

Occupational Health Equity Program PPOP

What are our priorities?

Not all workers have the same risk of experiencing a work-related health problem, even when they have the same job. Factors that place some workers at greater risk include social dynamics such as race, ethnicity, place of birth, age, class, and gender; economic trends such as the growth of the temporary workforce; and organizational factors such as business size. These vulnerable workers may need additional or different tools, strategies, and resources to promote occupational safety and health. The National Institute for Occupational Safety and Health (NIOSH) Occupational Health Equity Program seeks to improve occupational health and safety in specific, higher-risk populations with the help of partners in industry, labor, trade associations, professional organizations, and academia. The program focuses on these areas:

- Decreasing injury and illness in industries where vulnerable workers are frequently employed. Decreasing fatal occupational injuries and illnesses among vulnerable workers

What do we do?

- Improve surveillance to better capture differences in the number and type of injuries, illnesses, and fatalities across vulnerable worker populations.
- Use surveillance to understand better how economic costs like days away from work and healthcare expenses vary across vulnerable worker populations.
- Expand intramural and extramural collaborations with researchers studying injuries and chronic diseases (such as cardiovascular disease, diabetes, reproductive health, and cancer) by including occupational health questions in ongoing studies.
- Document occupational health inequities among groups of workers and research the causes of those disparities.
- Partner with state and federal agencies interested in worker safety and health, including city and state health departments and other CDC programs, to share information and helpful tools to impact more workers.

What have we accomplished?

- NIOSH, in partnership with the [Center for Work, Health & Environment](#) and the [National Indian Health Board](#), convened an American Indian and Alaska Native (AI/AN) [workshop](#) with over 50 participants.
- [Partnered](#) with the Anchorage Health Literacy Collaborative to educate adult English-language learners, many of whom are immigrants, on worker safety and health principles.
- [Identified](#) key aspects of the agriculture, forestry, and fishing industry sector that contribute to long work hours, sleep deprivation, and fatigue among workers, including immigrants.
- [Found](#) that patient care aides, a low-wage workforce predominantly made up of women and racial/ethnic minorities, have limited access to healthcare and high prevalence of adverse health outcomes.
- [Provided](#) national prevalence estimates of workplace discrimination and mistreatment from a community-based cohort of employed black and white men and women aged ≥48 years.
- [Collaborated](#) with international experts on methods for reducing bioaerosol exposures among seafood processors, many of whom are immigrants.

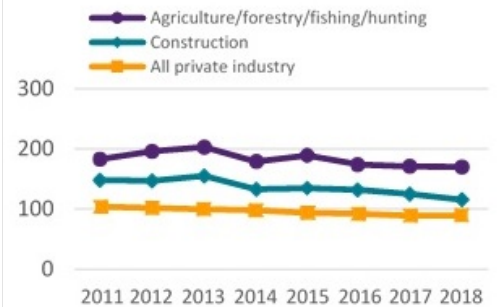
What's next?

- Finalize a strategic plan for American Indian and Alaska Native (AI/AN) workers across the U.S. that describes the safety and health research priorities for AI/AN communities.
- Promote consideration of the United States' changing workforce demographics in NIOSH's [Future of Work Initiative](#), in order to secure occupational health equity for an increasingly diverse workforce.
- Translate NIOSH's "[Protégase en el Trabajo](#)" (protect yourself at work) educational materials, including brochures and posters, into English in order to assist English-language learners in the workforce.
- Determine if it is possible to systematically collect crewmember language and English fluency information from U.S. Coast Guard injury reports, to populate NIOSH's [Commercial Fishing Incident Database \(CFID\)](#).

At-A-Glance

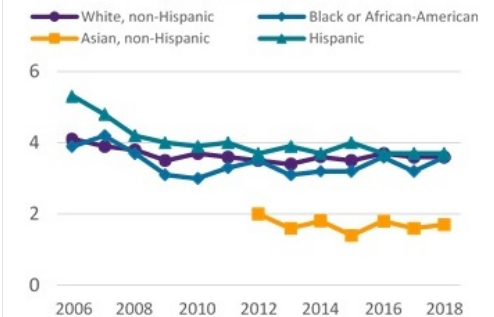
The Occupational Health Equity Program seeks to eliminate health inequities in morbidity and mortality that are closely linked with social, economic, and/or environmental disadvantage. This snapshot shows recent accomplishments and upcoming work.

Days away from work injury and illness rate (per 10,000 workers) in Sectors with a high proportion of Hispanic workers



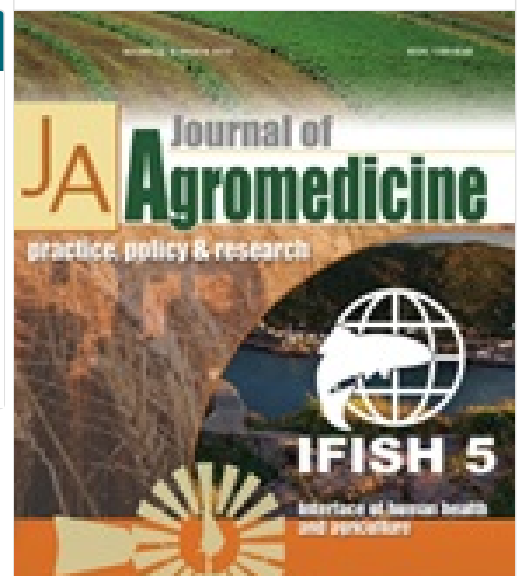
Source: U.S. Bureau of Labor Statistics

Rate of fatal occupational injury by race/ethnicity (per 100,000 workers)



Source: U.S. Bureau of Labor Statistics

Publication Spotlight



Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health

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