8 cases of satisfaction</b> concerning other OSH Cs <b>14 cases of interest</b> concerning C No. 155, and its 2002 Prot, and C No. 187 <b>33 cases of interest</b> concerning other OSH Cs
13. Number of persons effectively trained by the ILO in OSH-related capacity-building activities at national, regional and interregional levels;	A conservative estimate is 700 persons. A more efficient strategy for collecting data is being developed
14. Number of requests for training materials, thematic and research papers to be produced;	---
15. Number of Decent Work Country Programmes which include commitments to improve the OSH system;	Out of three DWCPs adopted after 2010, one included an OSH component. Out of 23 pending draft DWCPs initiated in the period, ten include an OSH component
16. Information submitted by countries on the decline in the number of fatalities, accidents and diseases due to an improved implementation of OSH	---
17. Number of cases in which the constituents, with ILO support, adopt legislation, a national or sectoral profile, a policy or programme, improve implementation or ratify OSH Cs	---

It seems to be difficult to motivate the member states to invest in proper recording and notification systems (indicator 8, 9 and 16). Reliable systems are absolutely necessary to measure long term impact and sustainability. The missing report on Indicator 14 shows that there is either no interest or no feedback system.

### **Main findings and conclusions**

The analysis shows that there are three main areas, which require clarification:

- Confusion and incomparability due to the changes of the strategic framework between 2008-09 and 2010-11;
- Imprecise definition of indicators (it is not defined when can an activity be counted, e.g. as national policy);
- Missing coherence between planning and implementation documents.

Disregarding these difficulties, the progress of Outcome 6 – measured by its indicators – is between 27% and 50% lower than targeted in the SPF 2010-2015.

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