

Manifesto of Rio de Janeiro on public occupational health policies: towards strengthening, follow-up and implementation

Manifesto do Rio de Janeiro sobre as políticas públicas de saúde do trabalhador, para seu fortalecimento, acompanhamento e implementação

During the Pan American Conference on Occupational and Environmental Health held in Rio de Janeiro from September 26 to 29, 2018, the Pan American Forum on Public Policies on Occupational Health was organized by the National Association of Occupational Medicine of Brazil ANAMT, the Latin American Association of Occupational Health (ALSO) and the American College of Occupational and Environmental Medicine (ACOEM), with the support and participation of the Pan American Health Organization (PAHO), and the institutional support of the International Commission on Occupational Health (ICOH) and the International Occupational Medicine Society Collaborative (IOMSC).

Delegates came from 16 countries of North America (Canada, United States and Mexico), Central America (Guatemala, El Salvador, Honduras, Costa Rica and Panama) and South America (Colombia, Ecuador, Venezuela, Peru, Uruguay, Chile, Argentina y Brazil), represented a significant sample of the countries of the region. They presented the main characteristics of the national occupational health systems in the countries of the Americas, in terms of legislation, best practices, strengths and challenges; and shared the way public policies in the continent are carried out. Based on these, participants were able to exchange experiences and strengthen international cooperation ties in those matters. Delegates from the Brazilian Ministry of Health, the Federal University of Minas Gerais, the University of Campinas and the Brazilian Association of Workers' Health (ABRASTT) also joined and participated in the Forum.

Based on the realities presented made by the participants, as well as the considerations, information and experience exchanges, the dialogue held between participants, and the preliminary conclusions, the organizers of the Forum declare that:

1. Regional heterogeneity is evident in terms of sociodemographic aspects, public policies, legislation and regulation, government structures and institutions, public and private insurance, workers' health care coverage, records occupational injuries diseases -that are deficient in general-, and on education and awareness in Workers' Health, amongst other issues.
2. That amongst countries that were present, Colombia (2001), Venezuela (2006), Argentina (2012), Brazil (2012), Peru (2013), Costa Rica (2014) and Chile (2016) have a national public health policy document on occupational health or for the protection of health in the world of work; and that there are others like Ecuador, which is in the process of its formulation. Similarly, all countries have constitutions, labor and health codes, laws, decrees, resolutions and technical guidelines for protecting workers' health and safety, many of which many require updates, modernization and adaption to the new realities of the world of work in the 21st century.
3. Nevertheless, the persistence of multiple and varied common problems was evident, including issues such as:

- a. The consequences and the effects of economic crises and their resulting consequences on social conditions that conditions prevalent in the region, such as poverty, social violence, labor exploitation, child labor and increasing migratory flows, all of which contribute to the increasing burden of informal work and informal employment which, without exception, affect in varying degrees all the countries of the region;
 - b. The lack of awareness and social dialogue that does not involve workers and unions, academia and research centers, and professional associations, and that calls to improve communication, coordination and exchange of experiences and knowledge amongst social actors in the world of occupational health in such a way that meets intersectoriality, as well as inter and trans disciplinary approaches, both at the national and international level;
 - c. The management and control weaknesses of the health, labor and safety and/or social protection sectors, probably linked to government variability, that weaken the required job enforcement from labor and health inspections;
 - d. The lack of trained and qualified human resources on basic occupational health sciences (Hygiene, Ergonomics, Safety and Occupational Medicine) for being able to address the problems in a comprehensive way, jointly with the weakness on the provision of health services for workers, particularly in Primary Health Care services, so that, as an entry point, they can promote workers' health and prevent occupational injuries and diseases;
 - e. Occupational health problems that have arisen from the new ways of work during the 21st century, such as the stress epidemics, psychological harassment and mental health problems (depression and suicide), musculoskeletal disorders, and other occupational diseases that historically coexist and that are not adequately attended or registered such as occupational cancer, silicosis, asbestosis, amongst many other pathologies;
 - f. The lack of detection, diagnosis, registration, notification and compensation of occupational injuries and diseases, which does not allow to complete national statistics, added to the weaknesses of national information systems and the minimum metrics in workers' health available to the national and regional stakeholders;
 - g. The differences between the public and private sectors that generate additional inequities, including the effects of public and private insurance coverage, together with the weaknesses to coordinate actions between regulators and public and private insurers to encourage and promote the workers' health and well-being;
 - h. The need to create awareness and prepare workers to identify and act on hazardous risks and processes at the workplace, so that they can become promoters of well-being and health at work; and,
 - i. The need to place the worker as the center of attention, in such a way that conveys the transversal approach of *Health in All Policies*, so that no worker is left behind.
4. That acknowledging that workers' health is a complex challenge for public health policies that has a high impact on the health of a large population group – about 600 million people in working age – and affects multiple sectors, PAHO contributed and emphasized some elements of Health in All Policies approach, which can serve to promote best practices of intersectoral and interdisciplinary collaboration. From this point of view, the workers' health becomes a priority for governments to promote best practices in the exchanges of Government-as-a-Whole and Society-as-a-Whole. This approach can advance towards philosophical and cultural changes for modifying social values towards workers' health; consider new ways of work with shared, flexible and collaborative leadership; and, generate new responsibilities and incentives for formulating or updating innovative policies, designing programs and providing services that involve all stakeholders, the public and private subsectors, and civil society.
 5. That considering the weaknesses and gaps caused by the problems and the consequent inequities in public policies, the professional associations that organize the forum manifest emphasizing their concerns about:
 - a. The current situation of workers' health and the need to strengthen policies and systems of health and safety at work;
 - b. The need to include all the countries of the region in this analysis, so that their needs are considered,

as well as all stakeholders from the government, workers, employers, academia, occupational health professionals and civil society;

- c. The need to reconsider the public health strategies which commemorate the 40th anniversary of the Alma Ata Declaration on Health for All, and to promote the strengthening of primary health care services, with emphasis on the health care of workers;
 - d. To make visible and share the successful experiences and good practices that can be replicated, fostering cooperation between countries and regions; and,
 - e. Maintain a permanent dialogue through virtual or face-to-face forums, to continue to exchange of solutions, experiences, knowledge and best practices.
6. That, to contribute to the improvement of public policies and to advance with their updating and progress towards equity for Workers' Health, they commit themselves to:
- a. Disseminate the information that was collected during this event, to raise awareness of the problems that workers' health is facing today in terms of public policies in the region;
 - b. Maintain the commitment and willingness to participate in a permanent, active, vigilant and efficient way, to help resolve the problems exposed during the forum;
 - c. Convene all stakeholders (governments, workers, employers, academia, professional associations, social collectives, etc.), to get them involved in the analysis and solution of the situations described; and,
 - d. Establish a road map and the collective mechanisms that will allow to continue this dialogue and exchange of experiences including all the countries of the continent.

Based on these premises, the organizers and those attending the Forum and this conference, call for action to academia, researchers, employers, workers, NGOs, civil society as a whole and governments as a whole, to protect and improve health at work, and reaffirm their commitment to contribute to the construction of healthy, productive, happy and resilient societies for the generations that follow us in the following decades, and the achievement of the sustainable development goals.

The organizers, institutions and associations approve and subscribe this document, on September 29, 2018 in the city of Rio de Janeiro, Brazil.

Paulo Rebelo

Associação Nacional de
Medicina do Trabalho - ANAMT

Luis García Girón

Asociación Latinoamericana
de Salud Ocupacional - ALSO

William Buchta

American College of Occupational and
Environmental Medicine - ACOEM

Neil Koehncke

Occupational Medicine
Specialists of Canada - OMSOC

Frida Marina Fischer

International Commission
on Occupational Health - ICOH

Daniela Buosi

Brazilian Ministry of Health

Richard Heron

International Occupational
Medicine Society Collaborative - IOMSC

Elizabeth Costa Dias

Federal University of Minas Gerais

Marcia Bandini

University of Campinas

Zuher Handar

Associação Brasileira de Saúde dos
Trabalhadores e das Trabalhadoras - ABRASTT