

**FIFTH EUROPEAN MEETING OF THE WHO
COLLABORATING CENTRES IN OCCUPATIONAL HEALTH
BUXTON, UNITED KINGDOM, 14-16 MARCH 2007**

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INTRODUCTION

Sixty delegates from twenty-six European countries met in Buxton, UK, 14-16 March 2007, for the World Health Organisation's (WHO) 5th Network Meeting of European Collaborating Centres in Occupational Health. The network has meetings at two yearly intervals and this year the Health and Safety Laboratory hosted the event. Representatives from the European Commission, the International Labour Organisation, the International Commission on Occupational Health, and International Trade Union Confederation also attended. The next meeting of the Network will be held in Madrid, Spain in late 2008, hosted by the European Institute of Health and Social Welfare. The Meeting participants expressed their warm gratitude and appreciation to the Health and Safety Laboratory, for the excellent organization and arrangements of the Fifth Network Meeting. The followings are the conclusions and recommendations of the meeting as summarized by Ms Suvi Lehtinen, who was elected as rapporteur of the meeting.

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1. Coordination and leadership

The European Network of the WHO Collaborating Centres in Occupational Health expressed its satisfaction in the efforts of the WHO Regional Office for Europe to strengthen the activities on occupational health in the European Region in accordance with the WHO Global Plan of Action on Workers' Health, which is expected to be endorsed by the World Health Assembly in May 2007.

The meeting recommended that issues of continuity and sufficient human and financial resources for occupational health be considered by the WHO Regional Office for Europe. This is crucial for meeting the occupational health needs of the countries and for the coordination and leadership to develop occupational health on an equitable basis in all parts of the Region.

2. Roles of National Focal Points, Collaborating Centres and the Regional Office

There was a great deal of enthusiasm and optimism among the meeting participants as to the opportunities for further development of occupational health in the European Region. The participation of the National Focal Points for Occupational Health in the ministries for the first time in the Network meeting was seen as a positive stimulus for collaboration at the national level. Several good examples were presented regarding, among other things, sub-regional networking and collaboration.

In order to further strengthen the priority position of occupational health – both on national and international agendas – closer collaboration among the National Focal Points (NFC) for Occupational Health in the respective Ministries and the Collaborating Centres (CCs) in Occupational Health was encouraged. In addition, closer contact between the National Focal Points and the Collaborating Centres with the WHO Regional Office was called for. This would increase the positive feedback from the countries in the Regional Committee meetings regarding the priority position and visibility of occupational health.

3. Programmes

The programmes and objectives of the WHO, ILO and the EU, as well as the forms of their collaboration, were described well in the meeting presentations and contributions. The WHO has developed the Global Strategy on Occupational Health for All (1996) and the WHO Global Plan of Action (forthcoming). The ILO Global Strategy on Occupational Safety and Health and the new ILO OSH Promotional Framework Convention No. 187 provide guidance to countries developing occupational safety and health. The EU Strategy on Safety and Health at Work 2007–2012 and the EU Health Strategy have been recently approved. All these documents and instruments were found to provide a strong political base for the practical implementation of

occupational health and safety systems and for further developing Decent Work in the Region. It was also appreciated by the meeting participants that the strategies and programmes of the above international organizations are synergistic, without duplication.

Substantively, the strategies provide guidance to all countries in the development of occupational health at the national level. The emphasis on the development of work ability, health, health promotion and employability of workers was gratefully appreciated. The increasing gap between and within sub-regions and countries needs to be narrowed. The principles of Health in the World of Work and Occupational Health in All Policies should also be taken into account when advancing policies for decent work. The meeting recommended that higher priority be given to primary preventive actions targeted toward the work environment and the work organization. The need for further training of all partners, including experts, workers and employers was recognized. Where appropriate and possible, the project and programmes of international organizations (WHO, ILO, EU) should be carried out in close collaboration.

4. Funding

The meeting recognized several actions that can be taken forward with relatively limited funding. However, planning and carrying out large-scale multi-centre projects with expected wide impacts on European work life requires sufficient funding and personnel resources.

The funding possibilities of the various programmes of the European Union should be fully utilized. Several project proposals were identified for which funding will be applied from appropriate programmes within the EU. The Collaborating Centres were also encouraged to organize consortia to respond to specific calls launched by the European Commission, especially by Research, and Health, and Consumer Protection Directorate-Generals. In addition, the Centres were invited to identify emerging occupational health research and policy issues and bring them to the attention of relevant contact points in the Commission, as well as national contact points for the Framework Programmes, in order that they be aware and consider these issues when elaborating topics for future calls for proposals. Through those contacts, emphasis should be given to the need for an Occupational Health Chapter in the forthcoming research Framework Programmes and other programmes.

5. Dissemination of information

Strong and dynamic information support to both the political decision-makers, as well as all other key stakeholders in occupational health and safety is the cornerstone of well-informed and coherent policy decisions on occupational health in society, and it is

sorely needed in all countries. It is also important to raise awareness of and raise the profile of workers' health issues. The Collaborating Centres are strong advocates for Occupational Health in the Region.

All channels and forms of information dissemination, including the participation of experts in public debate regarding the role and impact of occupational health in the welfare of the nations, should be utilized in a more systematic way. Access for all Network members to follow up and utilize the information gathered through multi-centre projects should be ensured.

6. Working groups for multi-centre projects

During the meeting nine Working Groups convened. Their topics were:

- Protecting health care workers, construction and agricultural workers from hepatitis B, asbestos and pesticides, etc.
- Ageing workers, work capacity and workplace health promotion
- Promoting Basic Occupational Health Services
- Occupational exposure to carcinogens
- Pan-European Workers Health Information System
- Newly emerging hazards, nanoparticles
- Re-emerging hazards, stress
- Economic aspects of occupational health and safety
- Narrowing the workers' health inequities within and between countries

The work and conclusions of the Working Groups in this Meeting will directly contribute to the Implementation of the Global Plan of Action on Workers' Health in the European Region.

Editorial Note

The Inter-Faculty Institute of Maritime and Tropical Medicine, Medical University of Gdańsk, has been the WHO Collaborating Centre for Maritime Occupational Health.

Publishing this IMH journal is one of the WHO collaborating projects currently implemented by the Institute.