



Republic of Bulgaria
ECONOMIC
AND SOCIAL COUNCIL

OPINION

on:

**“MAIN PRIORITIES IN THE DRAFT EU STRATEGIC FRAMEWORK
ON OCCUPATIONAL SAFETY AND HEALTH - 2021-2027”**

Sofia, 2020

The Economic and Social Council (ESC) included in its Action Plan the development of an opinion on "Main Priorities in the Draft EU Strategic Framework on Occupational Safety and Health - 2021-2027".

The elaboration of the draft opinion was assigned to the Labour, Income, Living Standards and Industrial Relations Commission and the Social Policy Commission of ESC.

Dr. Ivan Kokalov - ESC member from Group 2 - Trade Unions was appointed rapporteur for the opinion.

At its plenary session, held on 22 June 2020, ESC discussed and adopted the opinion.

1. Conclusions and recommendations

1.1. ESC welcomes the recommendations and conclusions of the Council for Employment, Social Policy, Health and Consumer Affairs, adopted on 10 December 2019, to develop a new EU Strategic Framework on occupational safety and health for the period 2021-2027¹.

1.2. ESC believes that the EU Strategic Framework on occupational safety and health for the period 2014-2020 has contributed to the efforts of member states for better and more effective national policies in the field of occupational safety and health (OSH). Most member states have adopted national action plans based on this framework. ESC recommends a detailed assessment of the impact of the national strategy for occupational safety and health for the previous period.

1.3. ESC emphasises that OSH not only benefits the EU economy and national economies, but is also part of basic labour rights. Despite the positive results achieved, ESC is concerned that the achievements in OSH and therefore the benefits of investments in OHS are not evenly distributed among EU Member States. There are still significant differences in working conditions between member states in different sectors of the economy.

1.4. ESC is of the opinion that the participation of the social partners in the development and implementation of the EU Strategy for Occupational Safety and Health (OSH) for the period 2021-2027 will be essential to achieve solutions that will lead to finding common indicators and criteria for implementing EU OSH policies, taking into account the specificities of the member states.

1.5. ESC supports the Council's conclusion on the leading role of the European Pillar of Social Rights in developing the Strategy for OSH for the period 2021-2027. Principle 5 of the pillar emphasises the need for quality working conditions, including innovative forms of work. Principle 10 emphasises the right of workers to "a high level of protection of health and safety at work" and to "a working environment which is adapted to their professional needs and which helps to prolong their participation in the labour market". Principle 17 emphasises the right of people with disabilities to "services that enable them to participate in the labour market and in society, and a work environment adapted to their needs".

1.6. ESC draws attention to the fact that the new forms of employment that have arisen as a result of digitisation are not sufficiently covered by the legislation in the field of health and safety. All workers in the EU should be protected by legislation in this area.

1.7. Given the efforts of the EU and the overall trend to reduce the number of accidents that cause injuries and deaths in the workplace, ESC proposes to pay more attention to work-related diseases that have the highest mortality - cancer and cardiovascular diseases, musculoskeletal disorders and diseases connected with psychosocial risks.

1.8. ESC emphasises that the recognition and registration of occupational diseases in the EU must be harmonized through systematic data collection in order to track trends at the EU level. According to ESC, the unequal standards for the recognition of occupational diseases and accidents at work lead to significant differences in the protection of workers with regard to their health and safety at work in countries that have a higher or lower degree of recognition of these diseases.

¹ <https://data.consilium.europa.eu/doc/document/ST-14630-2019-INIT/bg/pdf>

1.9. ESC points out that the impact of working conditions on men and women is different, which leads to differences in physical and psychological risk factors affecting their health - a special approach is needed to ensure OSH in relation to working women.

1.10. According to ESC, ensuring good health and safety management in SMEs and family farms remains a significant challenge. Many of these enterprises are mainly characterised by weak economic positions, concerns about economic survival, lack of investment in health and safety, limited knowledge, awareness and competence in the field of health and safety.

1.11. ESC notes with concern that labour inspectorates do not have sufficient financial and human resources to fulfil their obligations to control, promote and support compliance with national health and safety legislation. ESC supports EU initiatives to increase the resources and capacity of national labour inspectorates.

1.12. ESC emphasises the need for and calls for more in-depth studies to draw attention to the importance of investing in OSH. Investments in OSH should be considered not only in terms of workplace safety, but also in terms of job quality.

MAIN PRIORITIES IN THE EU STRATEGIC FRAMEWORK FOR OSH FOR THE PERIOD 2021-2027

2. Digitisation, new forms of employment and OSH

2.1. The process of digitisation and the use of artificial intelligence can lead to many positive changes in the field of OSH. ESC draws attention to the new forms of employment that have emerged as a result of digitisation should also fall within the scope of the OSH rules. ESC agrees with the conclusions of the Council that "new forms of work should not reduce or impair the responsibility of the employer to ensure healthy and safe working conditions for workers in every aspect related to this work"².

2.2. ESC points out that undeclared work is associated with significantly higher risks in terms of OSH. For workers, undeclared work leads to limited access to health insurance, work in an unfavourable working environment that puts their health and safety at risk, and limited access to inspections by control bodies.

2.3. ESC calls on the social partners to analyse the needs and, if necessary, to develop appropriate measures to protect the health of workers employed in atypical forms of work, taking into account the need to ensure work-life balance. Measures to protect workers employed in new forms of work should be part of the legislation to ensure OSH.

2.4. ESC believes that possible protection measures should be part of the strategy 2021-2027, considering the EU-funded projects and programmes. Their development must be carried out in cooperation between the relevant national and European institutions.

2.5. The unprecedented situation with COVID-19 during the recent months has shown the need for clear procedures for timely decisions to change OSH legislation. For example, the inclusion of SARS-CoV-2 in

² Council conclusions of May 2019 "The changing world of work: reflection on new forms of work and the consequences for workers' safety and health."

the scope of the Directive on the protection against exposure to biological agents in a much shorter period of time will ensure timely and better protection of medical workers, laboratory technicians, etc. who work with biological substances.

3. Prevention of work-related cancer

3.1. ESC notes with concern that cancer continues to be the number one cause of work-related deaths in the EU. The resulting annual EU-wide spending on health and productivity losses is estimated at between € 4 billion and € 7 billion. The fight against cancer is one of the leading priorities of the EC and one of the five missions in the scope of the European science and innovation program "Horizon Europe".

3.2. ESC welcomes the amendments to the European directive on protection against occupational exposure to carcinogens and mutagens in the workplace as one of the most important improvements in legislation in this area³. On the other hand, however, an increasing number of carcinogens related to environmental pollution or workplace exposure continue to be detected. Work on identifying additional carcinogens and mutagens in the workplace and setting limit values for them must continue to be a top priority.

3.3. In addition to carcinogens and mutagens, workers may be exposed to a variety of other hazardous substances, such as reproductive toxicants and nanomaterials. ESC notes that it is necessary to improve the legislation related to hazardous chemicals and the protection of workers in this field. Differences in directives and regulations regarding chemicals often lead to conflicting decisions both on their use and storage and on the provision of health and safety.

3.4. ESC emphasizes that in order to take adequate preventive measures for protection against hazardous chemicals and their effective management, it is necessary to collect and analyse statistics and information that are comparable throughout the EU.

4. Management of psychosocial risks in the workplace

4.1. Psychosocial risks and work-related stress are among the most serious and growing problems for health and safety at work. More than a quarter of all workers report being subjected to work-related stress all or most of their working time⁴. The most commonly cited causes of workplace stress are job insecurity, prolonged or irregular working hours, overwork, and harassment and violence in the workplace.

4.2. ESC stresses the need to develop a regulatory framework for psychosocial risk factors, risk assessment and management, focusing on the challenges arising from the changing world of work. Although finding solutions to stress and psychosocial risks involves significant costs, research shows that neglecting them is significantly more costly for businesses and the economy.

4.3 ESC welcomes the idea of proposing EU strategy on mental health, taking into account the cross-sectoral effects of various policies, including OSH, on mental health.

³ Directive 2017/2398 of the European Parliament and of the Council of 12 December 2017 on the protection of workers from the risks related to exposure to carcinogens or mutagens at work.

⁴ Second European Business Survey on New and Emerging Risks (ESENER-2) EU-OSHA, 2016.

5. Prevention of musculoskeletal disorders related to work

5.1. According to 60% of workers in the EU, musculoskeletal disorders (MSDs) are the most common work-related health problems⁵. Exposure to repetitive movements, tiring and painful postures, and carrying or moving heavy loads are still among the most common physical risk factors in the workplace.

5.2. ESC recognizes that the EU directives aimed at the prevention of work-related MSDs do not respond to both technological progress and changes in working conditions. The EU Strategic Framework on Safety and Health at Work 2021-2027 should provide guidelines for amending the directive on work with video displays, conducting in-depth studies on the relationship between psychosocial risks and MSDs and awareness-raising campaigns on ergonomic risks for MSDs.

6. Small and medium-size enterprises and OSH

6.1. ESC welcomes the Council's recommendation to continue initiatives to support small and medium-sized enterprises in terms of OSH. Micro and SMEs account for almost 93% of all businesses in the EU. Workers in small and medium-sized enterprises are at higher risk of accidents at work and occupational diseases than those working in large enterprises. The programmes for support of SMEs, the facilitated access to funds for investments in OSH, training and qualification of the employees will improve the safe working conditions in the enterprises⁶.

6.2. ESC emphasises that SMEs need more support to ensure adequate OSH. This support includes:

6.2.1. Financial support and cost-effective instruments tailored to the specific needs of SMEs.

6.2.2. Support from labour inspectors, who should play a more significant role in raising awareness of OSH legislation and providing assistance and advice.

6.2.3. Raising awareness among employers and workers from SMEs, exchange of good practices, training.

6.2.4. Development of methods and sharing of knowledge and expertise on how to ensure compliance with high standards in the field of health and safety in the supply chain by subcontractors and within consortia.

7. Development and implementation of a common European OSH barometer

7.1. According to ESC, the different standards for the recognition of occupational diseases in the Member States lead to different levels of protection for workers in the EU, whose countries have a higher or lower degree of recognition of these diseases. Recognition and registration of occupational diseases in the EU must be harmonized in order to follow trends at the EU level.

7.2. ESC shares the general opinion that the lack of comparable statistics between member states on OSH is a significant problem in developing measures to improve them. Sharing statistical information will significantly improve the evidence base of EU OSH policies.

⁵ <https://osha.europa.eu/bg/publications/msds-facts-and-figures-overview-prevalence-costs-and-demographics-msds-europe/view>

⁶ <https://ec.europa.eu/eurostat/web/products-eurostat-news/-/WDN-20180627-1>

7.3. ESC welcomes the initiative of the European Agency for Safety and Health at Work (EU-OSHA) to develop OSH barometer, which should improve the database. In addition, Eurostat has launched a methodological study on the problems arising from insufficient reporting. All this should lead to the creation of a stable system for collecting information and data, based on the pilot project on European statistics on occupational diseases.

7.4. ESC believes that the EU Strategic Framework on Safety and Health at Work should provide some guidance to Member States to develop national OSH information systems that are comparable to those of other EU countries.

8. Promoting a special OSH approach for working women

8.1. Although working in the same jobs, men and women often face different physical and psychosocial risks. ESC recommends that employers should be encouraged to include gender issues in the management of OSH, paying attention to the prevention of MSDs and cancer among women.

8.2. ESC believes that the new strategy for safety and health at work should promote full respect for the principles of gender equality and the prohibition of discrimination. Women are more likely to face violence and harassment in the workplace. Between 45% and 55% of women in the EU-28 have experienced sexual harassment after the age of 15, with 32% of these women reporting that the perpetrator was at work⁷.

9. Demographic problems, an ageing workforce and OSH

9.1. In the context of the rapid ageing of the European population, health and safety are a major factor in increasing working life expectancy. The number and share of older workers is growing rapidly. Older workers are at greater risk of accidents at work. In addition, diseases with a long latency period, such as work-related cancers, cardiovascular and musculoskeletal diseases, are much more common.

9.2. ESC notes that it is necessary to continue the efforts and measures for OSH, allowing older workers to continue their professional careers in a safe and healthy way. Current work practices and methods are often not attractive for older workers and for people with partial disabilities or chronic illnesses to continue working or return to work. The older worker may not be able to continue to perform work that requires physical strength, but may have the desire and ability to perform other activities that require less physical effort.

9.3. Good return policies and practices must be promoted in order for jobs to be sustainable. For workers wishing to return to work, an appropriate rehabilitation process and gradual and controlled workload and inclusion in the work process must be established, as well as the adaptation of their jobs if necessary.

9.4. ESC calls for greater attention to people with disabilities in all their forms. ESC emphasises that the link between disability and the labour market is expressed not only in measures to ensure the right of access such as quotas, incentives or tax relief, but also in a greater commitment to prevent risks to the health of people with disabilities in all types of work environment. Investments in OSH should be tailored to the needs of people with disabilities.

⁷ The key findings are analysed in R. Latcheva, Sexual Harassment in the European Union: A Pervasive but Still Hidden form of Gender-Based Violence, *Journal of Interpersonal Violence*, 2017.

9.5. ESC calls for special attention to be paid to mobile workers, migrant workers and seasonal workers, as they are more likely to suffer an accident at work due to language and other barriers. Many of them, especially illegal migrants, are not adequately covered by social systems and data reporting.

10. Increasing the capacity of labour inspections

10.1. New risks and new forms of work are additional challenges to effective labour inspection, while new approaches are emerging that complement traditional means and methods of implementation. In addition to carrying out their main activity of controlling labour legislation, labour inspectors play an important role in advising and sharing good OSH practices.

10.2. The EU's OSH Strategic agenda should encourage labour inspectorates to offer businesses free high-quality IT tools to help them assess occupational risks. The tools should be included in wider initiatives to mobilize the relevant sectors and be accompanied by campaigns to promote risk prevention efforts. The involvement of the social partners and workers is absolutely necessary.

10.3. According to ESC, labour inspectors have an important role in advising employers and workers' representatives on health and safety issues in order to encourage them to acquire the necessary knowledge, skills and measures to identify, assess and control risks. It is important to promote the role of health and safety committees and groups in enterprises and workers' representatives.

11. General remarks

11.1. In the context of the crisis caused by COVID-19, the EU is facing lasting economic stagnation and high unemployment rates. Unemployment is a special aspect of workplace health, as in some cases it is associated with the onset of mental illness. The highest standards of safety and health at work must be ensured when implementing COVID-19 crisis exit strategies. Workers experience anxiety and worry about both the risk of infection and the possibility of losing their job and livelihood.

11.2. Various European studies show that progress has been made on OSH, but the overall burden of costs related to accidents at work and occupational diseases remains high. According to estimates by the European Agency for Occupational Safety and Health (EU-OSHA), 3.9% of world GDP and 3.3% of European GDP are spent on occupational injuries and diseases. This percentage varies from country to country depending on the state of their economy, legal framework and incentives for prevention. The biggest cost item is work-related cancers, followed by musculoskeletal disorders⁸.

11.3. ESC supports the Council's view that health and safety are an important element of the welfare economy⁹. Improving health and safety conditions leads to greater employee satisfaction and increases their commitment to employers and their productivity.

11.4 ESC believes that the new EU strategy for OSH should provide guidelines for working with the new European Labour Authority (ELA). As an institution responsible for improving labour mobility, the ELA can play a role in ensuring safe and healthy working conditions for cross-border workers, seasonal workers and migrants. Its scope of activities includes the fight against undeclared employment and increasing the capacity of labour inspections.

⁸ <https://osha.europa.eu/en/publications/international-comparison-cost-work-related-accidents-and-illnesses>

⁹ Council conclusions of 26.11 2019 on the welfare economy.

11.5 ESC is convinced that the Strategic Framework for Safety and Health at Work of the European Union together with national strategies and rules are a guarantee for protecting the health and safety of workers, because it is extremely important for restoring sustainable economic growth and promoting quality jobs. Only a concerted effort by the Member States can lead to a reduction in occupational diseases and accidents and to the achievement of equally high levels of protection for workers in individual countries.

11.6 ESC believes that the new strategic framework of the EU for safe and healthy working conditions should provide appropriate guidelines and approaches to reduce fatal accidents and the detection of occupational diseases at a late stage, with a focus on promoting prevention and the exchange of good practices in the field of OSH.

(signed)

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