



International Commission on Occupational Health - ICOH
Commission Internationale de la Santé au Travail - CIST

Founded in 1906 as Permanent Commission



ICOH comments on the Agenda item 17. Public health emergencies: Preparedness and response

ICOH commends and congratulates WHO and the International Health Regulations (IHR) Review Committee for the excellent report.

Subchapter 3.2 of the IHR Committee report deals with core capacities needed for effective emergency preparedness, surveillance and response. As the whole report, ICOH finds the subchapter relevant and appropriate for the implementation of IHR in practice. Effective implementation of the IHR at country level needs, in addition to policy and regulatory actions, sufficient numbers of competent and health emergency response (ER) personnel, from health and other key ER occupations.

Reports from various countries speak for 15-35% of all COVID-19 infections originating from work and health workers and other ER workers are among the top ten high-risk occupations. Depending on the country, 5 to 30 % of confirmed COVID-19 infections are registered among health workers. Workers in ER practices and fieldwork are in the frontline of the COVID health and safety risk in emergencies sacrificing even their lives in practical ER work: As many as 40% of COVID-19 fatalities studied in the UK in a global sample of deaths of health workers were recorded among ER workers.

Lessons from the COVID-19 emergency response speak for critical importance of the prevention of risks and protection of health, safety, and workability of the public health emergency personnel working in the management of the pandemic crisis. ICOH proposes that adequate guidance for occupational health, safety and maintenance of workability of ER workers is included in the WHO guides member states concerning public health emergency preparedness and response. Such prevention and protection need provision of competent occupational health services for ER workers.

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