

Occupational health is a human right

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OCCUPATIONAL HEALTH IS STILL NOT CONSIDERED A HUMAN RIGHT, just like so many other rights that have been neglected over time but have been achieving some advancements and seeking new forms of affirmation under the guise of the term human right.

In a time internationalized by global media, Brazil reflects a reality of governments and societies divided between those who think, fight, and act for human rights and those who deny and try to prevent them. Regarding racism, misogyny, homophobia, and, more acutely at this moment, xenophobia, the conflict of antagonistic narratives is frequent and very present in the media in general. This fact brings social visibility and ‘heated’ the topic, allowing for sharper strategies in the struggle for more significant achievements. This is not the case with the human right to health at work.

In August 2025, the 5th National Conference on Worker’s Health (5th CNSTT) will be held. Its central theme is to consider health at work as a Human Right. It is expected to be a turning point between what has been done so far and what can be done afterward.

At the 8th National Health Conference in 1986, the Brazilian population and workers engaged with the health movement in which the Brazilian Center for Health Studies (Cebes) participated, and it was clear that what existed before needed to change. And it did!

Although much remains to be done with the Unified Health System (SUS), there is now more of what was previously lacking. This is what the 5th CNSTT aims for: to ensure there is more than what currently exists. Furthermore, to ensure there is something that does not currently exist: the right to health in the world of work as a fundamental human right.

Why deny the recognition of human rights to those who lose their health and their lives while working? If there is a utopia in this provision, may it serve to continue striving for a world where health at work is understood as a human right.

This has been Cebes’ role in its journey: to provide utopias. Since its inception in 1976, the health-work relationship has been one of the key ingredients in Cebes’ utopian-revolutionary pilgrimage toward health reform.

Two of the classics in the literature of occupational health bear the mark of Cebes: ‘A saúde nas fábricas’ by Giovanni Berlinguer, published by Cebes-Hucitec in 1983¹; and ‘Ambiente de trabalho – a luta dos trabalhadores pela saúde’ by Ivar Oddone (and others) in 1986². Furthermore, the foreword of the second book was signed by David Capistrano, one of our founders.



In the Brazilian incubator of utopias, these publications, along with many others, contributed to shaping counter-hegemonic thinking against occupational medicine and occupational health, typically privatized and corporate, and influenced the inclusion of the expression ‘worker’s health’ in the Federal Constitution of 1988³, as an assignment of the SUS and, therefore, as a public responsibility of the health sector.

From then on, the many advances have fallen short of the necessary achievements and new forms of affirmation, contrary to what has been accomplished by various movements fighting for human rights.

Brazil has a deep debt to the world of work regarding health. One cannot even think of discussing any public health tragedy in our country without mentioning the suffering, illness, and death at work.

The Occupational Safety and Health Observatory in Brazil, maintained by the Public Ministry of Labor, in conjunction with the International Labor Organization, shows that, from 2012 to 2022, every four hours, a worker died and that, every minute, a Brazilian worker with a formal contract was injured or sick due to work. There are still no official statistics on informal work. Still, the adverse effects on mental health arising from the precariousness of work are known, mainly linked to traffic violence, which is increasingly relevant in the context of new labor relations, such as what happens with app delivery workers, as well as in the coming and going of countless workers to their workplaces.

However, what are human rights, and how does our diverse society understand them? The definition of this simple yet complex term raises questions about what is relevant to humanity in its struggle for dignity at a given moment. Considering our current stage of civilization and our aspirations, the rights established in the current canon are not sufficient to assert that it is disgraceful for people to become ill and die at work and that very little or almost nothing is done in response to these crimes.

With this spirit, Cebes proposes a Free Conference on Workers’ Health as a Human Right, preparatory for the 5th CNSTT, an opportune recovery, and a reunion with their transformative aspirations.

In addition to Human Rights as the central theme, the 5th CNSTT will discuss three guiding themes: 1) National Policy on Health of Workers; 2) New work relationships and health of workers; and 3) Popular participation in workers’ health for Social Control.

The Free Conference of Cebes emphasizes the understanding that the three guiding axes must be intertwined with the main theme – occupational health as a human right. In other words, the national policy that encompasses new labor relations, supported by popular participation, should seek a transformation based on workers’ health as a human right.

Following this line, based on some texts discussing the topic, the Free Conference of Cebes proposes four questions for debate, presented below.

1 – Should human rights govern health in the workplace?

Disease and death in the workplace, when preventable and not prevented by public health, constitute injustice, based on the law that governs them, severely violating the principle of equity. Furthermore, the law that regulates occupational health today (labor, social security, sanitation, environmental, civil, criminal, economic, and others) is a law that does not achieve justice – the ultimate goal in the Democratic State of Law: a law that delivers justice.

Thus, the Health-Work-Law Center (NSTD) of Cebes claims that the occurrence of more than 2 thousand deaths and half a million annual illnesses of workers be raised to the level of a crime against humanity according to Decree No. 4,388, of September 25, 2002⁴, and that, from then on, concrete measures be taken to protect workers killed and mutilated by work.

2 – Does conceiving health at work as a human right, in essence, allow for a counter-hegemonic symbolic representation of the issue?

The relationship between health and work expresses the capital-labor relationship, objectively built on the foundations of the economic exploitation of those who buy the labor force over those who sell it. The historical consequences that persist in the capital-labor negotiation perpetuate economic exploitation in the form of legal and political domination: tripartism, blaming workers for their illness and death, biased arbitrations and judicial decisions, predatory lawyering, oppressive management of labor, corporate irresponsibility, among others.

Now, if the illness and death of workers express asymmetrical relations, it is necessary to expand the strategies of defense and struggle against capital. Evoking the principle of equity in the fight against injustices and crimes against humanity, the NSTD of Cebes proposes that the Brazilian State expand this fundamental principle beyond the SUS and assume its role in the defense of workers.

3 – Should labor, associative, popular, family, and cooperative movements relate directly to work associated with identity social movements in the fight for health at work as a human right? If so, in what way?

The theme of intersectionality among identity movements lacks the inclusion of health in the workplace as a human right. Occurrences of human rights violations in the workplace, when acknowledged, are primarily seen as identity

issues and are thus claimed (racism, misogyny, homophobia, ableism, ageism, etc.). In the absence of identity politics, transgressions are absorbed by the organization of work under a different socio-institutional-legal order, and therefore, they are overlooked and perpetuated.

Thus, the NSTD of Cebes proposes, regarding the health of working individuals, that the spaces for social control and participation outlined in Law No. 8.142/90 (Intersectoral Commission on Workers' Health – CISTT)⁵ ensure the involvement of identity movements, so that the dialogue among these issues can be broadened.

4 – If health in the workplace is to be considered a human right, what should be done?

Facing barbarism in the world of work means joining those who resist, in both national and international contexts, against the destruction of human rights across various realms of prejudice, discrimination, stigma, offense, slander, attacks on life, exploitation, oppression, etc. Today, the world of work is a factory of suffering, exclusion, disability, and destruction, including of the environment, as well as familial and social relationships.

These are some of the challenges that arise in today's world. To face them, it is essential to update and strengthen the National Policy for Occupational Health and Safety (PNSTT) to fulfill its created task. That is, it should promote the integration of occupational health across the entire SUS, from primary care to high-complexity services, and address the biopsychosocial dimensions of the effects of work, not just diseases and accidents. In this way, the possibilities for SUS to be a space that contributes to realizing the human right to health at work are increased.

Beyond the PNSTT, because it is insufficient for the purpose advocated here, the logic of

worker health as a human right must be guided by other instances involving all State and civil society sectors. In the governmental sphere, this means integrating departments, beyond the Ministry of Health, but without diminishing its structuring role.

The guarantee of this right spans popular participation in the form of the working class taking the lead. Since it is the working class that directly suffers the effects of exploitation and oppression and, therefore, has their human rights violated, the leadership of this debate/struggle cannot be delegated to any other party.

In the face of the suffering of those who came before us or who today are victims of these injustices, united with those hardworking individuals yet to come, the NSTD of Cebes

calls upon all of society to debate and fight so that the health of workers can be elevated to the level of human rights.

Collaborators

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