

► **Presentation**
**Bridging Social Protection
and Occupational Health to
Advance Sustainable
Development Goals**

► Definitions

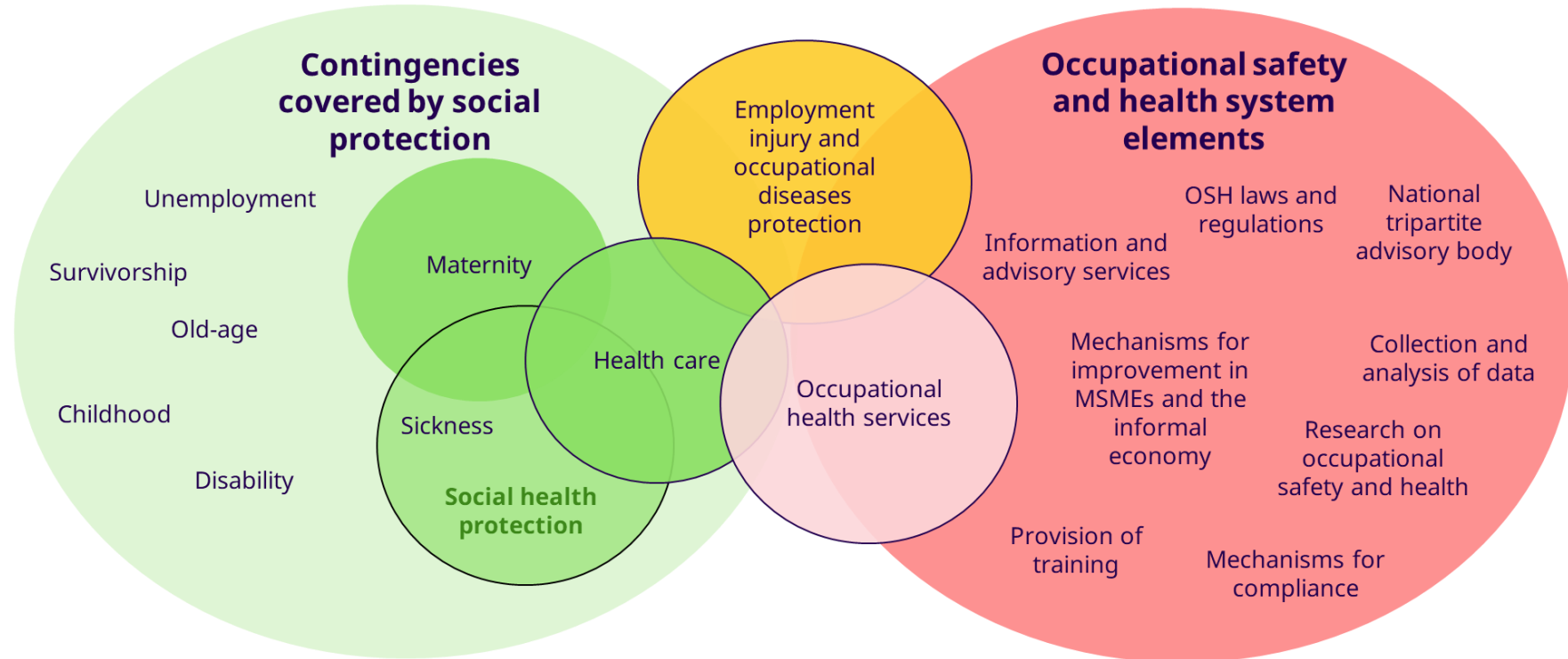
Social protection is the set of policies and programmes designed to reduce and prevent poverty, vulnerability, and social exclusion throughout the life cycle. It encompasses social insurance, social assistance, and includes, at a minimum, access to healthcare without hardship, including maternity care, and income security throughout the life cycle.

- Medical Care Recommendation, 1944 (No. 69)
- Employment Injury Benefits Convention, 1964 (No. 121)
- Social Security (Minimum Standards) Convention, 1952 (No. 102)
- Medical Care and Sickness Benefits Convention, 1969 (No. 130)

Occupational health services consist of those services entrusted with essentially **preventive** functions, which are responsible for advising employers, workers, and their representatives on requirements for establishing and maintaining safe and healthy working environments to facilitate optimal physical and mental health in relation to work. Convention No. 161 prescribes the 11 functions that should be guaranteed thereby.

- Occupational Safety and Health Convention, 1981 (No. 155)
- Occupational Health Services Conventions, 1985 (No. 161)
- Occupational Health Services Recommendation, 1985 (No. 171)
- Occupational Safety and Health Convention, 2006 (No. 187)

Social protection and occupational health services: what opportunities for synergies



Opportunities for synergies

Common objectives

Maintenance and restoration of health

Complementary missions

Prevention and compensation of work injuries and occupational diseases

Overlapping functions

Prevention
Curative services
Rehabilitation

Institutional architecture

OHS can be delivered through social security institutions (C161, R171)

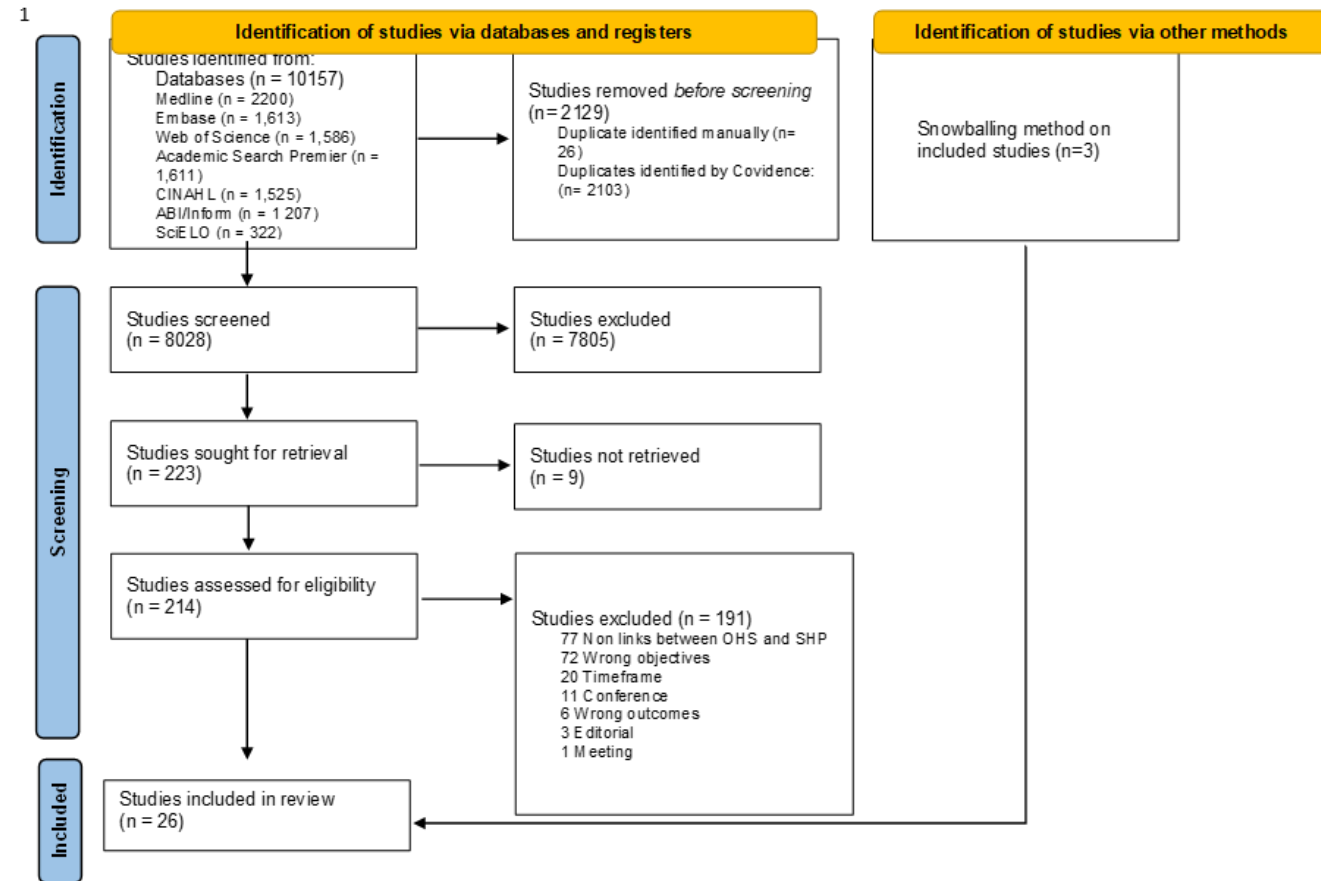
Research project

Research questions

- What is the nature of linkages between OHS and social protection
- In which countries are they reported?
- Is it possible to elaborate a typology of coordination models?

Methodology

- Scoping review
- Three country case studies
 - Colombia
 - Madagascar
 - Viet Nam



▶ Overarching findings

State of the evidence

- **Vast diversity** in the nature of linkages.
- Existence of **multiple linkages** within contexts.
- Often unclear **which OHS function** was the subject of the coordination.
- Many linkages between SHP, OHS, and **EII, as well as other social protection branches.**

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Types of linkages identified

1. Integrated stewardship
2. Integrated mandate of OHS and social protection within a single institution
3. Delivery of specific OHS functions by social protection administrations
4. OHS extension to general health services for workers and their families
5. Administration of benefits for employment injury or disease by social protection schemes responsible for other contingencies
6. Financial linkages
7. Referrals and information sharing

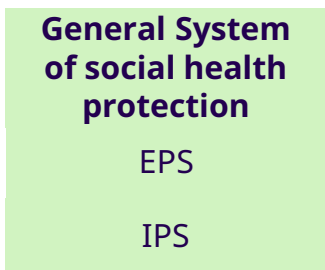
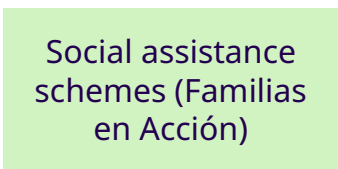
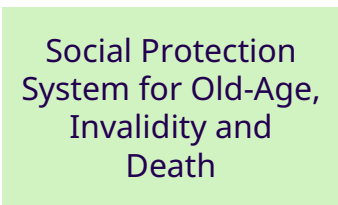
Diversity of institutional architectures

Colombia

Occupational health services

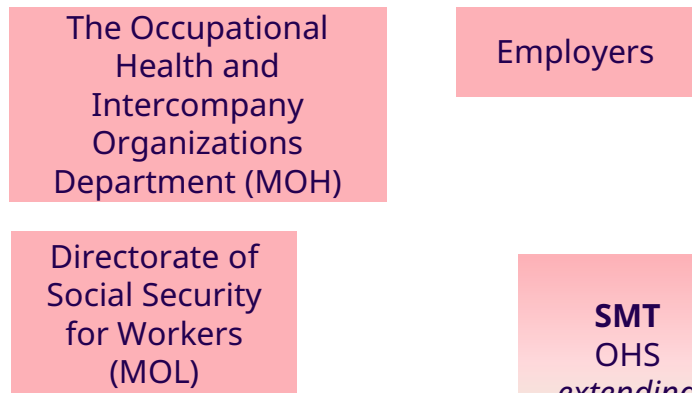


Social protection

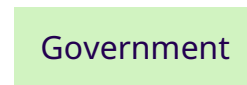
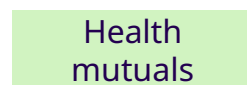
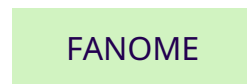
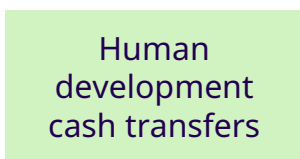


Madagascar

Occupational health services

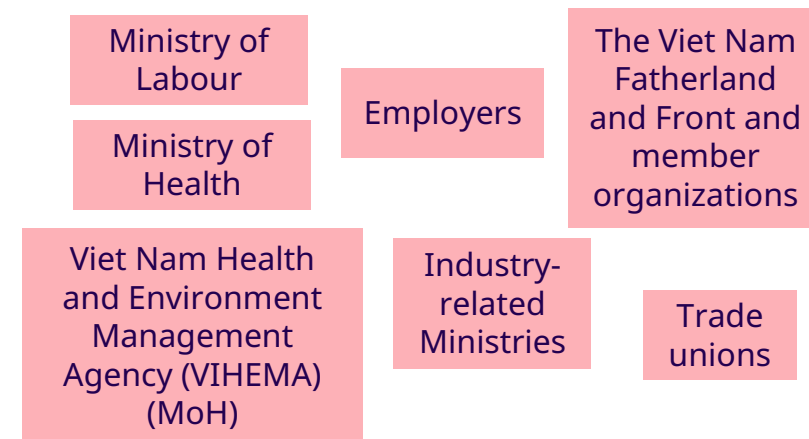


Social protection

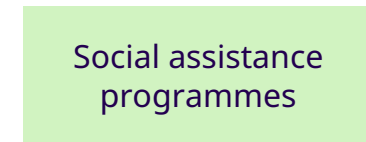
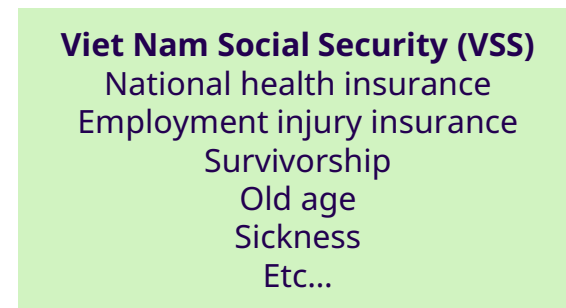


Viet Nam

Occupational health services



Social protection



▶ Linkages identified in the country case studies

	Colombia	Madagascar	Viet Nam
Integrated stewardship			X
Integrated mandate of OHS and social protection within a single institution	X		
Delivery of specific OHS functions by social protection administrations		X	
OHS extension to general health services for workers and their families		X*	
Administration of benefits for employment injury or disease by social protection schemes responsible for other contingencies	X		X
Financial linkages			X
Referrals and information sharing	X	X	

* Only country in which this linkage was identified.

► Priorities for future research

- Extent to which *linkages* promote *coordination* between social protection and occupational health services
- Comprehensiveness and quality of OHS when delivered by - or integrated with - social protection schemes
- Causes and implications of the administration of work injury benefits by social protection schemes responsible for other contingencies

**Thank you for
your kind
attention**



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