



# NEWSLETTER



**ICOH**  
International Commission on Occupational Health

**CIST**  
Commission Internationale de la Santé au Travail

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## Message from the President



Dear colleagues,

### The Impact of Global Conflicts on Workers' Health

The world continues to be challenged by unexpected conflicts. The war in Ukraine remains unresolved, while new tensions have emerged in Iran and the broader Middle East. These crises have widespread economic consequences, including rising fuel prices that drive up costs and restrict travel.

Beyond the tragic loss of innocent lives, wars severely disrupt livelihoods. Workers frequently face job insecurity or unemployment due to raw material shortages and a decline in international trade. War is inherently devastating to working life, and tragically, the health and safety of workers are consistently marginalized or entirely ignored during times of conflict. I sincerely hope that a normal, peaceful working life for all will soon be restored.

### Looking Ahead: ICOH2027 Mumbai Congress

Please remember that the abstract submission deadline is rapidly approaching. I hope all members are preparing to submit their abstracts for the ICOH2027 Mumbai Congress. You may also participate as a speaker in Special Sessions—such as mini-symposia, workshops, and seminars—organized by the Scientific Committees.

I plan to organize a session on publication strategies for young scientists, featuring the Editors-in-Chief of major occupational health journals. Building on the success of a similar session at the Marrakesh



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## NEWSLETTER

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### ICOH Newsletter

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among ICOH members.

Congress, which drew a full-capacity crowd, I look forward to another highly engaging discussion. Additionally, I would like to organize a dedicated session for corporate occupational health specialists to discuss comprehensive approaches to improving workers' health..

### Good News: The Return of US NIOSH

Last April, we shared the deeply concerning news regarding the abrupt closure of the US National Institute for Occupational Safety and Health (NIOSH) by an unpredictable government directive. NIOSH could not be permanently closed through this process, as it was established by law under the Occupational Safety and Health Act of 1970.

Although some researchers returned immediately due to appeals from various stakeholders, the majority of employees were left without job security for an extended period. Some chose to retire, while others left to find new jobs. However, many professional organizations issued strong appeals to the American public, and labor unions took the matter to court.

The court ultimately overturned the government's order, protecting all NIOSH employees as well as those in other organizations who were laid off at the same time. Consequently, the US Department of Health and Human Services (HHS) completely reversed its course. On January 13, 2026, the layoff notices were officially revoked, and all full-time NIOSH employees were reinstated to their positions. Furthermore, the agency's funding for 2026 has been fully restored.

While we celebrate the return of most of the staff, many of NIOSH's critical research projects were frozen over the past nine months. This interruption will inevitably have an impact on workers' health, not only in the United States but around the world.

### WHO

As noted in previous newsletters, the importance of occupational health is increasingly being marginalized within the WHO, with activities related to workers' health being scattered across different programs. Our main liaison officer, Dr. Ivan Ivanov, who retired last year, was situated within the Department of Environment, Climate Change and Health (ECH), where climate change was emphasized as the primary occupational health-related focus. Meanwhile, classic occupational health issues, such as chemical poisoning, have been absorbed by the Chemical

Safety Program, and work-related cardiovascular and respiratory diseases are being handled by the Noncommunicable Diseases (NCD) program.

As reported in our April 2023 newsletter, Past President, Jukka Takala, participated in previous SAICM conferences held in Nairobi, Kenya, and Berlin, Germany, in 2023. Last November, the Secretary General and I held an online meeting with representatives from the Chemical Safety Program and ILO staff. The next international conference on Chemical Safety will be held in Geneva in November 2026. ICOH has been invited to join the program, and both the Secretary General and I will participate.

Additionally, an NCD meeting is continuously taking place online to prepare for the WHA meeting in May 2026.

ICOH was also invited to the Intergovernmental Working Group (IGWG) on the WHO Pandemic Agreement from March 23-28. The discussions are primarily focused on infection control. As a non-state actor, ICOH was invited to join the opening and closing sessions of IGWG6. While the agenda focuses on the WHO Pathogen Access and Benefit-Sharing System (PABS/PASS)—which is not directly related to traditional occupational health—the COVID-19 pandemic clearly demonstrated that workplace prevention is a crucial strategy for controlling the spread of pandemics. As these examples illustrate, workers' health issues are being fragmented across various projects, making it increasingly difficult to maintain a unified occupational health presence within the WHO.

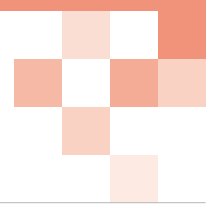
Historically, occupational health within the WHO has been supported by the WHO Collaborating Centers (OH-CC). Meetings for the OH-CC were typically held just before the ICOH Congress, a tradition that continued up to the 2024 Marrakesh Congress. I personally participated in the 2006 Stresa meeting in Italy as the WHO-CC director of KOSHA. At that time, there were 64 member institutes and universities globally; today, that number has dropped to 38. A Global Forum of WHO-CCs was held in Lyon (France) on 7-9 April 2026. Diana Gagliardi, in her capacity of Director of the INAIL WHO-CC, attended this event advocating for occupational health together with a few other OH Collaborating Centres. We hope that this active presence and open discussions will bolster support for occupational health within the WHO.

Finally, in February, ICOH was notified that the WHO Executive Board decided to maintain ICOH in official relations with the WHO. Our activities with the organization will undergo their next review in January 2029. Dr. Richard Brown, from the Environmental Health Department, serves as the WHO Designated Technical Officer for these official relations. Diana Gagliardi is scheduled to meet with him to discuss mutual collaboration during the World Health Assembly (WHA) at the end of May.

**Prof. Seong-Kyu Kang**  
President of ICOH



# News from the Secretary General



**Dear ICOH members,**

The ICOH activities for the current triennium are proceeding efficiently, and I would like to share some updates with you.

## Membership campaign

ICOH Secretariat is continuously working to strengthen ICOH membership base and the membership campaign is performing steadily. Maintaining an active status is essential for ensuring uninterrupted access to all member benefits, including the preferential registration rates for the upcoming Congress.

Also, members from low- and middle-income countries in Good Standing at the moment of submitting their abstract to the ICOH2027 Congress Free Papers programme will be able to apply for a grant, to receive a (total or partial) support to their participation in the Congress.

If you have not renewed your ICOH membership yet, please contact the ICOH Secretariat at [icoh@inail.it](mailto:icoh@inail.it) to receive the instructions and payment forms for the membership fee for the 2024-2026 period. Online payment options are also available in the Private Area of the ICOH website.

New members are also welcome to join ICOH. If you know any colleagues who might be interested, please invite them to apply for membership on the ICOH website, at [www.icohweb.org](http://www.icohweb.org)

We look forward to your active participation in and contribution to ICOH activities.

## ICOH2027 Congress

The preparations for the upcoming ICOH2027 Congress are advancing smoothly and are now well underway. The

abstract submission platform is still open and ready to receive your contributions. Don't miss the opportunity to share your work with the global community of OSH experts!

Also, the overall scientific programme of the Congress is in continuous development: after securing the Keynote and Plenary speakers, we are now completing the list of Semi-Plenary speakers, working on the features of the Global Policy Forum, and building the Special Sessions programme. Everything is on track to ensure that ICOH2027 will be another highly successful event.

For detailed information on programme, key dates, abstract topics and submission processes, registration fees, grants for participants from low- and middle-income countries, please refer to the Second Announcement.

Stay tuned and follow all the Congress updates on the Congress website ([www.icoh2027.in](http://www.icoh2027.in)) and social media accounts (Instagram and LinkedIn).

## ICOH Webinars and ICOH Events

In alignment with ICOH commitment to professional growth and knowledge exchange, a new series of ICOH webinars is currently being developed through the invaluable contributions of the ICOH Scientific Committees, Board members, National Secretaries, and Collective members. These sessions serve as a high-level forum for addressing critical topics under the guidance of recognized experts, while simultaneously reinforcing the professional bonds within our global network.

Members are encouraged to monitor the dedicated section of the ICOH website at <https://www.icohweb.org/site/webinars.asp> for updates on these sessions; furthermore, a comprehensive archive of all previous recordings remains available for consultation within the Private Area.

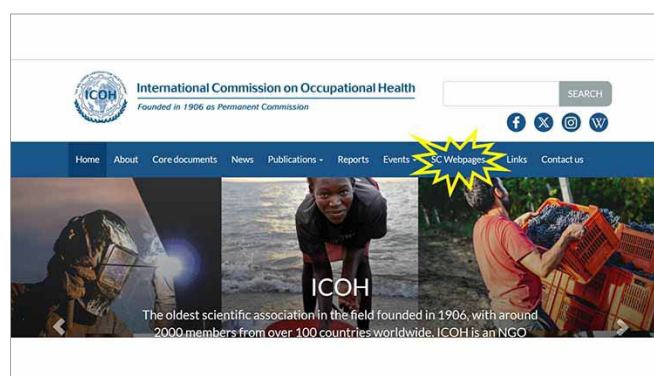
Parallel to this, ICOH Scientific Committees and National

# News from the Secretary General

Secretaries continue to organize a diverse range of events covering the breadth of Occupational Health and Safety, providing valuable opportunities for members to enhance their expertise and expand their professional networks. Don't forget to visit <https://www.icohweb.org/site/events.asp> to learn more about upcoming events and more.

## SC webpages

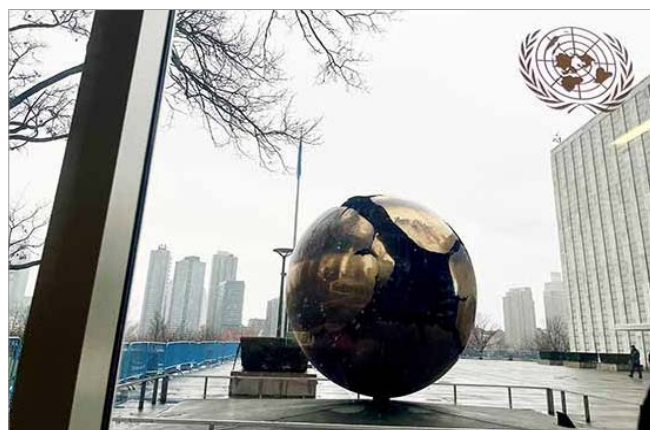
I am happy to announce that the first four Scientific Committees have successfully launched their new webpage hosted on the ICOH Website. Beyond their primary location within the established 'Scientific Committees' section of the ICOH website, we have finally achieved a significant enhancement of the SC webpages' accessibility: in a move to further streamline the user experience, these pages have now been fully integrated into the newly implemented search bar functionality. This update ensures that the links to the SC webpages are now directly searchable and instantly accessible from the ICOH Website homepage, representing a major step forward in ICOH efforts to foster a more connected and informed community.



The development of SC webpages is progressing and there are more SC pages that are currently in the final stages of development, and other SC Officers who are actively refining their content in view of the publication of their webpage.

## Activities of the ICOH Secretary General

In March, I attended the seventieth session of the Commission on the Status of Women, representing ICOH together with Dr. Gina Strozzi, ICOH Member representing the SC Women, Health and Work.



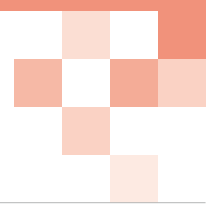
Any edition of the CSW represents a unique networking opportunity, where representatives of Member States, UN entities, and ECOSOC-accredited non-governmental organizations (NGOs) from all regions of the world are invited to participate and contribute to the international debate on the condition of women.

Participation in CSW70 offered a strategic opportunity for observation, institutional articulation and analysis of global trends related to the gender agenda, with particular attention to the intersections between violence, mental health, work and access to justice.

Beyond its formal dimension, engagement in plenary sessions, side events and high-level meetings enabled a qualitative understanding of multilateral dynamics, revealing progress, gaps and contemporary tensions.

The main topics across the conference were gender-based violence with all the related aspects spanning from access to justice to recognition of all the different forms of violence (private, economic, workplace, technology-facilitated) and

## News from the Secretary General



their intersections and interconnected impacts.

While it was repeatedly pointed that gender equality remains a persistent challenge, and that there will need decades, if not centuries, to achieve full parity, especially in public and political representation, discussions around social protection mechanisms demonstrated that the lack of gender-responsiveness hampers an effective protection of women in the labour market as well as in their private life. After participating to two consecutive editions of the CSW, we are absolutely convinced and ready to strengthen the institutional presence of the ICOH in the upcoming CSW71 through structured actions of advocacy and international collaboration. In particular, we will work to reinforce direct dialogue with UN Women and to position ICOH as a relevant technical actor to promote gender equality and women empowerment through decent work.

I have also attended the Global Forum of WHO Collaborating Centres (Lyon, France; 7-9 April 2026), where a frank and thorough discussion about the future of Occupational Health and of the Global Network of WHO Collaborating Centres on Occupational Health took place with the WHO management. Even if invited as Director of the INAIL's WHO-CC, I contributed to the discussion also in my capacity as Secretary General

of ICOH, reminding of the support that ICOH as always provided to the Global Network (e.g. by hosting the Meeting of the Global Network in conjunction with the ICOH Congress). Also, in the light of the recent decision of the 158th Session of the Executive Board of WHO, confirming ICOH as a Non-State Actor in official relations with WHO for another three years, I reconfirmed the intention of ICOH to support any initiative that can contribute to preserve Occupational Health as an asset to WHO's programme of work, including by facilitating a parallel session of the Network at the coming ICOH207 Congress in Mumbai.

The debate on the future of Occupational Health within WHO is still ongoing, and more meetings will be convened in the coming weeks and months. As ICOH, we will continue to monitor the situation, actively participate in the discussion, and offer support for any activity that may be useful for the continued operation of the Global Network. We will keep you updated.

**Dr. Diana Gagliardi**  
ICOH Secretary General



## Message from the Editor

**Dear ICOH members,**

Warm greetings to all. Welcome to the first edition of the ICOH Newsletter for 2026. As we step into the third year of the 2024-2027 Triennium, I extend my sincere thanks to all members who contribute their time, ideas, and dedication to our shared mission.

Reflecting on the past year, our community has shown remarkable resilience in the face of rapidly evolving global trends and various regional disruptions. In particular, our heightened interest and insightful discussions regarding “Climate Change and Worker Health” and “AI and Occupational Health” have demonstrated our shared commitment to protecting workers in a changing world.

These ongoing challenges remind us of the critical importance of our work and the need for continued solidarity and collaboration within our community. While these issues present complex challenges, your dedication

transforms them into opportunities for progress.

This first issue of the year features a wide range of news and reflections that highlight the vibrant spirit, resilience, and creativity of ICOH members worldwide. From expanding initiatives to international collaborations, I encourage each of you to remain actively engaged whether by sharing updates, exchanging insights, or participating in upcoming events.

Your involvement ensures that the ICOH Newsletter continues to be a meaningful and inclusive platform for learning and connection. I am deeply grateful for your unwavering support and for making us closer together as a global family.

Thank you for being part of this global community. Let us move forward together into 2026, with purpose and hope.

**Prof. Won-Jun Choi**  
Editor-in-Chief, ICOH Newsletter




### The editorial planning of the ICOH Newsletter

The editorial plans for 2026 are as follows:

- Number 1: 1st April (deadline for article submission: end of February)
- Number 2: 1st August (deadline for article submission: end of June)
- Number 3: 1st December (deadline for article submission: end of October)



## Notice from the Secretariat

### Information on Bid Submission for ICOH2033 Congress


Deadline: 14 August 2026, 23:59 CEST

The procedure for bid submission to compete for the venue of future ICOH Congresses is indicated in Bye-Law 7, Sections 1 and 2. Detailed information on the bidding process and required mandatory documents can be found in the Guidelines for ICOH Congress Organization available at <https://www.icohweb.org/site/core-documents.asp>

The documentation in support of the bid shall contain documents in accordance with the requirements set out in ICOH Bye-Law 7, Section 2.

Original documentation and an electronic version must be received by the ICOH General Secretariat six months before the First General Assembly (i.e., **by 14 August 2026, 23:59 CEST**). No applications will be accepted after that date.

For all additional information, please refer to the Guidelines for ICOH Congress Organization.





## ICOH Webinar Series

The ICOH Webinar Series programme continues to demonstrate strong and growing success, reflected in consistently high attendance and sustained interest from the global occupational health community. Building on this positive response—and in light of increasing engagement from a wide range of contributors—we are pleased to announce that the possibility to organise a webinar for the ICOH Webinar Series has now been afforded to **National Secretaries** and **ICOH Board Working Groups** too, further strengthening collaboration and diversity of perspectives across ICOH.

In 2026, the first webinar of the year in the ICOH Webinar series has been organized by an ICOH National Secretary. Entitled “Mental Health at Work: breaking paradigms and building healthy workplaces”, the webinar was held on January 22. It was organized by the National Secretary for Peru, Dr. Norvil Antonio Mera-Chu and co-organized by the National Secretary for South Africa, Ms Claudina Nogueira, with the participation of the Sao Paulo Association of Occupational Medicine.

Adopting a global perspective, the speakers shared their expertise and explored ways to promote healthy workplaces, with a strong focus on prioritising workers’ mental health. The webinar had a positive impact worldwide—particularly in Latin-America, where workplace mental health and psychosocial risk management are still developing.

Approximately 100 ICOH members from around the world actively participated in the session. The webinar featured a distinguished panel of speakers who covered the following agenda:

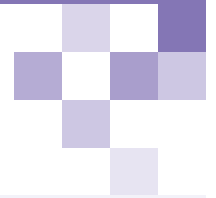
- Dr. Quentin Durand Moreau, “Digital technology and psychosocial risks: a new old story”
- Ms. Claudina Nogueira, “The African context”
- Dr. Nuri Purwito Adi, “Strategies for Psychosocial risks management: Good practices in Indonesia”
- Dr. Jonh Astete, “Psychosocial risks at workplaces: Experiences and impact inside companies in Perú”
- Dr. Joao Silvestre, “Psychosocial risks at workplaces: Experiences and impact inside companies in Brazil”

The event closed with a roundtable discussion, during which panellists answered questions from participants, shared final reflections, and encouraged continued action to ensure that mental health is recognised as a workplace priority.

One of the key takeaways, was the growing role of digital technologies, alongside the need for a stronger framework to access psychosocial risks and hazards. While these developments bring new challenge, they also create valuable opportunities across different regions: Africa, Indonesia, Peru and Brazil.

- Africa: despite notable progress and establishment of OSH networks, there is still a clear need to strengthen initiatives focused on worker well-being and psychosocial risk management.
- Indonesia: a wide range of adapted and validated tools for assessing psychosocial risks is already in place, with current efforts focusing on health promotion, prevention and mental well-being.

# ICOH Webinar Series



- Peru: following the validation of the COPSQ-istas 21 tool (Spanish version of the Copenhagen Psychosocial Questionnaire), its use in workplaces has increased significantly, along with the number of trained specialists. A National Observatory of Psychosocial Risk Factors has also been established.
- Brazil: managers often reported feeling underprepared to address organisational factors, with psychological distress still frequently treated as an individual rather than an organisational issue, limiting the effectiveness of risk management approaches.

We are pleased to announce the next round of the ICOH Webinar Series, starting in April, with three high-level sessions covering a range of topics in the OSH sector:

- “AI, Automation and Occupational Health and Safety”, April 30, 2026, organized by ICOH WG Demographic changes, inequalities and future of decent work;
- “Occupational Exposure to Optical Radiation: Updates on Protection and Prevention Strategies”, May 12, 2026, organized by SC Radiation and Work;
- “Violence in the Health Care Sector”, June 11, 2026, organized by SC Work Organisation and Psychosocial Factors.

The full agenda will be available on the official ICOH website under the “ICOH Webinar Series” section. Registrations for each webinar will open one month in advance.

We would like to thank all organisers, speakers, and participants for their valuable contributions. Their continued engagement strengthens our community and supports the exchange of knowledge and perspectives. We also look forward to new proposals for the next cycle, starting in September 2026.

We hope you will find the upcoming programme of interest and look forward to your participation.



## OPINION

### Rebuilding schools, repeating risks: Why Sri Lanka must act now on asbestos

Aseni Wickramatillake, NS for Sri Lanka

In the weeks following Cyclone Ditwah, across affected parts of Sri Lanka, children returned to school grounds that looked very different from before. Roofs lay twisted on the ground, classrooms were reduced to rubble, and piles of broken building materials waited to be cleared away. For many communities, the focus has understandably been on rebuilding quickly, restoring normality, getting children back into classrooms, and repairing what the storm destroyed.

Yet hidden within this urgent recovery is a quiet but serious public health risk that we have seen before and should not repeat asbestos.

A recent judgment by India's National Green Tribunal (NGT) has brought renewed attention to this issue across the region. While the Tribunal did not impose an immediate ban on asbestos cement roofing in schools, it clearly reaffirmed a critical scientific fact, there is no safe level of asbestos exposure. It also acknowledged that asbestos fibres are released when roofing sheets weather, break, or are dismantled, and that exposure is not limited to factory workers alone.

This judgment is particularly relevant to Sri Lanka at a moment when damaged schools are being cleaned up and rebuilt under immense time and financial pressure.

Sri Lanka is not without policy guidance. In 2020, the Cabinet of Ministers approved a decision to refrain from using asbestos roofing sheets in school buildings, especially in new constructions, and to adopt safer, environmentally friendly alternatives. This decision recognised what

public health professionals have long warned: children are uniquely vulnerable to asbestos exposure, and schools should be places of safety, not silent risk.

However, a policy written on paper does not always translate into protection on the ground. Even before the cyclone, asbestos-containing cement roofing sheets could still be seen in newly constructed or renovated pre-schools and primary schools, particularly in rural areas. Cost concerns, limited awareness, weak enforcement mechanisms, and procurement practices often override health considerations. For parents and teachers, this is rarely a conscious choice; most are unaware that the familiar grey roofing sheets above their children's heads contain a known carcinogen.

Cyclone Ditwah has magnified this risk. When asbestos cement sheets crack, collapse, or are broken during demolition, they release microscopic fibres into the air, fibres that cannot be seen, smelled, or felt, but can lodge deep in the lungs. In post-disaster clean-up operations, debris is often handled rapidly and informally, without protective equipment or guidance on hazardous materials. Informal workers, volunteers, school staff, nearby residents, and sometimes even children themselves may be exposed during debris removal, transport, or dumping.

The rebuilding phase presents a second and more enduring danger. Under pressure to restore schools quickly and within limited budgets, asbestos-containing roofing materials may once again be chosen. In doing so, a long-term health hazard is rebuilt into the very structures meant to protect and nurture young minds. This directly contradicts existing Cabinet decisions and ignores decades

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of global public health guidance that stresses prevention of early-life exposure as the most effective way to reduce asbestos-related disease.

Evidence from Sri Lanka itself shows that these concerns are not theoretical. In the article “Prevalence of Asbestos-Related Disease Among Workers in Sri Lanka,” radiological evidence of asbestos-related lung disease was documented among exposed workers in several parts of the country. Importantly, the findings also pointed to environmental and para-occupational exposure, including among people living under asbestos roofs. With limited diagnostic facilities, weak health surveillance, and widespread underreporting, Sri Lanka is likely seeing only a fraction of the true disease burden.

Children are not simply small adults. They breathe more air relative to their body weight, their lungs are still developing, and they have many decades ahead during which asbestos-related cancers such as mesothelioma may emerge. Schools are spaces of prolonged, daily exposure, making the continued presence of asbestos roofing especially troubling from both a health and ethical standpoint.

Post-disaster reconstruction offers Sri Lanka a rare opportunity. Rebuilding is not just about speed, it is about rebuilding better and safer. This moment calls for clear leadership and decisive action: strict enforcement

of the existing prohibition on asbestos use in schools, clear guidance on safe handling and disposal of asbestos-containing debris, and reconstruction contracts that mandate asbestos-free materials.

Asbestos risk must also be integrated into disaster preparedness and recovery planning, rather than treated as an afterthought.

The Indian NGT judgment sends a strong signal to the region. The debate is no longer about whether asbestos is dangerous; the science has long settled that question. The real issue is how long governments can justify continued exposure, particularly among children, when safer alternatives exist. As Sri Lanka rebuilds its schools after Cyclone Ditwah, the country has a responsibility to ensure they are not only standing, but safe. Rebuilding faster should never come at the cost of rebuilding unsafe.

The writer is Director, Centre for Occupational Safety and Health (COSH), Visiting Lecturer, University of Moratuwa, and College of General Practitioners, Sri Lanka, Board Member, Workplace Health Without Borders (WHWB) International Branch, National Secretary, International Commission on Occupational Health (ICOH) and Secretary, Workplace Safety and Health Association (WSHA), Sri Lanka.

**courtesy The Sunday Times, Sri Lanka**



## OPINION

### Financial Stress as a Growing Dimension of Occupational Health: Implications for Global Workforce Wellbeing

Eliana M. Touceda, Occupational Medicine Specialist, Argentina

In a global context marked by accelerated economic and technological change, workers' financial wellbeing has become an increasingly relevant component of the work environment. In this setting, financial stress is beginning to be recognized not only as an economic phenomenon, but also as a factor with significant implications for health and job performance.

Financial stress can be defined as the subjective perception of difficulty in meeting personal or family financial obligations (1). This psychological dimension is central: it is not solely determined by income level, but by the sustained experience of economic insecurity. A growing body of research indicates that financial stress is associated with a higher prevalence of anxiety, sleep disturbances, depressive symptoms, and overall deterioration in wellbeing (2).

In occupational settings, the impact of financial stress is reflected in both individual performance and organizational outcomes. Evidence consistently shows associations between financial stress, increased absenteeism, reduced performance, and lower productivity (3,4). Observational and experimental studies suggest that the cognitive load associated with financial concerns may impair concentration, affect decision-making processes, and generate measurable variations in work performance. Across different economic contexts, temporary relief from financial pressure has been linked to observable improvements in productivity (5), suggesting that the impact is not merely subjective but also quantifiable.

Moreover, financial stress is not evenly distributed. Its

effects tend to be more pronounced among workers with lower incomes, informal employment, and/or limited access to financial education, introducing an important equity dimension that is particularly relevant for global occupational health (6).

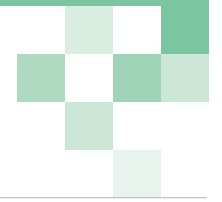
This scenario highlights the importance of considering the psychosocial dimensions related to workers' financial context within existing preventive frameworks. In this regard, recognizing financial stress as an increasingly visible dimension of workplace wellbeing may contribute to a more comprehensive understanding of how economic conditions influence health at work.

Possible strategies include the implementation of workplace financial education programs, the development of institutional support strategies for situations of economic vulnerability, strengthening interdisciplinary approaches, and integrating financial wellbeing into occupational health initiatives.

In conclusion, employers are encouraged to take a proactive and structured approach to financial wellbeing within their occupational health strategies by assessing the impact of financial stress in their workforce, incorporating it into psychosocial risk management processes, and collaborating across disciplines to design appropriate interventions. Practical measures may include workplace financial education, confidential counselling, equitable remuneration practices, and targeted support during periods of economic hardship.

By recognising financial stress as a legitimate workplace

# OPINION



risk factor and responding with coordinated, preventive action, employers can strengthen workforce resilience, enhance productivity, and contribute to more equitable and sustainable work environments.

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# Reports from the Scientific Committees

The following articles from the Scientific Committees are here.

SC Occupational and Environmental Dermatoses  
 SC OH in Small-Scale Enterprises and the Informal Sector  
 SC Rural Health: Agriculture, Pesticides and Organic Dusts  
 SC Radiation and Work  
 SC Women Health and Work  
 SC Work Organisation and Psychosocial Factors

## < SC Occupational and Environmental Dermatoses >

### The ESCD2026 Congress in Copenhagen - A Global Forum on Contact Dermatitis

José Hernan Alfonso, SC Chair

Cara Bieck, SC Secretary

The 17th Congress of the European Society of Contact Dermatitis (ESCD) will take place from 24–27 June 2026 at the iconic Maersk Tower, which is part of the University of Copenhagen, Denmark.

ESCD 2026 will bring together leading experts, researchers, and clinicians from across the globe to explore the latest advancements in contact dermatitis and related skin disorders.

#### Programme Highlights

The congress will provide a comprehensive platform to discuss cutting-edge topics, including emerging contact allergens, immune responses, diagnostic challenges, and new treatments. The ESCD 2026 programme features:

- Plenary lectures by internationally recognised experts
- State-of-the-art educational sessions
- Interactive workshops

- Focus sessions
- Free communications and poster presentations
- A pre-symposium dedicated to novel understanding of skin allergies with a specific focus on skin of color

#### Core Scientific Themes

The programme addresses both foundational mechanisms and real-world challenges, including:

- Emerging contact allergens and diagnostic dilemmas
- Occupational and hand eczema: exposure assessment, prevention, and management
- Irritant versus allergic mechanisms
- Atopic dermatitis and barrier dysfunction
- Molecular signatures and immune response profiling
- Adverse reactions to drugs, implants, and medical devices
- Regulatory perspectives and preventive strategies
- Global and demographic perspectives in dermatitis

# Reports from the Scientific Committees

## Dedicated Focus: Skin of Color

Importantly, ESCD 2026 will also specifically highlight skin of color within contact dermatitis. Differences in clinical presentation, diagnostic challenges and disparities in access to care are increasingly recognised as essential considerations in dermatology health.

Sessions will address:

- Diagnostic pitfalls in darker skin
- Occupational exposure risks in diverse worker populations
- Inclusion of diverse populations in research and clinical trials

### [Quote]

“ESCD 2026 aims to bridge dermatology, immunology, and public health — strengthening collaboration that directly improves prevention and patient care worldwide.”

## Copenhagen – A Hub for Scientific Exchange

Hosted in Copenhagen, ESCD 2026 will take place in the award-winning Maersk Tower, a modern research and educational facility at the University of Copenhagen, designed to foster collaboration and innovation.

The venue offers state-of-the-art lecture halls, networking spaces, and an inspiring academic atmosphere. Copenhagen’s accessibility, sustainability profile, and vibrant biomedical research environment make it an ideal location for an international congress.

## Registration and Engagement

Registration is open, including reduced rates for students and trainees. Early career researchers are strongly encouraged to participate and engage in discussions shaping the future of

dermatology and especially contact dermatitis.

## Further Information

Full details on programme updates, speakers, registration, and congress logistics are available at: <https://escd2026.org/>



Maersk Tower, University of Copenhagen

(Photograph: Charlotte Olsen, Credit: Lærke Gade Bjerregaard)

“The Maersk Tower — host venue of ESCD 2026 — symbolises the integration of research, clinical science, and international collaboration.”



ESCD2026 President Professor Charlotte Menné Bonefeld

(Credit: Jens Rosenfeldt)

“I am looking forward to welcoming you to Wonderful Copenhagen to share knowledge, foster collaborations, and advance our collective understanding of the critical aspects of dermatology and immunology. Together, we can pave the way for innovation and improved care in this ever-evolving discipline.”

## Reports from the Scientific Committees

### Advancing Work-related and Occupational Skin Cancer Prevention in South America

Jose Hernán Alfonso, SC Chair

Sonia Gaviola, ICOH member

Claudio Taboadela, Chair of SC Vision and Work

Norvil Antonio Mera Chú, NS for Perú

Cara Bieck, SC Secretary;

The ICOH Scientific Committee on Occupational and Environmental Dermatoses (SC-OED) has played an active role in strengthening occupational skin cancer prevention initiatives in South America. This work aligns with the recent recognition by the World Health Organization (WHO) that skin diseases constitute a global public health priority — an important milestone for dermatology and occupational health worldwide (1).

In October 2025, SC-OED contributed directly to the 29th Congress of the Society of Occupational Medicine of the Province of Buenos Aires, Argentina, attended by approximately 900 participants. A dedicated scientific session emphasized solar ultraviolet radiation (UVR) as a preventable occupational carcinogen and reinforced the core

principles of the Global Call to Action to Protect Outdoor Workers from Skin Cancer (2). Through expert presentations, SC-OED highlighted that occupational skin cancer is preventable through recognition, structured risk assessment, education, protective measures, and early diagnosis. In recent years, Argentina has developed national guidelines for the prevention and diagnosis of occupational skin cancer related to solar UV radiation at work (3,4,5).



Campaign poster for the prevention of occupational skin cancer among outdoor workers in Perú.



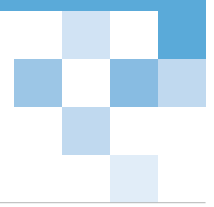
Session on the Prevention of Occupational Skin Cancer, attended by approximately 900 participants, held in Buenos Aires, Argentina. The session highlighted occupational ultraviolet radiation as a preventable risk factor and emphasized evidence-based strategies for protecting outdoor workers' skin health.

Photo: Joachim Adrian

In February 2026, SC-OED further engaged with colleagues in Peru through a webinar in collaboration with SC on Occupational Medicine and SC History of Prevention of Occupational And Environmental Diseases, with around 90 occupational health professionals. Discussions focused on integrating sun protection into national occupational health strategies in a country characterized by consistently high UV levels and altitude.

A Spanish-language adaptation of the Global Call to Action to protect outdoor workers from skin cancer<sup>1</sup> is currently being developed to support broader dissemination and implementation across Spanish-speaking countries.

# Reports from the Scientific Committees



SC-OED warmly welcomes collaboration with colleagues worldwide to advance prevention of occupational skin cancer related to UV exposure and to strengthen global efforts to protect outdoor workers.

<https://www.icohweb.org/sc/occupational-and-environmental-dermatoses>

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1. World Health Organization. Skin diseases as a global public health priority. Seventy-eighth World Health Assembly, 27 May 2025. WHA78.15 (Agenda item 13.4). Geneva: WHO; 2025.
2. International League of Dermatological Societies (ILDS). Global call to action to protect outdoor workers from skin cancer [Internet]. London: ILDS; 2019 [cited 2026 Feb 27]. Available from: <https://globalskin.org/about/collaborations/78-gs-2019-content/634-global-call-to-action-to-protect-outdoor-workers-from-skin-cancer>
3. Superintendence of Occupational Risks (SRT), Argentina. Occupational cancer. Buenos Aires: Superintendencia de Riesgos del Trabajo, Ministry of Production and Labour, Presidency of the Nation; 2026.
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5. Superintendence of Occupational Risks (SRT), Argentina. Occupational skin cancer. In: Guidelines for action and diagnosis of occupational diseases. Chapter 09. Buenos Aires: Ministry of Production and Labour, Presidency of the Nation; 2019.

## < SC OH in Small-Scale Enterprises and the Informal Sector >

### Report on the One Day Hybrid Symposium on Design Thinking and Informal Work

Somnath Gangopadhyay, SC Chair

Debleena Ghosh

The one-day hybrid symposium on Design Thinking and Ergonomics in the Informal Sector, organized by the Department of Physiology, University of Calcutta, and endorsed by the International Commission on Occupational Health (ICOH) Scientific Committee on Small-Scale Enterprises and Informal Sector and International Ergonomics Association (IEA) Technical Committee on Informal Work, represented a significant interdisciplinary platform for

rethinking work design in informal economies. The event brought together scholars from ergonomics, occupational health, design sciences, and social policy to explore how human-centered design approaches can transform work environments that remain structurally invisible within formal regulatory systems.

The symposium recorded 167 participants from India,

## Reports from the Scientific Committees

Nigeria, and the USA, with 32 in-person and 135 virtual attendees, reflecting strong global engagement and outreach.



Participants of the symposium

The event featured keynote contributions by Prof. Pranab Kumar Nag, Prof. Anindya K. Ganguli, and Prof. Debkumar Chakrabarti, whose presentations collectively articulated a conceptual shift from top-down regulatory models toward participatory, co-created, and culturally grounded design paradigms. Their deliberations framed informal work not as a peripheral anomaly of modern economies, but as a structurally embedded and enduring form of labor requiring systematic scholarly engagement.



Prof. Somnath Gangopadhyay is delivering his introductory talk on the ICOH SC OHSSEIS

Prof. Pranab Kumar Nag introduced the concept of temporal ergonomics, framing time as a design variable rather than a neutral metric. His presentation problematized rigid models of work-hour regulation when applied to informal economies, where labor rhythms are shaped by seasonal cycles, ecological conditions, household needs, market volatility, and survival imperatives. Dr. Nag's conceptual contribution lies in proposing a temporal ecology of work, where time design becomes culturally adaptive, biologically sustainable, and socially contextualized.

Addressing the institutional dimension of ergonomics, Dr. Anindya Kumar Ganguli through his analysis of international and national standardization systems, including ISO ergonomics standards and Indian regulatory frameworks, emphasized that ergonomic standards play a critical role in ensuring safety, productivity, accessibility, and quality assurance in formal economies and critically examined the structural exclusion of informal sectors from standardization processes and argued for the development of adaptive standards frameworks, where principles of ergonomics are translated into scalable, low-cost, and context-sensitive guidelines suitable for informal work system including simplified tool design standards, modular safety frameworks, community-level certification models, and participatory compliance mechanisms.

Prof. Debkumar Chakrabarti's presentation integrated design philosophy, ergonomics, and cultural sustainability. He distinguished between engineering design focused on technical functionality and industrial design centered on usability, identity, and human experience.

Prof. Chakrabarti's contribution also articulates a humanistic design epistemology, where informal sector innovation becomes a site of ethical responsibility rather than developmental charity. Design thinking, in this model, becomes a tool for empowerment rather than intervention.

## Reports from the Scientific Committees

Therefore, the symposium collectively articulated a paradigm shift in how informal work systems are conceptualized within ergonomics and design sciences. Rather than treating informality as a deficit condition to be formalized, the discourse reframed informal economies as complex adaptive systems requiring specialized design methodologies.



Speakers and in person participants of the symposium

### < SC Rural Health: Agriculture, Pesticides and Organic Dusts >

#### Rural Health SC Representatives Contributed to the Pesticide Management Workshop in Istanbul

Hanifa M. Denny, SC Chair

The FAO/GEF project “Lifecycle Management of Pesticides and Disposal of POPs Pesticides in Central Asian countries and Türkiye” has systematically documented the significant human health impacts of pesticide use across Central Asia. Evidence from projected exposure assessments revealed a high prevalence of acute pesticide poisoning among agricultural workers, exacerbated by critical gaps in the capacity of healthcare systems—particularly in rural areas—to diagnose, report, and manage these cases effectively.

As one of the activities of this project, an event titled “From Evidence to Action: Addressing Pesticide Health Impacts and Strengthening National Response Systems” was held in Istanbul on December 18, 2025. This event is designed to translate these critical findings into a strategic framework for national action. It presented compelling evidence from recent studies, showcase successful capacity-building initiatives for healthcare

professionals, and highlight the pivotal role of National Poison Information Centres as multifunctional hubs for emergency response, toxicovigilance, professional training, and public health advocacy. The session is culminated in a collaborative, country-focused workshop to draft actionable roadmaps for integrating health protection into national pesticide management systems. The main objectives of the event were to mobilize high-level action for the institutionalization of enhanced pesticide poison management and prevention and promoting the establishment of national poison centres and the integration of related training into sustainable government systems.

Officers and members of the Rural Health SC gave presentations at this event. Chair Prof. Hanifa Denny delivered a speech entitled “Building Resilient Health Systems’. Addressing the Burden of Pesticide Exposure in Agricultural Settings”, while the Secretary, Asst. Prof. Burak Kurt, spoke about “Building Frontline Capacity.

## Reports from the Scientific Committees

A Project Success Story: Results from the Training of Trainers Programme”, Prof. Claudio Colosio “The Unseen Health Crisis”, and Dr. Onur Acar “The Institutional Solution: The Role of National Poison Centres.”

Prof. Burak Kurt and Prof. Claudio Colosio moderated “Collaborative Roadmapping Workshop” and the event was closed with summary of key takeaways, shared commitments, and proposed next steps for advancing the national roadmaps.



### < SC Radiation and Work >

## Planned activities of ICOH Scientific Committee “Radiation and Work” for the first half of 2026

Alberto Modenese, SC Chair

The ICOH Scientific Committee Radiation and Work (SC R&W) has kicked off 2026 with a comprehensive plan of new upcoming activities set to unfold in the near future.

First off, the ICOH SC R&W has submitted to the ICOH Board a proposal to host one of the [ICOH Webinars Series](#) in early 2026. The topic of the webinar will be on the protection and prevention strategies to properly deal with the occupational risk related to optical radiations exposure. Details on the date (current proposal: May 2026) and on the program of the webinar will be available soon on the ICOH website.

Furthermore, the ICOH SC R&W has started to work at the detailed programs for the two Special Sessions that will be proposed by the SC at the upcoming [2027 ICOH world conference](#) in Mumbai (India). One special session is co-

organized with the Scientific Committee on Occupational and Environmental Dermatoses and it mainly deals with the topic of the prevention of UV-induced occupational skin cancers afflicting workers exposed to solar radiation. The second special session of the SC R&W will delve into updates on occupational health surveillance and worker

**Scientific Committee: Radiation and Work**

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

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The main aim of the Scientific Committee on Radiation and Work of the ICOH is to stimulate an international exchange of experiences on research, progress, methodology and practice in the field of:  
- exposure of workers to ionizing radiation (IR) and non-ionizing radiation (NIR), including Electromagnetic Fields (EMF) and Optical Radiation (OR)  
- the prevention and health protection of exposed workers.

The activities of the Scientific Committee on Radiation and Work are intended to provide a unique multidisciplinary and interdisciplinary network for sharing knowledge and advancement in the general field of occupational and environmental aspects of radiation as IR and NIR, on adverse health effects, methodology and application, and any other topic of interest to the general field of protection and health protection of IR and NIR exposed workers.

<p>Chair Prof. Alberto MODENESE University of Modena and Reggio Emilia Department of Biomedical, Molecular and Neural Sciences Via Campi, 207 - I-41100 Modena (MO) Italy Phone: +39 059 205 5161 Email: <a href="mailto:alberto.modenese@unimore.it">alberto.modenese@unimore.it</a></p>	<p>Secretary Mrs. Claudine STREHL Institute for Occupational Safety and Health (IFA) German Social Accident Insurance (DGUV) Alte Heerstrasse 111 - 53175 Bonn, Germany Phone: +49 228 205 13170 Email: <a href="mailto:claudine.strehl@ifa.de">claudine.strehl@ifa.de</a></p>
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# Reports from the Scientific Committees

protection concerning risks posed by both ionizing and non-ionizing radiations.

Furthermore, the ICOH SC R&W is collaborating closely with the International Commission on Non-Ionizing Radiation Protection (ICNIRP). Prof. Alberto Modenese, Chair of the ICOH SC R&W, will host a hybrid ICNIRP workshop titled Occupational Protection in Medical NIR Applications at the University of Modena and Reggio

Emilia in Northern Italy on the 20th of May 2026. The detailed program of the workshop, including information for registration, will be available soon on the [ICNIRP website](#). On behalf of the ICOH SC R&W, the former Chair, Prof. Fabriziomaria Gobba, will give a keynote on occupational health surveillance of NIR exposed workers.

All the activities will be posted also on the [ICOH SC R&W webpage](#): stay tuned!

## < SC Women Health and Work >

### Changing the global OSH vision with a gender perspective

Igor Jesus Bello, SC Chair

From the ICOH Scientific Committee on Women, Health and Work, we are pleased to introduce our latest project: “Comprehensive Occupational Risk Management from a Gender Perspective”. This initiative addresses the critical need to integrate gender into OSH policies, moving beyond “one-size-fits-all” approaches that often overlook biological, physiological, and social variables, resulting in unequal health outcomes.

The guidelines adopt a holistic life-cycle approach, ensuring protection for women from reproductive age and pregnancy through menopause and into their later working years. Key measures include chemical safety, ergonomic adaptations, and psychosocial support tailored to each stage of life.

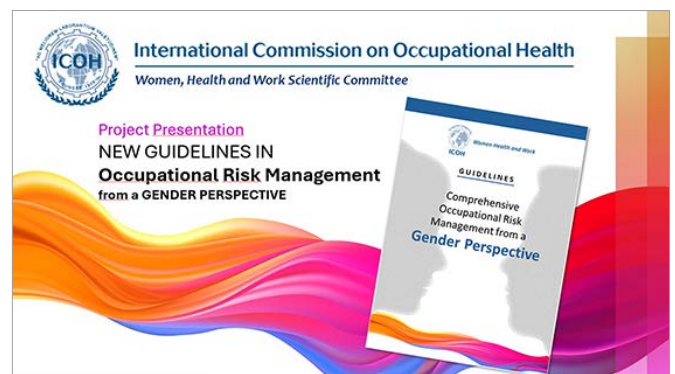
The project features four primary deliverables:

- A White Paper summarizing the supporting research.
- A Checklist-type evaluation form for quantitative

organizational diagnosis.

- Detailed Implementation Guidelines integrable with existing OSH plans.
- A Campaign Toolkit including multilingual flyers, videos, and presentations in English, French, and Spanish.

Developed utilizing Delphi methodology, the final Toolkit will be available online by late 2026 for a global launch at the ICOH Mumbai 2027 International Congress.





## Reports from the Scientific Committees

### < SC Work Organisation and Psychosocial Factors >

#### Reflections on Psychosocial Risk Management Is the regulatory framework efficient in Latin American countries?

Karla Canova, SC member

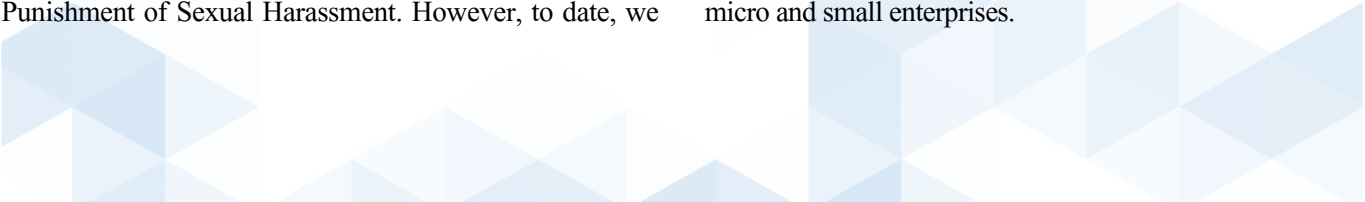
There is a significant challenge regarding the management of psychosocial risks in the workplace in Latin American countries. Currently, we find a diversity of regulatory frameworks that lack coherent public policies to effectively achieve the objectives related to managing these factors in various private and public organizations. On the one hand, we find that policies addressing “Organizational Factors” and “Personal Factors” are not yet clearly differentiated, which requires us to focus on developing the disciplines that converge within the framework of Occupational Safety and Health. On the other hand, we have regulatory frameworks that focus on isolated factors related to stress, violence, and harassment at work, which fail to address the reality of working people.

In the case of Peru, we have Law No. 29783 and regulations on occupational safety and health, which stipulate that employers must guarantee the protection of the physical and mental health of all workers. We also have Ministerial Resolution No. 375-2008-TR, a basic ergonomics standard that refers to minimum parameters allowing for the adaptation of working conditions to the physical and mental characteristics of workers; Law No. 30947, on mental health, which reinforces the promotion of mental health in the workplace and the prevention of psychosocial disorders; and Law No. 27942, the Law for the Prevention and Punishment of Sexual Harassment. However, to date, we

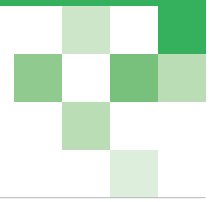
do not have sufficient indicators to understand whether this regulation is truly effective, nor whether the coordination at different levels of government is efficient in addressing potential scenarios related to “Workplace Suicide.” On the other hand, we also find countries that lack regulation, leaving the preventive treatment of these factors to the employer's discretion, as is the case in El Salvador.

In this regard, it is crucial to address this inequality in regulation and real protection to safeguard fundamental labor rights such as occupational safety and health. Adopting models from more advanced systems, such as those used in the Netherlands and Japan, could be a starting point for change that reduces this gap, considering that emerging risks related to technology use, digitalization, and other factors are increasing the impact on workers. It is important to raise awareness of the problem by generating country-specific indicators that allow us to understand the realities of organizations and evaluate these working conditions, which must evolve to achieve effective risk prevention.

Finally, the intervention of social dialogue forums also plays a key role, as they should prioritize this issue, striving to adopt progressive measures that allow for the sustainable application of regulations by organizations, especially micro and small enterprises.



# Reports from the National/Area Secretaries



The following articles from the National/Area Secretaries are here.

NS Belgium  
NS Finland  
NS Ireland  
NS Peru  
NS Thailand  
NS Uganda

## Evolving Occupational Medicine in Belgium: Key Changes Since 2025

Lode Godderis, NS for Belgium

Occupational medicine in Belgium has been shaped by a series of legal reforms aimed at strengthening return-to-work policies, reducing long-term sickness absence, and enhancing early intervention. The most significant changes, particularly the introduction of Reintegration Trajectory 3.0 (and related measures, took effect on 1 January 2026 and mark a shift toward more proactive and coordinated occupational health practice.

At the heart of these reforms is the government's strategy to prevent prolonged incapacity for work and support sustainable reintegration. The Act of 19 December 2025 and the Royal Decree of 17 December 2025 amended the Code on Well-being at Work and the rules on work incapacity, collectively known as RIT 3.0. These changes re-define the roles of employers, occupational physicians, and other stakeholders in managing work absence due to health reasons.

A key innovation is the possibility to initiate reintegration support from the occupational health service as from 4 weeks on to the sick listed employee. After eight weeks of absence, employers must arrange for the occupational

physician to assess the employee's work potential. If work potential exists, employers with 20 or more employees are legally obliged to start a formal reintegration trajectory within six months, with sanctions for non-compliance.

These reforms also introduce preventive measures: employees at risk of incapacity may request workplace adjustments or alternative duties to avert the need for sick leave. Employers must now include contact procedures in their work regulations, specifying how and how often they will maintain communication with employees on sick leave — a measure designed to support reintegration and monitor progress.

Parallel changes affect sickness certification and wage rules. As of 2026, employees may only be absent without a medical certificate twice per calendar year (down from three) and the “relapse period” for guaranteed salary has been extended from 14 days to eight weeks, influencing how occupational physicians evaluate ongoing incapacity.

In addition, the period before employers may begin a medical

## Reports from the National/Area Secretaries

force majeure procedure (which can lead to termination due to long-term incapacity) has been shortened from nine months to six. Communication between occupational and treating physicians, and mutualities' medical advisers, is increasingly formalized through platforms like TRIO, improving interdisciplinary collaboration.

Together, these reforms represent a paradigm shift in Belgian occupational medicine — from passive monitoring toward active, early, and coordinated care that emphasizes prevention, timely assessment, and structured pathways back to work.

### Building a Healthier Workforce in the Baltic Sea Region: New Digital Tool to Boost Mental Health

Minna Kaarina Majuri, NS for Finland

Mental health is just as important as physical health—yet across the Baltic Sea Region, declining mental well-being in the workplaces is a growing concern. In small businesses, even a single absence can disrupt operations. At the same time, access to occupational health services and structured mental health support is often more limited in smaller enterprises.

For example, in Finland, over 90% companies are micro-enterprises with fewer than ten employees. Daily life in these businesses is often hectic, with employers and employees juggling multiple roles in day-to-day operations. Supporting occupational well-being can feel like an additional burden, which often leads to the challenges being addressed only after problems arise. Yet, mental health is the true engine of our productivity. Alarmingly, mental health-related sick leaves have surged in recent years across all socioeconomic groups.

The idea for the First-Aid-Kit for mental health at work was inspired by the concept of the first aid kit that we use for physical injuries. Developed by the international MentalHealthMatters project team and funded by Interreg Baltic Sea Region, this free online tool offers practical,

easy-to-implement solutions to tackle common workplace risk factors that harm employee well-being. This First-Aid-Kit helps workplaces identify psychosocial risk factors and strengthen well-being in everyday work life.

Experts from all participating countries—Norway, Poland, Finland, Latvia, and Estonia—have contributed to building this comprehensive resource. Designed regionally, the resource addresses challenges that are shared by workplaces everywhere—making it adaptable, and applicable for small and medium-sized enterprises globally.

Click [here](#) to access the First-Aid Kit for Mental Health at work.

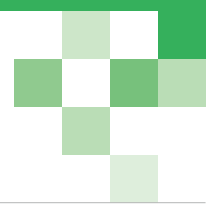
Click [here](#) to watch a short Kit's intro video.

Website: <https://mentalhealth.ndphs.org>

MentalHealthMatters project received financial support from the Interreg Baltic Sea Region and was co-funded by the European Union.



# Reports from the National/Area Secretaries



## ICOH Ireland & Phoenix Park Study Group Annual Christmas Meeting 2025: Crisis Negotiation and Behavioural Influence

Ciarán Bohane, NS for Ireland

The Annual Meeting of the International Commission on Occupational Health (ICOH) in Ireland was held on 5 December 2025, in conjunction, as is traditional, with the Phoenix Park Study Group. The meeting provided members with an opportunity to engage with a practical and insightful presentation on crisis negotiation delivered by Detective Sergeant David Swan of An Garda Síochána’s National Negotiation Unit.

### Crisis Negotiation in Ireland

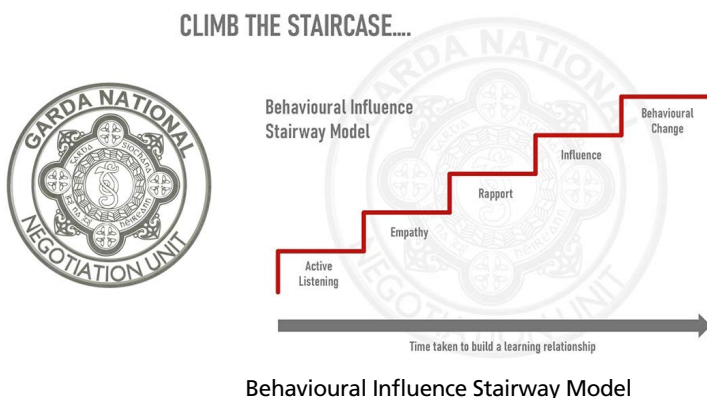
Detective Sergeant Swan outlined the development of crisis negotiation as a policing discipline, drawing on its origins in the United States and subsequent adoption and evolution in the UK, Canada, Australia and Ireland. He described the establishment of Ireland’s National Negotiation Unit in 2018 and its role within Special Tactics and Operations Command. The presentation highlighted the wide range of incidents in which negotiators are deployed, including hostage and barricade situations, suicide interventions, extortion and kidnap cases, protest engagement, Child

Rescue Ireland alerts, and support for high-risk planned operations.

Det. Sgt. Swan also provided an overview of current resourcing and activity levels, noting the fluctuating but sustained demand for negotiation services across recent years. Emphasis was placed on the importance of structured procedures, team-based deployment, and the duty of care afforded both to members of the public and to negotiators themselves.

### The Behavioural Influence Stairway

A central element of the presentation was the Behavioural Influence Stairway Model, a structured framework used by negotiators to build influence in high-stress situations. Det. Sgt. Swan explained how effective negotiation begins with active listening, progresses through empathy and rapport, and only then allows for influence and, ultimately, behavioural change. The model was presented as both a practical operational tool and a transferable communication



Det. Sgt. David Swan speaking to ICOH & Phoenix Park Study Group Members

## Reports from the National/Area Secretaries

framework relevant beyond policing contexts.

The importance of language and tone was also highlighted. Det. Sgt. Swan discussed how certain commonly used phrases can inadvertently escalate tension, while simple courtesies and carefully chosen wording can assist in de-escalation and cooperation. Throughout, the focus remained on preserving life, reducing risk, buying time, and creating the conditions for safe resolution.

### Relevance for ICOH Members

The presentation offered valuable insights for ICOH members with interests in occupational psychology, stress

management, leadership, and decision-making under pressure. The structured, evidence-informed approach to communication and influence demonstrated clear relevance to a wide range of occupational and organisational settings where conflict, crisis, or high-stakes interaction may arise.

### Acknowledgements

ICOH members expressed their appreciation to Detective Sergeant David Swan for a highly informative and engaging presentation. Thanks are also due to Dr. Tom Donnelly, Secretary of the Phoenix Park Study Group, for providing a wonderful venue and a welcoming reception that contributed greatly to the success of the evening.

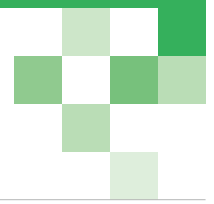


ICOH & Phoenix Park Study Group Members



Dr. Tom Donnelly, Phoenix Park Study Group Secretary, Det. Sgt. David Swan, An Garda Síochána National Negotiator Unit & Dr. Ciarán Bohane, ICOH Ireland National Secretary

## Reports from the National/Area Secretaries



### 3rd International Conference of SC OM: Crossing Borders in Favour of Workers' Health: A Milestone in Perú for Working on The Future and Opportunities for Occupational Medicine Worldwide

Gogillan Sevaratnam, Chair of SC Occupational Medicine

Norvil Mera Chu, NS for Perú

The 3rd International Conference of Scientific Committee on Occupational Medicine (SC OM) in collaboration with National Secretary of ICOH Peru (NS Perú) was held from December 11th-13th, 2025 in the vibrant and historic city of Lima, Peru. This conference brought together experts, researchers, and professionals from the field of Occupational Medicine worldwide to discuss the latest advancements, share insights, and exchange ideas on promoting health and safety in the workplace. This event was a milestone in Occupational and Environmental Medicine (OEM) and Occupational Health and Safety (OHS) for Perú and Latin-America.

There was a pre-conference webinar held in 9th December and was titled "Addressing Occupational Diseases in Peru." The speakers were able to present their experiences and open a dialogue with the participants about the challenges they face regarding regulations, technical and ethical aspects from the perspective of the public, business and medical sectors.

During our Opening Ceremony, Mr. Juan Carlos Requejo, the current Vice-Ministry of Small-Scale Enterprises and Industries of Perú delivered the key-note speech pointing out the impact of this conference. Alongside with him, Dr. Dr Gogillan Sevaratnam (SC OM Chair) and Dr. Norvil Mera Chu (NS of Perú) welcomed all the participants for kicking off the event.

There was a recognition to all the ICOH members from Perú for all their support during the last decade and specially during this new triennium.

In a special moment of the Opening ceremony, the Organizing Committee commemorate and thanked to the Past National Secretaries of Perú for their great contribution in the history of OH in Perú. They also honoured Dr. Carlos Llap Yesan for his contribution in the OEM Speciality in Perú. They all built the pathway for the new generations in Perú.

Before the welcome reception, there was an artistic Peruvian Show which included dances from all regions to share Peruvian culture, music and arts with everyone.

The Official Peruvian Newspaper "El Peruano" was covering the Opening Ceremony and interviewed Dr. Gogillan Sevaratnam, Mr. Juan Carlos Requejo and Dr. Norvil Mera Chu. In the previous months, the newspaper also published 2 articles about this conference and the potential impact on OHS for Perú.

Petroperú Auditorium was the venue for the Opening Ceremony and Universidad de Piura was the venue for the main academic program and the closing ceremony during the rest of the days. Both of them offered a very warm and nice space for sessions and the international networking.

For the very first time, SC OM arrived at Latin-America. Speakers and attendees from America, Europe, Asia and Oceania joint to work on the current problems and needs in OHS in each sector, exchanging experiences with global vision. The semi-plenary sessions included topics as Long-term impacts of occupational exposure

## Reports from the National/Area Secretaries

to neurotoxicants, The Causality Nexus of Occupational Diseases, Occupational Skin Conditions, Musculoskeletal Health in the Workplace, Cancer and Work capabilities, Risk Management with Gender Vision, and OEM Challenges in sector such as Mining, Construction, Oil & Gas, Fishing, Health workers and informal sector.

The Special sessions followed a methodology as roundtable session with panellists in English and Spanish. The Ministry of Health of Perú and the main Scientific Societies of OHS from Latin-America joint SC OM and other ICOH SCs for were invited to participate on the discussion of the following topics:

- Special Session 1: Occupational Asthma: Diagnoses and treatment, with panellists from the Peruvian Society of Occupational and Environmental Medicine (OEM specialists and pneumologists) and SC OM.

- Special Session 2: Preventing MSD at Workplace: The Best Programs, with panellists from the Latin-American Union of Ergonomics, the Peruvian Society of Ergonomics, and the Scientific Society of Ergonomics and Psychosociology of Perú.
- Special Session 3: Impairment & Disability: Impact on Working Environment, with panellists from SC OM and the Ministry of Health of Perú
- Special Session 4: Mental Health: The Challenges and Opportunities, with panellists from ICOH Scientific Committee on Women, Health and Work, Peruvian Society of Occupational Health and SC OM.

In the 2nd day of the event, there was a Workshop on “Pneumoconiosis in the Informal Sector in Latin America”. Participants included the ICOH Scientific Committees (Occupational Medicine, Women, Health and Work, and OH for Small Scale Enterprises and the Informal Sector),



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ICOH National Secretaries from Latin America, specialists from the IPO (International Pneumoconiosis Observatory), OHS Scientific Societies from Latin America (including Colombia, Chile, Argentina, Guatemala, and Peru), specialists from the public and private sectors (including mining, construction, occupational health clinics, and others), faculty, and medical residents. The working groups focused on the following areas:

- Group 1: Surveillance, Diagnosis, and Early Detection of Pneumoconiosis
- Group 2: Prevention and Control in Informal/Small-Scale Sectors
- Group 3: Policy, Legal Frameworks, and Collaboration with other clinical fraternities

The experts discussed about the main problems in each area, proposed solutions involving stakeholders from different sectors and roles, and presented conclusions which will be useful as a starting point for working on addressing this group of diseases, which in the informal sector is still a great challenge and requires a lot of attention from OSH professionals worldwide, and especially in Latin America.

One of the priorities at the conference was to promote research in occupational health and encourage more professionals to contribute to generating scientific evidence that will allow for better decision-making regarding workers' health. With very interesting research papers, authors from different countries (Indonesia, Austria, the UK, Malaysia, Chile, Colombia, and Peru) presented their research in both oral and poster formats. After a tough deliberation, the Scientific Review Committee announced the winners of the following categories:

1. Best Research Abstract Submission: Dr. Ulfa Dzakiyyah Al-istiqomah (Indonesia)
2. Best Oral Presentation: Dr. Raquel De La Cruz Vallejo (Peru)

3. Best Poster Presentation: Dr. Anantha Kumar Rajendran (Malaysia)



This event had support from the Journal Work and Health. The editorial team would choose the best abstracts to invite the authors to publish their full-text article in the next edition of the journal. All the content and abstracts will be published in the Proceedings of the conference.

In the closing ceremony, for many attendees it was hard to say goodbye, and the appreciation words and positive feedback from everybody were really inspiring for all to strength each one's commitment to continue working hard in favour of workers' health. It was pointed out the important participation on this event from different stakeholders such as the Government (through the Ministry of Health), the Academia (through ICOH Scientific Committees, the University of Piura, and the Scientific Societies of Latin-America) and the Private Sector. In this last one, this event involved experts with wide backgrounds but also companies such as PetroPerú, Chinalco Mining Company, AngloAmerican Mining Company, REST Perú, PULSO SALUD, Centro Médico del Trabajador, Grupo Tu Salud, Salus Preventiva and SAMA. Last but definitely not least, this event also involved the informal sector of Perú: the artisanal women from the Shipibo-Konibo Cantagallo

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Community were invited to some of the activities and the participants could get closer to the context of these workers and to know more about the risk exposure in their daily job.

The final message from this event was a call for action for OHS professionals: to work together (involving all the stake holders) on the future and opportunities for Occupational Medicine, crossing borders (in and outside of Perú) and prioritizing in workers' health and wellness. It was a historical chapter in OEM and OHS written in

Perú, with the participation of many with a global vision.



## Workshop on Pneumoconiosis in Informal Sector: Visible Dust on Non-Prioritized Sectors and the Call for Action for Pneumoconiosis Prevention in Informal Sector in Latin-America

Gogillan Sevaratnam, Chair of SC Occupational Medicine

Norvil Mera Chu, NS for Perú

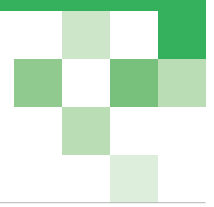
Pneumoconiosis affects an increasing number of workers in Latin-America, especially Brazil, Peru, Chile, Bolivia, México and Colombia. Despite most of the reported cases come from sectors such as mining and construction, there is a wide underestimated and underreported percentage of cases from other sectors and even more, from the informal sector.

According to the International Labour Organization (ILO), the informal sector in Latin America covers between 55-60%, which represents about 127 million people. In Perú, according to the Vice-Ministry of Small-Scale enterprises and Industries, informal sector could include over 70%.

One of the main activities included in the 3rd International

Conference of the ICOH Scientific Committee on Occupational Medicine held in Lima, Perú last November 2025, was the workshop titled "Pneumoconiosis in informal sector in Latin-America". The participants covered a wide representation: the ICOH Scientific Committees (Occupational Medicine, Women, Health and Work, and Occupational Health for Small Scale enterprises and the Informal Sector), ICOH National Secretaries from Latin America, specialists from the IPO (International Pneumoconiosis Observatory), OHS Scientific Societies from Latin America (including Colombia, Chile, Argentina, Guatemala, and Peru), specialists from the public and private sectors (including mining, construction, occupational health clinics, and others), universities and medical residents from the Social Health Insurance Hospitals of Peru.

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The participants were divided into 3 different groups: Group 1 discussed Surveillance, Diagnosis, and Early Detection of Pneumoconiosis. Group 2 worked on Prevention and Control in Informal/Small-Scale Sectors. Group 3 reviewed the current Policy, Legal Frameworks, and Collaboration with other clinical fraternities.

For Group 1, one of the key topics was the Surveillance and Screening for Pneumoconiosis, because there is still an important number of underreporting pneumoconiosis cases due to issues with correct diagnosis and reporting to relevant authorities. Also, they considered there is lack of awareness and ability of primary healthcare physicians to diagnose pneumoconiosis. They pointed out the need of increasing concern about the quality and availability of spirometry testing, especially in the informal sector (which includes artisanal mining, informal construction and other activities). They also emphasized the emerging occupational exposures in workers to consider the assessment of exposure to new materials used in the construction industry which have not been studied before. It was mentioned that OH professionals should consider the relationship between Tuberculosis and pneumoconiosis and the need for more national strategies and better politics to address this issue.

Group 1 concluded with important statements as following:

- Developing strategies to enhance the reporting and surveillance of pneumoconiosis cases, including improving diagnostic practices and strengthening the reporting mechanisms, particularly in the informal sector is needed.
- Implementing training and capacity-building programs for primary healthcare providers to improve their ability to recognize, diagnose, and manage pneumoconiosis cases would be crucial.
- Exploring ways to extend health insurance coverage and access to spirometry testing to workers in the informal sector, ensuring equitable access to preventive and diagnostic services would have positive impact in the

working population.

- Conducting comprehensive studies on the potential health impacts of new materials and technologies used in the construction industry, and developing appropriate control measures to protect workers is an important current challenge for OH professionals.
- Advocating for increased political will and cross-sectoral collaboration to address the interrelated issues of pneumoconiosis and tuberculosis, would ensure a more integrated and effective approach to respiratory health in the workplace.

An additional discussion in this group focused on the evaluation of the current standards and practices for respiratory disease surveillance, including spirometry, chest X-rays, and the availability, quality, and standards of the equipment and data. They talked about assessing feasibility and limitations of using advanced imaging techniques like CT scans and MRIs for surveillance in resource-constrained settings. The consensus was to focus on spirometry and chest X-rays as the primary tools for respiratory disease surveillance, following established standards.

Group 2 worked on potential strategies for prevention/control of Pneumoconiosis in informal sector and small-scale enterprises, with an intersectoral cooperation to involve international organizations, national authorities and private sector in designing solutions with a global vision. For this group, it is needed to identify options for funding (in Perú, for example, the “canon minero”) to use resources for implementing health programs in informal sector. They also pointed out the need for training on this topic: to train the general population which is exposed so they can prevent the risk and to train health professionals for an early diagnosis. This last option would include the general physicians and health professionals who work on their rural services in remote areas. In regarding of education, the panellists from this group also suggested that OHS Training

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for under-graduated students should be included in the current programs at the faculties.

For Group 2, the intersectoral cooperation should definitely include the Ministry of Health, Labor Ministry and the Ministry of Mining and Energy. Just like in Perú, other countries in Latin-America might have funding opportunities as the “canon minero” and could be used in the informal companies, too.

Finally, this group also mentioned the importance of data base about pneumoconiosis and the job exposure in working populations from informal sector. This data should be organized and systematized from the Primary Care Centers so OH professionals could use the data for medical surveillance programs not only in big companies located in main cities, but also in those informal companies located in rural and remote areas.

Group 3 discussed about the following topics: Delayed diagnosis of pneumoconiosis in various countries, including America, Chile, Argentina, Peru, and Indonesia; lack of competency among primary care doctors in the early diagnosis of pneumoconiosis and the importance of multidisciplinary teams (doctors, engineers, and hygienists) in preventing pneumoconiosis, the need to formalize mining workers to obtain accurate data, as pneumoconiosis is a public health problem, instead of just a medical issue and the challenges to build collaboration between the government and scientific societies/committees to develop guidelines and standards.

This group also emphasized the importance of improving medical competencies and promoting new technologies for enhancing the diagnosis and prevention of pneumoconiosis. They also mentioned that spirometry might bring challenges, both in terms of the quality of the test and the workers’ ability to follow instructions, which still need to be addressed.

As conclusions, Group 3 stated that collaboration between South American countries in addressing the issue of pneumoconiosis would be an option due to the similar contexts and job exposure in informal sector. They also suggested that establishing a guideline or best practice framework that can be presented to the International Commission on Occupational Health (ICOH) as a model for other regions could be useful. Finally, they call for action to build nexus between the government and scientific societies/committees to ensure a comprehensive and coordinated approach to addressing the public health challenge of pneumoconiosis.

The workshop was a very productive event inside the conference where experts from worldwide with different backgrounds were able to discuss the main problems related to Pneumoconiosis. To propose solutions involving stakeholders from different sectors and roles, and presenting conclusions that will serve as a starting point for working on addressing this group of diseases which are still a great challenge in the informal sector and requires a lot of attention from OSH professionals worldwide, and especially in Latin America. It was the first, but we hope, not the last international meeting in which experts gave fair visibility this public health problem should have to call for action to all the stakeholders for preventing and managing pneumoconiosis in informal sector.



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### Focusing on Non-visible Risk Exposure for improving workers' health in different sectors

Norvil Mera Chu, NS for Perú

To conclude 2025, the ICOH National Secretary of Perú (NS Perú) worked on strength cooperation with other Scientific Committees (SC) and National Secretaries (NS) from different regions, and with OHS Scientific Societies of Perú. Besides, NS Perú had an active participation in some ICOH SC activities. At this season, the main objective was to focus on those risks factors who are not so “evident” but are still associated with diseases and injuries on workers.

The 25th International Symposium on Shiftwork and Working Time (Shift2025), a biennial event delivered since 1969, was held “in person” again after 6 years (following the Covid19 pandemic). This event was organized by the Working Time Society (WTS), in collaboration with the ICOH SC Shiftwork and Working time, and its central theme was “Basic-to-Translational Science for Preventing and Managing Chronic Diseases in Shift Workers: Challenges and Barriers Hindering Progress.” Guarujá, Sao Paulo, Brazil was the warm venue for this comeback from 10 to 14 November 2025.

The symposium welcomed both scientists and professionals from industry, health and safety sectors, and policymakers. The sessions delivered focused on fundamental and applied issues related to shift and night work, a very important topic in the global workforce engaged in non-standard schedules, which are associated with increased risks of various health disorders producing a significant impact on multiples economic sectors worldwide.

The Opening lectures, symposiums, oral sessions and poster presentations were outstanding with impressive

speakers and researchers sharing the most updated scientific evidence from projects conducted in shift workers from many sectors worldwide. Dr. Norvil Mera Chu (NS Perú) had the opportunity to present a poster about sleep habits, disturbances and excessive daytime sleepiness in shiftwork informal fishermen, which is a very vulnerable working population, especially in Perú and Latin-America. During the Welcome Reception, the Working Time Society honoured NS Perú with the WTS 2025 Early Career Award (ECR) in Service, for his dedication to research dissemination and to building a stronger, more inclusive network of professionals dedicated to shift worker health, research and policy.



Besides the top Academic component of the event, there were very interactive and innovative activities included in the program such as the Event for Young Researchers, the Trivia night and social events which created a very nice and comfortable environment for all.

The session “Fostering international collaborations with the WTS Scientific Community Committee” offered a space for young and senior participants to exchange experiences, learn from background, and build networking for potential future

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projects in the field. Last day, the Organising Committee also gave recognition to all the ECR who received the Meritorious travel award.

An incredible hard work from the Working Time Society, the Local Organizing Committee from Brazil, and the Scientific Committee brought as result a very high academic level, with updated research in the field, passionate scientists and advocated ECRs who lived a once in a lifetime experience at Guarujá, Sao Paulo, Brazil.

December 2025 was a very busy month. In the previous months, NS Perú alongside with other ICOH members from Perú (the Local Organizing Team of the 3rd International Conference of SCOM “The Future and opportunities for Occupational Medicine”) were working with the OHS Scientific Societies of Perú and specialists from the Ministry

of Health to prepare some of the most important activities included in the academic program, specially the Special sessions (roundtable sessions), the semi-plenary sessions and the workshop on Pneumoconiosis in informal sector in Latin-America. For the very 1st time, the main Peruvian scientific societies joint ICOH SCOM and other SCs to work on the different topics of this event. These societies included Peruvian Society of Occupational Health-SOPESO, Peruvian Society of Occupational and Environmental Medicine-SOMOMA, Peruvian Society of Ergonomics-SOPERGO and the Scientific Society of Ergonomics and Psychosociology of Peru-SCEPP. In regarding of the importance of the Pneumoconiosis Workshop, a close relationship and work with the International Pneumoconiosis Observatory (IPO) was very supporting.

As a milestone, the organizing committee worked on some



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academic activities closely to some companies and working populations from Perú. The program of the event highlighted the importance of including, within the “future and opportunities for Occupational Medicine” a review of the needs in OHS of Small-Scale enterprises and the informal sector in Perú, which have a very significant presence in our country with many unmet needs. The program also included reviews of advances and innovations in sectors such as mining, as well as increasingly identified (though still underestimated) health problems such as sleep disorders.

Participants from Perú and worldwide at the event were able to visit mining companies (Anglo American Quellaveco and Chinalco), a sleep disorder medical center (Rest Perú), and the Shipibo-Konibo Artisan Women. This last group is part of the informal sector of Perú and the participants could observe their work in textiles, murals, and handicrafts, as well as the work and exposure to risks faced by Shipibo teachers at schools, and construction workers from the community. Visits full of learning and experiences, where Peruvian and foreign OSH professionals were able to work together to put future needs in Occupational Medicine and OSH on the agenda.

Mental Health at work implies lot of challenges for OHS

professionals worldwide but especially in Latin-America. Psychosocial risk factors are usually considered non-visible and underestimated. As a joint effort between the ICOH National Secretaries of Perú and South-Africa, the Sao Paulo Association of Occupational Medicine and, of course the ICOH General Secretary the webinar titled “Mental Health at Work: breaking paradigms and building healthy workplaces” was held this 22 January 2026 at 15.00 CET.

This was the 1st webinar included in the ICOH Webinar Series for this 2026. This webinar included topics such as Psychosocial risks and digitalization, and strategies for psychosocial risks management sharing practices in Indonesia, Brazil and Perú. These last three topics gave a global perspective about the advances in assessment risk guidelines, legislation and employees’ awareness, but pointing out the needs for working on other important aspects in favour of workers’ mental health.

- Dr. Martin Hogan, ICOH Vice-President, welcomed the attendees and pointing out the importance of this topic and the global vision it was included in this webinar.
- Dr. Quentin Durand-Moreau, ICOH Board member, delivered his presentation “Digital technology and psychosocial risks: a new old story”. He pointed out



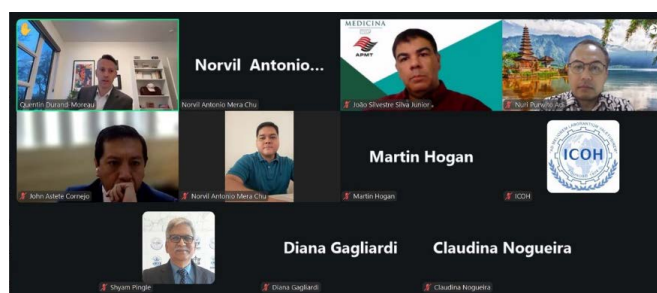
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that the use of well-established frameworks to assess psychosocial factors and hazards is still totally relevant and recommend to consider Digital technology as a work instrument which brings hazards and opportunities.

- Dr. Claudina Nogueira, ICOH NS South Africa, talked about the African context, and mentioned that there have been some Progress and innovation: More Employee Wellness and psychosocial programs, Growing advocacy from professional bodies, unions, NGOs and Recently established OSH networks and associations in several countries.
- Dr. Nuri Purwito Adi, from Indonesia, talked about the good practices in Indonesia, including the list of tools adapted/validated in Indonesia, the Psychological first aider program including at the workplace in 2024 - 2025, and emphasizing that the management practices in Indonesia have focused on enhanced promotion, specific prevention and wellness mental health program and employee assistance program.
- Dr. Jonh Astete Cornejo, from Perú, shared the work from the Perú National Center of Occupational Health CENSOPAS after validating the COPSQ istas 21 tool, which has brought an increasing number of surveys applied, workplaces in which they used the tool, and specialists using the tool. He mentioned that in Perú, we have a National Observatory in which we are working for identifying critical regions, getting real time comparisons and free access for all to the results.
- Dr. Joao Silvestre da Silva-Junior, from Brazil, emphasized that in Brazil they have high burden of mental disorders including the Major depressive disorder. He mentioned some of the current challenges in Brazil such as Predominance of individual-centred strategies, managers often feel unprepared to address organizational factors and psychological suffering is frequently individualized rather than treated as an organizational issue.

In the 2nd part of the webinar, there was a Roundtable session in which all the speakers/panellists could interact

with the attendees and exchange ideas, recommendations and proposals to improve mental health of workers, by better medical surveillance programs, psychosocial risks management and mental health promotion programs.



Finally, our speakers called for action to build healthy workplaces which must include workers' mental health as a priority.

In February 2026, the Webinar "Occupational Risk Factors in outdoor workers: UV, heat stress, others" was a joint effort between the 3 ICOH Scientific Committees (SC) on Occupational Medicine (SCOM), Occupational and Environmental Dermatoses (SCDermatoses) and History of Prevention of Occupational and Environmental Diseases (SCHistory) and the ICOH National Secretary (NS) for Perú.

This event brought together experts and attendees from worldwide to discuss about the risk factors in outdoor workers, prevention measures to implement, recommendations for medical surveillance and how to increase awareness

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in sectors such as agriculture, fishing, construction and others.

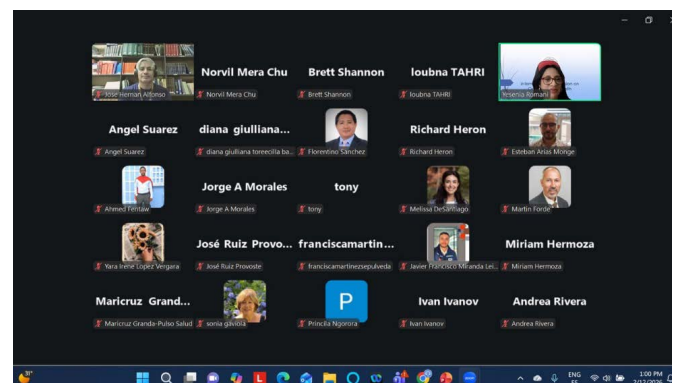
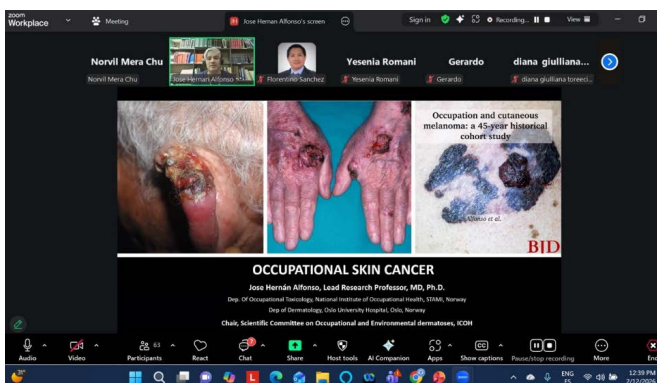
- Dr. Jose Hernan Alfonso, Chair of the Sc Dermatoses, delivered his presentation “Occupational Skin Cancer”. He pointed out the scientific evidence about some risk factors such as Ultraviolet light exposure and cutaneous squamous cell carcinoma and call for action to protect outdoor workers from skin cancer.
- Dr. Loubna Tahri from SCOM shared experiences on waste collection workers assessing and managing outdoor workers conditions. She also gave examples about potential health effects from risky exposure in this group of outdoor workers.
- Dr. Brett Shannon from SCOM talked about the Heat Stress and the current challenges for medical surveillance as working on employer awareness, and shared experiences from the Texas Heat Stress Awareness program.
- Mr. Esteban Arias Monge from La Isla Network delivered his presentation about experiences on Heat stress prevention and risk management in some countries from Latin-America, declining the Incident Kidney Injury (IKI) across countries at RSH-S Program Sites. Finally, a board member from each one of the 3 ICOH SC could share information about the SC and invited the attendees to affiliate and join them. It was a great opportunity for getting closer to OHS Professionals from Latin-America and other regions.

From Perú, Ms. Yesenia Romani, Mr. Florentino Sánchez and Dr. Norvil Mera Chu, were moderators and part of the organizing committee.

The recording of the webinar can be reviewed by clicking here: <https://lnkd.in/dX2wi7E6>

From the NS Perú, we hope to keep working in cooperation with other Scientific Committees, National Secretaries, ICOH members and OHS Specialists worldwide, and to promote the dialogue between OHS Stakeholders to think, design and cooperate together on potential solutions to future OHS challenges which should include non-visible risks management with a global vision in order to improve workers ‘health from all sectors.

We invite all the members to visit ICOH Perú Youtube Channel, to get access to the recordings of the different activities done in Perú. (<https://www.youtube.com/@SCOMICOH>)





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### Advancing Occupational Health for All: Thailand's International Engagement and Capacity-Building Initiatives in 2025

Chatchai Ekpanyaskul, NS for Thailand

Thailand—renowned for its rich cultural heritage and its capacity as a gracious host nation—demonstrated significant leadership in advancing occupational health and safety, including occupational medicine, through the organization of major international activities in 2025.

The first key event was the 8th International Conference in 2025 of the International Commission of Occupational Health (ICOH) Scientific Committee on Cardiology in Occupational Health (ICOH-CVD), organized by the Faculty of Public Health, Mahidol University. Notably, this conference marked the first occasion that the ICOH-CVD conference was convened in a developing country, reflecting Thailand's growing role in the global occupational health community. In addition, concern about emerging worker health problems, particularly in CVD.

The second major initiative was the Annual International Training Course on Fundamentals of Occupational Health and Occupational Medicine, organized by the Faculty of Medicine, Khon Kaen University, with support from the Thailand International Cooperation Agency (TICA), Ministry of Foreign Affairs of Thailand. The director of the course was Professor Dr. Naesinee Chaiear, ICOH Board member (2023-2027). The program focused on comprehensive capacity building for international participants—particularly from developing countries—emphasizing foundational principles, practical competencies, and global collaboration in occupational health and occupational medicine.

The details of these activities are summarized below:

#### I) The 8th International Conference on Work Environment and Cardiovascular Diseases

*Reported by Professor Dr. Orawan Kaewboonchoo and Professor Dr. Jian Li*

The Faculty of Public Health, Mahidol University organized the 8th International Conference on Work Environment and Cardiovascular Diseases () during 20-22 August 2025 in Bangkok (ICOH-CVD 2025). There were 272 participants—174 international delegates and 100 Thai attendees—from 36 countries in six continents.

Work-related cardiovascular diseases remain a major global health concern, encompassing conditions such as hypertension, metabolic syndrome, ischemic heart disease, and stroke. According to the 2021 WHO-ILO Joint Estimates, long working hours and exposure to air pollution, gases, and fumes are leading occupational risk factors contributing to CVD mortality worldwide, with a particularly high burden in Southeast Asia and the Western Pacific. These findings underscore the combined impact of psychosocial, physical, chemical, and ergonomic workplace hazards on cardiovascular risk among workers.

Under the theme “Reconnecting East and West,” the conference brought together researchers, occupational health professionals, and public health experts to exchange evidence and innovations related to occupational cardiovascular health. Distinguished Keynote speakers included Prof. Johannes Siegrist (Heinrich-Heine-University Düsseldorf), Dr. Yuka Ujita (ILO DWT-Bangkok), and

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Prof. Niklas Krause (University of California, Los Angeles), with a Master Lecture by Prof. Jian Li, Chair of the ICOH-CVD Scientific Committee (2024–2027).

The scientific programme featured plenary lectures, oral and poster sessions (78 oral and 23 poster presentations), fostering interdisciplinary dialogue and international collaboration. Major conference awards included the Recognition Award to Prof. Piyamitr Sritara, the Lifetime Achievement Award to Prof. Johannes Siegrist, and the Mid-Career Award to Prof. Jian Li.

The conference significantly strengthened global collaboration and advanced scientific discourse on work-related cardiovascular health, reaffirming the importance of coordinated international efforts to protect workers worldwide.

## II) Annual International Training Course on Fundamentals of Occupational Health and Occupational Medicine

*Reported by Professor Dr. Naesinee Chaiear*

The Faculty of Medicine, Khon Kaen University, Thailand, with financial support from the Thailand International Cooperation Agency (TICA), hosted a four-week onsite Annual International Training Course (AITC) entitled

“Fundamentals of Occupational Health and Occupational Medicine” from 3-28 November 2025 at Khon Kaen University.

The program aimed to strengthen participants’ competencies through an integrated curriculum combining theoretical foundations with practical applications. Core modules covered principles of occupational medicine, occupational health service systems, workplace hazard identification, health risk assessment, medical surveillance, and occupational safety management.

A total of 20 participants from 15 countries across Africa, Asia, the Caribbean, Latin America, and Eastern Europe attended. They represented diverse professional backgrounds, including occupational medicine, pulmonology, physical medicine and rehabilitation, general medicine, nursing, public health, physiotherapy, pharmacy, human resources, occupational health and safety coordination, hygiene and safety training, and health promotion. Participants were affiliated with ministries of health, hospitals, universities, public health agencies, national health services, judicial councils, and local government organizations.

The training employed a multimodal learning approach comprising expert lectures, case-based discussions, hands-on workshops, field visits with walk-through surveys, and individual and group assignments. This structure promoted



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active learning, strengthened practical competencies, and fostered interdisciplinary collaboration in addressing real-world occupational health challenges.

Participants outlined context-specific plans to apply the acquired knowledge within their professional roles and national systems. Physicians emphasized strengthening preventive occupational health services through improved early detection and reporting of work-related diseases, integration of routine medical surveillance, and greater attention to psychosocial and ergonomic risks. Occupational health and safety professionals focused on enhancing risk assessment, emergency preparedness, workforce training, and leadership engagement to build sustainable prevention cultures. Nursing professionals highlighted improvements in infection prevention and psychosocial risk management among healthcare workers. Pulmonology and rehabilitation specialists prioritized advances in diagnostic services, functional capacity evaluation, rehabilitation and return-to-work programs, and surveillance aligned with international standards. Academic participants proposed curriculum development, interdisciplinary research, and capacity building, while policy and regulatory professionals emphasized governance strengthening, inspection systems, data infrastructure, and evidence-based decision-making at organizational and national levels.

The program concluded with high participant satisfaction, reflecting the relevance of the content, the strong integration



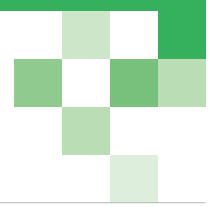
of theory and practice, and the value of peer learning across diverse professional and country contexts. Beyond technical capacity building, the course fostered sustained international collaboration and laid a foundation for continued cooperation in advancing occupational health and occupational medicine globally.

Overall, these initiatives collectively demonstrate Thailand's strong commitment to strengthening occupational health systems for all workers. The country continues to actively support professional development, international collaboration, and knowledge exchange in occupational health and occupational medicine.

For further information or professional collaboration, interested parties may contact the National Secretary for Thailand, International Commission on Occupational Health (ICOH).



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## Insights from an India–Uganda ICOH member meeting

Marianna Agaba Nyangire, NS for Uganda

On 2 January 2026, members of the ICOH Uganda chapter had the pleasure of meeting with Dr. Ashish Mishra, Chief Health and wellbeing officer (South Asia) at Hindustan Unilever Limited-India and member of the ICOH Board, during his visit to Uganda. His time in the country, although primarily for personal engagements, created a valuable opportunity to reflect together on how India and Uganda can work side by side to strengthen occupational health.

Dr. Mishra offered rich perspectives from the Indian experience, highlighting a clear gap between what is taught in academic settings and what workplaces, especially in manufacturing, actually need. While Occupational Health and Safety (OHS) regulations exist, he noted that implementation remains challenging especially in medium and small enterprises. He also pointed to limited pathways for advanced training in occupational medicine and a relatively low interest among younger doctors, which together contribute to a shortage of specialists. As a result, occupational health often remains in the shadow of occupational safety, whose injuries and accidents are more immediate and visible than long-term health outcomes. The other gap to bridge is the Occupational Health in informal sector which employs over 90% of the workforce.

Participants from Uganda observed that many of the realities in India resonated strongly with the Ugandan context. For both countries, the tendency to focus more on safety than on health, underscores the need to raise the profile and influence of occupational health within health and labour systems. This shared ground set the stage for a constructive conversation about how collaboration could help both sides move forward. From Uganda, the ICOH National Secretary mentioned about a new short course in occupational health

and safety currently being developed by the Makerere University School of Public Health and invited Dr. Mishra's technical input. The aim of the school is to design a curriculum that speaks directly to the realities of practice: linking classroom learning with day-to-day work, research, and policy engagement, so that scholars are better prepared to respond to real workplace challenges.

The group agreed on several practical next steps which included:-sharing of curriculum materials from a certificate course for doctors in occupational health in India and adapting useful components to the Ugandan setting. Participants were to also map relevant ICOH Scientific Committees that could offer expertise and resources to enrich academic programmes, strengthen research, support practice, and inform policy. In addition, they will explore incorporating selected elements of the NEBOSH International General Certificate (IGC) into the new short course to align it with internationally recognized standards in occupational health and safety training.

The meeting closed on a warm and optimistic note, with all present expressing a strong commitment to continued collaboration between Indian and Ugandan occupational health professionals and institutions, and to long-term efforts to build capacity for occupational health in Uganda and the wider region.



Group photo with members from the meeting. At the back, Dr. Sekimpi Deogratias, Dr. Nsubuga Mangasi, Dr. Charles Ssemugabo. At the front, Dr. Ashish Mishra with Dr. Agaba Marianna Nyangire (NS for Uganda)



## Members' Activity

**The following articles from the Members are here.**

Alex Collie (Chair of SC Work Disability Prevention and Integration)

Janice Green (ICOH member, the former NS for Jamaica)

IOSH (Institution of Occupational Safety and Health)

SASOM (South African Society of Occupational Medicine)

SOM (The Society of Occupational Medicine)

## Join the OSH-Connect Expert Advisory Group

Alex Collie, Chair of SC Work Disability Prevention and Integration

Monash University (based in Melbourne, Australia) is leading [OSH-Connect](#), a new project that will bring together publicly available, country-level occupational safety and health (OSH) data into a single, global database. Funded by Lloyd's Register Foundation, the project is led by ICOH members Professor Alex Collie and Professor Karen Walker-Bone.

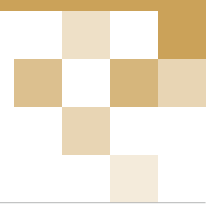
The OSH-Connect team are inviting OSH researchers, practitioners and policy makers to join their Expert Advisory Group, providing strategic input into database

development and helping guide priorities for data analysis and reporting. Participation is voluntary, unpaid, and low-commitment (up to one hour per month, and not required every month). Contributions can be acknowledged in project outputs, with consent.

If you are interested in shaping a global OSH evidence resource, we encourage you to express your interest by completing the [online form](#) or contacting the project team at [info@osh-connect.com](mailto:info@osh-connect.com).



## Members' Activity



### JAMAICA POPULATION HEALTH STATUS AND SOCIAL AND BEHAVIOUR CHANGE COMMUNICATION PROGRAMS

Janice Green, ICOH member, the former NS for Jamaica

The Jamaica Population Health Status Report for 2000 to 2022 states that “non communicable diseases” (NCDs) namely diabetes and cardiovascular diseases are the leading causes of death in Jamaica. In 2020 the proportion of all deaths attributed to NCD was 77.3%. This equates to 17014 (males 8874; female 8140,) Jamaicans dying that year from NCDs.

Accord to this report, among the leading causes of death in Jamaica, diabetes mellitus accounted for 99 deaths per 100,000 population in 2021; and was the second leading cause of death in that year. Death from diabetes mellitus between 2005 and 2021 have been higher in Jamaica females than males. During this time the number of deaths for both sexes increased. In 2021 the disease was responsible for the deaths of 87 females and 110 males per 100,000 populations.

In the Jamaican Economy Pannel issue of January 2022, it states that according to the WHO, the highest obesity rates are found in small islands in the Pacific, which make up the ten countries with the highest rates of obesity. Of those, Nauru has the highest obesity rate at 61 per cent (63.3 per cent of women and 58.7 per cent of men). Another region with high obesity rates is the Middle East, which contributes nine out of the ten countries ranked 11-20 in the highest morbidity rate, while the United States is the other.

The said Jamaican Economy Pannel issue of January 2022 went on to report that in the Caribbean, the Bahamas has the highest obesity rate, with 31.6 per cent of the population falling in that category (38.1 per cent of women and 24.4 per cent of men). Jamaica is ranked fifth amongst those

countries in the Caribbean with available data; 24.7 per cent of Jamaicans were estimated to be obese (33.4 per cent of women and 15.3 per cent of men) in 2016.

With this background, the Government of Jamaica being fully aware of the problem, has through the Ministry of Health and Wellness, designed several national campaigns and programs to address the problem of obesity. The Ministry’s efforts are supported by the Ministry of Finance with the most recent intervention in February 2026. This intervention was the imposition of a special consumption tax on sugary drinks and other unhealthy products.

This effort is support by the Medical Association of Jamaica (MAJ). The Association has stated that it is a necessary intervention to confront Jamaica’s growing non-communicable disease (NCD) crisis. The MAJ has argued that sugary drinks offer little nutritional value but carry significant health risks. High sugar consumption, particularly from sodas, can alter children’s taste preferences, making healthier options such as water less appealing.

The Medical Association of Jamaica pointed out that the intake of sugary drinks has been associated with poor dental health, increased rates of obesity in both children and adults, and higher incidences of NCDs such as diabetes and hypertension. These effects, the Association noted, could be mitigated by switching from sugar sweetened beverages to water.

In many developing countries such as Jamaica, providing affordable alternative food and beverage and the provision of safe space for physical exercise, may be a hindrance to

## Members' Activity

achieve the behaviour change in addressing NCDs that are preventable.

It must be noted, that agencies such as UNICEF has been working assiduously in Jamaica through their Social and Behaviour Change Communication programs, to bring together local knowledge with scientific insights to give families more control over the decisions that affect their lives.

Based on the aforementioned, it is hoped that in the long-term, social and behaviour change communication

programs and education, will achieve the effect of a positive and sustainable change in eating and exercise habits for children and adults in Jamaica.



## IOSH helps shape European move on asbestos risk

Marcus Boocock, Senior External Affairs Manager, IOSH

Policy experts at the Institution of Occupational Safety and Health (IOSH) have secured key changes to new European Commission (European Union) guidelines for managing asbestos-related health and safety risks at work.

Late last month, the Commission adopted new guidelines aimed at supporting national authorities, employers and workers to manage risks related to workplace exposure to asbestos. The guidance was developed after extensive consultation with stakeholders, with IOSH stepping forward to feed into the discussions and the proposed draft guidance.

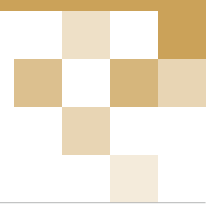
Asbestos is the biggest cause of occupational cancer, claiming hundreds of thousands of lives a year worldwide. It remains a major global challenge to both occupational health and public health. IOSH believes it must be addressed through improved public policy and occupational safety and health (OSH) management.

The Institution, therefore, continues to call for action on asbestos on all fronts: on the part of individuals, corporates and nations. On the new Commission guidelines on asbestos management – adopted on 18 December last year – IOSH is pleased to have influenced their final wording, most notably in two key areas:

- **Mining-identifying migrant workers as a high-risk group**

This is precisely what IOSH had argued for in the consultation, highlighting how “Foreign and migrant workers have language barriers, poor occupational safety and health (OSH) induction and coverage, and may fear losing work or facing deportation for reporting unsafe working conditions.” This was then clearly adopted by the Commission, with migrant workers highlighted as a high-risk group.

## Members' Activity



### • Emergency services

Another IOSH recommendation taken forward by the new guidelines came under the Commission's definition of 'emergency responders', which was changed to explicitly recognise the risks faced by humanitarian aid workers, particularly in war zones.

The IOSH policy team advocates for, influences and promotes IOSH's vision of a safe and healthy world of work for all across international public policy arenas, working with stakeholders and different audiences around the world.

"It's always heartening to see our expertise, experience and commitment to safer, healthier workplaces being recognised and acted on by our global partners," said IOSH Head of Policy and Public Affairs, Ruth Wilkinson.

"Asbestos remains a global issue and is the world's biggest cause of occupational cancer," she added.

"We want to see more action—specifically, joint action—from governments, public policymakers, businesses and other stakeholders to prevent exposure to asbestos, to manage asbestos risks, to drive up occupational safety and health standards and, ultimately, save lives.

"Despite asbestos being known as a work-related health hazards with the risks associated with its exposure, there is still a hazardous legacy within buildings that still contain asbestos. There remains too much uncertainty, lack of awareness and ignorance around managing asbestos. There's a lot to do but at least these new European guidelines will help bring more clarity."

## Businesses must choose prevention over perks to tackle work health and wellbeing issues, says IOSH

Marcus Boocock, Senior External Affairs Manager, IOSH

The Institution of Occupational Safety and Health (IOSH) has issued a stark warning to employers: stop papering over cracks with wellbeing perks and start confronting the root causes of harm affecting workforces.

This call comes as IOSH publishes its new white paper, [From perks to prevention: redefining health and wellbeing for today's workforce](#), which exposes a sharp global rise in workplace health and wellbeing challenges—and a widening gulf between good intentions and genuine impact.

Drawing on global research across 22 countries and more than 1,000 senior decision-makers, the report reveals a

workforce under mounting pressure. Two in three (67 per cent) organisational decision-makers reported an increase in health, safety and wellbeing issues over the past year. The pressures driving this surge are clear, with over half of respondents (55 per cent) citing mental health issues such as workplace stress, anxiety and depression as the most common challenge facing their employees.

Despite many organisations having health and wellbeing strategies in place, the white paper finds that these strategies often fail to address the very factors harming workers. Businesses continue to rely heavily on reactive benefits—lifestyle perks, wellness add-ons, one-off incentives—while



## Members' Activity

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leaving fundamental issues such as job design, workload, working hours, organisational culture and psychosocial hazards largely unaddressed.

To close this gap, the white paper sets out a series of bold and urgent calls to action:

- **For governments and policymakers**

IOSH urges governments to embed psychosocial risk management explicitly into health and safety regulations, promote health and safety competency standards, and provide accessible guidance, especially for SMEs. This includes supporting employers to meet their legal duties through proportionate health and safety management systems.

- **For businesses**

The message is unequivocal: prevention must replace perks. Employers are encouraged to adopt person-centred, prevention-first approaches. This includes identifying hazards and risks, designing safe and healthy work, developing inclusive and supportive cultures and involving workers directly in shaping health and wellbeing programmes. Leadership visibility and measurable performance indicators are essential.

- **For health and safety professionals**

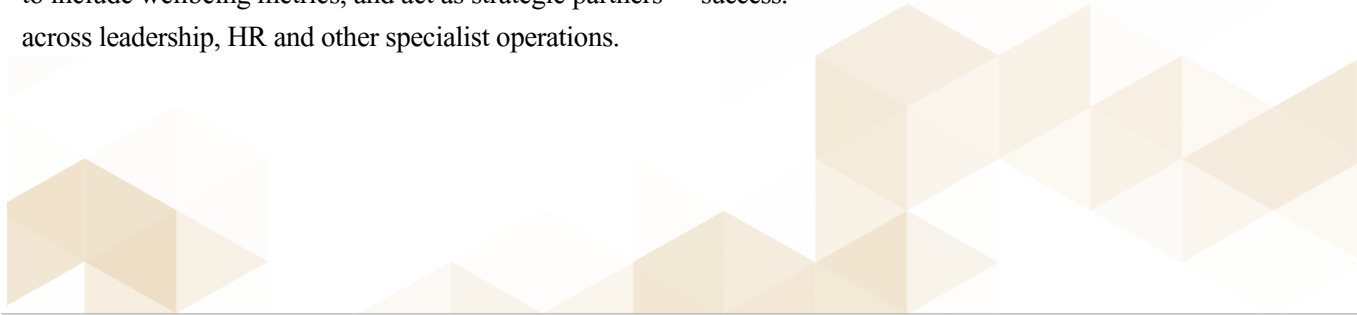
IOSH emphasises that health and safety professionals are pivotal in translating policy into practice. They are called on to embed mental health into health and safety management systems, embed psychosocial risks into risk assessment processes, strengthen reporting frameworks to include wellbeing metrics, and act as strategic partners across leadership, HR and other specialist operations.

Ruth Wilkinson, IOSH's head of policy and public affairs, said: "These findings tell us that employers are committed to investing in worker health and wellbeing, yet problems are still occurring. It means the action and investment to date is not having the desired impact – it is not getting to the root cause and preventing the harm from happening.

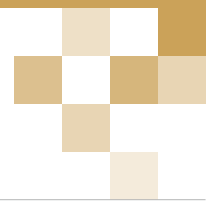
"For this reason, employers need to take a proactive approach – and this absolutely starts with prevention. Too many organisations still lean on reactive measures or wellbeing 'add-ons', while the real issues driving harm go unaddressed. Prevention must be embedded into the systems, culture and leadership of every organisation. That means strong, visible commitment from the top, clear communication, and creating workplaces where people feel psychologically safe to raise concerns. Only then can we shift away from firefighting and build genuinely healthy, safe, sustainable and resilient working environments."

Ruth added: "Our findings make one message unmistakable: the future of workplace health and wellbeing cannot be built on perks, posters or token initiatives. Meaningful progress requires integrated systems, root-cause prevention, cultural change and leadership prepared to move from aspiration to measurable action."

As organisations grapple with the fast-changing world of work, IOSH stands ready to support them with evidence-based guidance, training, practical toolkits and strategic expertise. The white paper reinforces that prioritising wellbeing is not an optional extra; it is fundamental to organisational performance, resilience and sustainable success.



# Members' Activity



## Navigating the Intersection of Innovation and Informal Labour: Insights from the SASOM 2025 Annual Conference

Claudina Nogueira, NS for South Africa, SASOM ExCo member

The South African Society of Occupational Medicine (SASOM), Africa's Affiliate member of ICOH, hosted two national webinars in June and August 2025 on the theme 'Occupational Health of Informal and Migrant Workers'. Organised in collaboration with the Global Coalition for Informal Workers' Health, Safety, and Wellbeing (GCIW) and the International Ergonomics Association (IEA) Technical Committee on Informal Work (TC IW), each high-impact webinar comprised two accredited two-hour CPD sessions endorsed by the South African Medical Association. The events brought together local and international participants, offering global perspectives, emerging research, and practical applications. A report on the first webinar was published in the ICOH Newsletter (Vol. 23, No. 2, 2025).

These webinars laid the foundation for the SASOM Conference and Annual General Meeting, held on 15 November 2025 in Menlyn, Pretoria. Themed 'Artificial Intelligence at the Crossroads of Informal Work and Public Health: Risks, Innovations, and Responsibilities', the conference addressed the critical intersection of artificial intelligence (AI), informal labour, and public health, exploring how technological innovation can better protect the informal sector, which represents over 80% of Africa's workforce.

### A Multidisciplinary Mandate for Change

Professor Daan Kocks, Chair of SASOM, opened the proceedings by stating that medicine cannot solve modern occupational challenges in isolation. The event showcased a collaborative model, integrating expertise

from cybersecurity, ergonomics, nursing, and AI development to create holistic health solutions for workers in precarious employment. This inclusive approach is designed to shift occupational medicine from traditional workplace settings into the broader community.

Technological 'Leapfrogging' and Diagnostic Innovation - A major focus of the event was the potential for Africa to bypass traditional development barriers through strategic AI adoption.

- **AI-Powered Diagnostics:** Mr Johan Coetzee (AI Diagnostics) introduced a tuberculosis screening platform, approved by the South African Health Products Regulatory Authority (SAHPRA), that uses smart stethoscopes and mobile apps, allowing frontline workers to provide specialist-level diagnostics in resource-limited areas.
- **Ethical Integration:** Dr Casper Joubert (Stellenbosch University) emphasised a "human-in-the-loop" framework, advocating for AI that prioritises worker dignity while remaining vigilant against algorithmic bias and data privacy risks.
- **Digital Security:** Professor Joey Jansen van Vuuren (Tshwane University of Technology) framed cybersecurity as a vital workplace safety issue, noting that protecting medical data from ransomware is essential for maintaining the integrity of healthcare systems.

Social Ethics and the Informal Economy-The conference emphasised that technology must be grounded in social values to be effective.

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- **The 'Ubuntu' Principle:** Ms Sma Ngcamu-Tukulula, President of the Ergonomics Society of South Africa (ESSA), called for a transition from mere compliance to “co-creation” with workers. She argued for embedding ‘Ubuntu’ principles – collective wellbeing and compassion – into ergonomics to ensure solutions truly serve the community.
- **Global Vulnerability:** Dr Acran Salmen-Navarro (New York University Grossman School of Medicine, Chair of the ICOH Scientific Committee on Occupational Health for Health Workers, and President of GCIW) highlighted the “4-D jobs” (dirty, dangerous, difficult, and discriminatory) common among migrant and informal workers, urging that AI be used to enhance dignity rather than exacerbate existing global inequalities.

### Looking Forward: Professional Growth and Global Leadership

The conference provided attendees with Continuing Education Units (CEUs) in both Clinical and Ethical categories, reinforcing SASOM's commitment to rigorous professional development. With the upcoming First International Conference on Informal Work in Colombia in November 2026, South African practitioners are positioned at the forefront of a global movement to formalise health protections for the non-traditional workforce.

As Africa's economic landscape continues to be reshaped

by migration and technology, SASOM's role remains vital in providing the evidence-based leadership necessary to protect the health of the working population.

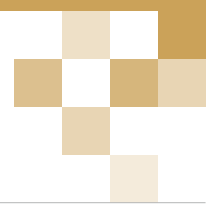


Participants at the 2025 SASOM Conference – L to R: Dr Jameson Malemela (Sibanye Stillwater), Prof. Daan Kocks (SASOM Chair), and Dr Geoffrey Tafaune (SASOM Treasurer). Photograph: Claudina Nogueira



Image: Courtesy of Claudia Frost (SASOM)

## Members' Activity



### Strengthening Occupational Health Capacity for Healthcare Workers in Oyo State, Nigeria

Rose Wood, SOM International Coordinator

In 2025, the Occupational Health Unit at the College of Medicine, University of Ibadan and the Society of Occupational and Environmental Health Physicians of Nigeria completed an Occupational Health Training Project for healthcare workers across Oyo State, Nigeria. SOM provided grant management and technical assistance.

After a baseline survey, the programme delivered four intensive training workshops for primary healthcare workers and resident doctors at the University College Hospital, Ibadan. The workshops covered core elements of Occupational Health and Safety, Infection Prevention and Control (IPC), and strategies to enhance wellbeing and prevent burnout. Topics were selected using recommendations from the World Health Organization's (WHO) guidelines on occupational health (OH) for healthcare workers, ensuring alignment with best practice. In-person delivery aimed to maximise engagement, demonstrated by participant feedback of the value of the interactive and approachable, supportive environment of the workshops.

322 healthcare workers were trained, 261 primary health care workers and 61 resident doctors. Pre-and post-training surveys evaluated workshop impact and value. Findings showed increases in OH and IPC knowledge, and significant improvement in wellbeing. The project emphasised mental health: five sessions explored workplace stressors, coping strategies, and supportive practices, with active question-and-answer discussions to encourage open dialogue. Participants reported that the personable delivery of sessions enhanced their sense of support and inclusion.

A central aim was to ensure long-term, sustainable impact.

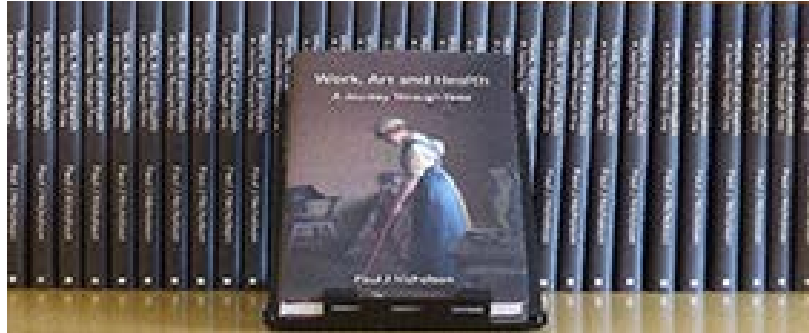
A stakeholder meeting was held with the Oyo State Primary Health Care Board at project completion to outline pathways for sustaining OH health capacity. Workshop materials were made widely accessible, and training slides were collated and shared via WhatsApp groups to reinforce key messages and encourage continued peer-to-peer learning. This maintained engagement and knowledge-sharing across the healthcare community.

Since the close of the project, lead partner Professor Folashade Omokhodion continued to embed OH within state healthcare systems. This included the development of an OH Policy for the Oyo State Primary Health Care Board, adapted from a WHO template. This represents the first OH policy for primary healthcare workers in Nigeria and progression toward stronger OH awareness at the PHC level. Further surveys and visits to selected primary health centres are scheduled to assess progress on corrective actions recommended during Occupational Risk Assessment of primary health care facilities.

This initiative is part of the Global Health Workforce Programme (GHWP), funded by the UK Department of Health and Social Care (DHSC) via the Global Health Partnerships (formerly THET), using Ducit Blue Solutions in Nigeria. SOM is grateful to the WHO for their participation, providing expert guidance and development of training content.

This project stands as a model for sustainable, scalable, and locally rooted occupational health interventions-one that will inform future initiatives including a project in Ethiopia and Zimbabwe that SOM is supporting

## Members' Activity



**Work, Art and Health:  
A Journey Through Time by Paul J Nicholson**

- a beautifully illustrated book which takes readers on an excursion to explore the world of work, and its effects on

health by looking at works of art from the prehistoric to the present.

The book is available at Work, Art and Health | Troubador Publishing or you are welcome to buy at the SOM/FOM conference in person as below

**Occupational Health 2026 | 16th-17th June**

15th June | afternoon: a unique line-up of workplace visits  
evening: a special Welcome Reception at Nottingham Castle

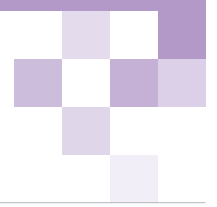
[occupationalhealthconferences.com](http://occupationalhealthconferences.com)

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# Résumé en français



## Message du Président

### Chers collègues de l'ICOH/la CIST,

#### L'impact des conflits mondiaux sur la santé des travailleurs

Le monde continue d'être confronté à des conflits inattendus. La guerre en Ukraine n'est toujours pas résolue, tandis que de nouvelles tensions sont apparues en Iran et dans l'ensemble du Moyen-Orient. Ces crises ont des conséquences économiques généralisées, notamment la hausse des prix du carburant qui fait grimper les coûts et restreint les déplacements.

Au-delà de la perte tragique de vies innocentes, les guerres perturbent gravement les moyens de subsistance. Les travailleurs sont souvent confrontés à la précarité de l'emploi ou au chômage en raison de pénuries de matières premières et d'un déclin du commerce international. La guerre est intrinsèquement dévastatrice pour la vie professionnelle et, tragiquement, la santé et la sécurité des travailleurs sont systématiquement marginalisées, voire totalement ignorées, en période de conflit. J'espère sincèrement que tout le monde pourra bientôt retrouver une vie professionnelle normale et sereine.

#### Perspectives d'avenir : Congrès de la CIST 2027 à Mumbai

N'oubliez pas que la date limite de soumission des résumés approche à grands pas. J'espère que tous les membres se préparent à soumettre leurs résumés pour le Congrès de la CIST 2027 à Mumbai. Vous pouvez également participer en tant qu'intervenant à des sessions spéciales — telles que des mini-colloques, des ateliers et des séminaires — organisées par les comités scientifiques.

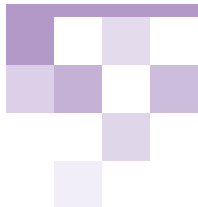
J'ai l'intention d'organiser une session sur les stratégies de publication pour les jeunes scientifiques, avec la participation des rédacteurs en chef des principales revues de santé au travail. Fort du succès d'une session similaire lors du congrès de Marrakech, qui avait fait salle comble, je me réjouis à l'idée d'une nouvelle discussion très animée. De plus, j'aimerais organiser une session dédiée aux spécialistes de la santé au travail en entreprise afin de discuter d'approches globales visant à améliorer la santé des travailleurs.

#### Bonne nouvelle : le retour du NIOSH américain

En avril dernier, nous vous avons fait part d'une nouvelle très préoccupante concernant la fermeture soudaine du National Institute for Occupational Safety and Health (NIOSH) américain, suite à une directive gouvernementale imprévisible. Le NIOSH ne pouvait pas être fermé définitivement par ce biais, car il a été créé par la loi en vertu de l'Occupational Safety and Health Act de 1970.

Bien que certains chercheurs aient pu réintégrer leurs fonctions immédiatement grâce aux appels lancés par diverses parties prenantes, la majorité des employés se sont retrouvés sans sécurité de l'emploi pendant une longue période. Certains ont choisi de prendre leur retraite, tandis que d'autres sont partis chercher un nouvel emploi. Cependant, de nombreuses organisations professionnelles ont lancé des appels pressants au public américain, et les syndicats ont porté l'affaire devant les tribunaux.

Le tribunal a finalement annulé la décision du gouvernement, protégeant ainsi tous les employés du NIOSH ainsi que ceux d'autres organisations qui avaient été licenciés au même moment. En conséquence, le ministère américain de



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la Santé et des Services sociaux (HHS) a complètement fait marche arrière. Le 13 janvier 2026, les avis de licenciement ont été officiellement révoqués et tous les employés à temps plein du NIOSH ont été réintégrés à leur poste. De plus, le financement de l'agence pour 2026 a été entièrement rétabli.

Si nous nous réjouissons du retour de la plupart des membres du personnel, de nombreux projets de recherche essentiels du NIOSH ont été gelés au cours des neuf derniers mois. Cette interruption aura inévitablement un impact sur la santé des travailleurs, non seulement aux États-Unis, mais dans le monde entier.

### OMS

Comme indiqué dans les bulletins précédents, l'importance de la santé au travail est de plus en plus marginalisée au sein de l'OMS, les activités liées à la santé des travailleurs étant dispersées entre différents programmes. Notre principal agent de liaison, le Dr Ivan Ivanov, qui a pris sa retraite l'année dernière, était rattaché au Département Environnement, Changement climatique et Santé (ECH), où le changement climatique était présenté comme la principale priorité en matière de santé au travail. Parallèlement, les questions classiques de santé au travail, telles que l'intoxication chimique, ont été intégrées au Programme de sécurité chimique, tandis que les maladies cardiovasculaires et respiratoires liées au travail sont désormais traitées par le programme sur les maladies non transmissibles (MNT).

Comme indiqué dans notre bulletin d'avril 2023, l'ancien président, Jukka Takala, a participé aux précédentes conférences de la SAICM qui se sont tenues à Nairobi, au Kenya, et à Berlin, en Allemagne, en 2023. En novembre

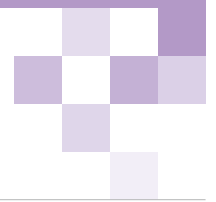
dernier, le secrétaire général et moi-même avons tenu une réunion en ligne avec des représentants du Programme de sécurité chimique et du personnel de l'OIT. La prochaine conférence internationale sur la sécurité chimique se tiendra à Genève en novembre 2026. LA CIST a été invitée à se joindre au programme, et le secrétaire général et moi-même y participerons.

Par ailleurs, une réunion du NCD se tient en continu en ligne afin de préparer la réunion de l'AMS prévue en mai 2026.

LA CIST a également été invitée au Groupe de travail intergouvernemental (IGWG) sur l'accord de l'OMS relatif aux pandémies, qui s'est tenu du 23 au 28 mars. Les discussions portent principalement sur la lutte contre les infections. En tant qu'acteur non étatique, la CIST a été invitée à participer aux séances d'ouverture et de clôture de l'IGWG6. Bien que l'ordre du jour se concentre sur le Système d'accès aux agents pathogènes et de partage des avantages (PABS/PASS) de l'OMS — qui n'est pas directement lié à la santé au travail traditionnelle —, la pandémie de COVID-19 a clairement démontré que la prévention sur le lieu de travail est une stratégie cruciale pour contrôler la propagation des pandémies. Comme l'illustrent ces exemples, les questions de santé des travailleurs sont fragmentées entre divers projets, ce qui rend de plus en plus difficile le maintien d'une présence unifiée en matière de santé au travail au sein de l'OMS.

Historiquement, la santé au travail au sein de l'OMS a été soutenue par les Centres collaborateurs de l'OMS (OH-CC). Les réunions des OH-CC se tenaient généralement juste avant le congrès de la CIST, une tradition qui s'est poursuivie jusqu'au congrès de Marrakech en 2024. J'ai

## Résumé en français



personnellement participé à la réunion de Stresa en Italie en 2006 en tant que directeur du Centre collaborateur de l'OMS de la KOSHA. À l'époque, on comptait 64 instituts et universités membres à l'échelle mondiale ; aujourd'hui, ce nombre est tombé à environ 20. Une réunion mondiale de tous les centres collaborateurs de l'OMS, tous secteurs confondus, se tiendra à Lyon, en France, en avril 2026. Diana Gagliardi, représentant l'INAIL, défendra la cause de la santé au travail lors de cet événement. Plusieurs membres des OH-CC y participeront également, et nous espérons que leur présence renforcera le soutien à la santé au travail au sein de l'OMS.

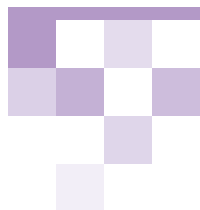
Enfin, en février, la CIST a été informée que le Conseil

exécutif de l'OMS avait décidé de maintenir les relations officielles entre la CIST et l'OMS. Nos activités avec l'organisation feront l'objet d'un prochain examen en janvier 2029. Le Dr Richard Brown, du Département de la santé environnementale, occupe le poste de responsable technique désigné par l'OMS pour ces relations officielles. Diana Gagliardi doit le rencontrer pour discuter de la collaboration mutuelle lors de l'Assemblée mondiale de la santé (AMS) fin mai.

**Prof. Seong-Kyu Kang**

Président de la CIST





## Résumé en français

### Nouvelles du Secrétaire général

#### Chers membres de l'ICOH/la CIST,

Les activités de l'ICOH/ la CIST pour le triennat en cours se déroulent efficacement, et je souhaiterais vous faire part de quelques informations récentes.

#### Campagne d'adhésion

Le Secrétariat de l'ICOH/ la CIST s'efforce en permanence de renforcer la base de ses membres et la campagne d'adhésion se déroule de manière régulière. Il est essentiel de maintenir un statut actif pour garantir un accès ininterrompu à tous les avantages réservés aux membres, y compris les tarifs d'inscription préférentiels pour le prochain congrès.

De plus, les membres issus de pays à faible ou moyen revenu qui sont en règle au moment de soumettre leur résumé au programme des communications libres du congrès ICOH2027 pourront demander une bourse afin de bénéficier d'une aide (totale ou partielle) pour leur participation au congrès.

Si vous n'avez pas encore renouvelé votre adhésion à l'ICOH/ la CIST, veuillez contacter le Secrétariat de l'ICOH/ la CIST à l'adresse [icoh@inail.it](mailto:icoh@inail.it) afin de recevoir les instructions et les formulaires de paiement pour la cotisation de la période 2024-2026. Des options de paiement en ligne sont également disponibles dans l'espace privé du site web de l'ICOH/ la CIST.

Les nouveaux membres sont également les bienvenus au sein de l'ICOH/ la CIST. Si vous connaissez des collègues susceptibles d'être intéressés, veuillez les inviter

à s'inscrire sur le site web de l'ICOH/ la CIST, à l'adresse [www.icohweb.org](http://www.icohweb.org)

Nous nous réjouissons de votre participation active et de votre contribution aux activités de l'ICOH/ la CIST.

#### Congrès ICOH2027

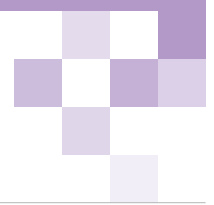
Les préparatifs du prochain congrès ICOH2027 avancent sans encombre et sont désormais bien engagés. La plateforme de soumission des résumés est toujours ouverte et prête à recevoir vos contributions. Ne manquez pas l'occasion de partager vos travaux avec la communauté mondiale des experts en SST !

Par ailleurs, le programme scientifique global du congrès est en constante évolution : après avoir confirmé les orateurs principaux et pléniers, nous sommes en train de finaliser la liste des orateurs semi-pléniers, de travailler sur les modalités du Forum mondial sur les politiques et d'élaborer le programme des sessions spéciales. Tout est en bonne voie pour que l'ICOH/ la CIST2027 soit à nouveau un événement couronné de succès.

Pour des informations détaillées sur le programme, les dates clés, les thèmes des résumés et les procédures de soumission, les frais d'inscription, ainsi que les bourses destinées aux participants issus de pays à revenu faible ou intermédiaire, veuillez-vous reporter à la deuxième annonce.

Restez à l'écoute et suivez toutes les actualités du congrès sur le site web du congrès ([www.icoh2027.in](http://www.icoh2027.in)) et sur les réseaux sociaux (Instagram et LinkedIn).

# Résumé en français



## Webinaires et événements de l'ICOH/ la CIST

Conformément à l'engagement de l'ICOH/ la CIST en faveur du développement professionnel et de l'échange de connaissances, une nouvelle série de webinaires ICOH est actuellement en cours d'élaboration grâce aux précieuses contributions, des comités scientifiques de l'ICOH/ la CIST, des membres du conseil d'administration, des secrétaires nationaux et des membres contributeurs. Ces sessions constituent un forum de haut niveau permettant d'aborder des sujets essentiels sous la houlette d'experts reconnus, tout en renforçant les liens professionnels au sein de notre réseau mondial.

Les membres sont invités à consulter la section dédiée du site web de l'ICOH/ la CIST à l'adresse <https://www.icohweb.org/site/webinars.asp> pour obtenir des informations actualisées sur ces sessions ; en outre, une archive complète de tous les enregistrements précédents reste disponible pour consultation dans l'espace privé.

Parallèlement, les comités scientifiques et les secrétaires nationaux de l'ICOH/ la CIST continuent d'organiser un large éventail d'événements couvrant l'ensemble du domaine de la santé et de la sécurité au travail, offrant ainsi aux membres de précieuses occasions d'approfondir leur expertise et d'élargir leurs réseaux professionnels. N'oubliez pas de consulter <https://www.icohweb.org/site/events.asp> pour en savoir plus sur les événements à venir et bien plus encore.

## Pages web des comités scientifiques

Je suis heureux d'annoncer que les quatre premiers comités scientifiques ont lancé avec succès leur nouvelle page

web hébergée sur le site de l'ICOH/ la CIST. Au-delà de leur emplacement principal dans la section « Comités scientifiques » du site de l'ICOH/ la CIST, nous avons enfin réussi à améliorer considérablement l'accessibilité des pages web des comités scientifiques : afin de rationaliser davantage l'expérience utilisateur, ces pages ont désormais été entièrement intégrées à la nouvelle fonctionnalité de barre de recherche. Cette mise à jour garantit que les liens vers les pages web des comités scientifiques sont désormais directement consultables et instantanément accessibles depuis la page d'accueil du site web de l'ICOH/ la CIST, ce qui représente une avancée majeure dans les efforts de l'ICOH/ la CIST pour favoriser une communauté plus connectée et mieux informée.

Le développement des pages web des comités scientifiques progresse et plusieurs d'entre elles en sont actuellement aux dernières étapes de leur élaboration, tandis que d'autres responsables de comités scientifiques peaufinent activement leur contenu en vue de la publication de leur page web.

## Activités de la secrétaire générale de l'ICOH/ la CIST

En mars, j'ai assisté à la soixante-dixième session de la Commission de la condition de la femme, en tant que représentante de l'ICOH/ la CIST aux côtés du Dr Gina Strozzi, membre de l'ICOH/ la CIST représentant le SC Femmes, Santé et Travail.

Chaque session de la Commission de la condition de la femme représente une occasion unique de réseau, où des représentants des États membres, des États membres des Nations Unies et des organisations non gouvernementales accréditées provenant de toutes les régions du monde, sont



## Résumé en français

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invités à participer et à contribuer au débat international sur la condition des femmes.

La participation à la Commission de la condition de la femme a offert une occasion stratégique d'observer, d'articuler les positions institutionnelles et d'analyser les tendances mondiales liées à l'agenda de genre, en accordant une attention particulière aux intersections entre la violence, la santé mentale, le travail et l'accès à la justice.

Au-delà de sa dimension formelle, la participation aux séances plénières, aux événements parallèles et aux réunions de haut niveau a permis une compréhension qualitative des dynamiques multilatérales, mettant en lumière les progrès, les lacunes et les tensions actuelles.


Les principaux thèmes abordés tout au long de la conférence concernaient la violence sexiste et tous les aspects qui y sont liés, allant de l'accès à la justice à la reconnaissance de toutes les différentes formes de violence (privée, économique, sur le lieu de travail, facilitée par la technologie) ainsi que leurs intersections et leurs impacts interdépendants.

Bien qu'il ait été souligné à maintes reprises que l'égalité

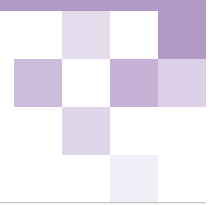
entre les sexes reste un défi persistant et qu'il faudra des décennies, voire des siècles, pour parvenir à une parité totale, en particulier dans la représentation publique et politique, les discussions autour des mécanismes de protection sociale ont démontré que l'absence de prise en compte des questions de genre entrave une protection efficace des femmes tant sur le marché du travail que dans leur vie privée.

Après avoir participé à deux éditions consécutives de la Commission de la condition de la femme, nous sommes absolument convaincus et prêts à renforcer la présence institutionnelle de l'ICOH/ la CIST lors de la prochaine Commission de la condition de la femme grâce à des actions structurées de plaidoyer et de collaboration internationale. En particulier, nous nous efforcerons de renforcer le dialogue direct avec ONU Femmes et de positionner l'ICOH/ la CIST comme un acteur technique pertinent pour promouvoir l'égalité des sexes et l'autonomisation des femmes par le biais du travail décent.

**Dr. Diana Gagliardi**  
Secrétaire général de la CIST



# Résumé en français



## Message du rédacteur en chef

### Chers membres de l'ICOH/la CIST,

Je vous adresse à toutes et tous mes salutations les plus chaleureuses. Bienvenue dans la première édition de la lettre d'information de l'ICOH/ la CIST pour 2026. Alors que nous entrons dans la troisième année du triennat 2024-2027, je tiens à remercier sincèrement tous les membres qui consacrent leur temps, leurs idées et leur dévouement à notre mission commune.

En repensant à l'année écoulée, notre communauté a fait preuve d'une résilience remarquable face à l'évolution rapide des tendances mondiales et aux diverses perturbations régionales. En particulier, l'intérêt accru que nous avons porté aux thèmes « Changement climatique et santé des travailleurs » et « IA et santé au travail », ainsi que les discussions approfondies que nous avons menées à ce sujet, ont démontré notre engagement commun à protéger les travailleurs dans un monde en mutation.

Ces défis permanents nous rappellent l'importance cruciale de notre travail et la nécessité d'une solidarité et d'une collaboration continues au sein de notre communauté. Si ces questions posent des défis complexes, votre dévouement

les transforme en opportunités de progrès.

Ce premier numéro de l'année présente un large éventail d'actualités et de réflexions qui mettent en lumière l'esprit dynamique, la résilience et la créativité des membres de l'ICOH/ la CIST à travers le monde. Qu'il s'agisse d'initiatives en expansion ou de collaborations internationales, je vous encourage tous à rester activement engagés, que ce soit en partageant des mises à jour, en échangeant des idées ou en participant aux événements à venir.

Votre implication garantit que la Lettre d'information de l'ICOH/ la CIST continue d'être une plateforme significative et inclusive d'apprentissage et de connexion. Je vous suis profondément reconnaissant pour votre soutien indéfectible et pour nous avoir rapprochés en tant que famille mondiale.

Merci de faire partie de cette communauté mondiale. Allons de l'avant ensemble vers 2026, avec détermination et espoir.

**Prof. Won-Jun Choi**

Rédacteur en chef, Bulletin d'information de l'ICOH/CIST

### La planification éditoriale de la lettre d'information de la CIST/ICOH

Les plans éditoriaux pour 2026 sont les suivants :

- Numéro 1 : 1er avril (date limite de soumission des articles : fin février)
- Numéro 2 : 1er août (date limite de soumission des articles : fin juin)
- Numéro 3 : 1er décembre (date limite de soumission des articles : fin octobre)



# Scientific Committee Officers for Triennium 2024-2027

**Text in black indicates the Scientific Committee Officers who are already appointed for Triennium 2024-2027.**

*Text in blue Italics indicates the Scientific Committee Officers who served for Triennium 2022-2024*

*(new officers to be appointed).*

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## **Industrial Hygiene**

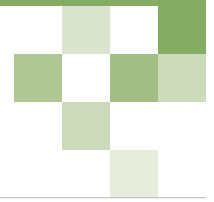
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## OH in the Construction Industry

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*Email:*

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Secretary: Mrs. Claudine STREHL

Email: Claudine.Strehl@dguv.de



## Scientific Committee Officers for Triennium 2024-2027

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### Reproductive Hazards in the Workplace

*This SC has been transformed in  
a sub-committee of the SC on  
Occupational Toxicology.  
Please refer to SCOT leadership.*

### Respiratory Disorders

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### Shiftwork and Working Time

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Secretary: Mrs. PK LATHA  
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### Toxicology of Metals

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### Vibration and Noise

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Secretary: To be appointed  
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### Women Health and Work

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### Work Organisation and Psychosocial Factors

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# National/Area Secretaries Triennium 2024-2027

**Text in black indicates the National/Area Secretaries who are already appointed for Triennium 2024-2027.**  
*Text in blue Italics indicates the National/Area Secretaries who served for Triennium 2018-2021 or 2022-2024 (new secretaries to be appointed).*

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Zimbabwe	Nonhlanhla ndhlovu YALALA	yalalan@gmail.com

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### PAST SECRETARY GENERAL

#### **Prof. Sergio Iavicoli** (Italy)

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