

16.30/18.00

## PARALLEL SESSIONS FRIDAY AFTERNOON

### Strand 3: Working with stakeholders and sectors

#### Health in all policies: the example of alcohol

Chair: Anders Ulstein, Norway

Rapporteur: Ruth Ruiz, Spain

#### Alcohol and the work place: the EU Strategy on safety at the workplace

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Occupational health and safety is a long-established discipline. It constitutes one of the European Union's most concentrated and most important social policy sectors. Since the late 1970s, and especially since the Single European Act was adopted in 1987, EU has developed a substantial corpus of legislation aimed at raising standards of safety and health. This activity has slowed down recently giving the floor to soft-law mechanisms such as the open method of coordination and instruments (frameworks for action, voluntary agreements, codes of conducts, recommendations, resolutions, ...) instead of hard-law ones (legislative and binding texts) and all of these under the umbrella of EU Social Agenda adopted during the EU Council that took place in Nice 2000.

On the grounds of this Agenda and with the view to relaunching the policy on health and safety at work, the European Commission has adopted its first OSH strategy for the period 2002-2006. The novel features of this strategy were mainly:

1- The shift from traditional OSH based on the biomedical concept of health to a more comprehensive approach adopting a **global approach to well-being at work**, taking account of changes in the world of work and the emergence of new risks, especially of a psycho-social nature.

2- Based on consolidating a **culture of risk prevention**, on combining a variety of political instruments — legislation, the social dialogue, progressive measures and best practices, **corporate social responsibility** and economic incentives — and on **building partnerships** between all the players on the safety and health scene.

3- Making the point on the key importance of an ambitious social policy for **competitiveness** and the cost of "no-prevention" in economy and society.

This strategy highlighted the importance of preventing new social risks including the effect of substance-dependence on accident rates, more especially problems associated with alcohol and medicinal drugs. In this first strategy risks related to dependence on alcohol, drugs and medicines were explicitly named as topics that merit specific actions integrated in this comprehensive approach always in close collaboration with health care systems.

In 2007 the Commission published the second OHS strategy for the period 2008-2012 putting the emphasis on the connection of the social and economic policies on the one hand and health policies on the other. This new strategy states among others issues:

- the need of promoting an in work situation which enhances person's health and wellbeing;

- the importance of the contribution of good health at work to public health in general.

- A recommendation to Member States to making provision in their national strategies for specific initiatives enabling enterprises to be given technical assistance and advice concerning the promotion of workers health.

The degree to which the Community strategy is successful depends on Member States being committed to adopting coherent national strategies. It's really difficult to trace the impact of this strategy on national OHS policies except for occupational accidents,

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