

## FINAL REPORT

European Network Workplace Health Promotion

(ENWHP) 2000/2001

LIAISON OFFICE

Agreement N° S12.253221 (2000CVF3-406)

### Summary

The European Network Workplace Health Promotion (ENWHP) aims to develop strategies and policies to improve the health of people at work and to increase employability of those in and out of work in Europe. Since the Network was initiated in 1995 it has co-ordinated the exchange of experience and information on work and health in Europe.<sup>1</sup>

The funding for 2000 was granted in November 2000 by the European Commission to the Federal Institute for Occupational Safety and Health (BAuA) for maintaining the ENWHP Liaison Office.

The main tasks carried out in 2000 were:

1. co-ordinating the ENWHP:
  - a) issuing publications (WHP-NET-NEWS, bi-annually), organising meetings, giving presentations at conferences, etc.
  - b) developing and implementing marketing strategies
  - c) co-operating in other EU projects
  - d) developing a position to be taken by the ENWHP in response to the EC's proposal for a future Public Health Strategy and a European Health Forum
2. developing a European reference model
3. analysing the status of WHP in Latin and southern European countries in view of the cultural differences / publishing the recommendations

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<sup>1</sup> See "Position Paper of the ENWHP", April 2000 Annex 1

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## 1. Introduction

The European Network Workplace Health Promotion (ENWHP) was established in 1995, based on the programme of Community Action on Health Promotion, Information, Education and Training (COM(94)202 final), and planned to run for five years. After more than five years networking, this programme is now coming to an end. The European Parliament has agreed to extend the programme until the end of 2002 to ensure a smooth transition into the new programme for Community action in the field of public health which is under discussion at the European Parliament.

- These developments have led the ENWHP to rethink its identity, its aims and objectives. Discussions among the network members about new strategies have already begun. Initial steps in this direction were taken at the 9<sup>th</sup> network meeting in Lisbon in June 2000 where for the first time small working groups were formed to discuss the future of the Network. At the 10<sup>th</sup> network meeting in Lyon in October 2000<sup>2</sup> three working groups were formed to discuss future strategies in terms of “advocating”, “marketing” and “content”. A task force was set up using the results of the meetings to discuss the next steps to be taken by the ENWHP including such important issues as marketing the network. The group also produced and disseminated a “statement” in response to the EC’s proposal for a programme of Community action in the field of public health and the new health strategy. The first meeting took place in January 2001.

- It was pleasing to see that the statement made by the European Health Council on 5th June, 2001 explicitly includes some elements from the ENWHP statement and for the first time mention is made regarding the implementation of health promotion both in health and safety at work and in employment policies.

Article 4: Joint strategies and actions. ”To ensure a high level of human health protection in the definition and implementation of all Community policies and activities, the objectives of the programme may be implemented as joint strategies and joint actions with relevant Community programmes and actions, notably in the areas of consumer protection, social protection, health and safety at work, employment, research and technological development, internal market, information society and information technology, statistics, agriculture, education, transport, industry and environment, and with actions undertaken by the Joint Research Centre and relevant Community agencies.“

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<sup>2</sup> See minutes

As well as discussing possible solutions for the future of the ENWHP, the task force meeting initiated a survey which was subsequently carried out under the guidance of Maria Dolores Solé the co-ordinator of the Spanish National Contact Office. The results of the survey were disseminated among the NCO's and were presented at the 11<sup>th</sup> network meeting in Lisbon. This initiative was important both for evaluation purposes and in order to obtain feed-back from the NCO's on the benefits of belonging to the network, to invite criticism and to put forward suggestions for future activities. Back in June 1995 when the Network was set up, an initial survey was carried out by the Federal Institute for Occupational Safety and Health throughout the member states. The results of the survey constituted a section of the *Integrated Plan of Action for Workplace Health Promotion (WHP) in Europe* in which a proposal was set out for a European Network on Workplace Health Promotion. After six years of networking this seemed to be the right moment to review and compare the results.

The impact of the results achieved by the Network over the last six years has been considerable. The *Luxembourg Declaration*, ratified in 1997 by all the network members to define WHP in Europe, is already quoted in several important European journals. The *Quality Criteria*, drawn up as a result of the first joint ENWHP project have also become an essential tool in promoting health activities at work. There has also been a noticeable increase in the level of co-operation on issue-based projects.

*A European Model for Workplace Health Promotion*, developed to find a European approach towards WHP in 2000/2001 was based on the results achieved by the Network over the past six years.

Another main project carried out in 2000/2001 was *Workplace Health Promotion in Latin and southern European countries (LSEC)*. This project was co-ordinated by the Italian Contact Office at the University of Perugia and the ISPESL<sup>3</sup> in Rome. Spain, Greece and Portugal took part in the project with Italy, aiming to identify solutions for integrating WHP in LSEC. At the final conference in Sicily on 5<sup>th</sup> - 7<sup>th</sup> April, the current status of WHP in Latin and Southern European countries was presented and discussed. The resulting recommendations for the implementation of WHP in Latin and Southern European countries, summarised in the *Sicily Decalogue*, were published by the Liaison Office and presented at the 11<sup>th</sup> meeting of the ENWHP and disseminated at the European conference "Small Healthy and Competitive:

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<sup>3</sup> National Institute for Occupational Safety and Health

New Strategies for Improved Health in Small and Medium Sized Enterprises” held on 18<sup>th</sup> – 19<sup>th</sup> 2001 in Lisbon.

## **2. The European Network Workplace Health Promotion (ENWHP)**

### **2.1 Results produced by the Liaison Office in 2000 -**

#### **2.1.1 Public Relations**

##### **Publications**

The Liaison Office published two newsletters in 2000, *WHP-NET-NEWS N° 7* and *WHP-NET-NEWS N° 8* and a special edition, *The Position Paper of the ENWHP*. The *Luxembourg Declaration* was reprinted due to enormous demand. These publications are available in print and in electronic form. They can be downloaded from the Liaison Offices website ([www.baua.de/whp.net](http://www.baua.de/whp.net)) and the BKK website: ([www.bkk.de/whp](http://www.bkk.de/whp)).

A brochure, *Healthy People in Healthy Organisations – the European Network Workplace Health Promotion* and a set of slides to use at presentations of the ENWHP was prepared to assist the NCO’s in publicising and marketing WHP in Europe (see Annex 1b).

##### **Internet presentation**

A catalogue of minimum requirements for the ENWHP internet presentations was put forward at the 9<sup>th</sup> network meeting in Lisbon in June 2000. The following requirements were set out in bilateral agreements between the Liaison Office and the National Contact Offices: The national web-site presentation should be easily accessible, either with a directly accessible address or should present the ENWHP logo on the homepage. It should be in English as well as the national language. The following information should be included:

1. Background /history

(see [www.baua.de/whp-net](http://www.baua.de/whp-net) - add national background)

2. Structure / Aims & Objectives

(see [www.baua.de/whp-net](http://www.baua.de/whp-net))

3. Activities, projects & co-operative activities

a) Meetings, conferences

b) Projects (MOGP, SME) / partnerships (Unemployment & Mental Health, Smoking at the WP)

- c) Main documents (LD, CM, Position Paper, Policy Document)
- d) National projects
- 4. Future perspectives
- 5. Publications (to include those of the individual NCOs)
- 6. News (e.g. conferences)
- 7. Network partners & other interesting links
- 8. Mail / feed-back

### **Network meetings**

Two ENWHP meetings were organised by the Liaison Office in 2000, each in the countries holding EU presidency. The 9th meeting took place on June 16<sup>th</sup>-17<sup>th</sup> in Lisbon, Portugal. The 10<sup>th</sup> was held on 26<sup>th</sup>- 29<sup>th</sup> October 2000 in Lyon, France.

In addition to the network members and partners, the meetings were attended by invited guests and representatives of specific disciplines and networks.

The 9<sup>th</sup> Network meeting in Lisbon was organised in co-operation with the Portuguese contact office at the Ministry of Health. The main topics on the agenda were:

- The development of a joint project in the field of Mental Health at the Workplace
- Models for marketing outcomes via the Internet
- The current status of the “WHP in small and medium sized enterprises” project
- News from the network members
- Presentation by the European Network for Smoking Prevention (ENSP)
- Future strategies for health promotion within European networks – Presentation by the European Network of Health Promoting Agencies (ENHPA)
- “European policy criteria and performance indicators of Good Practice in Health, Environment and Safety Management in Enterprises (GP HESME): Occupational and public health perspective” – a WHO initiative

The 10<sup>th</sup> meeting was organised together with l’ANACT<sup>4</sup>, in France which joined the network at the end of 1999. The main topics discussed at the meeting held in Lyon, October, 26<sup>th</sup>-29<sup>th</sup> 2000 were:

- The future role of the ENWHP (with special regard to the new Public Health framework)

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<sup>4</sup> Agence Nationale pour l’amélioration des conditions de travail (National Agency for the Improvement of working conditions)

- Future strategies for marketing the ENWHP
- Update on the 'WHP in SME's' project
- WHP in Latin and Southern European countries
- Mental Health at Work
- European awards in the field of health promotion

The 11<sup>th</sup> network meeting took place on June 16<sup>th</sup> 2001 in Lisbon. Although this meeting took place during the extension period of the contract (until the end of June 2001) there was no extra funding available to the Liaison Office to hold the meeting. For this reason it was organised by the German Contact Office at the BKK-BV which is now also network secretariat. The minutes were drafted by the Liaison Office together with the BKK.

The main topics on the agenda were:

- News from the EC
- News from the European Health Council (statement in response to the EC's proposal)
- Report of the networks activities of 2000/2001
- Presentation of the task force marketing
- Discussion of the action plan for 2001/2002
- Presentation and discussion of the 4<sup>th</sup> Initiative of the ENWHP
- A new joint project on Mental Health Promotion at the Workplace

### **Conferences**

Presentations were made by the Liaison Office on behalf of the ENWHP at a number of European and International conferences. The main events are mentioned here. We consider one of these to be the conference "*Towards a healthy Europe for the year 2010*", held in Santander on May 2000 and organised by the International Union for Health Promotion and Education (IUHPE). The conference which was co-funded by the European Commission, was organised to discuss the results of networking by inviting members from all the European Networks active in the field of health promotion. The ENWHP organised a workshop on Workplace Health Promotion and was represented in the plenary session as well as in the discussions. The IUHPE has published the results of the conference in its newsletter.

The Liaison Office was represented in two of the several conferences and meetings held to discuss the EC's proposal for a programme of community action in the field of public health,

both at the European Health Forum in Bad Hofgastein, September 2000<sup>5</sup> and at a meeting of the European Public Health Alliance in Brussels, November 2000<sup>6</sup>. The purpose of both events was to prepare statements /declarations in response to the proposal. These were supported and signed by the ENWHP.

The Liaison Office participated in two other European conferences, organised as part of the European Project on “*Unemployment and Mental Health*”, the first in Bilbao in May 2000 and the final conference in Paris, November 2000. Specific recommendations have been published by the project co-ordinators.<sup>7</sup>

Karl Kuhn from the Liaison Office gave his support to organising a workshop on “*Gender Approaches in Workplace Health Promotion*”. The workshop, organised by the Swedish Contact Office, was held on 11<sup>th</sup>-13<sup>th</sup> September 2000 at the Swedish Trade Unions in Brussels to produce a paper for the Swedish conference on “*Worklife*” in Malmö on 22nd-24<sup>th</sup> January 2001. This conference was one of the important events of the Swedish EU presidency. The paper is attached in Annex 2.

Karl Kuhn from the Liaison Office also gave a presentation at the World Mental Health conference in Geneva on 9<sup>th</sup> -10th October, 2000. A follow up conference will be held on 24<sup>th</sup> - 25<sup>th</sup> October 2001 in Geneva. Mental Health at the Workplace will be one of the future priorities of the ENWHP.

A Conference was held in Berlin in May 2001 to present the results of the “Smoking at the Workplace” project which was co-ordinated by the European Network for Smoking Prevention (ENSP). The ENWHP Liaison Office took part in the project steering committee and the Dutch contact office was responsible for the final report. The results of the project are also to be disseminated via the ENWHP web-site. Further information can be found in chapter 2.1.3 Partnerships.

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<sup>5</sup> see website: [www.efhg.org](http://www.efhg.org)

<sup>6</sup> see website: [www.eph.org](http://www.eph.org)

<sup>7</sup> see 2.1.3 Partnerships



## 2.1.2 Statement of the ENWHP in response to the EC's proposal for adopting a European programme of community action in the field of public health (2001- 2006)

At the 10<sup>th</sup> network meeting in Lyon a “*Taskforce- marketing and advocating*” was set up to discuss future marketing and advocating of the network.

The *Taskforce* met for the first time in Brussels on January, 29<sup>th</sup> 2001. The members are from the Liaison Office, the NCO Belgium, the NCO Germany, the NCO Spain, the NCO Netherlands and Richard Wynne from the Work Research Centre in Ireland. The results produced by the task force were summarised in two papers by Richard Wynne and Paul Baart (NCO NL). Maria Dolores Solé (NCO SP) initiated and guided an email discussion<sup>8</sup> aiming to evaluate the last years of networking and to identify future opportunities for the ENWHP.

The Task force first set out to produce a *Statement in response to the European Commission's proposal for a European programme of community action in the field of public health (2001- 2006)*. The statement was finalised in November 2000 and sent to several Members of the European Parliament. Some of the National Contact Offices (NCO's) have had personal contact with members of the *Committee on environment, public health and consumer policy*.

### **Statement of the European Network Workplace Health Promotion (ENWHP) in response to the EC Communication on the Health Strategy and the Proposal for adopting a Programme of Community Action in the Field of Public Health**

The European Network Workplace Health Promotion (ENWHP) aims at developing strategies and policies in order to improve the health of people at work and to increase employability of those in and out of work in Europe. It co-ordinates the exchange of experiences and information on work and health within and between all fifteen EU Member States and the three EEA countries as well as some countries of eastern Europe. In view of future challenges and with the aim of expanding healthy workplaces and of increasing the employability of those in and out of work, the ENWHP regards the following as a basis for future activities:

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<sup>8</sup> a summary of this discussion can be found in 2.1.5 Evaluation of five years of networking – about problems and benefits of the ENWHP (ENWHP Internet discussion)

- *Developing and formulating policies and strategies for work and health as well as for the employability of the European workforce,*
- *Initiating co-operation and communication between all different stakeholders and guarantee a comprehensive approach by inter-organisational, multidisciplinary and intercultural collaboration*
- *Disseminating good workplace health practice, particularly addressing the needs of small and medium sized enterprises.*
- *Monitoring the implementation of strategies for improving health at work and contributing to continuous monitoring of work-related health determinants*

### Comments on the future health strategy:

#### ➤ The setting approach

Workplace Health Promotion (WHP) is an important instrument to improve health of citizens. It affects 80 % of the population between 15 and 65 years old who spend at least one third of their life at work. The reduction of the enormous costs caused by work related diseases and the improvement of capacities to influence people's health positively via this tool are important reasons for the support of activities in WHP.

Settings like the workplace, schools, hospitals and others are important tools to influence people's health. This setting approach is absolutely necessary. It must be, integrated in the future EC health strategy as had been in the past. Leaving the setting approach would mean a step backwards.

The new EU health strategy should therefore include the world of work as a priority target setting for tackling health determinants. The ENWHP suggests the following formulation on Page 12: “This will be achieved by focussing on key lifestyle factors , such as smoking, alcohol, nutrition, physical activity, stress and drug abuse (including doping in sport), as well as major socio-economic and environmental factors ***in the context of relevant settings (e.g. the workplace, schools, etc.)***.”

#### ➤ Working across policies

It is obvious that there is a need for working across policies as it is foreseen in the future EC health strategy. In the plans an important connection is lacking to make such a strategy successful. There is a strong need for cross-sectoral policy development at European level which has been clearly identified within the new EU health strategy. WHP can be used as an interdisciplinary platform for establishing partnership and dialogue between different

policy areas, in particular Public Health, Occupational Safety & Health and employment policies. A good link between these sectors as well as the discussion of WHP within the Social Dialogue seems essential to the members of the ENWHP.

➤ The three strands

There should be a closer link between the first and the third strand.

The first strand is a prerequisite for target oriented Workplace Health Promotion via the third strand.

Monitoring of Workplace Health Promotion is the basis for setting up priorities and a need oriented health promotion policy.

➤ Benefits of networking

Networks are the basis for any collection and dissemination of information. More support should be given to the maintenance of networks in order to assure and to improve these information systems.

Some of the most important reasons for networking are:

- Policy, science and research development
- Guarantee of comprehensive approach by inter-organisational, multidisciplinary and intercultural collaboration

Diminish duplication and effort and enhance the efficiency by using complementary human, financial and material resources

### 2.1.3 Partnerships

The ENWHP – represented by the Liaison Office and some National Contact Offices – was partner to several European projects and initiatives, some of which were already mentioned in chapter 2.1.1.

#### **Unemployment and Mental Health**

The Unemployment and Mental Health project was co-ordinated by the University of Deusto (Spain), Integral (Austria) and STAKES (Finland). The aim was to identify national models, shown to be effective in improving health and wellbeing of people affected by unemployment (referring to three phases: before becoming unemployed, during unemployment and during

the phase of reintegration into work). The national partners were identified by the ENWHP and other European Networks active in this field. The project was concluded at the beginning of 2001. The final report includes recommendations for the different actors in the field of unemployment and mental health: the unemployed person, the social networks for the unemployed, the employers and trade unions, professionals, politicians (both national and European). The final report is available on the project web-site ([www.umhp.org](http://www.umhp.org)). The contacts made and the co-operation resulting from this project has led to plans for further co-operation in the future. Most of the co-ordinators of this project and members of other important European organisations active in this field have co-operated in drafting a new proposal for a project on *Mental Health Promotion and Prevention Strategies in Coping with Anxiety and Depression*. The project is expected to begin at the end of 2001.

### **Gender and Workplace Health Promotion**

The Liaison Office assisted in the planning and took part in a workshop on *Gender approaches at the Workplace*,<sup>9</sup> organised by the Swedish Contact Office. The aim of the workshop was to prepare a paper on this issue as a basis for discussion at the Swedish conference in Malmö (22<sup>nd</sup> –24<sup>th</sup> January 2001). The paper is printed in Annex2 at the end of this report. The majority of participants at the workshop were members of the network and representatives from the WHO, the ILO and other European organisations. The main questions discussed at the workshop were:

- ◆ Is there a contradiction between gender equality and specificity ?
- ◆ Is there evidence /need for a gender specificity in Europe ?
- ◆ What could a European gender approach be ?

The discussion drew on the results produced by the ENWHP. The workshop demonstrated that there is an urgent need for action on gender issues, taking the specific needs and problems of both men and women into consideration.

### **Smoking at the Workplace**

The European Network for Smoking Prevention (ENSP) carried out a project on *Smoking at the Workplace* (time schedule: 15.09. 2000- 15.09.2001) aiming to increase understanding, show the necessity and demonstrate the benefits/feasibility of smoke free workplaces .

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<sup>9</sup> see 2.1.1 Public Relations p.5

The project was introduced at the 9<sup>th</sup> network meeting by the General Secretary of the ENSP who requested the participation of the ENWHP in the project. The Liaison Office was requested to take part in the steering committee and the Dutch contact office to be in charge of co-ordinating the final report as well as being responsible for the chapter referring to the cost-benefits of smoke free workplaces.

On May 10<sup>th</sup>/11<sup>th</sup> 2001 a final conference was held in Berlin, to introduce the draft of the European report on smoking at the Workplace. Emphasis was laid on the importance of developing smoking prevention policies at the workplace. The report also drew attention to the danger of passive smoking and the need to guarantee protection to non-smokers at the workplace. The chapter on the cost-benefits of smoking policies at the workplace stresses the benefit to employers in setting up such policies. The final report will be available on the ENSP website in the 11 EU-languages by September 2001. The Liaison Office will set up a link on its website.

The Liaison Office gave a presentation on Workplace Health Promotion in Europe at the conference in Berlin, describing the tools developed over recent years by the ENWHP for implementing WHP. The Network will continue to co-operate with the ENSP in future.

In the *Conference Declaration* which was formulated at the end of the conference there is reference made to the Quality Criteria and the Luxembourg Declaration, produced as a result of efforts by the ENWHP, as being essential tools in the implementation of smoking policies at the workplace. The Declaration can be downloaded from the ENSP website [www.ensp.org](http://www.ensp.org)

### **Further Partnerships**

The Network participates in a lively exchange of information and expertise on specific issues with the WHO and the ILO and participates in the “networking the networks” initiative which sets out to enhance co-operation between the European networks in the field of health promotion. The Liaison Office has also developed contact with the Healthy Companies Network (HecoNet) which provides a good Internet and Intranet platform for the discussion of issues relevant to Workplace Health Promotion on an international level and could therefore be important to the Network in developing an internet structure. A representative was invited to the 10<sup>th</sup> network meeting to give an insight into their Intranet structure.

## 2.1.4 Support of the 2<sup>nd</sup> ENWHP initiative WHP in Small and Medium Sized Enterprises

The second joint ENWHP initiative which was co-ordinated by the German Contact Office (BKK-BV), was concluded with a final conference on June, 18<sup>th</sup>/19<sup>th</sup> 2001 in Lisbon. The objectives of the project *Workplace Health Promotion in Small and Medium-sized Enterprises (SME's)* were:

- To describe and analyse current practice of workplace health promotion in SMEs in the Member States of the Community and the countries of the European Economic Area
- To develop a European consensus on the requirements to be placed on good workplace health promotion practice in SMEs
- To identify, document and disseminate models of good WHP practice in SMEs
- To draw up recommendations for WHP in SMEs
- To assist, by means of the dissemination of good practice, key figures and institutions to focus more of their attention on workplace health promotion and develop a keen sense of commitment in this field.

The aims of the final conference were:

- To disseminate realistic models of good practice that SMEs can easily adopt in their business settings
- To encourage debates, enriched by research knowledge, on the key issues of advocacy and promotion of workplace health issues
- To learn how workplace health activities can foster economic development in specific branches
- To devise mechanisms to reach consensus on European and national level on how to encourage the development of supportive environments for SMEs

Issues discussed at the conference were:

- Effective strategies to advocate workplace health promotion
- Role of social partners and intermediary organisations
- Tools for working with small business owners
- Policy development and creating supportive environments

The Liaison Office was represented in the advisory committee and thereby involved in the discussions on the recommendations published at the end of the project and also took part in organising the final conference.<sup>10</sup> *The concept for this project was based on the Cardiff Memorandum defining WHP in Small and Medium sized enterprises as major priorities of the ENWHP*

### 2.1.5 Evaluation of five years networking – a survey about problems, benefits and future visions of the ENWHP

As mentioned previously in the introduction, a task force was set up at the 10<sup>th</sup> network meeting in October 2000. Their first meeting was held in January 2001 to discuss the situation of the ENWHP in light of the *EC's proposal for Community Action in the field of Public Health* and to discuss the future orientation of the network. As a result of the meeting the Spanish contact partner, Maria Dolores Solé, suggested setting up an e-mail based survey among the network members under her guidance. The main aim of the survey was to gather feed-back on needs and to invite criticism from the network members and secondly to lead to a more pro-active way of working within the network. For this reason, it was important for one of the Network members to guide the survey instead of the Liaison Office or the German NCO which is already in charge of co-ordinating the ENWHP projects. It was ensured from the beginning that the results of the survey would be disseminated on an anonymous basis. The outcome of the survey with the questions and answers from the NCOs is printed at the end of this report in Annex 4.

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<sup>10</sup> New strategies for improved health in small and medium-sized enterprises see Annex 3

## 2.2 Workplace Health Promotion in Latin and Southern European Countries

This working package was co-ordinated by the University of Perugia and the ISPESL<sup>11</sup> in Rome and the National Contact Offices of Greece, Portugal and Spain participated in the project. Due to some personnel problems France did not participate. The project concluded with an International Symposium held in Syracuse, April 6<sup>th</sup>-8<sup>th</sup> 2001.

The project was initiated to identify and take into consideration the specific problems needs of the Latin and southern European countries (LSECs) in the implementation of Workplace Health Promotion. The results of the project were formulated in the Sicily Decalogue and presented at the conference. They were also presented at the 11<sup>th</sup> network meeting in Lisbon, June 2001 and will hopefully serve as a basis for further action.

The authors were Lamberto Briziarelli, Fiorella Chierichetti, Alvaro Durão, John Griffiths (rapporteur), Elisabeth Galanopoulou, Giuseppe Masanotti, Sergio Perticaroli and Maria Dolores Solé. The Sicily Decalogue was dedicated to Fiorella Chierichetti, a good friend and colleague, whose premature death was a sad loss to the Network.

### **The Sicily Decalogue**

Implementation of WHP in Southern European Countries

Strategy Statement and Action Plan

#### **A summary of the recommendations**

**Recommendation 1:** To clearly identify the roles of the various public bodies at central, regional and local level and ensure effective partnership between them in regard workplaces and to co-ordinate the activities of the various administrations

**Recommendation 2:** To develop tailor made intervention programmes that respond to the specific needs of different countries, regions and localities, in keeping with national regulations

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<sup>11</sup> National Institute for Occupational Safety and Health



**Recommendation 3:** To strengthen collaboration and enhance co-operation between all stakeholders

**Recommendation 4:** To establish good co-ordination between the initiatives of the stakeholders

**Recommendation 5:** To produce tools for promoting health that are target specific, easy to use, simple and low in cost

**Recommendation 6:** To provide operative services with adequate human and technical resources

**Recommendation 7:** To include workplace safety and health promotion in the curricula of professional courses such as occupational medicine, health and safety and HR management

**Recommendation 8:** To develop specific training and information programs for employers and employees

**Recommendation 9:** To market workplace health promotion to all stakeholders

**Recommendation 10:** To make advisory facilities effective and easy to reach

## Introduction

Health and safety in the workplace is a priority action that is being addressed across all levels of society by the European Commission, national governments, health and labour institutions, social organisations. These organisations are united in their actions to make work safe, enhance the quality of working life and prevent occupational diseases, work related accidents and deaths.

Since its foundation the aim of the European Network for Workplace Health Promotion (ENWHP) has been to facilitate and co-ordinate the exchange of experiences and information on work and health both within and between all fifteen EU Member States. This has been done in order to encourage the development of common strategies, policies and processes that will lead to improvements in the health and safety of people at work, healthier lifestyles and enhanced levels of employability across Europe.

This emphasis on the promotion of employee health and well being makes workplace health promotion such an important element of employment practice. Keeping people fit and healthy, maintaining their ability to work and remaining active and productive members of society is a goal that can be achieved through the development of robust workplace health

promotion programmes. These programmes enhance and extend existing occupational health, safety and hygiene procedures and most importantly, contribute to the well being not only of the employees but also of the organisations in which they work.

The work of the ENWHP has brought to light significant differences in practice between the countries of northern and southern Europe. However in order to achieve the optimum development of workplace health promotion in Southern European Countries it is vitally important that the socio-cultural conditions and existing workplace health policies, services and infrastructures are taken fully into consideration.

In general, social-cultural models that originated in the Northern and Central European Countries have had the strongest influence on the developing theories of workplace health promotion and health promotion. In transferring these principles and theories to the Southern European Countries it is necessary for them to be adapted to the social and cultural context of those countries and to be implemented in a way that takes into consideration the different service developments that have occurred in Southern countries in recent years.

This document has been prepared with the intent of enhancing the development of workplace health in Southern European Countries according to those considerations. It does this through:

- Providing support for the re-orientation of occupational health services
- Facilitating the harmonisation of European policies across all Member States
- Spreading the culture of prevention and workplace health promotion
- Developing policies designed to improve employability, increase adaptability and reduce inequality, particular attention being paid to specific population groups such as the elderly, the underemployed and unemployed, immigrants in Southern European Countries.

All the Southern European Countries have enforced and are implementing the Framework Directive. This is being done through the development of national laws and decrees and proposals of new policies and health and safety measures. However while great progress has been made on the development of a legal and policy led framework, at the implementation level much remains to be achieved.

Of particular concern is the lack of active stakeholder and social partner involvement in the transition from a traditional occupational health and safety led system to a system based on the principles of workplace health promotion.

A series of meetings have been held between the National Contact Offices for Workplace Health Promotion in Southern Europe. These meetings took place so that the issues associated with the transition from a traditional occupational health and safety led system to a system based on the principles of workplace health promotion could be discussed and the particular factors which influence the development of workplace health promotion in Southern European Countries could be identified and addressed.

The outcomes of those discussions are set out below. They take the form of 10 recommendations, which, if implemented, would lead to enhanced levels of workplace health promotion and consequently a fitter, healthier and more productive workforce, together with more efficient and profitable working practices.

The aim of this document therefore is to move all stakeholders from health protection to health promotion, from legal obligation to personal commitment and from single respect of legislation to excellence.

The recommendations:

**Recommendation 1:** To clearly identify the roles of the various public bodies at central, regional and local level and ensure effective partnership between them with respect of workplaces and the promotion of health and well being at work

Working practices, working life and the labour market are undergoing major changes. The process of globalisation has a universal impact and Governments should seek to ensure that work with a potentially adverse effect on health (due to low pay, poor conditions, “dirty” or hazardous work for example) is not exported to developing countries. The concept of health being benefited by work, when it is ergonomically planned and executed, as well as being adversely affected by it when the exigencies are not compatible with the capacities and abilities of the workers, need to be recognised by all the stakeholders, and responsibility for health and well being at work in these changing circumstances should be clearly defined.

While employers have a statutory obligation to *protect* the health and safety of everyone at the workplace, there is no such statutory basis to *promote* employee health and well being. The links between health protection in the workplace and workplace health promotion need to be highlighted and strengthened and the duties of employers with respect to both clarified and reinforced.

**Recommendation 2:** To develop tailor made intervention programmes that respond to the specific needs of different countries, regions and localities, and are in keeping with national regulations

A strategy for the protection and promotion of health in the workplace should be developed within each country. The strategy should clearly identify the various stakeholders and the roles in the implementation of the strategy as well as determining clear lines of accountability for workplace health. The strategy should lead to the development of clear short, medium and long-term action plans which address the specific circumstances to be found in each country.

It is felt that it would be inappropriate to develop further legal measures to protect and promote health at work at this time. A preferred option would be the development of clear guidelines, agreed by all the stakeholders (employers, employers associations, professional bodies, social partners etc), leading to the enhancement of workplace health promotion activities. An area of particular concern is that of the promotion of health in and through SMEs and it is strongly recommended that the representatives of employees and employers in the SME sector are fully involved in the development of guidelines and action plans. The role of the labour inspectorate should be extended to facilitate the developments necessary to address the needs of SMEs.

Organisations providing local services should be oriented towards meeting the needs of SMEs and should pay particular attention to the well being of sole workers, familial agricultural and craft workers, disadvantaged groups and those who work outside the protection of legal employment.

**Recommendation 3:** To strengthen collaboration and enhance co-operation between all stakeholders

The situation, in terms of stakeholders, is consistent across all the Southern European Countries with each having two Government Departments with a major responsibility for health in the workplace – namely the Ministries of Labour and Health, although many Government departments also have some responsibility. To these central government departments must be added the regional and local tiers of government, the health services and non-governmental organisations such as the representative bodies of employers and employees.

Each of these organisations should place workplace health firmly on its agenda and discussion and dialogue on issues relating to health in the workplace between these organisations should be encouraged and promoted. In order to do this, common priorities and needs should be identified and all the stakeholders should accept the positive role of workplace health promotion in addressing these priorities and needs.

It is important therefore that the tangible benefits and positive outcomes of workplace health programmes are made clear and demonstrated to the stakeholders.

It is imperative to gain the commitment of all the agencies to the process of collaborative working - of having shared agendas, action plans and responsibility for employee health if the full potential of workplace health promotion is to be realised, and employees, their employers and the wider community are to benefit from the improvements in health which result.

Article 123 of the Amsterdam Treaty gives a high status to the process of Social Dialogue and maximum use should be made of it. However the role of government, be it central government, regional or local government should not be underestimated. Government has an important role to play in promoting dialogue between the stakeholders and in identifying and making available resources for the promotion of health through the workplace. These would include specific research funds, funds for the production of information and training tools, incentives to promote employee health and the reduction of taxes on investment.

A further important role for central Government is that of encouraging pan-European agencies such as the EC and the World Health Organisation to recognise the importance and benefits of workplace health promotion.

In these contexts tripartite discussions still have a valuable contribution to make to the development of workplace health promotion as they bring together and facilitate discussion between policy makers, decision takers and those with responsibility for implementing workplace measures. Such discussions are helpful as responsibility for health at work is shared by so many different organisations each of whom has an important role to play in the protection and promotion of employee health and well being.

**Recommendation 4:** To establish good co-ordination between the initiatives of the stakeholders

Mechanisms should be put in place to encourage information exchange, the determination of common priorities between Countries and within and between all levels of government and other stakeholders. Good co-ordination leads to a more efficient developmental process and allows for more rapid progress to be made. Special attention needs to be paid to co-ordinating the actions of official agencies such as the Ministries of Health and Labour with official functions such as those of the health and safety advising bodies, public health services and the labour inspectorate.

**Recommendation 5:** To produce tools for promoting health that are target specific, easy to use, simple and low in cost

While there is a clear legislative framework, which acts as a foundation for health related activity in the workplace, this legislation needs to be fully enacted. This process will be enhanced through the development of guidelines and practical tools for implementing workplace health related activity together with the identification and dissemination of models of good practice. The development of these resources should be considered as a matter of priority. The establishment of local networks, which support the exchange of information and experience, should be encouraged. Such networks can be useful tools in disseminating good practice and in identifying solutions to common problems.

**Recommendation 6:** To provide operative services with adequate human and technical resources

The provision of the resources necessary to protect and promote health in the workplace is an issue of fundamental importance. In this context, resources include not only financial measures but also technical support, materials and manpower. Each of these should be provided at a sufficient level to enable the promotion of health through the workplace to reach its full potential. Technical support such as the provision of advice and guidance, the provision of written materials, be they for use in training or as sources of information for employees for example, are important tools in the development of interventions to protect and promote employee health. Their provision requires a funding commitment from one or more of the stakeholders, but rather than viewing this as a cost it should be seen as an investment for health.

The use of financial facilities such as subsidies and bonus systems has been shown to be effective elsewhere in Europe and there is scope through government action and links with service supporting companies such as work accident funds and insurance companies to pilot innovative schemes in Southern Europe. One of the options in this type of scheme is for the Insurance Companies to offer a discount on the premiums paid by employers for whom they provide sickness or accident cover, once the employers have introduced workplace health promotion programmes of a certain scope and quality. Politicians, at National and European level are interested in financial and social benefits of WHP, more figures and data should be produced and supplied.

These schemes can be developed at a local or a national level and can be tailor made to meet the requirements of the partners involved and with particular concern on SMEs.

**Recommendation 7:** To include workplace safety and health promotion in the curricula of professional courses such as occupational medicine, health and safety and human resource management

Training is a key factor in the development of sustainable workplace health initiatives. Training programmes should address the specific functions of professional groups working in

this setting and should focus on the potential role of such groups in workplace health promotion as well as issues such as leadership and communication for example.

**Recommendation 8:** To develop specific training and information programs for employers and employees

It is widely recognised that the level of awareness of employers (especially proprietors of SMEs), managers and employees on matters relating to occupational health and safety and the promotion of health in the workplace is very low. Whilst it can correctly be argued that the general training of employees is largely the responsibility of the employer, measures must be introduced to improve the levels of training on health and safety and the promotion of health at the workplace for employers, managers and employees, with special attention being given to the training needs of owners and employees in SMEs.

It is essential to have tools and products that can be used to support the promotion of health at the workplace so that if the concept is marketed there are resources available to enable the process to begin and continue. Employers in the SME sector do not usually invest in such a process and so it will be necessary to identify and allocate resources to SMEs in order to facilitate the development of good practice in occupational health and safety and workplace health promotion in this sector.

Specific training professionals who can provide training for trainers and training organisations at the regional and local levels need to be identified and specific courses developed and marketed. Courses that are developed should be inclusive in nature, i.e. they should include all the necessary elements to plan and develop workplace health promotion actions that will meet the actual needs of the companies.

Training programmes should be developed on the basis of a needs assessment, and all training should be practically oriented and participative in nature. It should also equip those being trained to take a leading role in the promotion of health and well being at the workplace. To support these training programmes new curricula and training materials need to be developed and resources should be identified for this.



Preparing young people for the world of work is an important element of their schooling. Workplace health is of essential importance and materials and courses should be made available for teachers in schools to equip them to raise young people's awareness of the importance of health and safety at work.

Agencies with a legitimate role in the provision of training include universities and professional institutions, employers groups and associations, trades associations and the trades unions, government institutions and health service bodies.

Within the WHP network a sub network of trainers should be developed, as training is not a competence of the European Agency based in Bilbao. the main activities of which concern OSH, information collection and dissemination.

**Recommendation 9:** To market workplace health promotion to all stakeholders

The benefits of workplace health promotion and proactive health and safety practice should be identified and used to gain the necessary commitment of policy makers and decision takers.

The term "workplace health promotion" is not yet fully understood and many organisations might be undertaking the practice of workplace health promotion without realising that they are doing so. Raising awareness on workplace health promotion will be a gradual process, and a long term view needs to be taken. However in the meantime, the message that workplace health promotion has an important contribution to make to employee health and well being and in turn the well being of organisations must be clearly stated and tailored so as to achieve the most positive outcome from employers and employees

Key questions that need to be answered in relation to the marketing of workplace health promotion are:

1. Who will do the marketing?

This is the responsibility of national institutes, national and regional agencies and social partners, in fact every professional group involved in workplace health promotion and occupational health and safety are equally responsible. Agencies within the international community such as the World Health Organisation, the European Commission and the

International Labour Organisation should make workplace health promotion a priority and ensure it on the agenda of the governments they work with.

2. To whom will the message be conveyed?

The primary targets are employers and employees, together with decision makers at both national and local level. Other key groups who need to be targeted with this message include: health and workplace experts, human resource professionals, politicians and the general public. Politicians are an important group because of their influence over resource allocation. In working with politicians it is important to demonstrate the need for action through the development of strong health, social and economic arguments.

3. How will the message be conveyed?

There are many ways in which this important message can be conveyed. These include face-to-face discussions, training events and seminars, the publication of research and the promotion of resources for workplace health promotion and the World Wide Web. The National Contact Office Websites provide a good, attractive means of communication that can be used by a range of professional groups and individuals. Journalists for example can access the information for their own research and articles.

The WWW sites are extremely useful sources of information for those who spread the message to others such as occupational health physicians and labour inspectors as well as employers and employees. Consequently the web sites must contain a wide range of relevant, up to date information and should be promoted as widely as possible. There is considerable potential in the use of downloadable material, discussion forums etc. Yet there is also a need for the development of practical information on how health promotion can be built up. This could be achieved through a benchmarking exercise.

4. What should be marketed?

The issues which could form part of a marketing strategy include, the concept of workplace health promotion and its benefits, the approaches and processes which can be used and the results that might be expected.

This might be complemented by practical guidance on the development and implementation of workplace programmes adopting a staged approach sensitive to the needs of the target groups.

**Recommendation 10:** To make advisory facilities effective and easy to reach

Access to good quality information is essential if the promotion of health through the workplace is to continue. Key frontline occupational health and safety services can play an important advisory role to those seeking to develop and implement measure to promote and protect employee health.

All the guidance and advice that is provided should be consistent and based on sound principles and practice. The identification of information centres would help to ensure a consistent approach. Models of good practice, and the principles and foundations for success must be identified and promoted.

## Conclusion

These recommendations are suitable not just for Southern European Countries but also for the rest of Europe and beyond. The challenge is to translate them into action in Southern European Countries with their specific economic, social, cultural and political situations.

It is also imperative to gain the active participation of all the key stakeholders in this process, so that they in turn will promote the development of a participatory culture in which all interested parties can be involved. It is particularly important to encourage and facilitate the active involvement of stakeholders in the SME sector as this will aid the introduction of a health and safety management system as set out in the Framework Directive.

Once this level of participation is reached it will be possible to develop models for the overall management of health within an organisation – a position that would be strengthened if it conveys the message that workplace health promotion is an effective business investment. A future step would see the sharing and dissemination of health management within a company to the wider environment, a process that could be encouraged through Governmental support. Such action would benefit the workplace and additionally bring about social and economic benefits.

The potential of workplace health promotion to enhance the life not only of workers, but also their families and the communities in which they live should be an incentive to governmental bodies and all the other stakeholders to give their full support to the promotion of health and well being through the workplace and to become more fully involved in the process.

### 2.3 The European Reference Model for WHP

One of the main undertakings in the ENWHP programme for 2000 was to develop a *European Reference Model for WHP in Europe*. Richard Wynne from the Work Research Centre in Dublin was appointed to carry out this second working package. The document outlines a European reference model for Workplace Health Promotion which is the product of the work of the European Network for Workplace Health Promotion (ENWHP) over the past 5 years. The Reference Model represents a summary and integration of all that has been learnt during this period by the Network members. It draws on a range of documents which have been produced by the network and it also refers to the state-of-the-art findings with regard to the successful implementation of WHP from other work.

The full report is printed in Annex 5.

## 3. Outlook

A fourth Initiative of the ENWHP was discussed at the 11<sup>th</sup> meeting in Lisbon. A proposal was put forward by the BKK-BV which focuses on the implementation of the strategies and policies that were developed by the ENWHP during the past years of networking. This should be undertaken at different levels: national, regional and local. The two most important areas will be the enterprise level and the level of intermediaries which includes social partner organisations, autonomous self-administration bodies in the craft, manufacturing and service sector, social insurance organisations etc.

This aim should be achieved by developing infrastructures and network initiatives as well as developing a basic inventory of methods for WHP and the enforced work in the field of public relations, marketing and advocacy.

In discussing this proposal the network members made some suggestions concerning the implementation of this initiative:

- ◆ *to support networks on national level*
- ◆ *to strengthen marketing activities*
- ◆ *to support further integration of WHP (policy development, infrastructure and workplace level)*
- ◆ *to strengthen marketing activities*
- ◆ *to develop practical tools*
- ◆ *to compile action at national level*
- ◆ *to develop a data base regarding actions which have already been done*

A new proposal including all these elements will be drafted by the German contact Office at the BKK-BV, which is also to run the network secretariat in future.

The ENWHP will also continue co-operate with other networks and European organisations as it has done in the past. In this frame one important project will be on *Mental Health Promotion and Prevention Strategies in Coping with Anxiety and Depression*. It is planned in co-operation with several organisations and networks active in the field of Mental Health Promotion. This project will include all the network partners. The Federal Institute for Occupational Safety and Health as co-ordinator of the ENWHP will co-ordinate the part for the working population. The overall objective of the project is to build a European strategy to initiate and implement actions in Member States on Mental Health Promotion and Prevention for coping with anxiety and depression.

The specific goals of the project will be to gather relevant information concerning the growing impact of anxiety and depression and related disorders on the public health status of European citizens and the early detection and management of these problems. The focus will be specifically on three epochs of the lifespan, namely 1) children, adolescents and young people to age 24 years in educational and other relevant settings, 2) working adults from 25-60 years, and 3) elderly people from 60 years in various settings.

In order to achieve these aims, strategies, programmes and models of best practice will be identified and evaluated from the participating countries in mental health promotion and the prevention of anxiety, depression and related disorders.

A European strategy for Mental Health Promotion and Prevention for coping with problems of anxiety, depression and related disorders in these three age related population groups, will be developed. It will be based on the information acquired from the participating countries;

An integrated strategy for communication and dissemination of the aims, mechanisms and strategy outcomes of the project using all appropriate media most likely to 1) raise awareness among relevant professionals, policy makers and the general public; 2) encourage effective policy development and implementation within Member States will be developed and carried out.

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