



International
Labour
Office
Geneva

Achieving MDG 4 through Decent Work

MDG 4: Reduce child mortality

Despite progress in some regions, child mortality rates remain intolerably high in poor countries and among the poorest families. Most of these deaths can be prevented. Improving child protection and the status of women is key to achieving Millennium Development Goal 4 (MDG 4). The International Labour Organization supports efforts to reach MDG 4 with a focus on working mothers, health-care workers, combating child labour and extending social protection.

In connection with pregnancy and childbirth, many men and women face poverty and the risk of income and job loss. Many parents cannot afford to take time away from economic activities to care for their children, and a lack of childcare facilities may further put children's health and lives at risk.

Throughout the world, returning to work is a major factor in women's decisions to stop or to reduce breastfeeding, lessening the nutritional, developmental and health benefits for the child and the physical and mental benefits for the mother.

The health and development of children can also be at risk when their mothers face hazards, long working hours or physically demanding tasks at work. Policies and practices in the world of work that address these issues and that increase household incomes and social health protection are an important part of the package of measures required to improve newborn and child health.

Up to 55 per cent of infant deaths from diarrheal disease and acute respiratory infections may result from inappropriate feeding practices. 1.5 million infant lives could be saved each year by extending the duration and exclusivity of breastfeeding.

Hazardous working conditions, physically demanding work, and irregular or long working hours are linked to miscarriages and stillbirths, premature births, foetal growth retardation and low-birth weight.

Decent work and child health

Through the Decent Work Agenda, the ILO contributes to the achievement of MDG 4 by promoting:

- workplace education, good working conditions, and safety and health standards;
- work-family policies enabling parents to care better for their children;
- investment in human resources and infrastructure in the health field;
- access to health care, family benefits and financial protection for all families;
- maternity protection for all women workers during pregnancy, childbirth and breastfeeding;
- the elimination of child labour.

The ability to breastfeed a child after returning to work has major benefits for the health of the mother and her child.

Breastfeeding provides the best nutrition for child growth, development and neonatal illness.

Progress towards MDG 4

At the current rate of progress, the MDG 4 target is not expected to be met by 2015. Global partnerships need to be strengthened and pledges on financing for development upheld. Gender attitudes need to be addressed. In certain regions, girl children suffer neglect, poor nutrition and lack health care.

In 2007, an estimated 9.2 million children worldwide under the age of 5 died from largely preventable causes such as pneumonia, diarrhea, malaria, malnutrition, lack of access to safe water, and HIV/AIDS. Two-thirds of both neonatal and young child deaths — over 6 million deaths every year — can be prevented. When mothers die, their children are ten times more likely to die within two years.

Poverty, work and gender inequality are deeply intertwined with poor newborn and child health. Mainstreaming the Decent Work Agenda into efforts to reduce child mortality by drawing on the ILO's unique ability to reach people in the workplace will accelerate progress towards MDG 4, enabling working parents to balance their working life with the care needs of their children.

What the ILO does

The International Labour Organization (ILO) is the United Nations agency devoted to advancing opportunities for women and men to obtain decent and productive work in conditions of freedom, equity, security and human dignity. The ILO establishes universally shared international labour standards, which provide guidance for national law, policy and practice in maternity protection, social security, and terms and conditions of work in the health sector. The ILO is tripartite, bringing together representatives of governments, employers and workers to jointly shape policies and programmes to promote the Decent Work Agenda.

Research and technical cooperation

The ILO conducts research on trends impacting on the reconciliation of work and family life, occupational safety and health, gender equality and child labour. Part of this work includes establishing a database on

maternity protection legislation in countries worldwide.

Research findings are used to develop practical tools and provide technical assistance to governments and social partners on how workers with family responsibilities can be supported.

International labour standards

The ILO has developed a range of international labour Conventions concerning maternity protection, workers with family responsibilities, social security, safety and health at work, and terms and conditions of work in the health sector.

The Maternity Protection Convention, 2000 (No. 183), promotes the sound development of children by securing safe and healthy working conditions for pregnant workers, enabling adequate pre- and post-natal care, supporting breastfeeding, and providing time and facilities for mothers to recover and care for their children and infants after birth. Similarly, other types of leave (paternity, parental and family), included in the Workers with Family Responsibilities Convention, 1981 (No. 156), enable working parents to have time to care for their children without risking their job or economic loss.

The ILO also works to extend social health protection, promote decent work for health workers, extend workplace information and services on safety and health, and to address social and developmental aspects of maternity: Nursing Personnel Convention, 1977 (No. 149), and Social Security (Minimum Standards) Convention, 1952 (No. 102).

Dialogue and partnerships

The ILO's greatest strength lies in its tripartite constituency — governments, workers' and employers' organizations — who bring their commitment, their networks and their ingenuity to generate the momentum and capacity to organize and negotiate at all levels of society.

Health centres can provide information about child health, yet many people do not have access to such centres. The workplace, however, is an important point of entry to provide information and education on child health and health services. The ILO reaches people in a unique way through the workplace.

Returning to work is a major reason mothers stop breastfeeding before their child reaches six months old, raising the risks of food and water-borne germs and diarrhea and lessening the nutritional benefits for the child's immune system and development.

Campaigns

The ILO participates in the Countdown to 2015 monitoring effort. The ratification of the Maternity Protection Convention, 2000 (No. 183), is among the Countdown indicators for the health systems and policies required to improve maternal, newborn and child health.

Maternity leave, as foreseen in the Maternity Protection Convention, 2000 (No. 183), is also included in country profiles of child health and education-related policy, systems and practice covered by UNICEF's State of the World's Children and UNESCO's Education For All.

The ILO also actively participates in the Partnership for Maternal, Newborn and Child Health (PMNCH), and the Global Health Workforce Alliance.

Highlights

International labour standards and national legal rights

- Sixty-three countries have ratified at least one of the three international maternity protection Conventions (Nos. 3, 103 and 183).
- Forty countries have ratified the Workers with Family Responsibilities Convention, 1981 (No. 156).
- Forty countries have ratified the Nursing Personnel Convention, 1977 (No. 149), which is intended to strengthen the rights of nursing personnel and to guide policy-makers and workers' and employers' representatives in planning and implementing nursing policies within the framework of a given country's overall health policy.
- The ILO is developing policy options to help constituents upgrade social security systems so that they are inclusive and take into account the needs of workers with family responsibilities.
- Governments and workers' and employers' organizations in a number of countries have introduced workplace programmes on breastfeeding and hygienic feeding practices, on HIV/AIDS education and services, including preventing mother-to-child transmission of HIV (PMTCT), and on measures that increase working parents' opportunities to provide family care.

Campaigning for decent work for health workers and child health

- Governments, employers' and workers' organizations called upon the ILO to launch a Global Campaign on Social Security and Coverage for All in 2001.
- ILO constituents participated in the first Global Forum on Human Resources for Health in Kampala, Uganda in March 2008, and endorsed the Kampala Declaration and the Agenda for Global Action as guiding documents for initial steps in a coordinated global, regional and national response to the worldwide shortage and misdistribution of health workers.

Contributions of the social partners

- The International Trade Union Confederation (ITUC) launched a global campaign on maternity protection in 2007, and trade unions have worked at global, national and local levels to make maternity protection a reality, promoting the ratification and application of Convention No. 183 in collective agreements and labour legislation.
- Employers and their organizations have recognized that the major obstacles faced by women in achieving equality derive from their reproductive roles and family responsibilities. Many corporate social responsibility initiatives and workplace education and services address such barriers.

Workplaces offer a key entry point for information, education and services about measures that will reduce child mortality, including information on maternal protection; safe and healthy working conditions; the importance of breastfeeding and hygienic feeding practices; HIV/AIDS prevention, treatment and support; PMTCT; and other information on child health care.



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Priorities

The workplace is an important entry point for enhancing access to information, education and health services to improve child health and reduce child mortality. Policies and measures that support parents in caring for their children without economic risk, and that improve their access to health care can be incorporated into broader efforts to address maternal, and child health.

Social health protection: Providing effective access to health care and financial protection

- Implement, extend and improve social health protection.
- Promote effective access to affordable quality health care and provide financial protection against health-related costs.
- Ensure adequate cash and medical benefits to promote maternal and child health.
- Special attention to young workers of reproductive age.

Maternity protection and breastfeeding support

- Implement principles of maternity protection and take steps to ratify Convention No. 183.
- Undertake education campaigns on the importance of maternity leave, safe and healthy working conditions and workplace breastfeeding support.
- Train health workers on safe working conditions to protect pregnant workers.
- Introduce measures to enable women to breastfeed at work.
- Take steps to ensure that women's jobs and livelihoods are secure throughout maternity.

Work-family policies

- Implement principles of Convention No. 156 and take steps toward ratification.
- Establish policies and measures to enable parents to provide care for their children without economic risk, e.g. parental, paternity, family, annual and sick leave with pay.
- Introduce policies and measures to reduce long and overtime working hours and allow flexibility for all workers.
- Put national and local policies and measures in place to make childcare available, affordable and of high quality to meet the needs of children and working parents.

Workplace education and services

Provide access to information, education and services at workplaces about:

- pre- and post-natal health and care for sick children;
- safe and healthy working conditions;
- the importance of breastfeeding and hygienic feeding practices;
- HIV/AIDS prevention, treatment and support;
- prevention of mother-to-child transmission of HIV/AIDS (PMTCT).

Training health workers and other OSH personnel at the workplace.

Achieving MDG 4 requires measures that improve care for newborns and their mothers, enhance family care and infant and child feeding, increase vaccinations, prevent and control diarrhea, pneumonia, sepsis, malaria and HIV/AIDS.



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Decent work for health workers

- Implement the principles of and ratify the Nursing Personnel Convention, 1977 (No. 149).
- Create decent terms and conditions of employment for health workers in public and private health sectors, including attention to wage levels and their timely payment, benefits, working hours, violence at work, hazardous working conditions, maternity protection, and HIV/AIDS prevention, treatment and support.
- Involve health workers in health service planning and reform.
- Develop and implement policies to support and motivate health workers through better working conditions and incentives to succeed that will attract and retain workers in the health sector.

Measures that enable parents to provide care and economic security to their families are vital to the health of children of all ages.

ILO: National experience and success stories

Maternity protection, including breastfeeding support

Hazardous working conditions are associated with poor outcomes of pregnancy including stillbirth, low birth weight, premature birth and malformation. Protection against hazardous working conditions is essential to sound foetal development and provides children with a healthy start to life. Through the **WISE+ programme**, training has been developed to improve working conditions in small and medium enterprises, with a participatory, action-oriented approach. Activities in **Mozambique** in 2009, resulted in increased productivity and improved working conditions in participating enterprises. Employers agreed to extend emergency loans to employees, meaning they now have funds for medical bills when needed; breastfeeding rooms have been established for working mothers and workers have more days off.

Social health protection: Providing effective access to health care and financial protection

More than half of the world's population today remains without any form of social protection. The lack of adequate social protection is a threat to the health of women and their children during pregnancy and childbirth. Without appropriate medical care for mothers and their children, health outcomes will continue to suffer.



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The ILO's Strategies and Tools against Social Exclusion and Poverty Programme (STEP) is a major instrument to implement the Global Campaign on Social Security and Coverage for All launched by the ILO in 2001. STEP has developed a broad worldwide knowledge base and extensive field experience on community-based social protection schemes (in particular health protection), and is working intensively on non-contributory mechanisms aiming to provide basic social protection to all. STEP also works to link social transfers with employment policies and with measures ensuring better access to basic social services.

Work-family policies

In 2007, **Paraguay** ratified Convention No. 156 thanks to strong advocacy by a wide range of social actors. Since 2000, the ILO has supported local governments, coffee workers' and employers' organizations of **Nicaragua** in the setting up of rural childcare services for both seasonal and regular agricultural workers. In particular, as part of the "Harvesting Plan" initiative, municipalities provide space in school buildings, and employers and workers support the cost of food, health care and caregivers' salaries so childcare can run during parents' working hours.

Addressing the shortage of health-care workers as a major cause underlying poor supply and quality of maternal, neonatal, childhood and lifelong health-care services urgently requires action. Improving the working conditions of health personnel is key to attracting and retaining workers.

Working parents everywhere need access to affordable, quality childcare that enables parents to work without sacrificing the care their children require.

Workplace education and services

The **WIND programme** covers tools to improve working conditions among subsistence and agricultural workers and workers in the informal economy. These training tools address aspects of working conditions, including maternity protection. The **WIND programme** was first developed by ILO with other organizations in **Viet Nam** and has since been applied in **Ethiopia, Kyrgyzstan, Moldova** and **Senegal**. The ILO is also developing training modules to enhance the capacity of employers' organizations to assist enterprises in developing and implementing workplace initiatives for improving maternity protection.

Decent work for health workers

The working conditions of health workers are a serious concern in view of their impact on the delivery of health services in many countries. The first Global Forum on Human Resources for Health was held in Uganda in March 2008 under the auspices of the Global Health Workforce Alliance, of which the ILO is a member. Some 1,500 participants attended the Forum, including health workers' representatives, experts and ministers of health, education and finance, and donors. Forum participants endorsed the Kampala Declaration and the Agenda for Global Action as guiding documents for initial steps in a coordinated global, regional and national response to the worldwide shortage and misdistribution of health workers.

ILO resources

ILO Conventions

- Relevant international labour standards and texts at <http://www.ilo.org/ilolex/english/index.htm>.
- Maternity Protection Convention, 2000 (No. 183), and Recommendation (No. 191).
- Workers with Family Responsibilities Convention, 1981 (No. 156), and Recommendation (No. 165).
- Nursing Personnel Convention, 1977 (No. 149), and Recommendation (No. 157).
- Social Security (Minimum Standards) Convention, 1952 (No. 102).

ILO departments

Conditions of Work and Employment Programme (TRAVAIL)

For overall coordination, research, tools on maternity protection and work-family balance (www.ilo.org/travail)

International Labour Standards Department (NORMES)

For overall information and expertise on international labour standards (www.ilo.org/normes)

Programme on Safety and Health at Work (SAFEWORK)

For research and expertise on occupational safety and health (www.ilo.org/safework)

Social Security Department (SEC/SOC)

For information, research and tools on social health protection (www.ilo.org/secsoc)

Sectoral Activities (SECTOR)

For information, research and tools on the health sector and social dialogue (www.ilo.org/sector)

Programme on HIV/AIDS and the World of Work (ILO/AIDS)

For information, research and tools on HIV/AIDS and the World of Work (www.ilo.org/aids)

Bureau for Workers' Activities (ACTRAV)

For information and tools on workers' organizations, including initiatives for gender equality, maternity protection and work-family balance (www.ilo.org/actrav)

Bureau for Employers' Activities (ACT/EMP)

For information and tools on employers' organizations, including initiatives for gender equality, maternity protection and work-family balance (www.ilo.org/actemp)

Bureau for Gender Equality (GENDER)

For advocacy and outreach on gender equality, including maternity protection and work-family balance (www.ilo.org/gender)

International Training Centre (TURIN) (ITC/ILO)

For training courses on gender equality, maternity protection, work-family balance, social health protection and social dialogue (www.ilo.org/turin)

ILO Field Offices

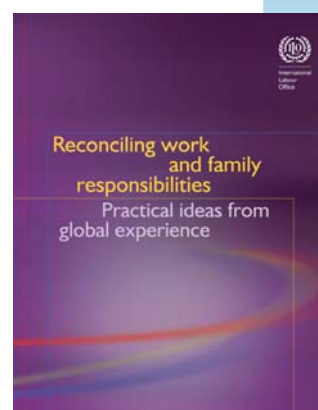
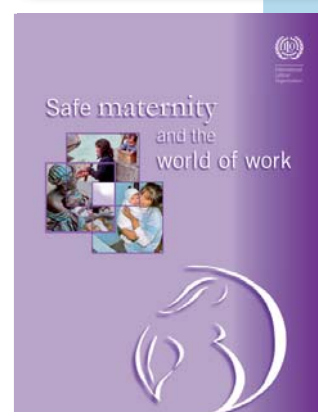
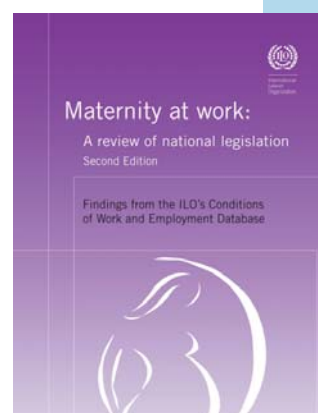
For national and regional activities on maternity protection, work-family balance, social health protection, decent work for health workers (www.ilo.org/global/regions)

WHO/UNAIDS/UNICEF recommendations for breastfeeding

- <http://www.unicef.org/programme/breastfeeding>

ILO publications

- Maternity Protection Resource Package (forthcoming at www.ilo.org/travail)
- ILO Database of Conditions of Work and Employment Laws: Maternity Protection, at www.ilo.org/travail
- *Maternity at work. A review of national legislation*, Second edition (ILO, 2010), at www.ilo.org/travail
- *Workplace Solutions for Childcare* (ILO, 2010), at www.ilo.org/travail
- WISER Module 5 on Family-Friendly Policies (ILO, 2009), at www.ilo.org/travail
- *Work and Family: The way to care is to share* (ILO, 2009), at www.ilo.org/gender
- *Work and Family: Towards new forms of reconciliation with social co-responsibility* (ILO-UNDP, 2009), at www.ilo.org/travail
- A Training Package on Work and Family (ILO, 2008), at www.ilo.org/travail
- *Safe maternity and the world of work* (ILO, 2007), at www.ilo.org/travail
- *Social health protection: An ILO strategy towards universal access to health care*, draft for consultation (ILO, 2007), at www.ilo.org/secsoc
- *Reconciling work and family responsibilities: Practical ideas from global experience* (ILO, 2005), at www.ilo.org/travail
- *Social dialogue in the health services: A tool for practical guidance* (ILO 2004), at www.ilo.org/sector
- *Healthy beginnings: Guidance on safe maternity at work* (ILO, 2004), at www.ilo.org/travail
- Information sheet series on work and family and maternity protection, at www.ilo.org/travail



Further information:

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