Volume One, Number Two, June 2007 Message from Dr. Maria Neira, Director, Public Health and Environment, World Health Organization

Dear colleagues,

I am very pleased to address this message to you, members of the Network of Collaborating Centres, which have been making a substantial contribution to our goal of "occupational health for all."

An excellent example of the synergy that exists between the WHO workers health programme and the CC Network members has been the development of the Global Plan of Action on Workers Health (2008-2017). I am extremely pleased to announce that the Global Plan of Action and its Resolution were endorsed on the 22nd of May 2007 at the World Health Assembly in Geneva. The



Dr. Maria Neira, Director, Public Health and Environment, World Health Organization

overwhelming support from the Member States, the international NGOs, the ILO, the Trade Unions, and Employers for the Global Plan has been heartwarming. And of course, the role of the Collaborating Centres has been fundamental in shaping the plan and will be fundamental in its implementation.

The WHO CC meeting that was held exactly one year ago in Stresa again demonstrated the commitment of all the Centres, and we are looking forward to working with you. You are the "on-the-ground" actors, with capacities and networks in developed and developing countries, and you play a key role in supporting capacity building at country level.

We are grateful to all of those working on projects within the Network and look forward to your continued success and the implementation of the Global Plan of Action to improve the health of workers all over the world. Workers Health is a great resolution... let's make sure that in ten years we will have the health of the workers at the highest possible level!

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The World Health Assembly endorses the "Global Plan of Action on Workers' Health 2008-2017"

As you know, the World Health Organization has been working on the preparation of the Global Plan of Action for over three years. The occupational health team, under the leadership of Gerry Eijkemans, has organized several global, regional, and national meetings and consultations to discuss the development of the Plan. On May 22, 2007, the World Health Assembly endorsed the "Global Plan of Action on Workers' Health 2008-2017."

Workers represent half of the world's population and are major contributors to economic and social development. All workers should be able to enjoy the highest attainable standard of physical and mental health and favorable working conditions.

The Global Plan of Action calls for all aspects of workers' health, including primary prevention of occupational hazards, protection and promotion of health at work, employment conditions, and a better response from health systems to workers' health. The health of workers is determined not only by the workplace hazards but also by social and individual factors and access to health services. Furthermore, the plan focuses on the protection and promotion of health at the workplace, the improvement of the performance of and access to occupational health services, and the provision of evidence for action and good practice. Its activities will include global campaigns for elimination of asbestos-related diseases, immunization of health-care workers against hepatitis B, and other actions addressing priority work-related health outcomes.

WHO will work with Member States to strengthen the capacities of the ministries of health to provide leadership for activities related to workers' health, to formulate and implement policies and action plans, and to stimulate intersectoral collaboration. The coordination between the health and labour sectors is fundamental, but workers' health also has to be incorporated into all policies.

The Collaborating Centre Network, including ICOH, IOHA, and IEA, has been fundamental for the development of the Global Plan of Action. The Workplan of the Network is very much in line with the Global Plan of Action, and the work of the Network will greatly contribute to the implementation of the Global Plan of Action.

Spotlight: Kaj Elgstrand, Creator of Activity Area 1

Kaj graduated as teacher of gymnastics and sports in 1964 and began work at the Institute for Work Physiology in Stockholm in research and teaching in work physiology and ergonomics, especially related to manual work. Working with the International Telecommunication Union, Kaj introduced ergonomics as a subject for investigation and teaching at the University

of Cauca, Colombia. Kaj was the Director of the national specialist training courses for personnel including labour inspectors. From 1988-1992, he worked in Finland, as director of the Nordic Institute for Advanced Training in Occupational Health. At the Swedish National Institute for



Kaj Elgstrand

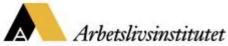
Working Life (NIWL), he was the director of many international training programs for OSH specialists. Together with Christer Hogstedt, he initiated two twelve-year collaboration programs, Salud y Trabajo en Centro América (SALTRA) and Work and Health in Southern Africa (WAHSA), which aim to prevent occupational accidents and diseases in the two regions through research, capacity building and direct actions.

Kaj notes that the international world of work is undergoing dramatic changes. Globalisation is reshaping industry, technology, work, working conditions, and labour markets. There are growing demands for flexibility, mobility, and productivity. Freer flows of capital, knowledge, and work forces have created new risks for extreme inequalities between individuals, nations, and regions. In the developing countries, a large portion of the working population is part of the informal economy, and is outside laws and societal control of occupational safety and health. The current paradigm that occupational safety and health is regulated by laws and agreements between the tripartite social partners is under stress. Therefore, Kaj finds it relevant that "WHO has taken the initiative to establish the 2006-2010 Workplan with Global Situation Analysis as its first Activity Area."

The Swedish National Institute for Working Life (NIWL) has been a major contributor to the WHO Collaborating Centre Network. On this occasion, the CC Network thanks Kaj Elgstrand and the entire staff of NIWL for their leadership and work in the area of occupational safety and health for all. We invited Kaj to contribute a farewell article.

Farewell to the Swedish National Institute for Working Life

By Kaj Elgstrand, Swedish National Institute for Working Life



In October 2006, the new Swedish government declared its intention to close the Swedish National Institute for Working Life (NIWL), and the Parliament took the decision in December. The Institute is closing down on July 1, 2007, and the 420 employees have moved to other jobs, retired, or are unemployed.

NIWL and its predecessors have 40 years of history. In 1966, the National Institute for Occupational Medicine was created. The mission was to provide specialization in research and training in occupational safety and health to meet the developments in Swedish working life. Specialist training of personnel for occupational health services also became the responsibility of the Institute.

During the period from 1972 to 1987, occupational safety and health issues had great social visibility and important research was carried out concerning the toxicity of vinyl chloride, motor fuels, and other solvents. In the 1980's, musculoskeletal disorders became a social and scientific concern. The Institute reappeared as an independent Institute in 1987, named the National Institute of Occupational Health (NIOH).

In 1992, political measures changed the conditions for occupational health services in the enterprises, and the Institute's yearly specialist training courses decreased in numbers. In 1995, NIOH merged with the Institute for Work Life Research, and NIWL was created. Sickness and absence from work were major concerns in society in the beginning of the new millennium.

Now NIWL is closing down. Why? The government has declared that this type of research should be carried out at the universities, not in governmental agencies. It has also been mentioned that the work environment in Swedish enterprises is of high standard and that the Institute therefore is not needed. Another reason for the closure may be found by comparing with the latest closure of a national occupational health institute. It happened in 1974, when general Pinochet closed the national occupational health institute in Chile to change the societal focus from working conditions to the creation of new jobs.

Regional Collaboration: The Fifth European Network Meeting of the WHO Collaborating Centres in Occupational Health

By Suvi Lehtinen, Finnish Institute of Occupational Health

The European Network of WHO Collaborating Centres in Occupational Health was established in 2000 to put emphasis on issues specific to the European Region and to give support to the implementation of WHO occupational health programmes in Europe. The Fifth European Network Meeting was held on 14–16 March 2007 in Buxton, United Kingdom. The Health and Safety Laboratory (HSL) was the local organizer of the successful meeting. Mr. Eddie Morland, Chief Executive, bid all the participants a warm welcome on behalf of HSL. Special

Andrew Curran and David Fishwick co-chair the Fifth European Network Meeting of the WHO Collaborating Centres in Occupational Health. Photo courtesy of HSL.

thanks to Dr. Andrew Curran, Dr. David Fishwick, Mr. Edward Robinson and all their colleagues, who helped make this meeting a very successful event.

The main issue on the agenda was how to encourage and initiate multi-centre studies in the Region with a specific aim to implement the 2006–2010 Workplan of the WHO Global Network of Collaborating Centres in Occupational Health. Other issues discussed were: agriculture and rural health; basic occupational health services; stress and psychosocial factors at work; and the changing world of work, including work ability of ageing workers and problems caused by new technologies, as well as improving the evidence base of occupational health.

The newly-appointed National Focal Points in Occupational Health (in the ministries) were invited to the meeting. The 32 Collaborating Centres in the European Region come from 18 different countries.



Engaged participants in Buxton, UK. Photo courtesy of HSL.

As the total number of countries in Europe is 53, we still have a major challenge ahead to involve all countries, thus ensuring the provision of occupational health and safety services to all working people in the Region.

The meeting also decided to send a pledge to the WHO Regional Office for Europe, offering the collaboration of the Network as

an arm of the Regional Office in the countries, and at the same time requesting that the Regional Office ensure the priority position of occupational health on its agenda.

The next meeting of the Network will be held in Madrid, Spain in late 2008 at the kind invitation of Dr. Elena Muñoz of the European Institute of Health and Social Welfare.

A "Crystal Clear" Collaboration

By Jo Harris-Roberts and Ed Robinson, Activity Area 2

There have already been a number of successful collaborations within the WHO networks, and as the Activity Area 2 Manager and Deputy, we would like to thank all the collaborating centres involved so far. While it would be great to showcase all of the centres' activities, we have chosen one particular success story for this issue, which describes ongoing work in the field of best laboratory practice for crystalline silica exposure assessment.

This scheme of work has been led by Dr. Rosa Key-Schwartz of the National Institute for Occupational Safety and Health. This large and complex project is responsible for preparing a number of key guidance documents for silica exposure measurement techniques, quality assurance, and proficiency schemes. This information is currently being disseminated to laboratories though training events and seminars.

In order to achieve the project's aims, this work has relied on a number of essential networks and collaborations operating on sub-projects including: ISO, ASTM, WHO/ILO, PAHO, IOSH, HSL, ISP (Chile), OSHA, MSHA (United States) and the WOHL (United States). This large network has incorporated the skills from a number of experts in diverse fields ranging from laboratory scientists, geologists, chemists, and mineralogists to policy makers, who have worked together on this multidisciplinary team.

As the project has developed, members within the collaboration have taken responsibility for the delivery of a number of project outcomes. For example, Peter Stacey of HSL is leading the Best Laboratory Practice ISO project, and Joseph Fernback is working on the ASTM project concerned with workplace air and defining bulk materials. This has demonstrated how the functional model of collaborative project delivery can be applied successfully to large multi-centre projects.

As we go to press, this work is concentrating on assisting laboratories within developing countries to implement quality assurance programs and laboratory accreditation. In fact, Dr. Rosa Key-Schwartz will be in Santiago in July to provide training for silica analyses to laboratories from Chile, Peru, and Brazil. We wish her and the team continued success with this work, which has provided vital research skills and training for

crystalline silica assessments and has offered us all a working model of successful collaborations.

Further details about this work on silica assessment can be obtained from the project leader: rjk9@cdc.gov and for more information about Activity Area 2 (Jo Harris-Roberts/Ed Robinson) or the Health & Safety Laboratory, please contact: cwh@hsl.gov.uk.

Conferences

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