



**SAFE HEALTH WORKERS,
SAFE PATIENTS**

**Speak up
for health worker safety!**



SAFE HEALTH WORKERS, SAFE PATIENTS

**Speak up
for health worker safety!**

COMPREHENSIVE APPROACH OF THE HEALTH OF HCW FROM A PUBLIC HEALTH PERSPECTIVE IN THE CONTEXT OF COVID-19



Julietta Rodríguez-Guzmán, MD ESO MScA
Regional Advisor on Workers' Health
Health Promotion and Social Determinants of Health Unit
Family, Health Promotion and Life Course Department
rodriguezj@paho.org / occdis@paho.org



PAHO



Pan American
Health
Organization



World Health
Organization

REGIONAL OFFICE FOR THE Americas

BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus

What is occupational health?

In 1950, the Joint ILO/WHO Committee on Occupational Health stated that: "Occupational health should aim at the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations; the prevention amongst workers of departures from health caused by their working conditions; the protection of workers in their employment from risks resulting from factors adverse to health; the placing and maintenance of the worker in an occupational environment adapted to his physiological and psychological capabilities".

Executive Board, 7. (1951). Joint ILO/WHO Expert Committee on Occupational Health: report on the first session. World Health Organization. <https://apps.who.int/iris/handle/10665/86728>

From the Labour to the public health Approach

The Labour Approach

Occupational Health

Employee work force
Labour Contract
Employer's responsibility
Focus on workplace
Only work-related health issues
Bargaining between workers and employers
Decent work



The Public Health Approach

Workers Health

All workers
Beyond the workplace
Responsibility of everybody
Considers all health determinants
HiAP Approach
Other stakeholders: insurance, health and environment authorities
Health protection = Human right

What determines workers health?

Working Environment

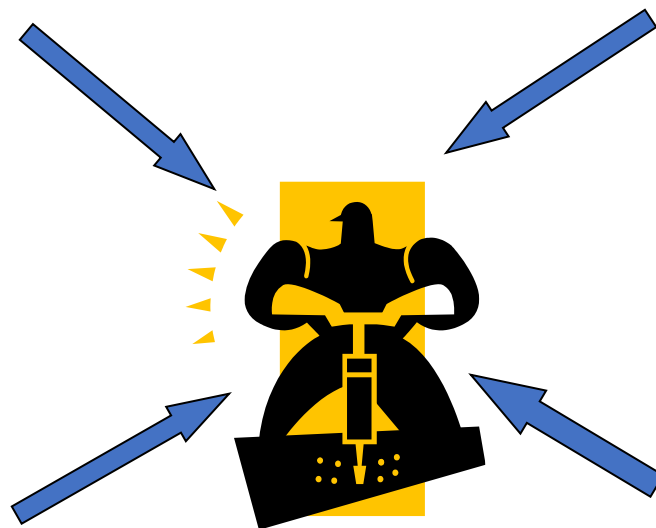
Working conditions

- Mechanical
- Physical
- Chemical
- Biological
- Ergonomic
- Psycho-social hazards/work organization

Social Factors

Employment conditions

- Employment conditions
Salaries, contracts, etc.
- Economic Status : poverty
- Equity: gender, ethnic, age, residence, etc.
- Employer-employee relationships
- Family, community, union



Individual Work-related health practices

Behavioural conditions

- individual behaviours
- sedentary work
- diet and nutrition
- unhealthy habits – smoking, alcohol
- religious & cultural practices

Access to health services

Comprehensive health services

- Preventive OHS services
- Healthcare: care and rehab
- Health insurance
- **Workers' compensation schemes (occupational disease and accident insurance)**

Economic Stability	Neighborhood and Environment	Education	Food	Community and Social Context	Health Care System
Work	Housing	Literacy	Hunger	Social integration	Health Coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguist and cultural competency
Debt	Playgrounds	Vocational training		Discrimination	
Medical Bills	Walkability	Higher education			Quality of Care
Support					

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

<https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>

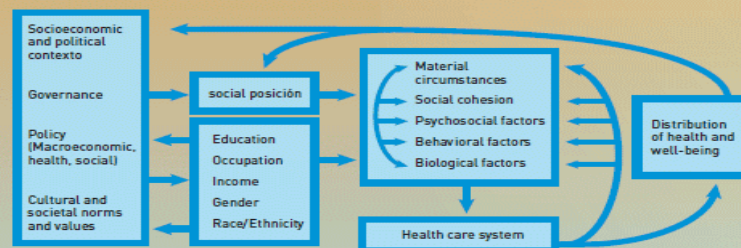
COVID-19

Background

- 2005: The WHO launched a Commission on the Social Determinants of Health (CSDH)
- 2011: The Rio Political Declaration on Social Determinants of Health.
- 2014: Regional Plan of Action on Health in All Policies
- 2015: Sustainable Development Goals (SDG 1: No Poverty)

Towards sustainable development
The 2030 Agenda for Sustainable Development

The social determinants of health conceptual framework

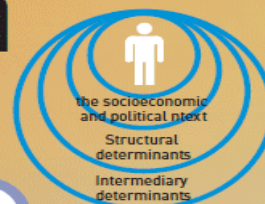


Social determinants of health and health inequities

Source: Adapted from Solar and Irwin.



Social Determinants of Health +

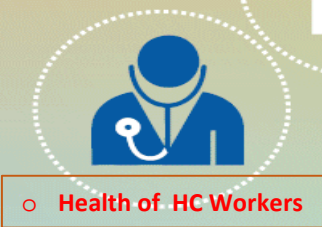


Core regional challenges

- Reproductive and maternal health
- Communicable diseases
- Noncommunicable diseases and mental health
- Occupational diseases, injuries and fatalities

The social determinants of health approach to core regional challenges

Given the close links between health equity and the underlying determinants of health, an integrated and systematic approach to address the underlying determinants of health is essential for reducing health inequities.

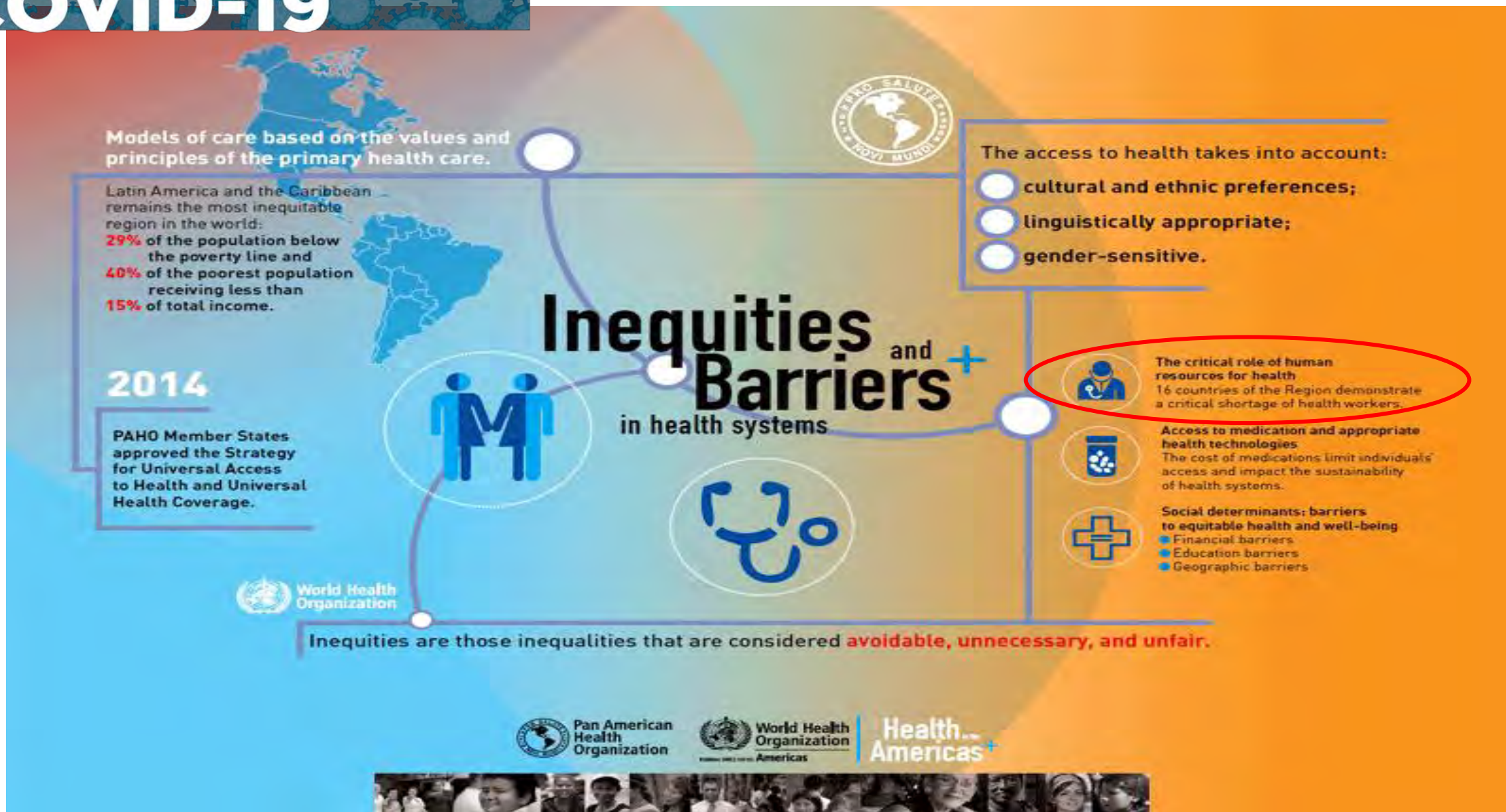


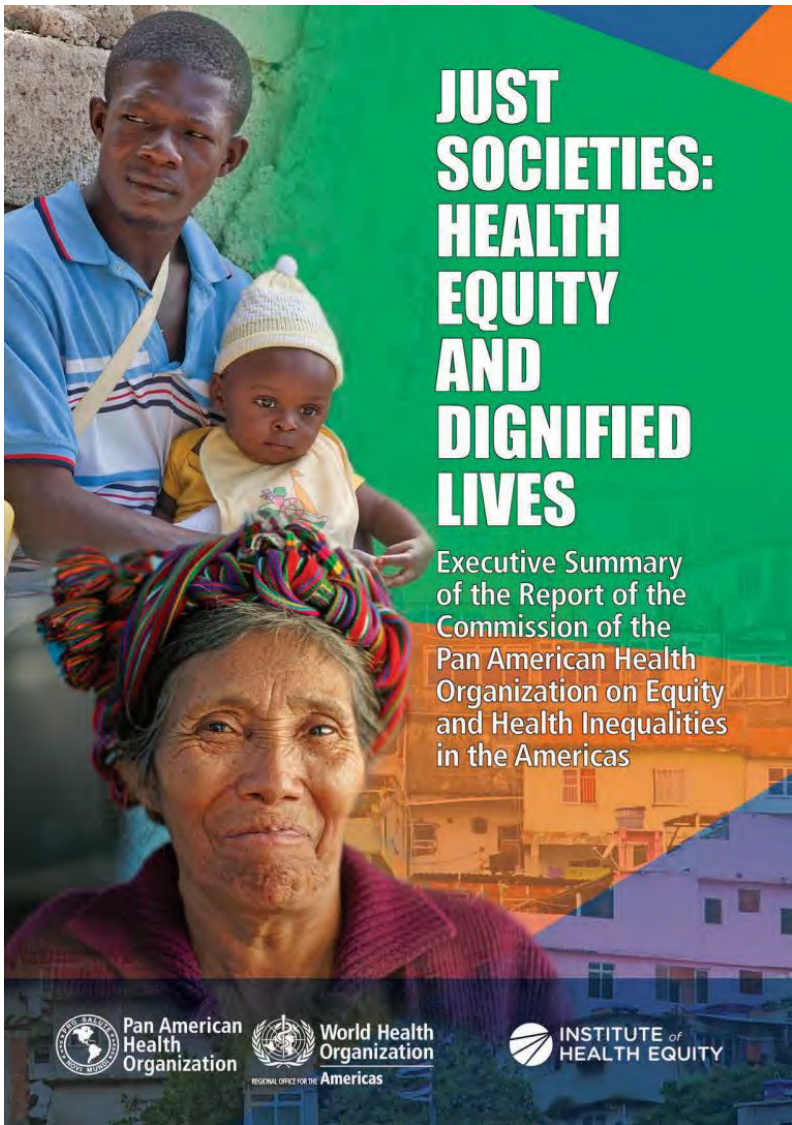
Health of HC Workers



“the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life”.







file:///C:/Users/PAHO/Downloads/9789275120217_eng.pdf

Section 1: Introduction and conceptual framework

Commission on Equity and Health Inequalities in the Americas
Conceptual framework

Section 2: Health inequalities in the Americas

Section 3: Structural drivers: Inequities in power, money, and resources

Recommendation 1 Achieving equity in political, social, cultural, and economic structures

Recommendation 2 Protecting the natural environment, mitigating climate change, and respecting relationships to land

Recommendation 3 Reversing the health equity impacts of ongoing colonialism and structural racism

Section 4: Conditions of daily life

Recommendation 4 Equity from the start: Early life and education

Recommendation 5 Decent work

Recommendation 6 Dignified life at older ages

Recommendation 7 Income and social protection

Recommendation 8 Reducing violence for health equity

Recommendation 9 Improving environment and housing conditions

Recommendation 10 Equitable health systems

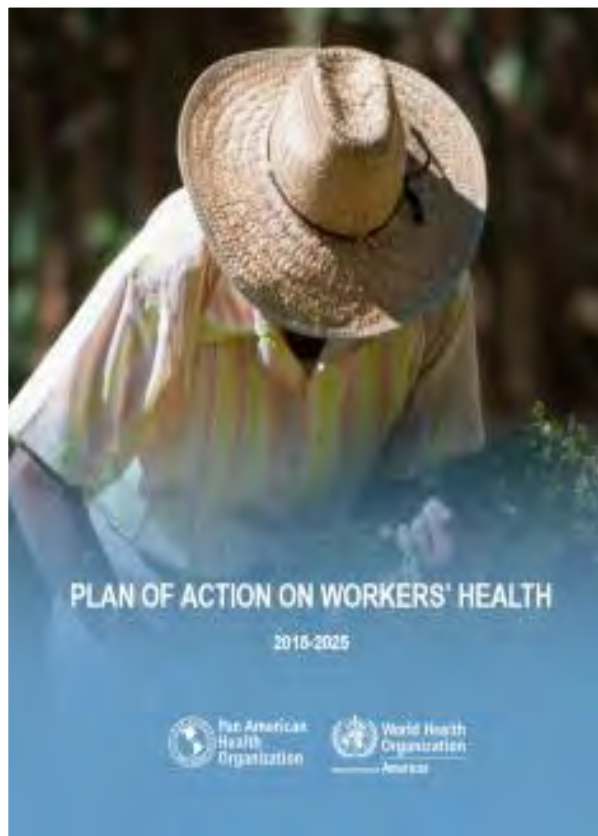
Section 5: Governance for health equity

Recommendation 11 Governance arrangements for health equity

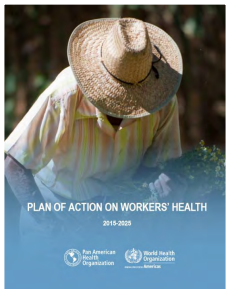
Recommendation 12 Fulfilling and protecting human rights

Section 6: Conclusions

References



*Approved by Resolution CD54/10
September 30, 2015*



PAWH → Offers options to address the problems:

1. Preventive interventions at the workplace.

2. Collaborative and coordinated actions with all economic sectors

3. Protect and safeguard life and health of all workers

- The ministries of health have a key role to make it happen:
 - Strengthen *public policies and regulations* on WH in the countries
 - Set in place *policies and inter-sectorial strategies* with leadership and close coordination with the ministries of Labor, and other key sectors (environment, education, mining and agriculture).
 - Increasing *comprehensive and competitive health services*, to increase coverage through *Primary health care services* in harmony with the mandates of the WHO Global action plan on WH, SDGs and other governmental agreements.

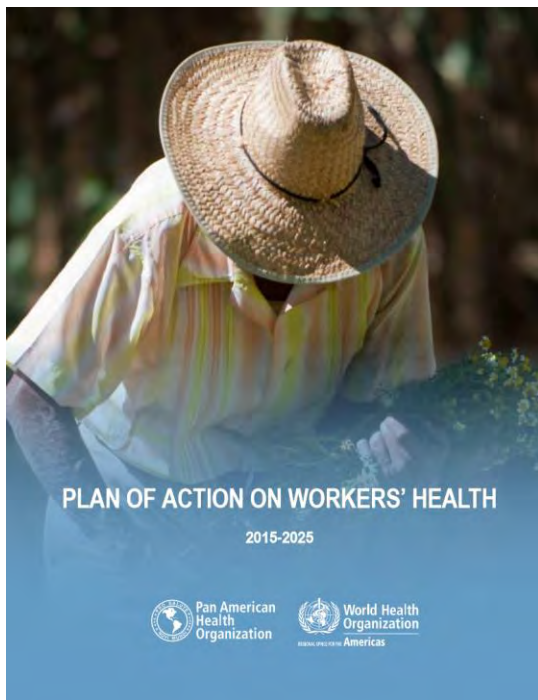
Goal

Strengthen the response of the health sector to provide comprehensive health services for workers' health during the life cycle and decreased health through implementation of up dated policies, plans and regulations inequalities.

The ministries of health will strengthen:

- ✓ Their technical and institutional capacities;
- ✓ Actions to prevent and control the conditions that cause injuries, diseases and deaths at work; and,
- ✓ promote and protect life, health and wellbeing of the workforce.

- ✓ The **leadership of health authorities** / ministries of labor and others → applying the fundamentals of **Health in All Policies (HiAP)**
- ✓ *Close the gaps on inequalities in workers' health*; and
- ✓ *Improve universal access and coverage of health* for all workers.

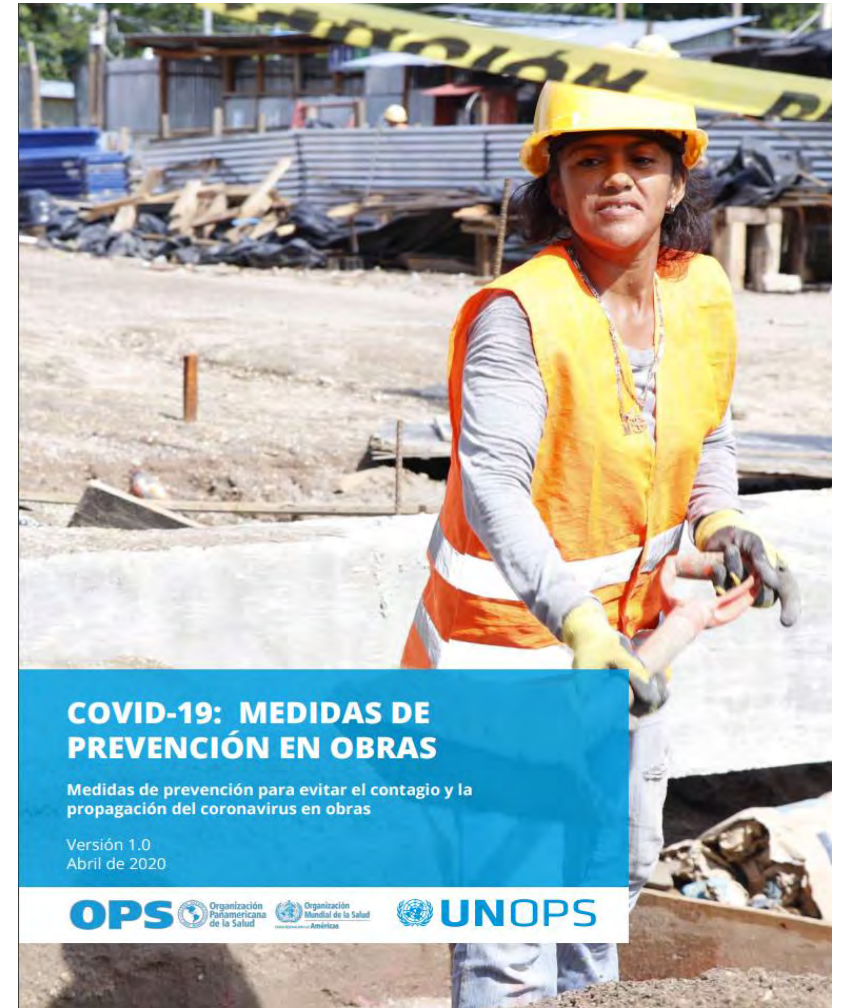
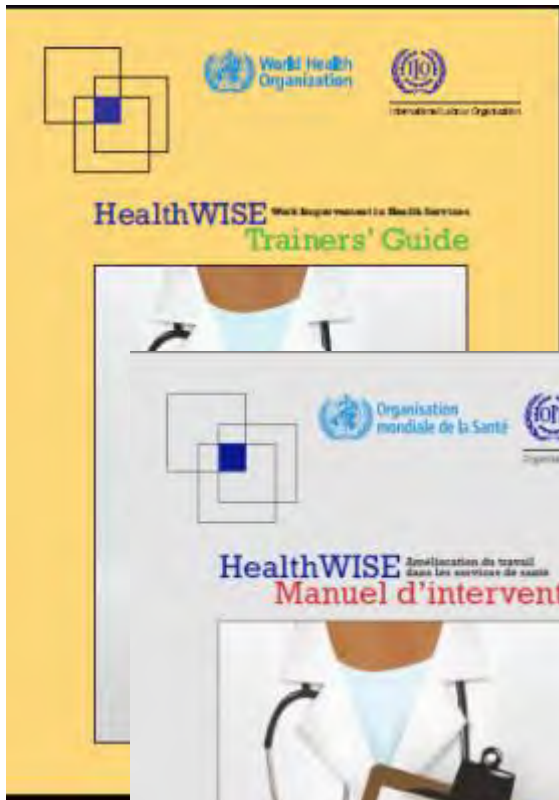


2015-2025

STRUCTURE of the PLAN

Strategic lines of action:

		SPECIFIC OBJECTIVES	INDICATORS
1	<i>Elaborate and update legislation and technical regulations on WH</i>	2	2 3
2	<i>Identify, evaluate, prevent and control working conditions and hazardous exposures at work</i>	3	2 4 5
3	<i>Increase access and coverage of health services for all workers</i>	2	2 1
4	<i>Promote health, wellbeing and health at work in all workplaces</i>	3	3 1 3
5	<i>Strengthen the diagnostic capacities, information systems, epidemiologic surveillance and research of diseases, injuries and deaths at work</i>	3	2 2 4



<https://iris.paho.org/handle/10665.2/52057>

https://www.ilo.org/sector/Resources/training-materials/WCMS_250540/lang--en/index.htm

<https://www.who.int/publications-detail/occupational-safety-and-health-in-public-health-emergencies-a-manual-for-protecting-health-workers-and-responders>

COVID-19



BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus

Do we care enough for those who care?



Speak up
for health worker safety!



- *2014–2016 Ebola outbreak* ⇒ Risk of infection for HCW was 21 to 32 > general adult population in West Africa
- *Latent tuberculosis* ⇒ 54% of HCW in Low & Middle income countries, 25 times > general population
- *COVID-19 infections* ⇒ Highest risk of COVID-19 infections
- *Chronic low back pain* ⇒ Between 44% and 83% of nurses in Africa
- *Occupational burnout* ⇒ Between 17% and 32% of health-care workers in developed countries
- *Violence at the workplace* ⇒ 63% of health workers report experiencing any form globally
- *Suicide* ⇒ Medical professions at higher risk in all parts of the world
- *Depression and anxiety during COVID-19* ⇒ 23% of front-line health-care workers worldwide
- *Insomnia:* ⇒ 39% of front-line health-care workers worldwide

Source: Ivanov, I. WHO World Patient Safety, September 17 2020

ACTIVITIES TO PROMOTE & PROTECT HEALTH WORKERS AND AVOID SPREAD OF COVID-19

Basic concepts:

1. **Spread:** by *exposure* to a contaminated source (close contact person-to-person close, surfaces or working objects with respiratory infected droplets of persons coughing or sneezing), by *proximity* (no social distancing) or by *aggregation* (contact with groups of persons in closed places).
2. **Determination of risk of exposure at work:** particularly when the worker has more and closer contact with colleagues or persons probably infected, if symptomatic or not.
3. **Consequences of the epidemic at the workplace:** they vary, from absenteeism due to medical leave for the sick worker, changes due to mechanisms to control dissemination of the virus, closure of services or products, and variations in the service markets.

ACTIVITIES TO PROMOTE & PROTECT HEALTH WORKERS AND AVOID SPREAD OF COVID-19

Preparation and response plan to the epidemics at the workplace:

1. Follow the instruction of health authorities → guidance actions to control the epidemics in your community, city, workplace or house.
2. Determine the risk and occupational exposure levels for the workers → general public, colleagues and partners, or clients either sick or carrying the virus.
3. Determine the presence of non-occupational risk factors → contagion at home or the community, and worker's individual characteristics such as NCDs or others.
4. Take all precautions to control the impact of absenteeism → social distancing that conducts to drastic reduction measures including temporary closure of the workplace, including suspension of production or services, or establishing virtual work (teleworking).

Preparados en el lugar de trabajo #COVID19



Promueve una buena higiene respiratoria. Provee mascarillas y/o pañuelos desechables a quienes tengan goteo nasal o tos, y basureros con tapa para desecharlos higiénicamente.



OPS

#Coronavirus

Preparados en el lugar de trabajo #COVID19



Las superficies (como los escritorios y las mesas) y objetos (como los teléfonos y los teclados) deben desinfectarse regularmente.



OPS

#Coronavirus

Preparados en el lugar de trabajo #COVID19



Asegúrate de que tus empleados sigan las instrucciones de las autoridades locales sobre restricciones de movimiento, viaje y lugares de alta concurrencia.



OPS

#Coronavirus

Preparados en el lugar de trabajo #COVID19



Aconseja a tus empleados y contratistas que consulten las recomendaciones nacionales antes de realizar viajes de negocio o de placer.



OPS

#Coronavirus

Preparados en el lugar de trabajo #COVID19



Promueve el lavado de manos frecuente y de forma correcta. Coloca los dispensadores de desinfectante para las manos en áreas visibles en el lugar de trabajo. Proporciona acceso a lugares donde el personal, los contratistas y los clientes puedan lavarse las manos con agua y jabón.



OPS

#Coronavirus

Preparados en el lugar de trabajo #COVID19



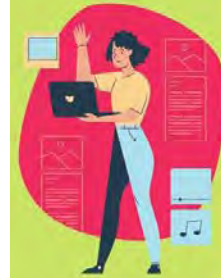
Informa a tus empleados, contratistas y clientes que, si el coronavirus comienza a propagarse en sus comunidades, cualquier persona que tenga una tos leve o fiebre deberá quedarse en casa.



OPS

#Coronavirus

Preparados en el lugar de trabajo #COVID19



Promueva el teletrabajo habitual en su organización. Si hay un brote de COVID-19 en su comunidad, las autoridades sanitarias pueden recomendar a las personas que eviten el transporte público y los lugares concurridos. El teletrabajo ayudará a mantener a su empresa en funcionamiento y protegerá a sus empleados.



OPS

#Coronavirus

PAHO



Pan American
Health
Organization



World Health
Organization

REGIONAL OFFICE FOR THE Americas

BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus

ACTIVITIES TO PROMOTE & PROTECT HEALTH WORKERS AND AVOID SPREAD OF COVID-19

Implement basic preventive measures at the workplace

1. Promote hand washing
2. Stay home if symptomatic
3. Respiratory etiquette
4. Trash cans and disposable bins available at the workplace
5. Establish work organization that allows social distancing, including teleworking and flexi-time.
6. Avoid to share work and personal elements such as desks/working tables, cell phones, computers, etc.
7. Keep adequate order and cleanliness at the workplaces: including cleaning and disinfection of surfaces, equipment and other office and elements of usual usage

ACTIVITIES TO PROMOTE & PROTECT HEALTH WORKERS AND AVOID SPREAD OF COVID-19

Define a strategy for early detection and isolation of a sick worker:

1. **Detection of sick workers:** Be ready for detecting cases!
2. **Monitor symptoms:** temperature control can prevent contagion.
3. **Establish a report mechanism:** so if sick, stay at home.
4. **Establish procedures to help a COVID symptomatic or a sick worker,** placing the person in isolation while home transfer is available.
5. **Define isolation measures for symptomatic and sick workers,** and train the workers to put them in place.
6. **Organize personal protective programs and provide the Personal protective elements (PPE)** to control the spread or respiratory secretions of these symptomatic or sick workers, such as glasses, facial protectors, etc.
7. **Foresee the need to establish the access to a health service or a triage station,** to ensure screening of possible sick workers, and the use of containment barriers.
8. **Use all other additional engendering or administrative measures available,** including good occupational safety practices, personal protective systems and elements, to avoid contagion with asymptomatic persons.

SOME KEYS ISSUES FOR OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT DURING COVID

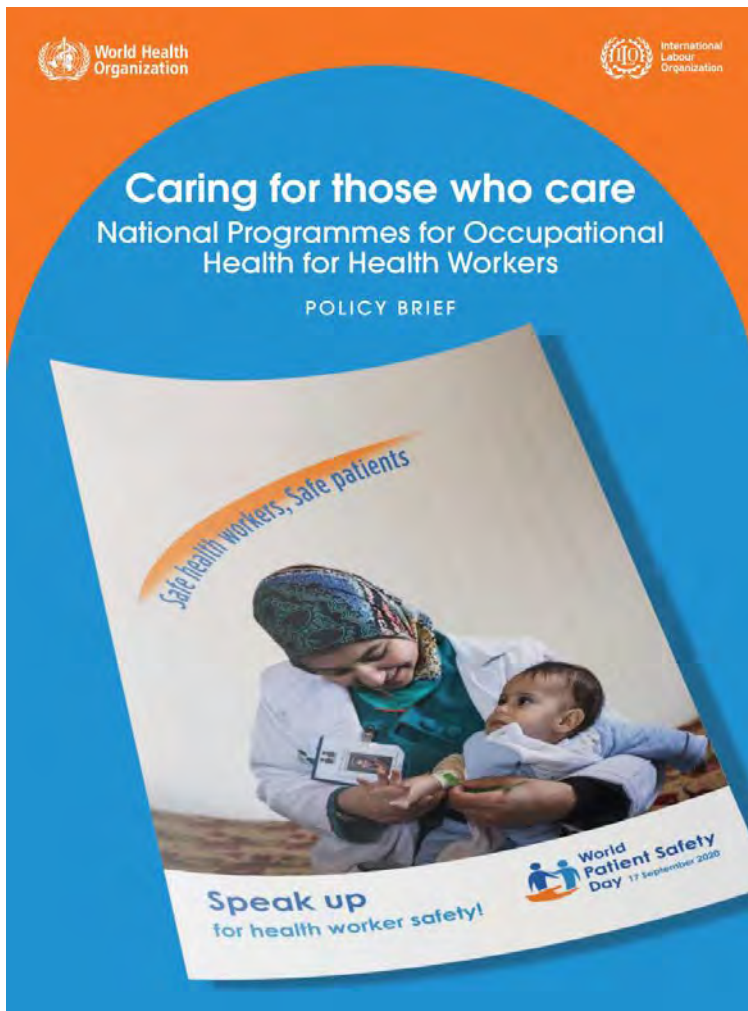
- **Identify incidents and follow-up:** presence of anosmia and loss of taste, COVID testing, determine release and follow-up from work until recovery and RTW programs.
- **Observation of asymptomatic workers:** COVID tests, labs, RTW with respiratory protection program and follow-up.
- **Track and screen symptoms:** screening/questionnaires: throat-ache, mild head ache, follow-up with testing, home observation casa, RTW.
- **Populations at high risk :** pregnant workers or workers with NCDs.
- **Surveillance and information management:** record keeping for updated info to assure timely protection of workers and definition of RTW programs RAT.

ACTIVITIES TO PROMOTE & PROTECT HEALTH WORKERS AND AVOID SPREAD OF COVID-19

Implemente medidas de control en el lugar de trabajo con base en la jerarquía de controles:

- 1. Controles de ingeniería:** control en la fuente - de la calidad de aire con instalación de filtros, incremento de la ventilación en el ambiente de trabajo, barreras físicas, mecanismos avanzados de ventilación presurizada, etc
- 2. Controles administrativos:** cuidados en casa en caso de estar enfermo, minimizar contacto entre trabajadores, alternar turnos y días de trabajo para disminuir exposición, no usar transporte público, definir planes de comunicación de emergencia, mantener una línea de comunicación viva para atender las inquietudes de los trabajadores.
- 3. Prácticas de trabajo seguro:** los controles administrativos para reducir la duración, la frecuencia y la intensidad de cualquier exposición al virus, con medidas *de higiene ocupacional y personal* (jabones, desinfectantes, guantes, etc.), y lavado de manos antes y después de usar guantes y después de usar los servicios sanitarios.
- 4. Elementos de protección personal EPP:** no reemplazan los controles administrativos, pueden incluir guantes, protectores visuales o faciales, protección respiratoria, y algunos muy específicos dependiendo del oficio que desempeña el trabajador. Asegurar su uso adecuado en el tiempo y lugar de trabajo requerido, mantenimiento y la reposición necesarias. Aquellos trabajadores que se vean obligados a trabajar en cercanía deberán utilizar respiradores adecuados (NIOSH N95, con o sin filtros, PAPR, mascararas quirúrgicas N95, piezas protectoras de cara, etc.)

COVID-19



<https://www.who.int/publications/i/item/caring-for-those-who-care>



DR TEDROS ADHANOM GHEBREYESUS
DIRECTOR-GENERAL
WORLD HEALTH ORGANIZATION

WORLD PATIENT SAFETY DAY, 2020

"The COVID-19 pandemic has highlighted the urgent need for strong national programmes to protect the health and safety of health workers, medical professionals, emergency responders, and the many other workers risking their lives on our behalf."



GUY RYDER
DIRECTOR-GENERAL
INTERNATIONAL LABOUR ORGANIZATION

WORLD PATIENT SAFETY DAY, 2020

"We need special measures to protect the millions of health workers and other workers who risk their own health for us every day. I call on all countries to assure well-defined, decent and safe working conditions for all health workers."

Key messages

- Protecting health workers and ensuring occupational health and safety is fundamental for well-functioning and resilient health systems.
- Health workers face a range of occupational risks associated with biological, chemical, physical, ergonomic and psychosocial hazards affecting the safety of both health workers and patients.
- Ensuring the occupational safety and health of health workers needs to be a priority and is a prerequisite for quality care.
- Comprehensive programmes on occupational health and safety for health workers in line with national occupational health and safety policies and laws are recommended to effectively protect health workers

PAHO



Pan American
Health
Organization

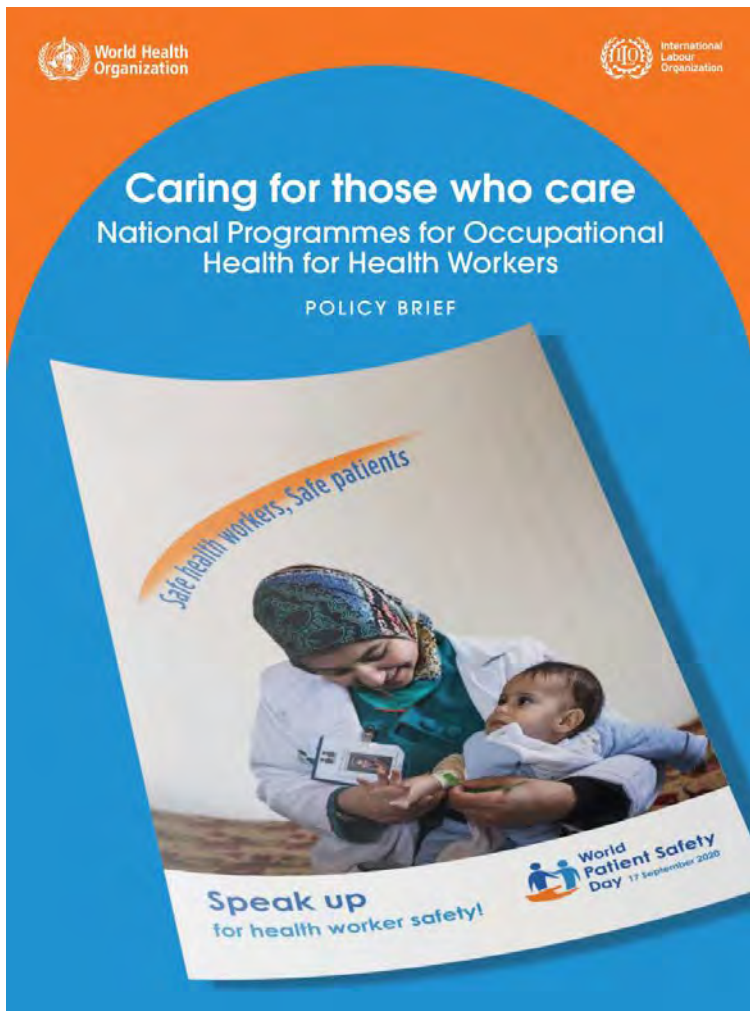


World Health
Organization

REGIONAL OFFICE FOR THE
Americas

BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus



<https://www.who.int/publications/i/item/caring-for-those-who-care>

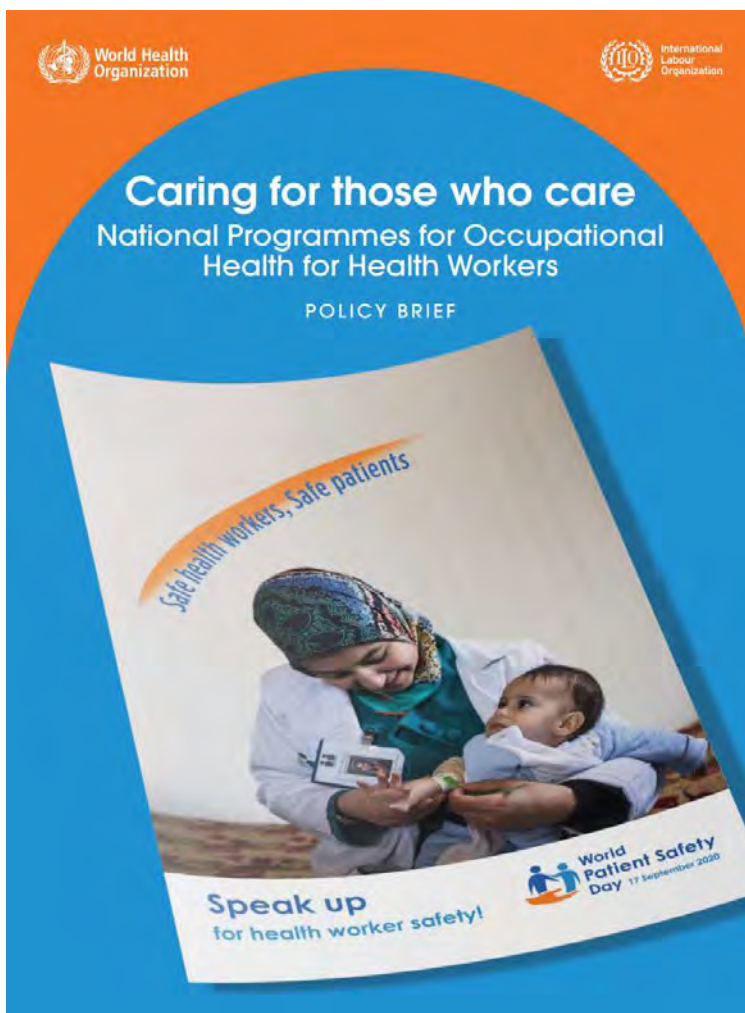
National programmes on occupational health for health workers

A national programme on occupational health of health workers provides a policy framework for actions to protect health, safety and well-being of workers in the health sector. It facilitates the regulatory compliance of facilities in the health sector with the national occupational safety and health laws and regulations, bearing in mind the specific working conditions and occupational hazards in the sector. It aims at providing decent work and a healthy and safe work environment for all health workers, thereby improving productivity and job satisfaction of health workers and their retention. Such programmes also contribute to improving the quality of care and patient safety. By strengthening the protection of health and safety of health workers and responders, such programmes increase the resilience of health services in the face of outbreaks and public health emergencies.

What is occupational health?

In 1950, the Joint ILO/WHO Committee on Occupational Health stated that: "Occupational health should aim at the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations; the prevention amongst workers of departures from health caused by their working conditions; the protection of workers in their employment from risks resulting from factors adverse to health; the placing and maintenance of the worker in an occupational environment adapted to his physiological and psychological capabilities".

Executive Board, 7. (1951). Joint ILO/WHO Expert Committee on Occupational Health: report on the first session. World Health Organization. <https://apps.who.int/iris/handle/10665/86728>

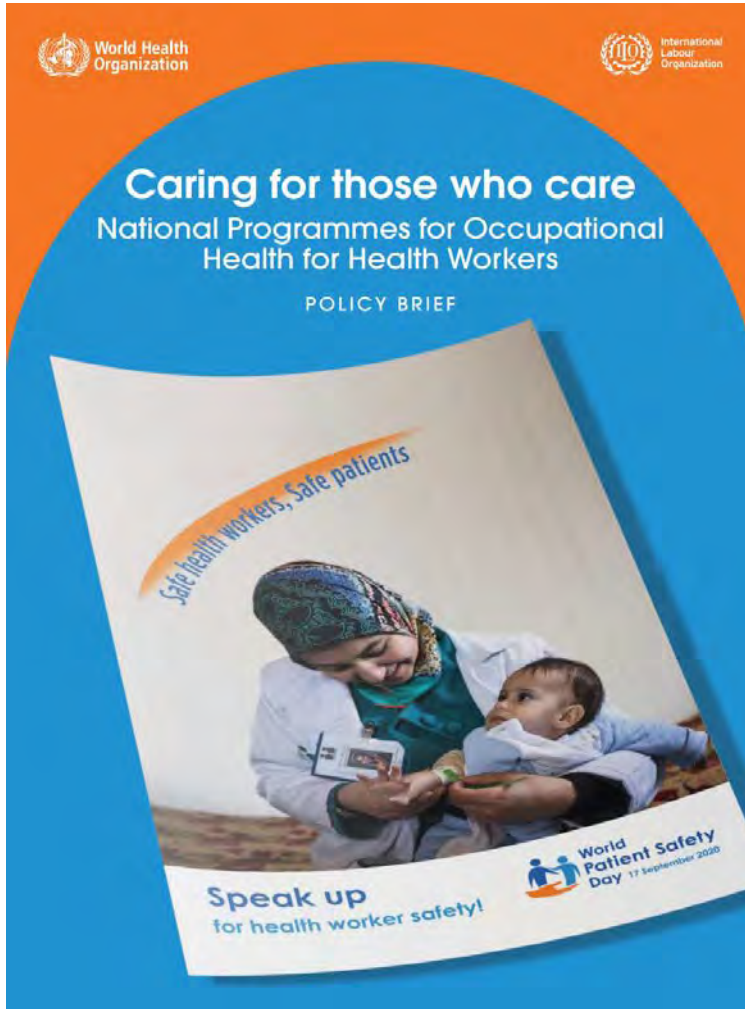


<https://www.who.int/publications/i/item/caring-for-those-who-care>

Building blocks of national occupational health programmes for health workers according to the WHO-ILO Global Framework

1. Identify a responsible person with authority for occupational health at both the national and workplace levels.
2. Develop a written policy on safety, health and working conditions for health workforce protection at the national and workplace levels.
3. Ensure access to Occupational Health Services by strengthening existing or establishing new occupational health programme, and allocate sufficient resources/budget to the programme, occupational health professional services, and the procurement of necessary personal protective equipment and supplies.
4. Create joint labour-management health and safety committees, with appropriate worker and management representation.
5. Provide ongoing (or periodic) education and training that is appropriate to all parties, including occupational health practitioners, senior executives, front-line managers, health and safety committees, front-line workers and their representatives, and the general public.
6. Identify hazards and hazardous working conditions in order to prevent and control them, and manage risks by applying the occupational health hierarchy of controls, which prioritizes elimination or control at the source.
7. Provide pre-service and ongoing immunization against hepatitis B and other vaccine-preventable diseases in the workplace at no cost to the employee and ensure all three doses of the hepatitis B immunization have been received by all workers at risk of blood exposure (including cleaners and waste handlers).
8. Promote exposure and incident reporting, eliminating barriers to reporting and providing a blame-free environment.
9. Promote and ensure health worker access to diagnosis, treatment, care and support for HIV/AIDS, tuberculosis and viral hepatitis B and C.
10. Utilize appropriate information systems to assist in the collection, tracking, analysing, reporting and acting upon data to promote health and safety of the health-care workplace and health workforce.
11. Ensure that health workers are provided with entitlement for compensation for work-related disability in accordance with national laws.
12. Promote research on occupational health and safety issues of concern to health workers and translation of research into practice, particularly with respect to combined exposures and applied intervention effectiveness research.
13. Promote and implement greening health sector initiatives that incorporate occupational health, green and safe jobs while reducing greenhouse gas emissions with a preference for: use of renewable energy; providing safe drinking water; promoting hand hygiene; active transport; environmentally preferable management of hazardous health care waste; and environmentally preferable selection and disposal of chemicals such as pesticides, disinfectants, and sterilants.

Developed and adopted in 2010, the WHO-ILO Global Framework is meant to be adaptable to national contexts and emerging epidemiological developments.



Mechanisms for implementation

Responsible authorities

- National – responsible unit in the ministry of health, technical resource
- Sub-national – responsible person, inspection authority
- Health facility – responsible person

Collaboration and participation

- National level → Committee on health and safety in the health sector, with representatives of workers and employers, and government agencies
- Facility level → labour-management health and safety committees

Enforcement

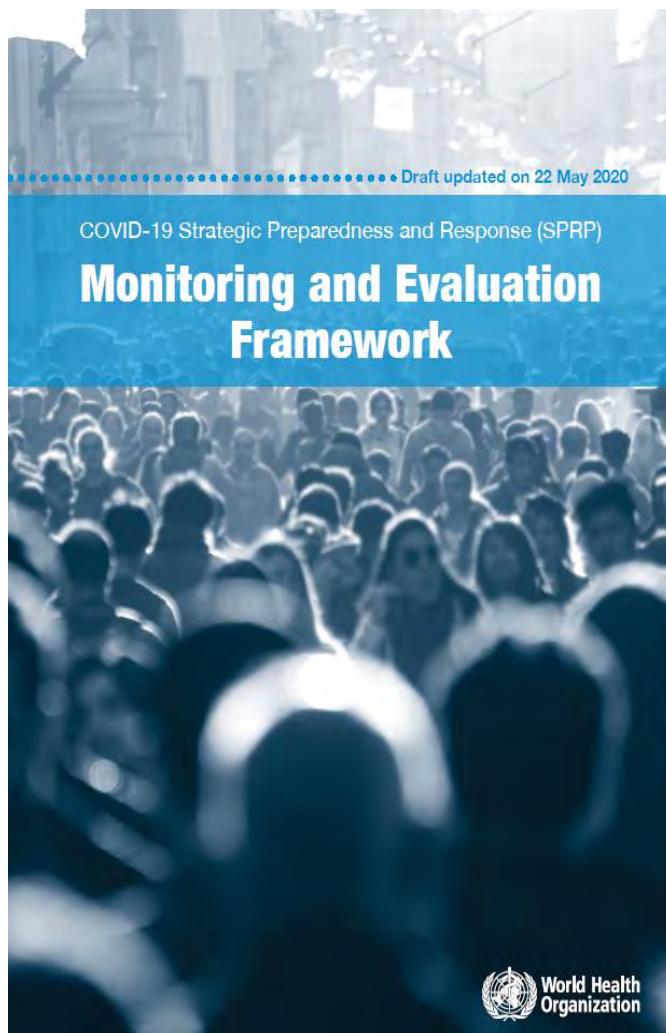
- Inspection authority – regulatory compliance
- Occupational health services – risk assessment, surveillance
- Accreditation of healthcare facilities – standards for OH&S
- Financial mechanisms - special budget line for occupational health and safety in the health facilities
- Employment injury benefits – social protection of workers in the case of occupational injuries and diseases

NEW TOOL FOR HEALTHCARE FACILITIES

Contents:

- Introduction
 - Tool in line with the WHO/ILO Global Framework for national Occupational Health Programs for health Workers
- Preparations
 - Appointments with facility manager and other relevant persons
- How to use the check list
 - Observation based answers to deliver advise for action and improvement
- Assessment information:
 - A. Management of Occupational health and Safety
 - B. Prevention of physical risks for health and safety
 - C. Preventions of Occupational infections
 - D. Prevention of Psychosocial risks
 - E. Additional measures



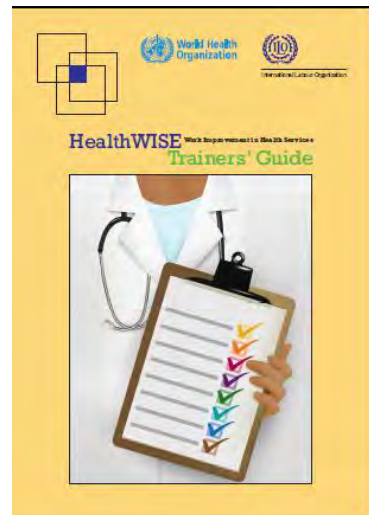
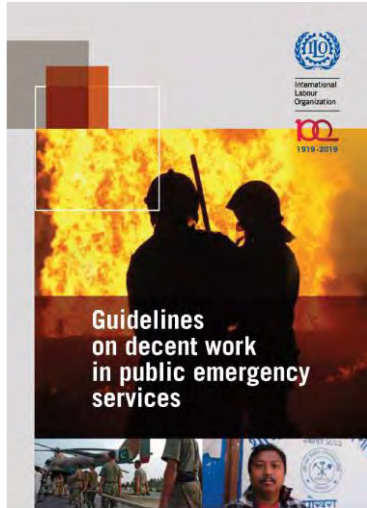


Pillar 9 Maintaining essential health services and systems										
DPT3 Vaccination coverage in children under 12 months of age	Situation	Outcome	N/A		x		WHO			x
Institutional delivery	Situation	Outcome	N/A			x	WHO			x
Essential health services during COVID-19 pandemic	Situation	Outcome	100%		x		WHO			x
Percentage of countries where at least one VPD immunization campaign was affected (suspended or postponed, fully or partially) by COVID-19	Response	Outcome	0%			x	WHO			x
Cross-cutting issues										
Percentage of countries with multi-sectoral mental health and psychosocial support technical working group	Response	Output	100%			x	WHO			x
Percentage of countries that have national occupational safety and health plans or programmes for health workers	Situation	Process	100%		x		WHO			x



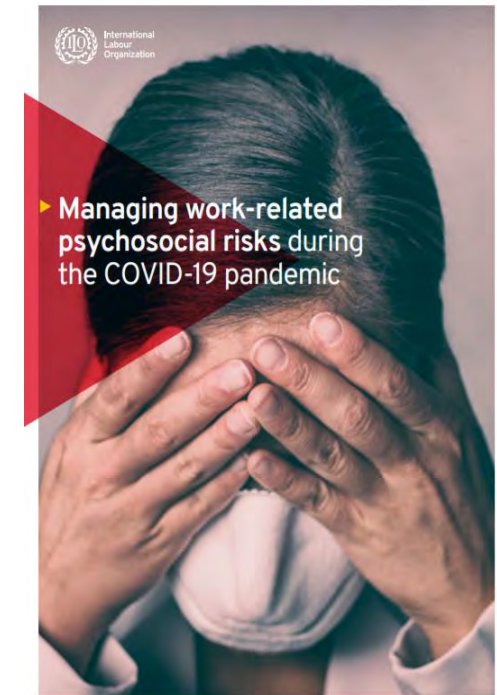
RESPONSE IN THE ACUTE PHASE

- All HCW should be covered by OHS regulations, workers' compensation systems, and economic compensation in case of loss of income and health coverage in case of disease.
- Labor rights are key to ensure health worker's protection.
- Social dialog and participation of the employer and workers organizations are fundamental so that all can play an active role in the COVID-19 response.



Recuperation / post-crisis / in the long-term

- Safe personnel recruitment levels: investing in health employment is an urgent need to tackle health worker shortage
- The Decent Work's working conditions are critical to provide high quality health services and retention of highly qualified and motivated health workers.



https://www.ilo.org/wcmsp5/groups/public/---europe/---ro-geneva/---ilo-ankara/documents/instructionalmaterial/wcms_750207.pdf

MENTAL HEALTH OF HEALTH WORKERS

CARING FOR YOUR MENTAL HEALTH IS EQUALLY IMPORTANT AS CARING FOR YOUR PHYSICAL HEALTH

1. Remember that the virus affects everyone no matter age, gender, ethnicity, economic or social levels, hierarchy, etc.
2. Remember not to call the sick worker as [case*, or sick one*, or the Corona virus family*, etc..]
3. The worker feels under personal pressure because of the increase in stress levels and mixed feelings of human impotency and pain, and the rejection of his family or neighborhood caused by the fear of contagion.

HEALTH WORKERS

¿Es esto para mí?

¿Está cumpliendo una función crítica durante la pandemia de COVID-19? ¿Su trabajo es esencial para la supervivencia de las personas afectadas por COVID-19 o para mantener los sistemas y servicios funcionando en beneficio de todos?

Si es así, ¡esta información es para usted!

Quizás trabaja...

como profesional de la salud: p.ej. médico, enfermera/o, consejero/a; trabajador/a social o en manejo de casos



como personal de primera línea de respuesta: p.ej. agente de la ley, conductor/a de ambulancia, bombero



en el suministro o preparación de alimentos, en una farmacia o en trabajos funerarios, transporte, gobierno, servicios públicos o saneamiento



apoyando a sus seres queridos, amigos, o a personas vulnerables en la comunidad

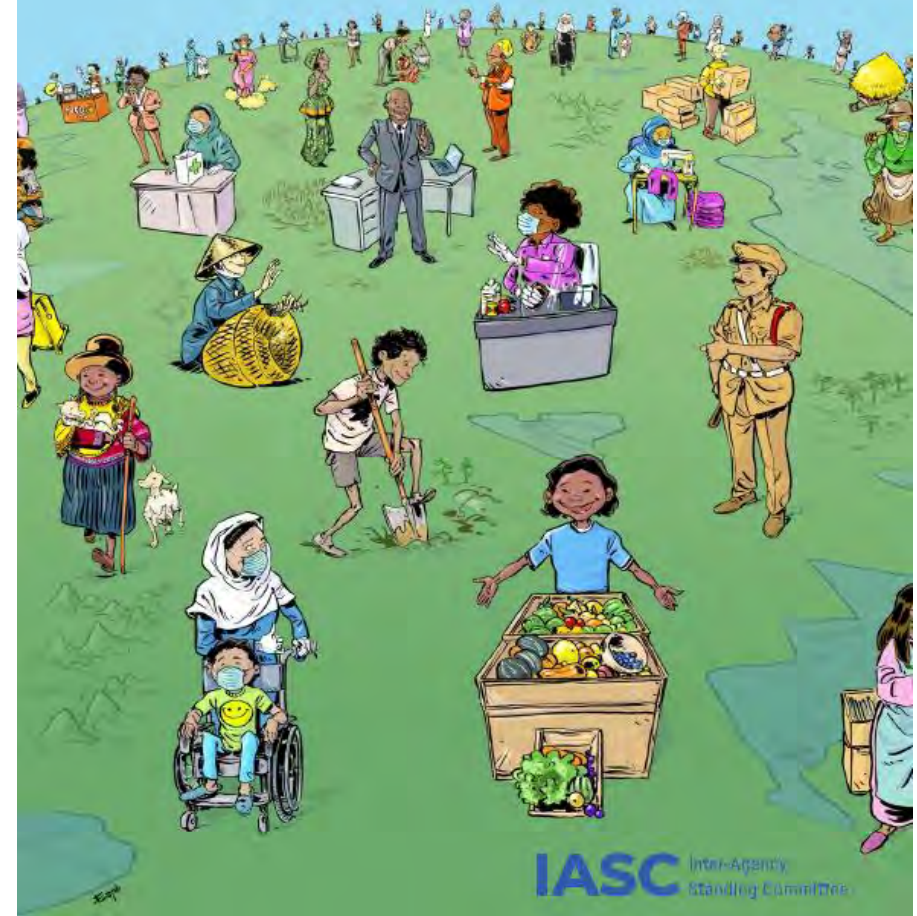


como supervisor o gerente apoyando al personal o al equipo voluntario.



Habilidades Psicosociales Básicas

Guía para personal de Primera Línea de Respuesta a la COVID-19



PAHO



Pan American
Health
Organization



World Health
Organization

REGIONAL OFFICE FOR THE Americas

BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus

All Health workers



1. **Health is at risk** due to hazardous exposure to:
 - Direct exposure to the virus
 - Long working hours
 - Fatigue and burnout risk
 - Psychological stressors
 - Stigma and/or violence
2. **Health and safety conditions at work** should be optimal because they are the first line responders to the epidemic, and contagion should be avoided.
3. **Some conditions imposing additional risk** for healthcare workers are:
 - Late diagnosis of COVID-19 in patients
 - Work in High risk services (ER, ICU)
 - Lack of compliance from infection prevention and control programs, such as: hand wash
 - Lack of containment measures and *biosafety programs* in health institutions, not only of *personal protective programs and equipment (PPE)*.

All Health workers



4. All infected workers at the workplace have the right to receive the benefits of workers' compensation systems and insurances. Thus, recognizing the occupational or work related character of the disease acquired at the workplace, for compensation, rehabilitation and treatment.
5. In some occupations they are often victims of threats and aggressions: physicians, nurses, midwives, care-givers (home, elderly homes) and safety personnel who are providing services for COVID-19 testing, tracking contacts and ensuring social distancing to control the epidemics.
6. The health labor force is overwhelmed due the shortage of health workers to address these type of situations in many countries of the region and the world. This calls to strengthen and reinforcing investments in sustainable health systems, and to strengthen the health workforce with decent working conditions that will enable them to safely do their work.
7. There is an increasing trend of violence raising against health workers and health institutions due to all the above and the social tensions caused by the epidemics.

The ILO sectoral impact , responses and recommendations briefs are now available at: ilo.org/covid19

LA SALUD MENTAL DE LOS TRABAJADORES DE LA SALUD

1. A nivel individual es hacer un llamado a atender su salud mental y su bienestar psicosocial:

- Cuidar su salud y bienestar mental dentro y fuera del trabajo.
- Darse pausas de descanso, alimentación saludable, actividad física (pausas ergonómicas).
- Mantener contacto con su familiares o amigos.
- Buscar estrategias que le hayan ayudado con el estrés.
- Recordar que no hay afán, es una situación que se prevé de una mayor longitud.
- Evitar respuestas inadecuadas como acudir al alcohol u otras drogas.

2. A nivel institucional, también se recomiendan acciones tales como:

- Mantener la salud mental del personal y aliviar los niveles de estrés para la prestación del servicio en condiciones totalmente fuera de lo habitual.
- Tomar conciencia de que es una situación de largo plazo.
- Brindar orientación para prestar apoyo básico y emocional a las personas en el primer nivel de respuesta. [enfermeras, conductores de ambulancia, voluntarios, maestros, líderes comunitarios, médicos] → **TENER DISPONIBLE Y ACCEDER A PRIMERA AYUDA PSICOLOGICA**

4. Las respuestas y actividades en curso de acción

COVID-19



Respuesta de la OPS/OMS. 6 de julio del 2020.
Informe n.º 15

Cursos sobre la COVID-19 disponibles en el Campus Virtual de Salud Pública de la OPS (ESP-POR)

Virus respiratorios emergentes, incluido el virus de la COVID-19: métodos de detección, prevención, respuesta y control
(ESP, POR)

Directrices de planificación operativa para la COVID-19 para el sistema de UNCT y otros asociados (ESP)

Prevención y control de infecciones (PCI) causadas por la COVID-19 (ESP, POR)

ePROTECT Infecciones respiratorias: Salud y seguridad ocupacional (ESP)

Curso de manejo clínico de las infecciones respiratorias agudas graves (IRAG) (ESP)

Diseño de centros para el tratamiento de los síndromes respiratorios agudos graves (SRAG) (POR, ESP)

Materiales técnicos de la OPS/OMS sobre la COVID-19 NUEVOS Y ACTUALIZADOS



Intervenciones recomendadas en salud mental y apoyo psicosocial (SMAPS) durante la pandemia (solo en español)

Publicado: 1 de julio del 2020

En este documento se describen las intervenciones de salud mental y apoyo psicosocial fundamentales que se recomienda desarrollar de manera intersectorial en los países y las comunidades. Para ello se propone utilizar una pirámide de intervenciones para estos servicios creada por el Comité Permanente entre Organismos (IASC), la cual ilustra diferentes niveles de apoyo que varían desde las consideraciones sociales hasta la prestación de servicios especializados para el manejo de afecciones más graves, así como la dimensión probable de la demanda a cada nivel.

Estudio de los Trabajadores de la Salud COVID-19

[COVID-19 HEalth caRe wOrkErs (HEROES) study]



Objetivo general:

Examinar los problemas de salud mental, conductual y social experimentados por los trabajadores de servicios de salud en diferentes contextos de salud (hospitales, centros de atención primaria, residencias, etc.)

PAHO



Pan American
Health
Organization



World Health
Organization

REGIONAL OFFICE FOR THE Americas

BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus

Estudio de los Trabajadores de la Salud COVID-19

[COVID-19 HEalth caRe wOrkErs (HEROES) study]

Diseño del estudio:

Estudio prospectivo de cohorte

Evaluación inicial (línea de base) y evaluaciones de seguimiento a los 3, 6 y 12 meses.

Cuestionario en línea que incluye instrumentos estandarizados y preguntas ad-hoc.

Participantes:

Trabajadores de centros de salud o residenciales que brindan atención a personas con COVID-19 o que pueden brindar servicios en el futuro.

Estudio de los Trabajadores de la Salud COVID-19

[COVID-19 HEalth caRe wOrkErs (HEROES) study]

El instrumento:

- GHQ-12
- PHQ-9
- Preguntas sobre empleo, temores y preocupaciones
- Suicidio
- Estigma y discriminación
- Resiliencia
- Apoyo psicológico/social
- Precondiciones

Países de la Región:

Implementando: CHL, MXC, GTM, ARG;

En proceso: Puerto Rico, VEN, PER, BOL, BRA,

En discusión: COL, DOM, URU, ECU



KEY

● Started or committed to start

■ Expected to join

Estudio de los Trabajadores de la Salud COVID-19

RESULTADOS PRELIMINARES



776
iniciaron

635 (81.8%)
terminaron



comenzaron
19 Mayo



1064
iniciaron

774 (72.7%)
terminaron



comenzaron
19 Mayo

Datos preliminares. Requiere validación y revisión para su difusión.

CONCLUSIONES PRELIMINARES

- 1.** Alto riesgo de infección
- 2.** Alto nivel de percepción de riesgo
 - Cambio de roles
 - Preocupación de infección
 - Elementos de protección personal
 - Estigma/violencia
- 3.** Alto nivel de desconfianza en la respuesta organizada
- 4.** Alto nivel de sintomatología y percepción de necesidad por el cuidado de la salud mental

Datos preliminares. Requiere validación y revisión para su difusión.

“Es solo cuando se garantizan los derechos humanos para todos, cuando todos los pueblos tienen acceso universal a la salud y sus determinantes socioeconómicos, cuando garantizamos la protección social de los vulnerables y cuando nuestro desarrollo económico aborda la erradicación de la pobreza y el logro de los objetivos del desarrollo sostenible, solo entonces el mundo estará preparado para enfrentar futuras pandemias. Pero tenemos que comenzar este trabajo ahora”.
Mayo 19, 2020



Dra. Carissa F. Etienne
Directora OPS



**SAFE HEALTH WORKERS,
SAFE PATIENTS**

**Speak up
for health worker safety!**



SAFE HEALTH WORKERS, SAFE PATIENTS

**Speak up
for health worker safety!**

THANKS! GRACIAS! MERCI! OBRIGADA!



Julietta Rodríguez-Guzmán, MD ESO MScA
Regional Advisor on Workers' Health
Health Promotion and Social Determinants of Health Unit
Family, Health Promotion and Life Course Department
rodriguezj@paho.org / occdis@paho.org



PAHO



Pan American
Health
Organization



World Health
Organization

REGIONAL OFFICE FOR THE Americas

BE AWARE. PREPARE. ACT.

www.paho.org/coronavirus