Employment, Work and Health Inequalities: A Global Perspective

Joan Benach, Pompeu Fabra University (Barcelona, Spain)
Carlos Muntaner, University of Toronto, CAMH (Toronto, Canada)
Vilma Santana, Federal University Bahia (Salvador Bahia, Brazil)
and the EMCONET Network

Summary

- The Commission on Social Determinants of Health
- Aims of the Employment Conditions Knowledge Network
- Knowledge Generation Process
- Concepts
- Theoretical Model
- Typology of countries
- Summary of findings
- Policies and interventions
- Final thoughts

1. Provide a global description and analyses (impact and pathways) between employment conditions and health inequalities through key cross-cutting issues.
2. Identify employment-related macro and community policies and interventions to reduce inequalities in health.
3. Translate knowledge into recommendations, dissemination and implementation of these recommendations.

Fair employment encompasses a public health perspective in which just employment relations (i.e., the relation between buyers and sellers of labour as well as all the behaviours, outcomes, practices and institutions that emanate or impinge upon the employment relationship) are a prerequisite factor to reduce poverty, improve health, and reduce health inequities.

Fair employment implies: freedom from coercion, job security, fair income, job protection and social benefits, respect and dignity at work, workplace participation, and enrichment and lack of alienation.

Typology of countries classified by national economic level and welfare and labor market regimes

<table>
<thead>
<tr>
<th>Core</th>
<th>More Equal</th>
<th>LABOR MARKET</th>
<th>More Unequal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Norway</td>
<td>Social Democratic Labor Institution</td>
<td>Corporation Labor Institution</td>
<td>Liberal Labor Institution</td>
</tr>
<tr>
<td>Denmark, Germany, Spain, France, Australia</td>
<td>US, Canada, South Korea, UK</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Semi-periphery

<table>
<thead>
<tr>
<th>Informal Labor Market, More Successful</th>
<th>Informal Labor Market, Less Successful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chile, Hungary, Poland, Malta</td>
<td>El Salvador, Botswana, Gabon</td>
</tr>
</tbody>
</table>

Periphery

<table>
<thead>
<tr>
<th>Informal Market, Insecurity</th>
<th>Maximum Insecurity</th>
</tr>
</thead>
<tbody>
<tr>
<td>India, Sri Lanka, Indonesia, Armenia, Pakistan, Bulgaria, Tajikistan, Sudan</td>
<td>China, Nigeria, Jordan, Algeria, Morocco, Egypt, Arab Rep., Iran, Islamic Rep.</td>
</tr>
</tbody>
</table>


HALE IN FEMALES (2002). Typology of countries

Bangladesh, Angola

Such as employers, workers and government (…) A

Group

Korea

No regulated job security and substantial contingent work
Secure jobs norm (except women)/small contingent workforce
Decline in job security and growing contingent workforce
No regulated job security and large/growing informal sector


HALEM02

• Public efforts at improving the health inequalities produced by employment relations

Female

Pakistan, Bulgaria, Venezuela, Turkey, Brazil, Russia, US, Canada

Informal, Labor Market, More successful

Theoretical models
Core

Labour standard laws

Informal market, More successful

Informal, Labor Market, Insecurity

Collective bargaining

Social Democratic Labor Institution

Informal, Labor Market, Less successful

Corporatist Labor Institution

Informal, Labor Market, More Successful

Liberal Labor Institution

Informal, Labor Market, Insecurity

Maximum Insecurity

• Theoretical models showing links between processes (country and regional levels), employment conditions, working conditions and health outcomes.

• Surveillance information systems to gather data on employment conditions, especially in low-income countries.

• More research on the health inequalities consequences of employment relations.

• Studies on mechanisms between employment relations and conditions and health stratified by class, gender, age, ethnicity/race and migration status.

• Instruments to implement and evaluate policy interventions.

What do we need to know? (Gaps in knowledge)

Where do we want to go? (Vision and values)

Public efforts at improving the health inequalities produced by employment relations should take into account power differences among social actors such as employers, workers and government (…) A more equitable balance of power in employment relations in most parts of the world is needed to create decent job growth and improve health.

Today fair employment is not acknowledged as a human right. Political and public health international institutions should recognise fair employment and decent working conditions as universal human rights.

Approaches to translate knowledge into policy

• What needs to be done? (Priorities, Global strategies, general recommendations)
  
  1. Global recommendations
     - Enforce International and National Labor standards for fair employment (with effective sanctions)
     - Enhance Labor Market Equality (through state intervention and labor market regulations)
     - Expand Public Welfare Policies (intersectorial actions and programs)
     - Expand and enforce Policies & regulations to improve working conditions (right to have a healthy working environment)
     - Expand cooperative models of organisation and production management based on solidarity (real participation of workers)


Approaches to translate knowledge into policy

• What needs to be done? (Priorities, Global strategies, general recommendations)
  
  1. Global recommendations
  2. Priorities and strategies
     - Selected among four Entry Points and six different Employment Conditions