

National Occupational Safety

and Health Profile of Finland



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Abstract

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The National Occupational Safety and Health (OSH) Profile of Finland has been prepared at the request of the International Labour Office (ILO). The Finnish Ministry of Social Affairs and Health requested the Finnish Institute of Occupational Health to prepare this document.

The national profile aims to provide information about the occupational safety and health legislation, policy review mechanisms, infrastructures, collaborative structures, activities of various partners in occupational safety and health, human resources, actors, statistics and indicators of OSH, general demographic data, problems and challenges, as well as the needs for future development in the specific country. This information also serves as a basis for the updating and further development of the national policy and programme on occupational safety and health of the country.

The structure of the Report follows the outline given by the ILO as closely as possible. Some additional information has, however, been included on points which may be of interest to the reader.

The tripartite mechanism vital to OSH has been implemented through a questionnaire survey covering all stakeholders in OSH. Comments on the document by the most central OSH stakeholders were also received and integrated into the profile document when discussing the report in the Advisory Committee on Occupational Safety and Health.

This document is abridged from a larger analytical report which will be available on the web at: www.stm.fi/english.

Key words: accident statistics, collaboration, occupational health services, occupational safety and health, social partners, statistics on occupational diseases

Tiivistelmä

National Occupational Safety and Health Profile of Finland. Helsinki 2006. 79 s. (Sosiaali- ja terveysministeriön julkaisuja, ISSN 1236-2050, 2006:8)
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Suomen kansallista työsuojelu- ja työterveysprofiilia koskeva julkaisu valmisteltiin Kansainvälisen työjärjestön (ILO) pyynnöstä. Sosiaali- ja terveysministeriö antoi raportin laadinnan Työterveyslaitoksen tehtäväksi.

Kansallisen profiilin tavoite on tarjota tietoa työsuojelua ja työterveyttä koskevasta lainsäädännöstä, kansallisen työsuojelustrategian valmistelu- ja seurantamekanismeista, yhteistyön rakenteista, eri tahojen toiminnasta työterveyden ja työsuojelun alalla, työsuojelua ja työterveyttä koskevista tilastoista ja indikaattoreista, yleisistä maata koskevista demografisista ja taloudellisista tekijöistä, ongelmista ja haasteista sekä tulevan toiminnan kehittämistarpeista. Kansallinen työsuojelu- ja työterveysprofiili palvelee myös tietopohjana ajantasaisesti ja kehitettäessä kansallista työsuojelustrategiaa ja -ohjelmaa.

Raportin rakenne seuraa mahdollisimman tarkoin ILO:n antamaa sisällysluetteloa. Mukaan on sisällytetty joitakin lukijan kannalta kiinnostavia lisätietoja.

Työsuojelun ja työterveyden näkökulmasta keskeinen kolmikantamenettely toteutettiin tämän raportin laadinnassa kahdella tavalla. Kaikille keskeisille työsuojelun ja työterveyden toimijoille lähetettiin kysely, johon kaikki 16 tahoa vastasivat. Keskeiset työelämän toimijat antoivat myös kommenttinsa raporttiin, kun se oli keskusteltavana Työsuojeluneuvottelukunnan kokouksessa.

Tämä raportti on tiivistelmä laajemmasta analyysistä, joka on käytettävissä osoitteessa www.stm.fi/english.

Asiasanat: ammattitautirekisterit, työmarkkinajärjestöt, työsuojelu, työtapaturmat, työterveys, työterveyshuolto, yhteistyö

Sammandrag

National Occupational Safety and Health Profile of Finland. Helsinki 2006. 79 s. (Social- och hälsovårdsministeriets publikationer, ISSN 1236-2050, 2006:8)
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Den nationella arbetarskydds- och arbetshälsoprofilen i Finland förbereddes på begäran av den Internationella arbetsorganisationen (ILO). Arbetshälsoinstitutet framställde rapporten på uppdrag av Social- och hälsovårdsministeriet.

Avsikten med den nationella profilen är att erbjuda information om arbetarskyddslagstiftningen, förberednings- och uppföljningsmekanismerna inom den nationella arbetarskyddsstrategin, infrastrukturerna, samarbetsstrukturerna, de olika organisationernas aktiviteter inom arbetarskyddet och företagshälsovården, expertresurser, statistik och indikatorer, de generella demografiska och ekonomiska faktorerna i landet, de viktigaste problemen och utmaningarna samt utvecklingsbehovet av de framtida aktiviteterna. Den nationella arbetarskydds- och arbetshälsoprofilen tjänar även som grund vid uppdateringen och vidareutvecklingen av den nationella arbetarskyddspolicyn och -strategin samt det nationella programmet inom området.

Rapportens uppbyggnad följer så noggrant som möjligt innehållsförteckningen uppgjord av ILO. Diverse tilläggsinformation som är till intresse för läsaren har inkluderats.

Trepartsmodellen, som är central när man behandlar arbetarskyddet och företagshälsovården, förverkligades på två sätt vid framställningen av rapporten. Först besvarade alla 16 centrala organisationer inom arbetslivsområdet ett frågeformulär och dessutom fick de mest centrala organisationerna kommentera rapporten, då den diskuterades vid delegationen för arbetarskyddsärenden.

Den här rapporten är en förkortning av den mera ingående analysen tillgänglig på adressen: www.stm.fi/english.

Nyckelord: arbetarskydd, arbetshälsa, arbetsmarknadsorganisationer, arbetsolycksfallsstatistik, företagshälsovård, samarbete, yrkessjukdomstatistik

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Abbreviations

AC	Advisory Committee
AKAVA	Confederation of Unions for Academic Professionals in Finland
BOHS	Basic Occupational Health Services
CATI	Computer-aided telephone interview
CC	Collaborating Centre
CEN	The European Committee for Standardization
CENELEC	European Committee for Electrotechnical Standardization
CICAD	Concise International Chemical Assessment Documents
CIS	Information Service Centre of ILO
CSR	Corporate Social Responsibility
DC	Developing countries
DHS	Department of Health Services
DOSH	Department for Occupational Safety and Health
EC	European Commission
EHC	Environmental Health Criteria Document
EK	Confederation of Finnish Industries
ETSI	European Telecommunications Standards Institute
ETUC	European Trade Union Confederation
EU	European Union
EU-PHARE	Pre-accession instrument financed by the European Union
FAII	Federation of Accident Insurance Institutions
FEMDI	Finnish Employers' Management Development Institute
FIOH	Finnish Institute of Occupational Health
GA	Government agency
GDP	Gross domestic product
HPV	High production volume
HTP	Concentrations known to be hazardous
HUCH	Helsinki University Central Hospital
HUS	Hospital District of Helsinki and Uusimaa
IARC	International Agency for Research on Cancer
ICFTU	International Confederation of Free Trade Unions
ICNIRP	International Commission on Non-Ionizing Radiation Protection
ICOH	International Commission on Occupational Health
ICSC	International Chemical Safety Cards
IEA	International Ergonomics Association
ILC	International Labour Conference
ILO	International Labour Organization; International Labour Office
IOE	International Organization of Employers
IOHA	International Occupational Hygiene Association
IPCS	International Programme on Chemical Safety
ISO	International Standardization Organization
MTK	The Central Union of Agricultural Producers and Forest Owners
MWA	Maintenance of Work Ability
NGO	Non-governmental organization
NIVA	Nordic Institute for Advanced Training in Occupational Health and Safety
NPHI	National Public Health Institute
OECD	Organization for Economic Co-operation and Development
OHP	Occupational health physician

OHS	Occupational health services
OSH	Occupational safety and health
OSH-MS	Occupational safety and health management systems
PD	Professional development
PISA	Programme for International Students' Assessment
PPE	Personal protective equipment
R&D	Research and development
SAK	Central Organization of Finnish Trade Unions
SCOEL	Scientific Committee on Occupational Exposure Limits
SFS	The Finnish Standards Association
SLIC	Senior Labour Inspectors Committee
SME	Small and medium-sized enterprises
SSI	Social Security Institution
STAKES	National Research and Development Centre for Welfare and Health
STTK	The Finnish Confederation of Salaried Employees
STTV	National Product Control Agency for Welfare and Health
STUK	Radiation and Nuclear Safety Authority Finland
SWOT	Strengths-weaknesses-opportunities-threats
TUKES	Safety Technology Authority
TYKES	The Finnish Workplace Development Programme
UN	United Nations
UNDP	United Nations Development Programme
UNEP	United Nations Environment Programme
UNICE	Union des Industries des pays de la Communauté Européenne
VDT	Video display terminal
VETO	National Programme for an Attractive Working Life
VTT	State Technical Research Centre
WEF	The Finnish Work Environment Fund
WHO	World Health Organization
WHO/EURO	World Health Organization, Regional Office for Europe
WPF	Work Pension Funds
WTO	World Trade Organization

Foreword

The National Occupational Safety and Health (OSH) Profile of Finland has been prepared at the request of the International Labour Office (ILO). The Finnish Ministry of Social Affairs and Health asked the Finnish Institute of Occupational Health to prepare this document.

The Finnish Institute made a contract with Professor Jorma Rantanen, President of the International Commission on Occupational Health, concerning the preparation of the profile. He is the main author of the document. The document has been prepared by a working group led by Professor Jorma Rantanen, Ms. Suvi Lehtinen being the representative of the Finnish Institute of Occupational Health, and Mr. Lars-Mikael Bjurström the representative of the Ministry of Social Affairs and Health. Mr. Bjurström as well as Mr. Hannu Alén, Mr. Antti Posio and Mr. Arto Teronen of the Ministry of Social Affairs and Health, Department for Occupational Safety and Health, have contributed to the chapters on legislation, national policy review mechanisms, implementation of OSH management systems and emergency preparedness in major catastrophes. Ms. Suvi Lehtinen of the Finnish Institute of Occupational Health has contributed to the chapters dealing with information dissemination and international activities. She has also edited the entire document. The English-language linguistic editing was done by Ms. Terttu Kaustia.

The structure of the Report follows, as much as possible, the outline given by the ILO. Some additional information has, however, been included on points which may be of interest to the reader. To improve user-friendliness, we have included graphs, tables and figures in several chapters. We hope they will help to orientate the reader to the Finnish occupational safety and health system.

The tripartite mechanism vital to OSH has been implemented also through a questionnaire survey covering all stakeholders in OSH. The results of the survey are reported in Chapter 10. We would like to thank all the sixteen organizations which contributed to the preparation of this report by replying to the questionnaire. Comments on the document by all OSH stakeholders were received in the meeting of the Advisory Committee on Occupational Safety and Health in February 2006.

Also the constructive comments and consultations of Mr. Mikko Hurmalainen, Dr. Erkki Yrjänheikki and Dr. Asko Aalto, all from the Ministry of Social Affairs and Health, are gratefully acknowledged.

The authors hope that this document offers a basis for others to monitor and better understand the status and characteristics of occupational safety and health in Finland. We also hope that this document will create a basis for further developing work life both in Finland and worldwide.

The longer version of the report will be available at: www.stm.fi/english

Helsinki, 8 March 2006

The Authors

1

Occupational safety and health legislative framework

1.1 Provisions of the Constitution

According to the Constitution of Finland (731/1999), the public authorities shall assume responsibility for the protection of the labour force. The Finnish constitutional law has included a corresponding provision since the beginning of our independence (1917). The original provision on the protection of labour force has played a central role in the development of labour legislation. The state shall always ensure that the working conditions are safe and healthy.

1.2 Major laws on occupational safety and health (OSH)

Occupational Safety and Health Act (738/2002)

The Occupational Safety and Health Act (most recent amendment in 2004) is a general law applying to all work, with only a few exceptions. The Act includes the basic provisions and the general objectives concerning occupational safety and health. It lays down the minimum level of safety and health at work. The aim of the Act is to improve the work environment and working conditions in order to safeguard and maintain the employees' work ability, and to prevent occupational accidents, diseases, and other physical or mental health problems related to work or the work environment. The employer shall systematically and on his/her own initiative identify the hazards and risk factors related to the work or working conditions, eliminate or remedy them, and assess the effects of the remaining risks to the employees' health and safety. The Act describes the employer's general duties, procedures related to work and working conditions, provisions on special work situations in shared workplaces, and on the duties of other persons having an impact on safety at work. The Act emphasizes the cooperation between the employer and employees. However, the cooperation does not diminish or abolish the employer's responsibility to carry out any measures necessary for the safety and health of the employees.

Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health (44/2006)

The Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health (44/2006) contains provisions on the enforcement procedure of statutes that shall be enforced by the occupational safety and health authorities, and provisions on cooperation in matters concerning safety and health at work. In fact, the Occupational Safety and Health Authorities are responsible for supervising 25 separate Acts and more than 80 Government or Ministry Decrees.

The objective of the procedural provisions is to ensure that the employer or some other person observes that the minimum requirements laid down by the Act are enforced. The Act on the enforcement of occupational safety and health includes provisions on carrying out in-

spections, on the rights and responsibilities of authorities, confidentiality and impartiality of action, and on coercive means and other sanctions that can be used. Inspections shall be carried out as often and as efficiently as necessary for enforcement purposes. The starting point of the activities is to give guidance and instructions. When necessary, an obligating decision can be given, and, e.g. a conditionally imposed fine can be used as a sanction. Dangerous work or activities can be prohibited. Violation of statutes can be reported to the public prosecutor. The Occupational Safety and Health Authority takes part in the settlement and trial of criminal cases.

The Act also stipulates the principles, rights and duties of various partners who collaborate in safety and health activities at the workplace, including the Occupational Safety and Health Committee, Safety Chief of the employer, and safety representatives of the workers.

The Act also obligates physicians who diagnose occupational and work-related diseases to report them to the OSH inspection.

The new Act entered into force on 1.2.2006. The revised Act emphasizes particularly the strengthening and effectiveness of enforcement, the advisory role of inspectors, improved collaboration between employers and workers, and adjustment of inspection and other OSH measures to the new structures and trends in work life.

Act on Occupational Health Services (1383/2001)

The Act on Occupational Health Services (OHS) originates from the year 1978 (743/1978), and was revised in 2001 (1383/2001). The purpose of the Act is to ensure a safe and healthy work environment, prevention of work-related diseases and accidents, and promotion of the work ability and functional capacity of employees, as well as the provision of preventive occupational health services for the employees. Each employer is obligated to organize services for his/her employees. The organization and content of the services needs to be based on a company-wide plan, and in the case of external service providers, on a formal contract between the employer and the service provider. If necessary, employers may also organize curative services for medical treatment of diseases, general preventive health services and other health services. Workers or their representatives have the right to participate in the planning of OHS for the workplace.

The content of occupational health services is primarily preventive. Curative activities are, however, also permitted as a voluntary activity of the OHS. About 80% of the occupational health services for enterprises comprise also curative services.

Municipal health care centres are responsible for providing occupational health services to employers who request them. Employers may organize occupational health services themselves or through private service providers. The compliance of the employer is inspected by the OSH Authorities, whereas the health content, competence and activities of the health personnel are supervised by health authorities. The Social Insurance Institution reimburses employers 50 percent of the costs of arranging occupational health services and 60 percent of the expenses of a workplace survey.

Legislation on occupational accidents and occupational diseases

Act on Accident Insurance (608/1948; 681/2005)

The employer is responsible for insuring his/her employees against occupational accidents and occupational diseases as stipulated by the Act on Accident Insurance (608/1948). The Act has been amended several times, most recently in 2005 (681/2005). Corresponding legislation has been passed for self-employed farmers (1026/1981). Other self-employed persons can take the insurance on a voluntary basis. More than 2 million people are covered by the insurance. (For more details, see Chapter 5.1.5).

Act on Occupational Diseases (1343/1988, 1315/2002)

The first provisions on occupational diseases were passed in 1926 when Finland ratified the ILO Convention No. 18 on Workmen's Compensation (Occupational Diseases) and a Governmental Ordinance was given. Since then several amendments have been made which systematically have expanded the concept of an occupational disease and the coverage of the entitlement to compensation. The current act originates from the year 1988 (1343/1988) and the last amendment comes from the year 2002 (1315/2002). The related Government Ordinance (1347/1988) was amended most recently in 2003 (252/2003).

The Act defines an occupational disease as a disease caused by a physical, chemical or biological agent at work. The occupational exposure needs to be the main cause of the disease and the probability of association between the exposure and outcome needs to be proven. In principle, any disease or adverse health outcome meeting the above criteria is entitled to compensation, provided the disease is contracted as a consequence of exposure at work under the employment contract with a private employer, in public services or public offices. As the Act on Occupational Diseases defines the concept and criteria for the disease, the compensation is made according to the accident insurance legislation. Also the agricultural entrepreneurs are entitled to compensation on the basis of their specific accident insurance legislation.

1.3 Laws and regulations related to OSH

Employment Contracts Act (55/2001)

The Employment Contracts Act (55/2001) applies to contracts in which an employee personally agrees to perform work for an employer under the employer's direction and supervision. The Act contains provisions on the mutual duties between the parties. However, any agreement reducing the right and benefits due to employees under the Act shall be void. The main duty of the employee is to carry out work for the employer in return for pay. The employer shall give the employee work and pay a salary or wages. The Employment Contracts Act defines the essential conditions of an employment contract and the terms for terminating an employment contract. In addition to the main duties, the Act also includes provisions on some other duties of the parties and how they shall carry out the duties. The Act stipulates the minimum requirements for the contract and protects the employee's right to stay in the employment. It also includes special provisions on maternity protection and on elected representatives of employees, as well as provisions on the employees' right to equal treatment. Ensuring occupational safety and health is also a contractual duty of the employer.

Working Hours Act (605/1996)

The Working Hours Act (most recent amendment in 2005) is a general act regulating working hours. Seafarers have their own working hours act. There are special provisions also on young workers. Otherwise the Act on Working Hours covers almost all work carried out under the employer's direction and supervision. It applies both to work performed under an employment contract and to work within a civil servant's or municipal officeholder's service contract. The Act includes a general definition of the time included in the working hours and it defines additional work and overtime. It also defines, among other things, the limits for regular working hours, cases when it is allowed to exceed the regular working hours, limits for night work, rest periods, ways to follow up the working time, and how to pursue claims on the basis of working time. A general provision on the starting point situation states that the regular working hours are not to exceed 8 hours a day and 40 hours a week. The Act aims to regulate working hours in a flexible way, especially as concerns the placing of the regular working time.

Annual Holidays Act (272/1973; 162/2005)

The Annual Holidays Act (most recent amendment in 2005) regulates the employees' right to an annual paid holiday, or to corresponding holiday compensation. The Annual Holidays Act is based on the idea of earned holidays. The employees usually earn two weekdays for each full holiday credit month, or two and a half days in an employment relationship that has lasted for over a year. There are special minimum provisions for part-time employees. The Act also contains provisions on the giving of annual holidays, payment of annual holiday pay and holiday compensation, saved leave, and keeping a record on annual holidays. No exceptions to the provisions of the Act may be made to the detriment of the employee. Some provisions of the Act can be agreed on differently through national collective agreements. Every employee working a whole year has the right to at least four weeks' annual paid holiday.

Young Workers' Act (998/1993)

The Young Workers' Act (most recent amendment in 2004) applies to work done by persons under 18 years of age. The law contains provisions on minimum age for admitting to work (15 years), and on the working time limits in an employment contract. The occupational safety and health requirements apply to work done by apprentices, and other work covered by the Occupational Safety and Health Act. There are provisions on, for example, medical examinations and on work hazardous to young workers. Such work is either totally forbidden, or allowed on certain conditions only. The Act and the Decrees are in compliance with the ILO Conventions concerned, as well as the EU Young Workers Directive (94/33/EC).

Other important OSH legislations

The OSH Authorities enforce and supervise numerous individual laws, including 13 Acts on OSH and 19 Acts supervised partially or jointly with another authority, such as equity legislation, legislation on the protection of privacy at work, act on the control of tobacco-related health hazards at the workplace, and several others. There are a number of laws enforced by the Ministry of Labour mainly covering the economic and social aspects of work. A part of the relevant legislation is supervised jointly by the Ministry of Social Affairs and Health and the Ministry of Labour. The OSH Authorities also supervise 80 lower-level regulations, Government Ordinances, Government Resolutions, as well as Ministries' Ordinances and Resolutions.

2

National policy review mechanisms

Government Programme

For each parliamentary tenure, the parties negotiating on participation in the government agree upon the Government Programme, which defines the general framework and objectives for the Government for the whole four-year parliamentary tenure. The current Prime Minister Vanhanen's Government Programme for the tenure 2003–2007 includes a special Chapter No. 5 on work life:

A high standard of labour force skills, well-being at work and functioning labour market relations are important national success factors. The Government will respect basic rights relating to work life, developing it in line with the established tripartite principle and basing its action on sound cooperation between the labour market organizations in Finland and in the European Union. The Finnish work life and labour market model is characterized by the establishment of basic minimum conditions in collective agreements which are universally binding.

Government decisions on income security and social insurance legislation related to work life will be worked out in cooperation with the social partners. The Government will implement the measures that central government is already committed to in collective agreements with the labour market organizations and solutions regarding unemployment security and pensions.

It is the Government's aim to ensure that all citizens can participate fully in work life, contribute to longer working careers, facilitate the coordination of family life and work, promote equality and make work more attractive. The Government supports actions to help immigrants, people with disabilities and those who are difficult to employ. Workplace development programmes will be continued and expanded, with special attention to small workplaces.

The Government will focus development resources particularly on promoting equality, the coordination of work and family life, psychological occupational safety and health, well-being at work and more effective monitoring of working hours, the development of good management practices and general expertise, workplace health promotion work and the special needs of the ageing workforce.

Preparations must be made during the Government's term for the eventual retirement of the baby-boom generation. The competitiveness of workplaces in the public sector must be ensured. The Government will take special measures to make recurrent fixed-term jobs permanent, particularly in the public sector. Interaction between different generations in work life should be encouraged so as to ensure that the knowledge and skills that older people have gathered during their long work experience are passed on to their younger colleagues. The Government supports opportunities for lifelong learning in the workplace.

The Government will monitor enforcement of the employment legislation, and ensure that adequate resources are available, especially for occupational safety and health. Monitoring of compliance with the Working Hours Act will be intensified. In occupational safety and health, the specific targets for development are well-being at work, and psychological well-being, and prevention of violence in the workplace.

The Government will work with the labour market organizations to prepare the way for working time arrangements which take the needs of families and the best interests of children into better account. Opportunities for working shorter hours will be gradually introduced for the parents of children under the age of 10. Partial care leave and partial home care allowance will be developed to provide working parents with a real alternative. The expansion of partial care leave will be agreed on a tripartite basis and rapidly put into practice. Family policy leaves will be further developed and a more equal division of such leaves between both parents will be encouraged.

The Act on Cooperation within Undertakings will be completely reformed. In order to create opportunities for real negotiation and actual participation, the aim of the reform will be to bring more issues involving workplace development and operations and work organization within the sphere of cooperation than is the case at present. Issues involving the organization of work will not, however, affect the right to supervise work. Whether the municipal sector could be brought within the sphere of the Act will be explored. The legislation on data protection in work life will be supplemented based on the work of the working group on alcohol and drug testing and technical surveillance, on the principle that employees' personal data and privacy must be protected. The functioning of personnel funds will be developed.

A tripartite study will be made of the feasibility of making the switch-leave system permanent, of improving its potential for use and of ensuring that remuneration is adequate.

The Government will launch an extensive tripartite project aimed at preventing the grey economy, eliminating illegal employment contract terms and ensuring equal competitive positions for companies, taking international experience into account. A tripartite project will also study the principles relating to the situation of employees in situations where companies and public bodies arrange competitive tenders.

The Government will also launch a tripartite study of the situation of employees when a company is about to move a production unit or its entire production abroad.

Supervision of employees' contract terms will be stepped up, including foreign labour and employees in foreign postings, and adequate resources will be allocated. The possibility of setting up a separate unit for this purpose as proposed in the collective bargaining will be explored. The unanimous proposals of the tripartite working group on supervision of foreign workers' contract terms will be implemented. The powers of officials and labour market organizations to intervene in the case of problems will be more clearly defined and reinforced, and the right to information and supervisory right of shop stewards concerning different personnel groups will be increased.

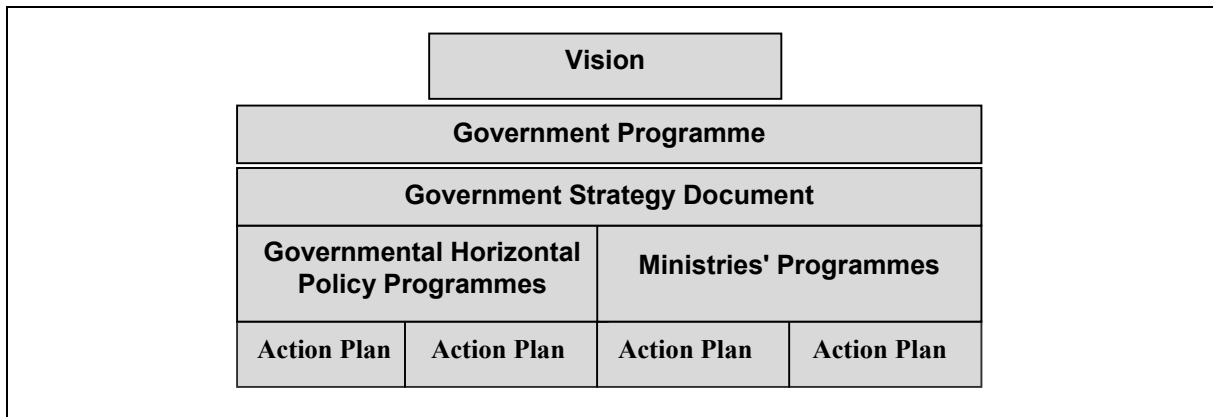


Figure 2.1 Government's strategic tools (J. Rantanen 2006)

Special action programmes have been launched by the relevant Ministries for the implementation of the special objectives of the Government Programme.

- The VETO Programme 2003–2007: National programme for an Attractive Working Life (Ministry of Social Affairs and Health)
- Government Employment Strategy and Employment Policy Programme (including elements for lengthening working careers) (Ministry of Labour)
- Health 2015: Public Health Programme (Ministry of Social Affairs and Health)
- Occupational Accident Prevention Programme 2001–2005, 'Prioritizing occupational safety' (Ministry of Social Affairs and Health)
- National Programme on Chemical Safety (Ministry of the Environment)
- 'Noste' Programme 2003–2007 for improving the competence and work capacity of ageing workers (Ministry of Education)
- National Programme for Aging Workers 1998–2002 (Ministry of Social Affairs and Health)
- The Finnish Workplace Development Programmes TYKE 1996–2003 and TYKES 2004–2009 (Ministry of Labour)
- Well-being at Work Programme 2000–2003 (Ministry of Labour)
- National Information Society Strategy 1998– (The Finnish National Fund for Research and Development, Sitra)
- Tobacco Control Programme (Ministry of Social Affairs and Health).

Special follow-up systems are organized for the Programmes and they are all externally evaluated after their completion.

Roles of the Ministry of Social Affairs and Health and the Ministry of Labour in OSH

Ministry of Social Affairs and Health

The constitution safeguards basic economic, social and educational rights for all people living in Finland. The realization of these basic rights is guaranteed by the state and the municipal authorities. From the standpoint of social policy, the right to comprehensive social protection is one of the key fundamental rights. Social protection consists of preventive social and health policy, social welfare and health services, as well as sickness and unemployment insurance, and old age benefits and other benefits.

The aim of social protection is to safeguard the working and living environment of the population, to ensure good standards of health and work ability, and sufficient income, services and social security at different stages of life. Practically every household at some point receives some form of income transfer or uses social and health services. The Finnish social protection system is structured in line with the principles of the Nordic welfare model which emphasizes the principles of universality and equity.

The Ministry of Social Affairs and Health is responsible for the development of social and health services and for the improvement of the living conditions of the population by means of preventive social and health policies. The Ministry supervises the activities of the Occupational Safety and Health Authorities and drafts occupational safety and occupational health service legislation and oversees their implementation, coordinates research and international collaboration in the field of social protection in general, and in occupational safety and health.

The Department for Occupational Safety and Health in the Ministry of Social Affairs and Health is responsible for the development of national occupational safety and health policies, the coordination of occupational safety and health research, and the effective application of research information. The Occupational Safety and Health Administration seeks to influence the operations of working communities and the work environment in order to improve the employees' safety, health and working conditions, as well as the productivity of work. The OSH Administration works in close cooperation with the labour market organizations, employers and trade unions. Besides the traditional inspection and monitoring services, the OSH Administration focuses on the development of multi-faceted instruction, guidance and information services. The European context and international cooperation require that the administration must assume new levels and standpoints in its work. The Finnish Institute of Occupational Health, the Centre for Occupational Safety, and the Work Environment Fund are also involved in the work of promoting occupational safety and health.

The Department of Health in the Ministry of Social Affairs and Health is responsible for the development of occupational health service legislation. It also draws up the national strategies for occupational health services.

The Department of Social Insurance in the Ministry of Social Affairs and Health drafts and develops legislation for insurance coverage of occupational accidents and diseases, and workmen's compensation. The national social security legislation is implemented by the National Social Security Institution and the Work Pension Institutes, and the accident insurance legislation by the Accident Insurance Institutions.

Ministry of Labour

The Ministry of Labour promotes and facilitates the functions of labour markets and integration of migrants into the Finnish labour market. The Ministry of Labour drafts, in tripartite collaboration, the most central labour legislation other than that on safety and health. The Policy Department drafts the policies and strategies. The Department of Policy Implementation is responsible for steering the policy implementation with the help of the regional employment and economic development centres, and for guiding the OSH-related legislations through the OSH Inspection Districts.

The Ministry's Labour Council issues statements on legislation concerning working hours, annual leaves, young workers, and occupational safety and health. The enforcement of the

legislation related to occupational safety and health, working hours, annual leaves, young workers, etc. is carried out by the Occupational Safety and Health Districts of the OSH Administration under the Ministry of Social Affairs and Health.

The Ministry of Labour also organizes the activities of the tripartite national ILO Committee. The Ministry coordinates the national tripartite Programmes for Development of Work Life aiming at improving the quality of work life and productivity.

Occupational Safety and Health Strategy

The Ministry of Social Affairs and Health ratified the **Occupational Safety and Health (OSH) Strategy** in April 1998 (English, Publications 1999:11). The document was prepared in co-operation with major interest groups and social partners. It defines the objectives for the action in OSH, focal areas and development principles for the years to come.

The strategy emphasizes that occupational safety and health shall first and foremost be carried out by the workplaces on their own initiative. The OSH district administration develops its own supervisory activities on the basis of the needs of work life and supervision will be targeted as efficiently as possible. The effects of the productivity of a good work environment, as well as utilization of economic thinking are emphasized. When ensuring the efficiency of its activities the administration maintains and develops a co-operation network with other parties contributing to occupational safety and health. The Ministry monitors the implementation of the strategy together with the Advisory Committee on Occupational Safety and Health.

The strategic priorities

The substantive strategic priorities (development targets) are stipulated by the Strategy as the following:

- Maintenance and promotion of the work ability and functional capacity of the workers
- Prevention of occupational accidents and diseases
- Prevention of musculoskeletal diseases
- Mental well-being at work
- Promotion of worker's capacities to cope with work
- Control over one's own work.

The aims and the principles of the Strategy are described under the following headings:

- Based on the modern concept of occupational safety and health and the European environment
- Emphasizing holistic, systematic and spontaneous action at workplaces
- Promoting a modern safety culture and safety management
- Strengthening client orientation
- Developing and strengthening OSH district administration
- Focusing the authorities' supervision according to the desired effects
- Developing more diverse supervision methods
- Promoting cooperation between the present statutory systems at workplaces
- Providing support from the Ministry in the implementation of the Strategy
- Ensuring research and development support for implementing the Strategy
- Strengthening the Ministry's internal synergy.

The Strategy is implemented in close collaboration with the social partners, research institutions and professional associations. Periodic follow-up and evaluation has been organized triennially, and the necessary amendments have been made accordingly.

The Strategy is at present being revised. The Strategy is implemented in practice through National Action Programmes, which together constitute a National Policy and Programme for OSH (Figure 2.2). The Finnish OSH Programme is not a single document but consists of the Strategy and several national programmes. The scoring indicated by pluses reflects the intensity of input to various OSH Strategy objectives in different National Programmes.

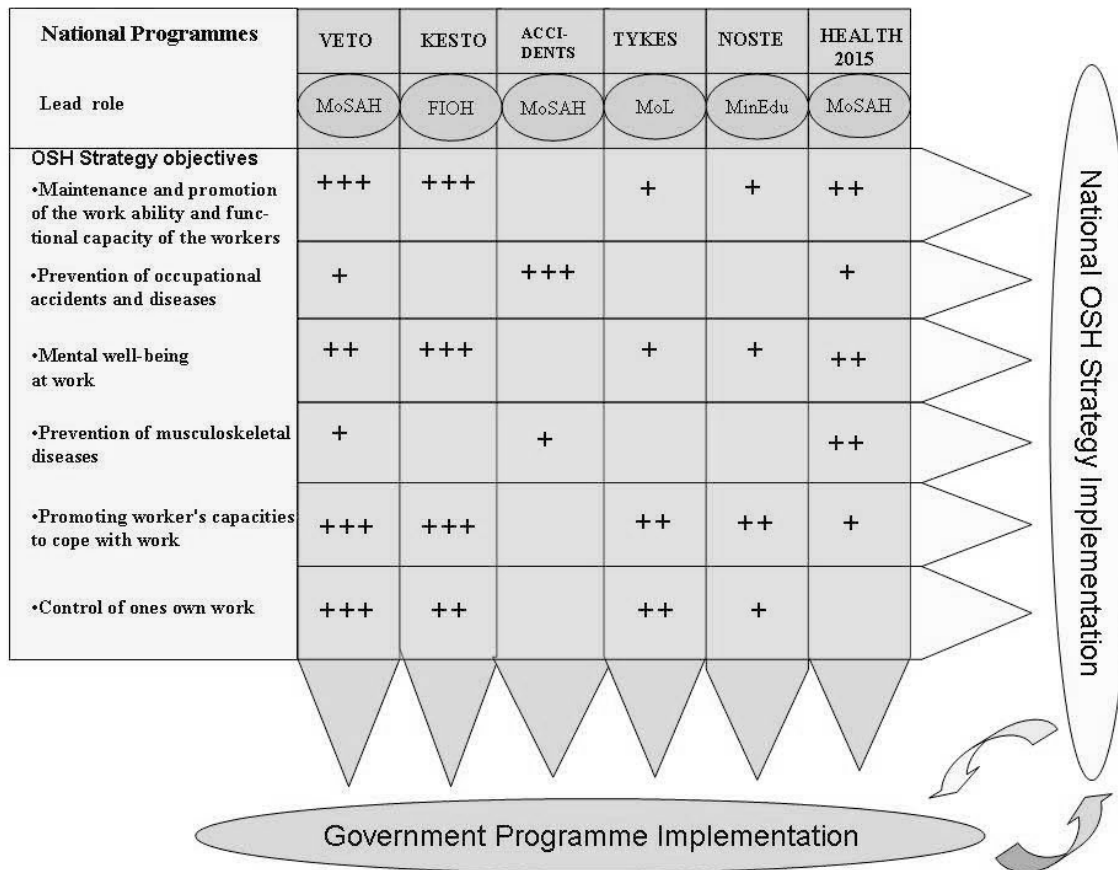


Figure 2.2. National Programmes in the implementation of Occupational Safety and Health Strategy objectives (J. Rantanen 2006) (MoSAH = Ministry of Social Affairs and Health, MoL = Ministry of Labour, MinEdu = Ministry of Education; VETO =National Programme for an Attractive Working Life, KESTO = Programme to promote the work ability, attractiveness of work life and to prevent exclusion, Accidents = Prevention of Occupational Accidents, TYKES = The Finnish Workplace Development Programme, NOSTE = Programme for Improving Competence and Capacity of Ageing Workers, Health2015 = Public Health Programme)

Strategies for Social Protection

The Ministry of Social Affairs and Health approved in 2001 the **Strategies for Social Protection 2010 – Towards a socially and economically sustainable society**. The strategy includes a vision for 2010, including, for instance:

- People will stay on at work for 2–3 years longer than they do at present.
- The general functional capacity of the population will have improved, and elderly people will not need care until at a more advanced age.

Two of the four strategic goals are connected to the work environment:

- Making work more attractive
- Promoting the health and functional capacity of workers.

Institute strategies

The **Finnish Institute of Occupational Health** has drawn up a new strategy for 2006–2010 (<http://www.ttl.fi/NR/rdonlyres/E7679856-2DB2-4AEA-80F1-0E84EB5410DE/0/Strategia.pdf>).

The **Centre for Occupational Safety** has a strategy for the years 2003–2007. (<http://www.tyoturva.fi/keskus/esittely/toimintakertomus/Strategiaesite.pdf>)

Virtually all the institutions listed on page 33 have drawn up a strategy which contains elements relevant to OSH (see webpages of the Institutions given in Table 5.1).

3

Coordination and collaboration mechanisms

3.1 At the national level

The leading occupational safety and health authority is the Department for Occupational Safety and Health of the Ministry of Social Affairs and Health. It is responsible for policy making under the supervision of the Minister of Social Affairs and Health.

The coordination of policies and activities at the national level takes place in ministerial groups at the government level: the ministers of neighbouring sectors coordinate their policy making. The OSH Department of the Ministry coordinates its activities mostly in ad-hoc negotiations with the other ministries and social partners, first of all in the Advisory Committees which constitute a broad consultative mechanism with social partners and other relevant stakeholders. The coordination mechanisms cover the whole OSH sector described in Figure 3.1. The workplace is considered to be the main focus and arena of the OSH activity.

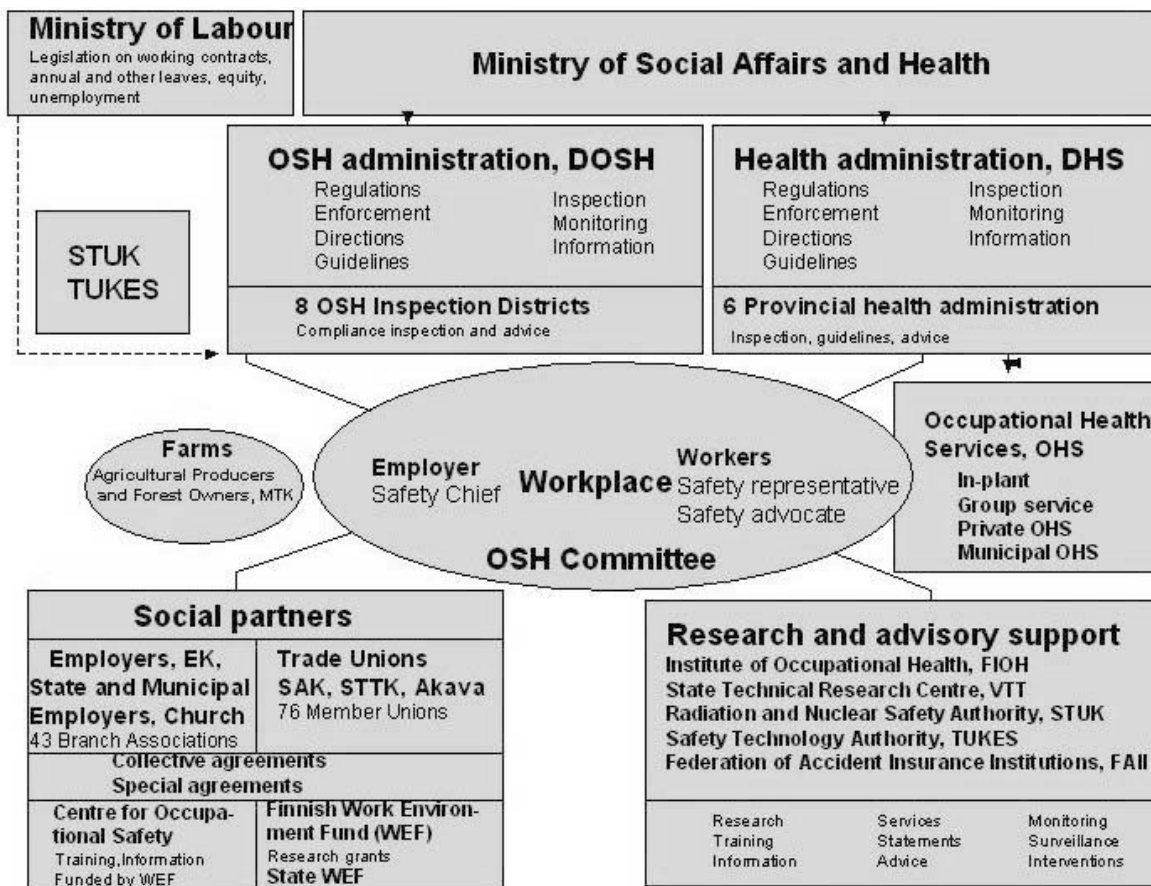


Figure 3.1. Occupational Safety and Health Organizations in Finland (J. Rantanen 2006)

Social dialogue and tripartite collaboration in Finnish work life

As part of the Nordic welfare model, Finnish work life is based on the principle of tripartite collaboration between the Government, employers and employees. All the key policies related to work life, the labour market, social security, and occupational health and safety are negotiated collectively between the three partners (Government, Employers and Trade Unions) and agreements are usually made on a consensus basis. The leading role of the Government arises from the strong efforts to reach a societal consensus, and the legislative power that is subject to parliamentary approval and control.

A special questionnaire survey conducted for this particular report (see Chapter 10) revealed a high degree of convergence in the values, recognized problems and challenges, future challenges and objectives in OSH among the most central Government bodies and the key social partners. Consensus and the well-working social dialogue are often referred to by the various partners as the backbone for the smooth functioning and competitiveness of Finnish work life.



Figure 3.2. Social dialogue at the national level (J. Rantanen 2006)

Policy Advisory Committees

OSH policy is multisectorial and multidisciplinary in nature. It requires the involvement of several government jurisdictions and numerous other actors. A traditional way in Finland is to organize such participation through Policy Advisory Committees where typically all the relevant administrative sectors are represented, i.e. trade unions and employers, professional associations, other non-governmental organizations (NGO), when appropriate, and in some special instances, industries, businesses and other possible operators. The Advisory Committees are legislation-based and have an official status in administration.

The overall mission of the Advisory Committee on Occupational Safety and Health is to deal with issues of OSH which are of principal importance. The Committee is appointed by the Government Council and is located within the jurisdiction of the Ministry of Social Affairs and Health. According to the Government Ordinance, the members of the Committee are to be appointed so as to represent the most representative social partners' organizations and other stakeholders of importance to the development of OSH.

The Government Ordinance (199/1993) stipulates the tasks of the Committee as follows:

- 1) Deal with the issues of harmonization and promotion of OSH activities, and promotion of collaboration in OSH
- 2) Deal with the preparation of actions for the most important regulations, development, planning and follow-up in OSH
- 3) Discuss the general activity lines, objectives for results, and direct the resources for the promotion of OSH
- 4) Deal with other issues important for the development of OSH within the jurisdiction of the OSH Administration
- 5) Deal with all the other relevant issues requested by the Ministry of Social Affairs and Health.

The Advisory Committee on Occupational Safety and Health establishes according to the needs various sub-committees with a wide representation of various stakeholders. The current sub-committees are: Sub-Committee on Bilbao Affairs, Sub-Committee on the Prevention of Occupational Accidents, and Sub-Committee on Agriculture and other Rural Services and Industries.

Table 3.1. Advisory Committees (AC) relevant to OSH in the Finnish Government Administration (Min=Ministry, GA=Government Agency, SSI=Social Security Institution)

ACs in the OSH Administration of the Ministry of Social Affairs and Health	Government Authorities	Social partners	Professional bodies	Municipalities	SSI	Industry, businesses & others
AC on Occupational Safety and Health	1 Min 1 GA	+	-	-	-	
AC on Chemical Safety at Work	3 Min 2 GA	+	-	-	-	+
AC for Preparation of OSH Regulations	1 Min 1 GA	+	-	+	-	+
ACs in the Health Administration of the Ministry of Social Affairs and Health						
AC on Occupational Health Services	3 Min 1 GA	+	+	+	+	-
AC on Radiation Protection	3 Min 2 GA	-	-	-	-	University hospitals
AC on Chemicals	5 Min 3 GA	+	-	-	-	+
Other ACs in the Jurisdiction of the Ministry of Social Affairs and Health						
AC on Occupational Health Services of the SSI	1 Min	+	+	-	+	-

The other Advisory Committees have similar tasks adapted to their specific missions and constituents. The Advisory Committee institution plays an important role in the decision-making and policy design of the Finnish OSH administration. The key Advisory Committees relevant to OSH or related activities are listed in Table 3.1.

The Advisory Committees also constitute a constant and well-established forum for social dialogue, and in time they accumulate substantial experience and competence in policy issues, as well as in drawing up and evaluating programmes. In such a role they also constitute an important source of resources for the administration and for social dialogue.

3.2 At the enterprise level

Legislation-based activities

The Finnish OSH policies are strongly based on collaboration at the workplace level between employers and workers and other actors. The legal framework is given in the recently amended Occupational Safety and Health Act (738/2002) that stipulates the obligations and rights of the employers, workers and authorities in view of safety and health at work. The Act is simultaneously a national transposition of the EU Directive 89/391/EEC on Safety and Health of Workers at Work, as well as the implementation of the ILO Convention No. 155 concerning Occupational Safety and Health and the Working Environment. The Act applies to all workplaces and types of work, and thus also concerns short-term and temporary employment. The Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health stipulates the organs, duties, rights, responsibilities and collaboration of various actors at the workplace.

The Finnish OSH policy supports and promotes the integration of safety and health operations with the workplace's other operations, which also emphasizes the importance of each worker's competence and commitment to the development of the working conditions and maintaining his or her work ability. Undisturbed production activities and good working and production conditions, i.e. a good work environment, constitute the basis for occupational safety and job satisfaction, and ensure the quality of products and services, and facilitate high productivity.

The cooperation and collaboration at the workplace level between the employers and workers or their representatives in all aspects of occupational safety and health are stipulated by legislation. In addition to the legally required collaboration, also agreement-based and voluntary collaboration take place.

The Ministry of Social Affairs and Health encourages the development of a safety culture and safety management at the workplace. Safety management is an important preventive tool for strengthening the safety culture at the workplace. Safety culture is enhanced also by general safety training and attitude adjustment, and by dissemination of safety knowledge.

Agreement-based activities

The social partners have made an agreement on the training and education of employees in matters concerning work in general, on collaboration issues in enterprise democracy (joint regulation), and on occupational safety and health. Safety and health training is provided to the personnel as a whole in line with Section 14 of the Occupational Safety and Health Act which stipulates the employer's general obligation to inform, educate and instruct the work-

ers on hazards at work and on how to avoid them, including safe working practices and adequate protective measures. Another target group for the agreement are the people especially involved in safety and health activities, such as the safety representatives of employees and the members of Occupational Safety and Health Committees. The agreements have been made between all the key social partners and they cover about 80% of the workforce. The training and education provided within the frames of the agreements often exceed the obligations stipulated in the legislation, as the employers have found it useful to increase the competence of the employees in these issues.

Roles of various actors at the workplace level

The Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health describes in detail the duties and tasks, obligations and rights in relation to OSH of the employers, workers, safety officers and safety representatives of the workers, as well as the tasks of the Occupational Safety and Health Committee at the workplace. The composition and functions of the Occupational Safety and Health Committee are shown in Figure 3.3.

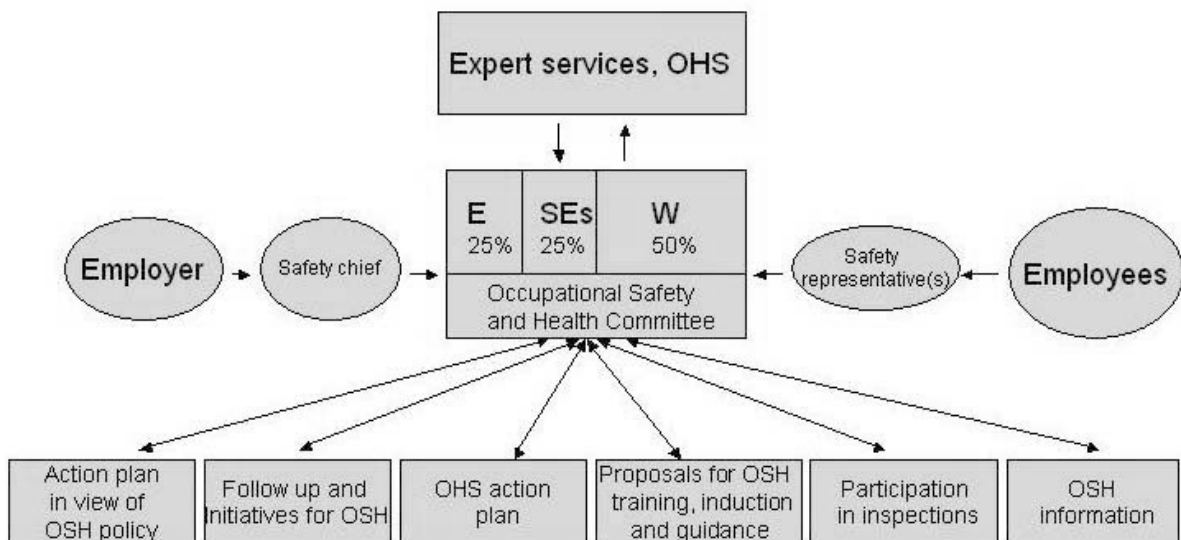


Figure 3.3. Workplace level organization, activities and typical composition of the Occupational Safety and Health Committee (J. Rantanen 2006)

(E = Employer's representatives, SEs = Salaried Employees' Representatives, W = Workers' representatives, OHS = Occupational Health Services, OSH = Occupational Safety and Health)

Such Committees shall be organized at workplaces with 20 or more employees, and the safety representative must be elected by the workers at workplaces employing 10 or more persons. The Committee provides the most central forum for collaboration at the enterprise and workplace level between workers and employers on issues concerning OSH.

4

OSH technical standards, guidelines and management systems

4.1 Implementation of OSH management systems

The new Occupational Safety and Health Act (738/2002) has been in force since the beginning of the year 2003. It incorporates the basic idea of safety and health management which is considered to be the key principle for carrying out the safety and health obligations set on the employer. The Act requires systematic and continuous monitoring of the working conditions, and identification and assessment, as well as elimination of hazards and risk factors. The Act emphasizes that safety management shall be carried out in a way that is most suitable for the individual enterprise or establishment, and that such operating procedures shall be developed that are best for **the enterprise itself**.

The ILO guideline on occupational safety and health management systems, OSH-MS 2001, has been translated into Finnish. The safety management system referred to in the EU Seveso Directive has also been considered. Many large companies are building various integrated action systems which combine health, safety and environmental matters. During the 1990s, the new developments in the European community and the development of technical standards have been considered, as well as the ILO Convention No. 174 on Prevention of Major Industrial Accidents, the related recommendation, and the preceding guide. The Organization for Economic Co-operation and Development, OECD, has prepared its own guides on safety management, and these have also been considered in the Finnish Occupational Health and Safety Management Systems.

4.2 Information materials based on technical standards and ILO Codes of Practice

Guidelines by the OSH Authorities

More than 22 specific guidelines on risk assessment, chemicals, psychosocial hazards, extremely hazardous work, occupational health services, pesticide work, forestry work, etc. have been published by the OSH Authorities during 2001–2005. Such guidelines provide practical information for employers, workers, and safety and health experts. The guides prepared by safety and health experts under the supervision of the authorities provide guidance on good practices on how best to comply with the statutory requirements of OSH legislation in special cases, work tasks or circumstances. In the preparation of these guidelines the ILO Codes of Practice are utilized as reference material, together with several other relevant sources.

Exposure limit values

In line with the Decree on Concentrations Known to be Hazardous (109/2005), the Ministry of Social Affairs and Health has confirmed a list of concentrations for impurities in workplace air known to be hazardous (more than 500 HTP values) and a list of four values for biological exposure indicators. The values are intended to be taken into account when as-

sessing the quality of workplace air, the employees' exposure and the significance of the results of measurements. The list is updated periodically by a tripartite Advisory Committee.

The 2005 edition gives 19 new main entries with HTP values and other information. The HTP values of 22 main entries have been changed and, in the lists for 2007, 13 entries will be reviewed and at least 16 new entries will be included. The document also contains a list of 15 binding Occupational Exposure Limits issued by the Government Council. Codes of standardized risk phrases (R phrases) specified in the Decree on the List of Dangerous Substances by the Ministry of Social Affairs and Health (624/2001) are also given. (*HTP values 2005. Handbooks of the Ministry of Social Affairs and Health, Finland. Helsinki, 2005. 70 p*).

SFS Standards

The Finnish Standards Association, SFS, is an independent, non-profit organization co-operating with trade federations and industry, research institutes, labour market organizations, consumer organizations, and governmental and local authorities. The members of SFS include professional, commercial and industrial organizations, and the state of Finland, represented by 12 ministries.

SFS Standards are drawn up by technical committees of SFS or its standards-writing bodies, and they are implemented on a voluntary basis. The total number of SFS Standards amounts to over 17 000. All SFS Standards are mentioned in the annual bilingual (Finnish and English) SFS Catalogue, which is also available on the www-pages of SFS and is being continuously updated. Based on the British Standard 8800, a Guide to occupational health and safety management systems is available as a Finnish Standard (SFS): Occupational Health and Safety Management Systems. (*Guidelines for the implementation of OHSAS 18001 and OHSAS 18002*). Also a table on the compatibility between ISO 18001 and ILO OSH-MS 2001 has been published.

Guidelines by various institutions

The Finnish Institute of Occupational Health, FIOH, continuously publishes and updates dozens of practical guidelines on various OSH topics, such as chemical, physical, biological and psychosocial hazards, as well as ergonomics and safety. The FIOH also provides evidence-based guidelines on good practices in occupational health services, occupational hygiene, risk assessment, and on the maintenance and promotion of the workers' work ability. A number of branch-, work- and occupation-specific guidelines are also published particularly for hazardous jobs.

The Centre for Occupational Safety publishes a wide variety of practical guidelines and information leaflets for workplaces (240 on the list in 2005). Many of these publications are based on a branch approach, and cover various aspects of safety and health, such as electronics, the graphic industry, hotels and restaurants, teaching work, bakeries, social work, information and telematic communication, municipal work, etc. These guidelines have been prepared in close collaboration with industries, branches or professions which are going to use them. Thus the user feedback is ensured already in the drafting phase.

5

OSH system implementation: Means and tools

5.1 National competent bodies with OSH implementation responsibilities

The Department for Occupational Safety and Health of the Ministry of Social Affairs and Health serves as the highest Government body for OSH Administration. It supervises independent Labour Inspectorates covering the whole country.

The most important duties of the Department, whose staff number about 90 persons, involve:

- preparation and drafting of occupational health and safety legislation
- performance and resource management of the Occupational Safety and Health Inspectorates
- monitoring of their results
- improvement of inspection methods
- coordination and targeting of OSH research
- application of the results of research projects at the workplace level
- market surveillance and product control.

The Department consists of four units, namely, legislation, development, field operations, and administrative resources, each directed by a Head of Unit.

Finland is divided into eight independent Occupational Safety and Health Inspectorates. *The Occupational Safety and Health Inspectorates* have a staff of about 475 persons. In field operations there are about 380 inspectors. In 2004 they were responsible for 220,000 workplaces with 1.8 million employees. The number of personnel in each Inspectorate ranges from 27–94, and the workplaces for which they are responsible from 11,000 to 75,000.

In most Inspectorates the Head of the Inspectorate is aided by an Assistant Head. The rest of the staff fall into the following categories:

- Chief Inspector – inspectors with a university degree and/or long experience and seniority who normally manage a group of inspectors
- Engineer (MSc) – inspectors holding a university degree
- Inspector – staff with technical qualifications or persons who have joined the Inspectorate from industry and who may not be qualified academically or technically, but who have practical experience in health and safety matters at the workplace, either as a safety delegate or safety supervisor.
- A staff member with a degree in law.

5.1.1 Inspection and enforcement systems

The law dealing with working conditions, including occupational safety and health, applies to all persons working under a contract of employment, and the responsibility for its enforcement with few exceptions lies with the Occupational Safety and Health Administration. Thus the coverage of inspection extends to all sectors of the economy and all

branches, including the private and public sectors, cooperatives and non-governmental organizations. The inspection of mines is a task of the Safety Technology Authority. There is also, within the Ministry of Social Affairs and Health, the Radiation and Nuclear Safety Authority for nuclear safety inspection and protection against radiation.

According to the Act on Occupational Safety and Health Administration (16/1993) the occupational safety and health authorities shall promote safety and health at work by:

- developing (and promoting) safety and health at work
- supervising through inspections and investigations the compliance of OSH regulations, within the legal mandate stipulated to the OSH Authority
- carrying out planning and development activities for OSH
- carrying out advisory, information, research, and training and education activities for OSH
- providing instructions, advice and statements on the implementation of OSH regulations
- providing instructions, advice and training on OSH for the self-employed, and planning and developing OSH for their needs
- collaborating actively with the organizations of employers and workers in the field of OSH
- performing all the other functions and tasks especially stipulated to the OSH Authority.

The OSH Authorities are independent in their supervisory and inspection activities.

The powers given to the inspectors are set out in the Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health (44/2006) and include the power

- of entry into any place of work at any reasonable time of day or night to carry out inspections and to make enquiries
- to question employers and employees about matters of occupational health and safety and other matters concerning working conditions. This power does not extend, however, to requiring them to make a written statement.
- to call for and examine all registers and other documents legally required to be kept
- to take samples of materials and products for analysis
- to take photographs and measurements
- to issue an inspection protocol or improvement notice. The notice identifies the law that is being broken, describes the nature of the deficiency; it may suggest how the deficiency can be rectified, and stipulates a time limit within which the employer must answer to the inspector on the action he has taken.
- to issue a legally binding enforcement notice under the authority of the Head of Inspectorate if the inspection protocol has not had the desired effect. The notice stipulates a time limit within which the required work must be completed and may, though this is not obligatory, set a fine which must be paid if the deadline is not met. The employer has the right of appeal to a regional administration court.
- to issue a prohibition notice in cases where an inspector believes there is an imminent risk to life or health. The notice comes into force immediately.

The number of inspected workplaces is about 23,000 a year, which is about 10% of all workplaces in the country. The focusing of inspections according to preset priorities is strong to ensure a maximal safety and health effect of the activity.

5.1.2 OSH research institutions and OSH laboratories

OSH research institutions

The research on occupational safety and health has a recognized position in the national research policy. On the other hand, research is considered as an important instrument in the National Occupational Safety and Health Strategy, and in the Strategy for the Development of Occupational Health Services. Most of the research on OSH is carried out by the Governmental Research Institutes. Numerous universities also carry out OSH research in special areas corresponding to their orientation and competence. The key research institutions relevant for OSH and their principal orientations are listed in Table 5.1.

Table 5.1. OSH Research Institutions and their main research orientation

Research institute	Main focus in OSH research
Finnish Institute of Occupational Health* http://www.ttl.fi	Comprehensive, multidisciplinary research structure and programme covering all fields of OSH
State Technical Research Centre, VTT Automation http://www.vtt.fi	Safety technology, risk assessment and management
Radiation and Nuclear Safety Authority in Finland, STUK** http://www.stuk.fi	Research, regulation, enforcement and services in the field of radiation safety
Safety Technology Authority, TUKES** http://www.tukes.fi	Safety-promoting research and development activities
Tampere University of Technology / Occupational Safety Engineering http://www.tut.fi	Safety technology
University of Kuopio / Department of Environmental Science http://www.uku.fi/english	Occupational and environmental hygiene
University of Oulu/Work Science http://www.oulu.fi/english/index.html	Ergonomics, safety systems
Helsinki University of Technology / Laboratory of Work Psychology and Leadership http://www.helsinki.fi/university	Organization of work, leadership, psychosocial aspects of work and work organizations
Lappeenranta University of Technology http://www.it.lut.fi/index_eng.html	Safety technology research
Work Research Centre at the University of Tampere http://www.uta.fi/english/index.html	Research on work life and its structural changes, and social aspects of work
The Tampere School of Public Health at the University of Tampere http://www.uta.fi/english/index.html	Occupational health, musculoskeletal disorders, ergonomics
The UKK Institute for Health Promotion Research http://www.ukkinstituutti.fi/en/	Promotion of physical work ability and general functional capacity at work

* For a small part the activities contain government agency functions.

** STUK and TUKES have a substantial part of their activities that comprise functions of a government agency.

The National Strategy on OSH Research

The National Research Policy Programme for occupational safety and health research was for the first time drawn up by the OSH Authorities in 1994. It was updated in 1998 and the most recent programme entitled *'Workplace Welfare Research in Finland and its Priority Areas – a Perspective of Health and Safety'* has been published in 2005. As in the case of the previous programmes, also the new programme was drafted under the leadership of the Department for Occupational Safety and Health of the Ministry of Social Affairs and Health in an expert group representing OSH Administration, research institutes and universities, and financiers of OSH research. The research priorities recognized in the Programme are given in Table 5.2 (not in priority order).

Table 5.2. Research priorities

Development of products, production and organizations

- development of products
- development of production methods
- development of organizations

Management of risks

- identification, assessment and prevention of hazards
- prevention of occupational accidents and work-related diseases
- prevention of major accidents

Psychosocial functioning of work organizations

- management of haste and coping with work
- development of management methods and interaction
- management of change in work organizations
- development of new competences
- promotion of equity and using diversity as a resource
- continuous follow-up of developments (of the psychosocial state of work life)

Promotion of health in work life

- impact of life styles on occupational health and work ability
- possibilities for the promotion of a healthy life style and its effects
- development of action models for the promotion of a healthy life style
- development of models for evaluating promotion methods

Maintenance and promotion of work ability and functional capacity

- research on the maintenance of work ability
- work ability research and its links with research on other priority areas
- maintenance of work ability and ageing

Health and safety risks and loading factors

- work-related musculoskeletal disorders, their causes and mechanisms
- management of psychosocial health hazards related to the work environment
- research on chemical and biological hazards
- research on physical hazards and exposures

Occupational safety and occupational health services

- development of activities and prerequisites for occupational safety
- development of activities and prerequisites for occupational health services
- strengthening collaboration between occupational health services and rehabilitation

Economic impact of working conditions

- impact of the work environment on national economy
- impact of the work environment on enterprise economy
- economic steering methods of occupational safety and health

OSH Laboratories

The main organization providing OSH laboratory services is the Finnish Institute of Occupational Health, which has a comprehensive list of services. The scope of service provision is multidisciplinary.

The spectrum of expert services offered by the FIOH is very broad, ranging from occupational hygienic measurements and risk assessment to the testing of personal protective equipment, from the diagnosing of occupational diseases to the development of the content of occupational health services, from ergonomics to occupational safety analyses and safety-related information services, and from aptitude testing to services for the development of work communities. Finnish workplaces benefit from the fact that one and the same institute provides expert assistance in solving a multitude of problems associated with occupational health and safety.

Approximately 40% of the FIOH's working time is consumed by the provision of services. The list of various types of analytical and other advisory services covers some 700 different service products, including chemical, physical, biological factors, indoor air exposure, biological monitoring, ergonomic analysis, safety analysis, risk assessment and advice, assessment of psychosocial aspects of work, development of work organizations, assessment of work ability, and testing of personal protective equipment. The services are covered by a quality management system, and the most central service methods are accredited according to ISO standards.

The VTT, STUK, and TUKES provide laboratory services in their special areas. The University units which carry out OSH research may also provide laboratory services in their special areas of expertise. Consultancies and private laboratories also provide services often in relatively specialized topics.

5.1.3 OSH information centres

All the research bodies listed in Table 5.1 have information elements on their agendas. Four organizations, however, have a special mission for the dissemination of information in the field of occupational safety and health: The Department for Occupational Safety and Health of the Ministry of Social Affairs and Health, the Finnish Institute of Occupational Health, the Centre for Occupational Safety, and the Finnish Work Environment Fund.

Ministry of Social Affairs and Health

On the website of the Ministry of Social Affairs and Health occupational safety and health issues are dealt with quite briefly emphasizing the occupational safety and health strategy questions.

<http://www.stm.fi>

The Ministry is also responsible for the information on the website of the Finnish focal point of the European Agency for Safety and Health at Work. This website contains a lot of occupational safety and health information, especially good OSH practice examples, mainly in Finnish. Information in Swedish and in English is also provided.

<http://www.tyosuojelutietopankki.fi> or <http://fi.osha.eu.int>

Occupational Safety and Health Inspectorates

The Occupational Safety and Health Inspectorates have their own common website emphasizing practical information on inspection issues and common interpretations of OSH legislation. The information is mainly in Finnish. Information in Swedish is also provided.

<http://www.tyosuojelu.fi>

Finnish Institute of Occupational Health

The Institute disseminates information through the periodical Työ Terveys Turvallisuus (Work Health Safety, 12 issues a year, circulation more than 72 000), the information newsletter Työterveiset (four times a year, each issue on a specific theme, circulation 15,000), and books as well as manuals on occupational safety and health. The Institute also publishes one quarterly Finnish-language scientific journal, numerous guidebooks, textbooks and information leaflets on special aspects of occupational health and safety intended not only for occupational health and safety experts, but also for workplaces and the general public. The number of these publications is 35–40 every year, and the total number of distributed copies is over 100,000. Fact sheets are prepared for workers in various workplaces on priority topics, such as Prevention of accidents while walking and prevention of slipperiness, Work in the cold, Work in hot environments, Support systems for young workers, Work with VDTs, and so on. They are available both in Finnish and in Swedish in print and on the web. The Information Service Centre of the Institute offers on-line reference information and library services to the public. It is also an ILO/CIS National Centre. The Institute disseminates information also at exhibitions and invites groups to visit the Institute.

The web service of the Institute is available at www.ttl.fi in Finnish, in Swedish and, to some extent, also in English. The main content of the information has been grouped under topics such as ergonomics, psychosocial well-being, chemical safety, construction safety, ageing and work, youth and work, just to mention a few. The Institute website attracts some 3,000 visits a day.

In collaboration with international organizations, the Institute publishes three regional newsletters on occupational health and safety, one for the African, one for the Asian-Pacific, and the third for the Barents Region. The Institute also coordinates several national, regional and international networks in the field of occupational health and safety.

www.ttl.fi

Centre for Occupational Safety

The Centre for Occupational Safety is a collaborative training, information and service agency for the central labour market organizations, employers and trade unions. The major function of the Centre is the provision of expert services associated with the development of working conditions. The Centre is also involved in training, information and the publication of training materials. The general goal is to increase well-being and success in work life. The Centre consists of three sectorial and 21 special Branch Groups which provide a forum for collaboration between employers and workers on OSH issues.

The Centre publishes practical information and training materials pertaining to the development of the work environment. Some materials are general and others deal with specific topics or fields. The number of new publications a year varies between 20 and 40. Newsletters on topical issues in occupational safety are published four times a year. The Centre maintains a register on occupational safety and health personnel at worksites, including safety supervisors, safety delegates and safety representatives of the enterprises, as well as occupational health physicians and occupational health nurses in Finland. There are more

than 68,000 persons in the register. On the basis of the register's mailing list, informative material pertaining to the work at the workplace level is mailed to the OSH personnel. The Centre distributes some 250 specific guidelines on safety and health practices and publishes a journal with an edition of 45,000.

www.tyoturva.fi

The Finnish Work Environment Fund

The Finnish Work Environment Fund is a tripartite organization for funding research and information for the development of safety, health, and work life in general. The Work Environment Fund supports financially the application of the research results into practice. The Fund also finances the activities of the Centre for Occupational Safety.

The Fund finances applied research on OSH and work life. Funds are also available for publishing and disseminating information on work and the work environment, particularly for the application of the research results from Fund-supported research. Criteria for grants include the production and dissemination of the latest scientific information through research and development activities, as well as by means of training and education. The summaries of the results of the research projects funded by the Finnish Work Environment Fund are published; they are freely available and are also published on the web.

www.tsr.fi

Other bodies disseminating information on OSH

The employers' organizations (http://www.ek.fi/ek_englanti/index.php) and the trade unions (<http://www.akava.fi/>, <http://www.sak.fi/englanti/index.shtml>, <http://www.sttk.fi/en/369/>, and http://www.mtk.fi/MTK-briefly/mtkfacts/en_GB/mtkfacts_etusivu/) provide information on OSH to their own member organizations and to individuals. They provide web services for their members and publish journals which regularly contain OSH information. They also issue practical guidelines.

5.1.4 Occupational health services

The Act on Occupational Health Services originates from the year 1978 (743/1978), and was renewed in 2001 (1383/2001). The purpose of the Act is to ensure a safe and healthy work environment, the prevention of work-related diseases and accidents, the promotion of the work ability and functional capacity of employees, and the provision of preventive occupational health services (OHS) for the employees. Each employer is obligated to organize services for his/her employees. The organization and content of services need to be based on a company-wide plan, and in the case of external service providers, on a formal contract between the employer and the service provider. If necessary, employers may also organize curative services for the medical treatment of diseases, general preventive health services, and other health services. Workers or their representatives have the right to participate in the planning of OHS for the workplace. The coverage of services is 90% of the employees and 85% of the total workforce in Finland (including the public sector, SMEs and the self-employed).

The small and medium-sized enterprises constitute a universal challenge to OHS systems. 98% of Finnish enterprises are small and the vast majority among them are microenterprises (93% of all enterprises) (See Tables 9.4 and 9.5). The municipal health care centres (primary health care centres) have a legal obligation to provide occupational health services for any employer who asks for such services in order to comply with the Act on OHS. 61% of all enterprises and particularly the small and microenterprises get their services from the

OHS of municipal health care centres. The coverage of workers by municipal OHS is 37% of the total served workforce and the municipal health care centres accommodate 30% of all occupational health service provision units in Finland.

The content of services is often the basic preventive service as stipulated by the Act. Also curative services may be provided. The farmers and other self-employed are virtually all served by municipal health care centres' OHS. Their service provision is specially supported by a support and advisory unit located in the Finnish Institute of Occupational Health.

The content of the services stipulated in the legislation and the Government Ordinance is mainly preventive. Curative activities and the provision of general practitioner-level health services may also be included. The tasks of occupational health professionals in the provision of services include, among others:

- Analysis of working conditions by regular visits to places of work
- Assessing and monitoring of work-related health hazards
- Surveillance of the health of employees through medical check-ups
- Drawing up proposals to improve the health conditions in the workplace or to adjust work tasks according to an employee's capacities, when necessary
- Monitoring and provision of rehabilitation advice for handicapped workers
- Planning and follow-up of measures for maintaining the employees' work ability.

The model of service provision can be chosen by the employer in consultation with the workers. Municipal health care centres are responsible for providing occupational health services to employers who request them. Employers may also organize occupational health services themselves, or through private service providers. The compliance of the employer is inspected by the OSH Authorities, whereas the content of the contract, as well as competence and activities of the health personnel are supervised by the health authorities.

The Social Insurance Institution reimburses employers 50% of the costs of arranging occupational health services and 60% of the expenses of a workplace survey. The Government Resolution on Occupational Health 2015 – Development strategy for occupational health services was passed by the Government in 2004. The Resolution outlines national measures and the responsibilities of various actors in the development of OHS. The strategy focuses on improving the quality of work life, maintaining and improving the workers' work ability through enhancement of preventive measures, and safeguarding comprehensive high-quality occupational health services. The Resolution includes ten development themes with one or more identified bodies responsible for the implementation, partners and procedures defined for each. The Resolution was prepared by the Advisory Committee on Occupational Health Services. The ten development themes are:

1. Development and effective implementation of the legislation
2. Development of the content of occupational health services
3. Development of occupational health services as a system
4. Development of a funding and compensation system for occupational health services
5. Training and education of personnel for occupational health services
6. Emphasizing ethics in occupational health services
7. Cooperation within the sector and on a tripartite basis
8. Developing information management systems in occupational health services
9. Strengthening research and development in occupational health services
10. Monitoring and supervision of the status and development of occupational health services through periodic national surveys.

5.1.5 Workmen's compensation and insurance schemes

The employer is bound by law to ensure the workers' health and safety at work. It is his duty to compensate for the loss of earnings, health care costs and disability due to an occupational accident or an occupational disease. To bear this responsibility, he is obligated to insure his employees against occupational accidents and diseases.

The history of the Finnish occupational accident insurance system can be traced back to the year 1895. The present occupational accident insurance legislation is based on the Labour Accident Insurance Act of 1948 (608/1948). The Act on Accident Insurance for the government sector was passed as early as in 1935 (154/1935). The Acts have been amended several times since then, and the latest amendments were passed in 2004 and 2005 (545/2004; 681/2005). The Act on Accident Insurance for self-employed farmers corresponding to the employment accident insurance legislation was passed in 1981 (1026/1981), and last amended in 2003 (924/2003) concerning some specifications in the compensation of injuries. Thus the coverage of occupational accident insurance extends from employees in the private sector to the employees of the government, municipalities and other public sector employment, as well as the self-employed, totalling about 2.4 million persons. According to the Act, each employer who employs a person for more than 12 days a year must provide occupational accident insurance for his worker. In Finland, occupational accident insurance is technically operated by 12 private accident insurance companies under the supervision of the Ministry of Social Affairs and Health.

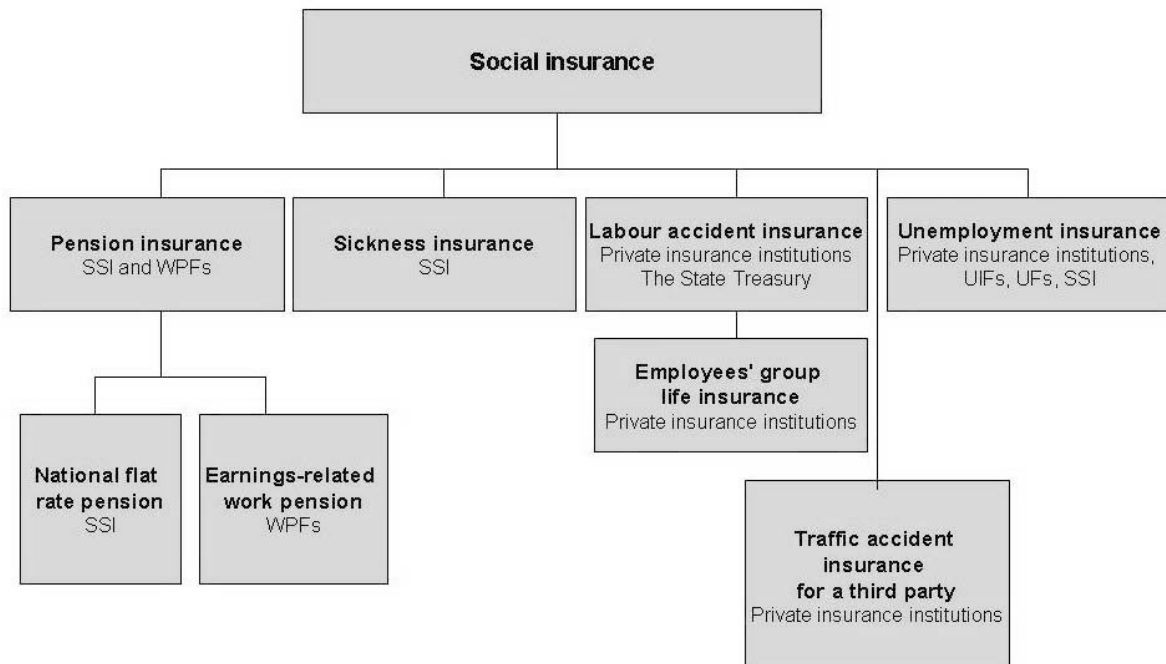


Figure 5.1. Overall structure of the Finnish social insurance system (SSI = Social Security Institution, UIF= Unemployment Insurance Fund, UF= Unemployment Fund, WPF = Work Pension Funds) (J. Rantanen 2006)

The accident insurance system is financed on the basis of premiums paid by the employer. The amount of premium depends on the salaries and wages paid. The premium is also dependent on the average accident risk of the industrial sector to which the company belongs. The premium is determined by the Ministry on the basis of the average accident risk of the industry in question (pooling collective risk of the branch). For the big companies paying more than a preset limit premium, the level of the premium is defined on the basis of the accident rates of the individual company (experience-based tariffing). For smaller compa-

nies paying smaller premiums than the preset limit premium, the premium is set defined on the average risk of the branch. Thus, in the larger companies the accident insurance costs of the company are dependent on the accident risks and level of safety in the company itself.

Compensation

The Occupational Accident Insurance Act covers the following events:

- A. Labour accidents occurring
 - 1. on the job
 - 2. in conditions resulting from the job
 - a) at the workplace or in an area belonging to the workplace
 - b) on the way to or from work
 - c) when the employee is running an errand for his employer
 - 3. if the employee attempts to protect or save his employer's property or human lives in connection with his work.
- B. Occupational diseases defined by the Act on Occupational Diseases
- C. Injuries caused by specially defined physical strain or other unfavourable ergonomic conditions at work.

The scope of compensation by occupational accident insurance is very broad, and the level of compensation is relatively high, resulting practically in full 100% compensation of all costs caused by the accident or occupational disease and the loss of earnings and, if needed, also the loss of the worker's working capacity. The appropriate diagnosis and treatment, as well as rehabilitation of accidental injuries and occupational diseases are compensated. The pensions for loss of work ability for the insured employee and in the case of fatal injuries and diseases are allocated to the survivors. The accident insurance institutions also provide advisory services for the prevention of accidents and may, if needed, provide consultations for employers on how to improve safety.

5.1.6 Poison Control Centre

Finland is divided into 20 hospital districts for the organization of specialized medical care. Five of these are university hospital districts. The Hospital District of Helsinki and Uusimaa (HUS) is the largest one. In Finland, there is one Poison Information Centre which is located at the Helsinki University Central Hospital, HUCH (myrkytys@hus.fi). It is open 24 hours a day, and can be reached by phone. About 30,000 phone consultations are given annually, most of them to general health services and private households. There is a lot of information on the website of the Poison Information Centre about poisonings, causative factors and ways to act in case of poisoning. Occupational health services and other workplace organs consult the Poison Information Centre in the case of acute chemical hazards and accidents, such as accidental inhalations or splashes of chemicals to the skin or eyes. There is an average of one such consultation per workday. Cases of chronic and subacute occupational intoxication are directed by the Centre to the Finnish Institute of Occupational Health. Thirteen cases of occupational diseases due to acute intoxications were registered in 2002.

The Finnish Centre is listed in the Network of Poison Control Centres of the International Programme on Chemical Safety, IPCS. It provides expert assistance when requested, and utilizes the information services of IPCS among several other international data sources. Web site: <http://www.hus.fi/default.asp?path=59,403,9739,9541>

5.2 Education, training and raising of awareness

Training in occupational safety and health at various levels is organized officially for occupational health physicians (OHP), nurses, physiotherapists and psychologists. Also official qualifications, specialties or certain minimum training requirements are set for them. Due to such requirements virtually all experts working in occupational health services have passed a minimum level of training. Most occupational health nurses have special training in occupational health, and a half of the occupational health physicians are specialists in occupational health services. For other professionals, such as safety officers and work organization experts, qualification requirements and formal training curricula are not systematically provided. Safety officers, however, have the possibility to take a voluntary safety examination and a higher-level safety examination with diplomas.

The national registry of persons active in occupational safety and health at the workplace level shows the rates of minimum training among the people active in OSH. About 23% of them had passed the basic course in safety and health, and the respective rate among the most central actors was 26.7% for safety chiefs and 34–35% for safety representatives of employees.

5.2.1 University curricula

Occupational health physicians

Education in medicine is given according to a nationally harmonized 6-year curriculum in the medical faculties of five Finnish universities. The 6-year basic curriculum of physicians contains 1–2 credits in occupational health. The course includes topics on OSH legislation, the OSH system and infrastructure, the most common occupational diseases and the most important activity areas of OSH. Specialist education comprises a six-year curriculum consisting of tutored service in a primary health care centre, backbone training in clinics close to the person's ultimate specialty to be studied, and four years of specialist training in an institution authorized to give theoretical and practical training in the specialty in concern. 120 h of theoretical training is required and the specialty is awarded after passing successfully the national specialist exam. Annually about 30 persons pass a specialist examination in occupational health.

Occupational health nurses

Twenty-two polytechnics provide a 160-credit theoretical curriculum for public health nurses. This includes 40 credits – specialization with a possibility to orientate to occupational health. Altogether various elements contain 57 credits in practical training. In addition, complementary training courses of various duration are available. Numerous courses provided by other training institutions and particularly by the Finnish Institute of Occupational Health are available. They meet the requirement of the minimum 4 weeks of training in occupational health, which is required for permission to work in occupational health services.

Physiotherapists

Also physiotherapists may be employed in occupational health services. Sixteen polytechnics provide training in physiotherapy. The curriculum consists of a 140-week programme including 50 weeks of practical training. The Finnish Institute of Occupational Health or-

ganizes combined theoretical and practical postgraduate-level training for physiotherapists. This training is strongly ergonomics-oriented, focussing on workplace ergonomics.

Ergonomists

The University of Kuopio provides an extensive curriculum in ergonomics for students with different backgrounds. The degree may be a BSc (180 credits) or a MSc (in addition to the BSc 120 credits) in health research with an ergonomics orientation. There is an option for distant e-learning of ergonomics as well.

Occupational hygienists

The University of Kuopio provides graduate and PhD-level training in occupational hygiene. The graduate studies in occupational hygiene, as well as environmental hygiene, are an orientation option. The Finnish Institute of Occupational Health offers, on top of graduate studies, a postgraduate specialization curriculum with an examination. The curricula are currently being rearranged and renewed.

Other OSH training

About one third of the 20 universities in the country have formal studies on occupational safety and health. Most of the safety education is given as a part of other substantive topics. Technology universities (6 in number) and universities with curricula in natural sciences, however, have special courses in safety. The Tampere University of Technology provides a special study line with 20 credits in occupational safety; it is possible to graduate in engineering, majoring in occupational safety or safety technology. Also Professional Development (PD) programmes for several relevant professions in the field of safety and health are provided by the Tampere University of Technology.

The universities which arrange training in laboratories on any subject request and provide a one-week laboratory safety course before entrance to the laboratories. Of the 30 polytechnics, those which provide curricula in ergonomics, physical education, health care, chemistry and machine technology, offer also courses in safety and health. The curricula for specialists in occupational health services include safety. The polytechnics which provide a curriculum for public health nurses have a special orientation option for occupational health nurses whose curriculum also contains some safety elements. At the level of vocational training, safety and health at work is dealt with in the content of the curricula. This constitutes a good basis for the workers' safety competence as a part of their general vocational competence and skills.

5.2.2 Training organized by employers' and workers' organizations

Training arranged by employers

Employers, the Finnish Employers' Management Development Institute, FEMDI, provide a number of courses in OSH for technical personnel and for managers and supervisors. The volume of all types of managerial training covers some 30,000 participants a year. The Institute also provides services for organizational development and for leadership development. The resources for OSH training comprise a staff of 61 persons representing various aspects of safety, health and work life development (juridical, technical, psychological, social, business administration sciences). Four main types of programmes are offered: short

1–4-day courses on occupational and chemical safety; a safety examination covering 30 credit points and 5 theoretical study credits (plus diploma); a higher safety examination comprising 50 theoretical credit points; and international courses.

Training arranged by trade unions

The Trade Unions' Central Organizations and individual Trade Unions, as well as the Trade Unions of Salaried Employees and the Confederation of Unions of Academic Professionals have made an agreement with the Private Employers, Governmental Employers and the Municipal Employers on training in OSH. They organize a large number of courses in occupational safety and health (25,000 person-training days a year). Not all OSH training is included in these figures. The Training Institutes of the Trade Unions provide three types of occupational safety and health courses: basic courses in OSH, continuation courses, and complementary courses. According to the agreement, the employer covers a part of the costs of training. The training of the Unions is targeted mainly at the safety and health representatives and their substitutes, as well as at the members of Occupational Safety and Health Committees.

5.2.3 Institutions organizing legally required training for OSH specialists

The Finnish legislation on occupational safety and health and occupational health services stipulates that experts working in the field of occupational safety and health must be competent for their tasks, and the competence needs to be maintained during the entire career of the expert. Several organizations organize training in occupational safety and health.

Centre for Occupational Safety

The Centre for Occupational Safety is a collaborative organ of Employers and Trade Unions offering training in safety and health at work. Its mission comprises training, education, information, campaigns and certain registration activities. The volume of training is substantial; about 8,500 persons participate in 250 courses or other training events covering virtually all aspects of occupational safety and health, and particularly OSH in various branches of the economy. The target groups are workplace level safety and health personnel, safety representatives, safety officers, and OSH Committee members.

Professional associations

Besides trade unions, also the associations of various professionals provide safety and health training for their members. In some associations such training has been accepted officially as a part of specialist training, and credits are given for it. For example, the Finnish Association of Occupational Health Physicians and the respective Association of Occupational Health Nurses are entitled to organize such training. The Association of Safety Chiefs also organizes basic and continuation courses which bring some credits for the Safety Examination and Diploma.

Finnish Institute of Occupational Health (FIOH)

The training and education offered by FIOH is planned and coordinated by the FIOH National Training Centre for Occupational Health and Safety. The Centre organizes training along three main lines, namely, occupational health and occupational medicine, occupational safety, hygiene and ergonomics, and occupational psychology and sociology. Two different types of training are given: long-term specialist curricula for occupational health physicians, nurses, physiotherapists, occupational hygienists, psychologists and safety managers (all in collaboration with universities or polytechnics), and shorter courses of various duration.

Occupational Safety and Health Administration

In Finland, there are no academic degrees that would directly give competence for an OSH inspector's tasks. Inspectorates arrange work orientation for their newly recruited employees. On the national level, the Department for Occupational Safety and Health in the Ministry of Social Affairs and Health is responsible for joint training arranged for all new inspectors. The training usually lasts a total of 8 weeks during one year. There are five periods of 'class-room' learning, each taking 5 days, and the training includes individual homework and self-study. The training deals with state administration and legislation, occupational safety and health administration, the powers and duties of the inspectors, action of the OSH inspectorates, the work environment, the content of occupational safety and health, and interaction skills. At present, plans are being made to renew the training. The Department for Occupational Safety and Health of the Ministry of Social Affairs and Health organizes also other training for OSH inspectors, mainly short courses. In addition, the Occupational Safety and Health Districts organize themselves training for their personnel. Almost all personnel participate in the training.

5.2.4 Awareness-raising structures

Ministry of Social Affairs and Health

The Ministry provides public information on important policy or legislative events or in connection with the implementation of Government-instituted National Programmes, such as the National Programme for Aging Workers. Press releases are also published in connection with nationally important events, congresses or seminars. The Ministry publishes about 50 press releases a year on various issues related to occupational safety and health. The coverage of press releases is nation-wide and often leads to secondary level information in various types of media. The Ministry also publishes reports and special publications, programme documents and information leaflets, and in selected cases launches public campaigns using all the media channels, including TV. The web services of the Ministry provide the information retrospectively from several years. (www.stm.fi). The Ministry of Social Affairs and Health has also a tripartite working group to plan, coordinate and implement the European Occupational Safety and Health Week.

The Confederation of Finnish Industries, EK

The employers' organizations provide information on the web, focussing mainly on the information needs of the member enterprises. The national, tripartite or employers' own OSH programmes or events may be informed widely to the general public through special campaigns. On the other hand, joint information actions within the frames of national tri- or bi-

partite programmes are common. The total information in the EK website contains a large number of reports and press releases on work life. The number of actual press releases is high and information events are arranged frequently. Work life issues are dealt with at least weekly, and events concerning OSH are arranged 1–2 times a month. The various industrial and service employers' associations provide numerous information services on legal and other aspects of OSH. They also provide practical guidance and links to important OSH data sources, and publish a Newsletter in English. (www.ek.fi)

Furthermore, the local authority employers and the government as an employer provide a lot of information on OSH and development of work life on their websites: (www.kuntatyonantajat.fi, www.vm.fi).

Trade unions

The Trade Unions' Central Organizations and dozens of individual trade unions have an active and dynamic information policy through their websites, journals, newsletters, articles in the daily media and sometimes on TV. OSH issues are given a regular share of the total information in all the information channels used by the unions. The organizations have a special service on the web focusing on OSH and dealing with the basic issues and current highlights. Toolboxes and checklists for practical use in OSH work are also provided. Trade unions participate in the tripartite safety and health campaigns, and sometimes organize their own campaigns both at the nation-wide level or targeted at special groups, branches or occupations. (www.sak.fi, www.stk.fi, www.akava.fi).

Professional organizations

Numerous scientific and professional organizations provide information on OSH, including the Finnish Association of Occupational Health Physicians, the Finnish Association of Occupational Health Nurses, the respective associations of physiotherapists, psychologists, occupational hygienists, ergonomists, safety chiefs, etc. The associations regularly publish journals in which OSH themes are discussed, and they provide web services for their members. The associations participate actively in public campaigns and events dealing with OSH. (www.stthl.net, www.terveysportti.fi/stly)

Finnish Institute of Occupational Health (FIOH)

In the FIOH activities, the following channels are used – to a varying degree – for information dissemination: the media, including the radio and TV, PR activities, journals, magazines and newsletters, books and other publications, web service, as well as library and information services.

A total of 30–40 press releases are issued every year. FIOH also publishes several journals in Finnish as well as English. FIOH has three journals of its own: one Finnish-language scientific journal (*Työ ja ihminen*, *People and Work*, 4 regular issues a year), the periodical *Work Health Safety* (12 issues a year, distribution 72,597, readership 216,000 per issue) targeted at Finnish workplaces, and the Institute quarterly newsletter, *Työterveiset* (*Occupational Health News*) which describes the activities of the FIOH in thematic issues (distribution 15,000). The periodical *Work Health Safety* carries out a readership survey every three years, and has received positive feedback from its readers concerning the value of the periodical as an information source. In addition, FIOH, together with its sister institutions in the Nordic countries, publishes the *Scandinavian Journal of Work Environment and*

Health, a scientific journal with an established position in the field. The FIOH publishes some 30–40 publications a year, and has some 300 publications on its list for sale. The FIOH web service provides information not only on the activities of FIOH, but also information services for visitors on a number of multidisciplinary topics, such as safety, occupational health services, ergonomics, chemical safety, mental health at work, work ability, aging and work, etc. The 13 thematic sites provide practical tools for various groups of actors in work life, and the new web toolbox gives practical methods for OSH work. The FIOH website also links the visitors to about 50 Finnish and another 50 international websites relevant to safety and health. There are some 3,000 visits a day. FIOH has a well-equipped information service and library. It acquires and manages information resources, such as electronic and printed journals, books and databases from international providers and takes care of the information support of researchers and students in the Institute and in Finland. It is a national ILO-CIS Centre.

Centre for Occupational Safety

The Centre for Occupational Safety is a collaborative organ for joint activities of employers and workers. Information dissemination comprises a substantial part of its activity. The most important channels of information are press releases, study reports, participation in or organizing public campaigns, and participation in the tripartite and Government OSH programmes. Journals and guidelines are published on occupational safety and health, and the web service provides much OSH information in various forms. The Centre distributes some 250 specific guidelines on safety and health practices and publishes a journal with an edition of 45,000. The branch-oriented information activities are organized through special branch-wide OSH groups. The Centre for Occupational Safety is in charge of organizing the annual ILO/UN World Day on Safety and Health at Work in April in Finland.

5.3 Specialized technical, medical and scientific institutions with linkages to various aspects of OSH

5.3.1 Standardizing agencies

Standardization by the Finnish Standards Association, SFS, is carried out at international, regional, national and company levels (see Chapter 4.2). The Finnish Standards Association and its standards-writing bodies, the Finnish Electrotechnical Standards Association and the Finnish Communications Regulatory Authority are members of the European standards organizations CEN, CENELEC and ETSI. The membership implies obligation to implement all European standards as SFS standards within six months, when the organization in question has approved the European standard. SFS promotes the use of standards in Finland by issuing information on international, foreign and Finnish standards and drafts. The WTO (World Trade Organization) Enquiry Point has operated at SFS by the mandate of the Ministry of Trade and Industry since 1980. National SFS Standards are sold in Finland only by SFS. The distribution of SFS standards abroad is handled by national ISO member bodies. SFS is the Finnish source for all international standards and drafts of the International Organization for Standardization (ISO), for European standards and drafts of CEN, and for publications of ISO member bodies. SFS also distributes other foreign standards and technical regulations.

5.3.2 Institutions specialized in hazard and risk assessment

Finnish Institute of Occupational Health

The Finnish Institute of Occupational Health is a research and advisory institute which carries out a wide variety of hazard and risk assessment activities. These comprise both chemical, physical, as well as safety-related activities, including chemical risk assessment, certification of personal protective equipment (PPE), testing of marine equipment, testing of clothing and equipment for protection against cold, measurement of all types of exposures at work and their methodologies, major hazard and risk assessments and evaluation of products intended to ensure safety. The FIOH also develops general risk assessment methods and practices for expert use and for use at workplaces.

The Safety Technology Authority

The Safety Technology Authority (TUKES) is subordinate to the Ministry of Trade and Industry and acts as the supervisor, developer and expert organization within technical safety and reliability. The mission of TUKES is to protect people, property and the environment against safety risks and to promote reliability in technology. The organization is divided into three groups: Product Safety Enforcement, Plant and Installations Surveillance, and R&D and Support Services. TUKES operates within the realms of chemical and process industry, electrical safety, pressure equipment safety, rescue service equipment, articles of precious metals, construction products, and legal metrology. All these activities need and use risk assessment methodologies, which they also develop for their practical purposes.

STTV National Product Control Agency for Welfare and Health

The activities of the National Product Control Agency for Welfare and Health, STTV, are intended to prevent and control health hazards caused by chemicals and pesticides to humans, and to promote the development of a good living environment. The Agency monitors compliance with regulations on chemical substances and preparations and the placing of these products on the market. It maintains a register of products and material data sheets.

The product register contains data on such chemicals available on the Finnish market which are classified as dangerous or which may cause a hazard. The product register contains data on more than 100,000 chemicals. Of these, 30,000 are available on the market. The collection of data into the register started in 1979. In the early years of registration, safety data sheets compiled in accordance with national legislation were sent to the product register for control of contents and registering.

Others

The State Technical Research Centre, VTT, carries out activities in its respective areas for hazard identification and risk assessment. The VTT has produced a risk assessment method for small and medium-sized enterprises (SME) which helps them to comply with the legal requirements.

The Radiation and Nuclear Safety Authority Finland, STUK, monitors and assesses risks from all sources and all types of radiation to health and safety. The most important occupational groups monitored are nuclear plant workers, health personnel, welders and industrial X-ray users. Ionizing and non-ionizing radiation are covered by STUK activities.

5.3.3 Emergency preparedness and its organization

Emergency preparedness in major accidents

First aid and emergency preparedness at workplaces is, on the one hand, based on the obligations laid down for the employer in the occupational safety and health legislation and occupational health service legislation, as well as on special legislation on dangerous substances, and, on the other hand, on legislation on rescue services and structural fire safety. The provisions on first aid preparedness also include plans for medical rescue services in the case of major accidents.

When there is a risk of a major accident at the workplace, the personnel must be given necessary training and instructions for risk prevention and accident handling procedures. Rescue rehearsals shall be organized when necessary.

The Rescue Act (468/2003) defines several parties that are required to draw up accident rescue plans. The EU major accident directive has been transposed into the national legislation through special legislation on dangerous chemicals, occupational safety and health legislation, legislation on rescue services, and on the environment. Workplaces that are to apply for permission on the basis of the chemical quantities in their establishments must draw up an internal rescue plan for accidents caused by dangerous chemicals. The plans shall include the names of the employees responsible for the first aid and rescue tasks. The plans must also be trained in practice, and the personnel shall be given training and instructions on the right way to act in accident situations. The ILO guide on major hazard control is used as a guide in practice.

Employers carrying out dangerous operations must give the rescue authorities all the necessary information on possible accident hazards and their consequences outside the dangerous establishment, so that an external rescue plan can be drawn up by the regional rescue department or rescue authority.

National, regional and municipal rescue services

The Rescue Act (468/2003) stipulates on the national rescue system and activities. The responsibility for the Finnish rescue services is divided between the Ministry of the Interior and the State Provincial Offices, which supervise the 22 Regional Rescue Departments. Furthermore, Finnish municipalities have a statutory duty to organize rescue services together in rescue service regions. The Ministry of the Interior's Department for Rescue Services directs and oversees rescue services and their availability and standard, is in charge of the preparedness and organization of rescue services at the national level, and coordinates the activities of various ministries in the field of rescue services. The Advisory Committee on Rescue Services assists the Ministry in planning, developing and monitoring of rescue services. A whole host of voluntary activities can also be involved in rescue services. Rescue authorities may also assign training, advice, and educational duties to rescue service organizations. The functions of the Finnish rescue services are divided into accident prevention, rescue operations, and civil defence.

The Finnish rescue service system consists of 22 rescue service regions, responsible for maintaining a rescue service organization to carry out rescue service functions. Together with the 22 regions, 635 voluntary fire brigades and 153 industrial and institutional fire brigades the system comprises 700 fire stations. The human resources are 5,000 full-time employees, and 14,300 part-time crew and voluntary fire brigade members. The Finnish fire-

fighters are multi-skilled rescuers. In addition to fire fighting and rescue work, they take part in preventing fire and other accidents and participate in ambulance and medical services. First aid includes maintaining basic vital functions and controlling severe haemorrhages. The material resources comprise among others approximately 4,000 vehicles and 500 boats.

Rescue operations and emergency missions per year

Finnish rescue departments handle approximately 85,000 emergency missions a year, distributed as follows:

- fires 18%
- rescue missions 25%
- medical first aid (first response) 15%
- checking and verification 35%
- assistance-type missions 7%.

In addition there are about 200,000 ambulance services tasks.

Accident prevention

Finnish rescue services are responsible for the active prevention of fires and other accidents. Accidents can be prevented by taking safety into account in all activities from the outset. Safety work is carried out in cooperation with other authorities, various organizations, and citizens. One of the duties of rescue authorities is to prevent fires and other accidents. The provisions of the Rescue Act concerning accident prevention apply to public authorities and private individuals alike.

Civil defence

Rescue services also have to function in exceptional circumstances, such as major hazards. Rescue authorities take precautions to protect people and property in the event of an emergency. The activities of the government offices and agencies and production plants essential to maintaining the proper functioning of society must also be safeguarded. The responsibility for civil defence managed by public authorities rests with the State, rescue service regions and municipalities. In addition to the activities of the authorities, civil defence involves the self-preparedness of companies and other organizations, property owners, and citizens.

<http://www.pelastustoimi.fi/en/>

5.4 Overall national level of human resources active in the area of OSH

5.4.1–3 Occupational health services personnel and safety personnel

Occupational safety and health personnel are in principle divided into three main categories with different backgrounds, legal position, roles and tasks: Occupational safety and health professionals and experts, workplace safety and health personnel, and OSH inspectors.

A total of 7,144 persons work in the Finnish OSH, about one third being part-timers.

The professionals and experts include occupational health physicians, occupational health nurses, occupational hygienists, ergonomists, physiotherapists, occupational psychologists, safety engineers and technicians. The numbers of expert categories are given in Table 5.3. Their roles and duties in OSH and OHS practices have been stipulated in the legislation.

Table 5.3. Numbers of various categories of experts in occupational health and safety

Profession	Number
Occupational health physicians	2,461
Occupational health nurses	2,615
Occupational physiotherapists and ergonomists	837
Occupational psychologists	343
Occupational hygienists	150
Safety engineers and safety officers	12,439
Total	18,845

The Ministry of Social Affairs and Health shall monitor the use of occupational health service professionals and experts and their education and training.

5.4.4 Workplace level occupational safety and health resources

The workplace level OSH personnel comprise the safety chief appointed according to the Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health. Similarly the safety representatives of employees are elected on the basis of the Act. They constitute the core members of the Occupational Safety and Health Committees, which also have other members appointed by the employer or elected by the workers. Their duties and roles have been defined by the Act on Occupational Safety and Health Enforcement and Cooperation on Workplace Safety and Health.

Table 5.4. Numbers of OSH actors at the workplaces (2005)

Category	Number
Safety chiefs (employer's representative)	12,439
Safety representatives of workers	9,581
Deputy safety representatives of workers	14,317
Safety representatives of salaried employees	4,794
Deputy safety representatives of salaried employees	7,145
Safety agents	10,102
Members of OSH Committees	6,481
Total	54,757

5.4.5 Number of inspectors

The total staff of the OSH inspectorate numbered 475, including the assisting personnel. Of these, 418 worked full-time and 12% were part-timers. Out of all, 4.2% held a leading position, 10% a supervisory position, 69% an expert position, and the rest various types of assisting and support positions. Most of the inspectors had earlier had basic training in engineering, but during the past few years the professional profiles have shifted to a more multiprofessional direction in line with the human resources requirements of the renewed OSH Strategy and the renewed legislation.

Table 5.5. Number of OSH persons in OSH Inspectorates in relation to the workforce

Number of personnel	Density 1: Total workforce per OSH person	Density 2: Employees per OSH person	Density 3: % of OSH persons out of total workforce/ employees
475	4,979	4,339	0.20/0.23

5.4.6 Number of environmental protection specialists

The Finnish OSH system does not comprise environmental protection activities, which are the responsibility of the Ministry of the Environment. The Finnish Environmental administration comprises the Ministry of the Environment, the Environment Institute, 13 Regional Centres and municipal environmental protection activities. In the Government Environment organizations more than 3,000 persons are employed, of whom about 2,000 in the Regional Environment Centres. More than 300 of them are directly employed in environmental protection activities. The number of human resources for municipal environmental activities is 630, of whom a substantial part is estimated to serve for environmental protection activities, including inspection.

The OSH Administration collaborates with all the organizational levels of environmental protection authorities. Environmental noise is considered when the OSH inspectors carry out OSH inspections concerning machinery.

In some large companies the occupational safety and health activities and the environmental protection measures are combined in either safety and health units or in environment protection units. Respectively, the Occupational Safety and Health Committee may cover both of these activities.

6

Statistics on occupational accidents and diseases

The statistics on occupational accidents are collected into the official statistics of Statistics Finland from notifications made by the employers to the accident insurance institutions on the basis of legislation, from the Farmers' Social Security Institution and from Statistics Finland's own labour force surveys. The most recent report was published in 2004 and provides data on the year 2002. The Report contains a relatively detailed description of accidents by branch of economy, occupation, gender, age, activity in which the accident happened, severity of the consequences, injured part of the body, duration of disability, and immediate cause of the accident. Data on total numbers of all accidents, severe, fatal and minor, are given, and the rates are provided per 1,000 employees in the case of all accidents and per 100,000 for fatalities. Every fatality and severe accident is investigated by a special body involving the police.

The Federation of Accident Insurance Institutions collects its own statistics on the basis of notifications made by employers as stipulated by law. The Finnish statistics contain also minor accidents causing insurance events (even cases which do not cause work disability but, for example, treatment costs are incurred). The accidents leading to three days or more disability, severe accidents leading to at least one month disability and fatal accidents are also specially registered.

6.1 Registered numbers of occupational fatalities

The data on fatalities are highly reliable, as every fatal accident is carefully investigated by a special body and the police. Again all fatalities are registered, including those at the workplace, in traffic and in commuting, as well as the fatalities of farmers and the self-employed. The numbers and rates of fatalities in 1975–2002 are given in Figure 6.1.

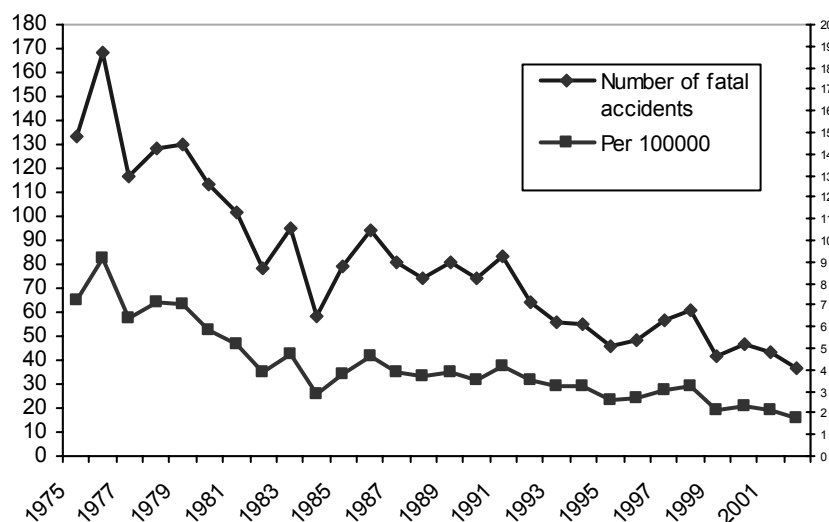


Figure 6.1. Fatal accidents at the workplace in 1975–2002 (Statistics Finland 2002)

6.2 Registered numbers of occupational injuries

All accidents that happen at work, in traffic work and in commuting traffic of all sectors of the economy, including industries, services, the private and public sectors, and the self-employed and entrepreneurs are registered. This results in higher absolute and relative figures than in many other countries, where only the accidents that happen at work may be registered. The registration of minor accidents leading to less than 3 days of disability explains about 30% of the total injury burden, commuting accidents about 13%, and the accidents of the self-employed and farmers about 7% of the total number (124 000) of accidents. Thus, if only the accidents of wage earners at work, leading to an absence of 3 days or more, were to be registered, the figures would be almost 50% less than they are at present. The high coverage of the registration is, however, important, as it is an important tool to ensure the fairness of compensation and for targeting preventive and control measures. The relative risk, for instance, of self-employed farmers is higher (58.3/1000) than that of the majority of the employees (average 27.9/1000), thus calling for intensive preventive measures.

Table 6.1. Accidents among different types of workers at work and in commuting in 2002

Mode of employment	Total	Accidents at the workplace	Commuting accidents
Wage earners	113,890	97,524	16,366
Less than 3 days absence	46,021	39,720	6,301
3 days or more absence	67,804	57,767	10,037
Fatalities	65	37	28
Self-employed	4,304	3,951	353
Less than 3 days absence	1,325	1,227	98
3 days or more absence	2,975	2,721	254
Fatalities	4	3	1
Farmers	6,641	6,641	-
Less than 3 days absence	698	698	-
3 days or more absence	5,935	5,935	-
Fatalities	8	8	-
Total	124,835	108,116	16,719

6.3 Registered numbers of occupational diseases

A special Act on Occupational Diseases (1343/1988) stipulates the definition of a disease, gives examples of causative factors or conditions, and defines the principles of compensation as stipulated in the Act on Accident Insurance. The statistics on occupational diseases were until 2002 collected by the Finnish Institute of Occupational Health. The registration system is under reorganization, and therefore the data are so far available only up to the year 2002. An occupational disease can be caused by physical, chemical or biological factors at work or by physical overload and poor ergonomics (e.g. repetitive strain). Psychological factors are accepted as a cause of an occupational disease only in rare cases, for example, post-traumatic shock. The Ministry of Social Affairs and Health together with the Finnish Institute of Occupational Health has published a guidebook to aid in the recognition of occupational diseases and related exposures and conditions.

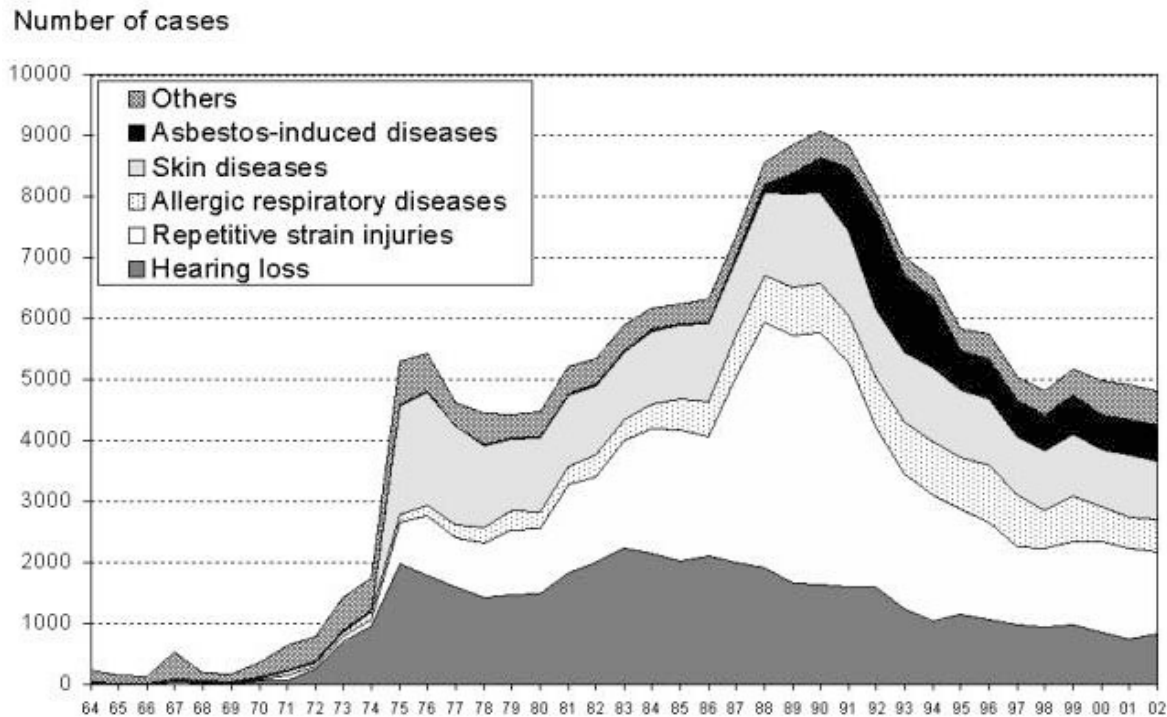


Figure 6.2. The total numbers of occupational diseases in 1964–2002 and the main categories of diseases (FIOH)

The number of registered occupational diseases is in the long term affected by changes in legislation and, for example, by surveys of specific occupational diseases, such as screening of asbestos-related diseases.

6.4 Estimate of underreporting

As described above, the coverage of occupational accident registration in Finland is high. This may be mainly due to incentives embedded in the insurance system, as both the injured person and the employer will benefit from notification. A number of interview or questionnaire surveys have investigated the occurrence of accidents during the past 12 months. The registered annual rate of accidents at work plus accidents during commuting was 5%, and the rate obtained in a recent interview survey was also the same. In spite of the risk of numerous sources of error in the comparison of two different data sources, the effect of possible under-reporting is assumed to be relatively low.

7

Policies and programmes of employers' and workers' organizations

7.1 Employers' organizations

The employers in all branches of the private sector, municipal sector, government sector, as well as in both big industries and SMEs are highly organized and participate fully in the tripartite collaboration at all levels. The organizations have drawn up concise strategies for OSH and on wider objectives for the development of work life in their respective sectors. The key process is collective bargaining resulting in medium-term (2–3 years) collective agreements which will usually cover identically all the main three employer sectors. OSH elements are nearly always included in the collective agreements. The most important outcome of these agreements is the special agreement on occupational health and safety. It contains several detailed actions, and particularly the agreement on the training of employees, which deals mostly with OSH training. The employers (Confederation of Finnish Industries, EK; Municipal Employers, Government as employer, Church) have made agreements on training in occupational safety and health and on collaboration in occupational safety and health issues with all the three major confederations of the employees' trade unions.

7.2 Workers' organizations

All the three major central organizations of employees, the Central Organization of Finnish Trade Unions (SAK), the Finnish Confederation of Salaried Employees (STTK), and the Confederation of Unions for Academic Professionals in Finland (AKAVA) participate in the collective bargaining process and negotiate on OSH issues as a part of several other items concerning salaries, work life in general, and safety and health. The central organizations have well developed OSH strategies and programmes on OSH and on the development of several other social and qualitative aspects of work life which provide a good basis for negotiations. Often the agreements contain a well-designed follow-up system for the evaluating the implementation of the agreements in practice.

7.3 The Central Union of Agricultural Producers and Forest Owners (MTK)

The MTK participates in the collective bargaining process, having the Government as the counterpart, and representing the interests of farmers and forest owners. The MTK has designed a policy for OSH and for occupational health services. Key OSH issues in the negotiations have been the improvement of the coverage of occupational health services for farmers, and the provision of training and education in safety. Also the mental work load and stress and work ability have been problems discussed in connection with agricultural workers' health. OSH issues are also negotiated with the Government in the formal process dealing with the development of agriculture and with rural development programmes. When appropriate, MTK also participates in the planning and implementation of the government-initiated national programmes, such as the development lines of occupational health services, OHS 2015.

7.4 Summary of the employers' confederations and trade unions

The coverage of Finnish tripartite collaboration is high and the collective agreement process has enjoyed full support from all the three parties, the government, employers and employees. It has also been found highly successful in providing social peace, development of the Finnish economy and social dimension, including OSH throughout the decades. As Finland is rated highly in the international productivity ranking lists, it may be concluded that such a widely implemented national negotiation system has also been conducive to productivity and competitiveness. Table 7.1 below summarizes the participation of the Finnish social partners in the bargaining process.

Table 7.1. Summary of the coverage and membership of the Finnish labour market organizations*

Employers	Coverage of sectors	Member associations	Coverage of enterprises	Coverage of employees	Involvement in OSH policy
Confederation of Finnish Industries (EK)	Industry and private services	43 industrial and services employers' associations	15 000 member companies	900,000	Partner in national collective agreement for private sector
Local authority employers in Finland	All municipal activities	Part of the Association of Finnish Local and Regional Authorities	431 municipalities, 231 joint municipal authorities	431,000	Partner in the National Collective Agreement for the municipal sector
Office for the Government as employer	The whole government sector	Constitutes Department of Personnel of the Ministry of Finance	110 government organizations and institutions	124,000	Partner in the National Collective Agreement for Government sector
Trade Unions	Coverage of sectors	Member associations	Coverage of enterprises & workplaces	Number of members	Involvement in OSH policy
Central Organization of Finnish Trade Unions (SAK)	Industry, public sector, services, 10 district offices	26 National Unions with 140 local organizations, 4000 local unions 14 regional service centres	40,000 shop stewards, 60,000 in other steward activities, 9,600 safety representatives and 14,000 deputy safety representatives	1,080,000 46% in industry 31% in services 23% in public sector	Partner in the collective agreements with all the three employer sectors
Confederation of Salaried Employees (STTK)	Industry, health sector, public services, banking & insurance	20 member unions	Almost all sectors of the economy	640,000 29% health sector 21% industry 15% municipalities 11% private services 24% others	Partner in the collective agreements with all the three employer sectors
Confederation of Unions for Academic Professionals (AKAVA)	Industry, education, research, services, health care	32 member unions	Almost all sectors of the economy	448,000 44% private industry and services 38% municipalities 13% government 5% others	Partner in the collective agreements with all the three employer sectors
Farmers and forest owners	Coverage of sectors	Member associations	Coverage of enterprises & workplaces	Number of members	Involvement in OSH policy
Central Union of Agricultural Producers and Forest Owners (MTK)	128,000 mainly family farms, over 120,000 forest owners	400 municipal farmers' associations which form 16 unions, 338 forestry societies organized in 19 provincial unions	70% of all farmers and forest owners	189,000, incl. 168,000 farmers, 16,000 Swedish-speaking farmers and 5,000 forest owners	OSH is an important strategic element and included in bargaining with the Government on agricultural development and on rural development.

* The membership figures are not identical with the labour force survey figures in Chapter 9. The Church as an employer is not included in this Table.

8

Regular and on-going activities related to OSH: Examples

8.1 Regular activities at the national level

8.1.1 National initiatives

Finland has organized a National Occupational Safety and Health Week in October of each year since 1980. The FIOH, several NGOs, including the Invalid League, the Allergy Association, the Red Cross, the Societal Council of the Lutheran Church, the Federation of Accident Insurance Associations, and the Centre for Occupational Safety have participated in the Organizing Committee. Funding has been obtained from the Ministry of Social Affairs and Health, from the participating organizations, and later on from the Finnish Work Environment Fund. The theme of the week has always been a topical OSH problem or development idea which has been widely discussed during the week at the workplaces and in dozens of seminars organized throughout the country. Since 1996 the European Occupational Safety and Health Week has been coordinated by the European Agency on Safety and Health at Work. The European week has provided the framework and a European theme for the national Occupational Safety and Health Week. The tripartite working group participates in the planning and implementation of the European Occupational Safety and Health Week in Finland under the leadership of the Occupational Safety and Health Department of the Ministry of Social Affairs and Health. Dozens of thousand of participants attend the occasions of the week. The Finnish Institute of Occupational Health organizes every year a two-day Occupational Health and Safety Convention that brings together some 700–900 occupational health and safety experts to learn about the most recent advances in the field and to share their experiences.

The World Day of Safety and Health at Work on 28 April is organized annually by the Centre for Occupational Safety.

The VETO Programme, under the auspices of the Ministry of Social Affairs and Health, arranges information campaigns raising people's awareness about the need for and possibilities of ageing workers to stay at work for 2–3 years longer than at present. Another national campaign, implemented under the Ministry of Social Affairs and Health and in collaboration with several other organizations, is entitled the 'Accident Prevention Day'.

8.1.2 Industry initiatives

Safety card

A new innovative safety and health practice, called the Occupational Safety Card, has been launched by the Centre for Occupational Safety in collaboration with the social partners and several industries. The card is operated in practice by the Federation of the Accident Insurance Institutions. The card is awarded after a one-day introductory training session on safety and health given by a specially trained trainer. After the training event the safety card is granted for a five-year period to the worker. The card is designed especially for workers

at worksites that are shared by several enterprises and employers operating simultaneously in the same site. It is therefore important that each operator masters a certain minimum competence in OSH. The Card has become very popular, and some companies have trained 100% of their personnel in the courses. Some large companies also provide training to their subcontractors and clients in safety card courses.

<http://www.tyoturva.fi/tyoturvallisuus/hallinta/ttkortti/>

Zero Accident Forum

In Finland, a national Zero Accident Forum has been established in 2004. It is a part of the National Accident Prevention Programme and is coordinated by the Finnish Institute of Occupational Health. At present, there are 120 companies and organizations involved in the Forum. The goal is to share knowledge, experiences and good practices with the aim to prevent all preventable accidents.

<http://www.nollatapaturmaa-foorumi.fi>

Corporate Social Responsibility

A special campaign of the Employers has been the extensive action programme for Corporate Social Responsibility (CSR), which has been well received by the Finnish industrial as well as other employers. The guideline for the development of CSR contains the objectives and guidelines needed to ensure the good care of the personnel of the company, including safety and health, promotion of work ability and well-being at work.

www.ek.fi/arkisto/ekarchive/20010124-144202-178.pdf

8.1.3 Trade Union OSH activities and initiatives

All the central organizations of trade unions and individual unions organize campaigns to promote safety and health at work, either by targeting actions at their membership or by calling attention to special problems of the sector, occupation or theme in concern. They also participate actively in the campaigns organized within the frames of the tripartite National Action Programmes, which constitute the majority of the campaigns.

8.2 International collaboration

As a small country, Finland has traditionally participated widely in international collaboration. Within its limits of resources, Finland is active at all levels of collaboration, namely in the UN organizations, international industrial and other associations, at the EU level, and at the sub-regional level.

OSH Administration

EU collaboration

The Finnish Occupational Safety and Health Authorities cooperate with the EU Advisory Committee on Safety and Health at Work, as also with the Governing Bodies of the European Foundation for Improvement of Living and Working Conditions, and the European Agency on Safety and Health at Work. The authorities also cooperate with expert bodies like the Senior Labour Inspectors Committee (SLIC), and the Scientific Committee on Occupational Exposure Limits (SCOEL). The representation in the EU bodies is presented in Table 8.1.

Table 8.1. Representation of the OSH Administration in EU bodies

Activity	Participants
Council of Ministers	Minister of Social Affairs and Health and in part Minister of Labour
Advisory Committee on Safety, Health and Hygiene at Work (tripartite)	Representatives of the Government (Director General of OSH Department), employers and workers
Senior Labour Inspectors Committee (SLIC)	Director General of the Department for Occupational Safety and Health
Scientific Committee on Occupational Exposure Limits (SCOEL)	The SCOEL members are experts in chemistry, toxicology, epidemiology, occupational medicine and occupational hygiene, and they act as independent scientific experts.
The Governing Board of the European Foundation for Improvement of Living and Working Conditions, Dublin	Representatives of the Ministry of Labour, employers and workers
The Board of the European Agency for Safety and Health at Work	Tripartite representation of the Ministry of Social Affairs and Health, employers and workers
Focal Point for the European Agency for Safety and Health at Work	Ministry of Social Affairs and Health, Department for Occupational Safety and Health, representatives of employers and workers

Nordic collaboration

The collaboration within the Nordic Council of Ministers in the field of occupational safety and health has a history of 50 years, and it continues actively. The activities cover the collaboration between the Nordic Parliaments (Nordic Council), Nordic Governments (Council of Ministers) and at the level of Senior Government Officials (Ministry of Social Affairs and Health and Ministry of Labour), as well as the ministries and the OSH Administrations (Nordic Working Environment Committee) and Research Institutions (Nordic Working Environment Research Committee). The activity is steered by a special Work Environment Convention from the year 1989 and is implemented within the frames of a Nordic Action Programme for Occupational Safety and Health, which is periodically renewed. The Nordic Social Partners collaborate in their respective organizations and participate on the tripartite basis in the activities of the Nordic Council and the Council of Ministers.

UN Special Organizations, WHO and ILO

Finland participates in the annual governing events of both the WHO and the ILO, and in its turn in the governing bodies. A large part of the practical international collaboration takes place through the activities of the research institutions, particularly FIOH. All the research institutions mentioned in Chapter 5.1.2 are actively involved in the international collaboration in their own fields. The aim of this collaboration is to avoid duplication of work, and to utilize the synergy available in the field of occupational health and safety.

The strong support from the part of Finland to the occupational health programmes of the World Health Organization has been clearly expressed in the strategies of both the Ministry of Social Affairs and Health, and the FIOH. Collaboration with the ILO has also always been a priority.

Social Partners

The Finnish employers, besides collaborating within the frames of tripartite collaboration at the Nordic level, in the EU and in the ILO, also collaborate with the international employers' organizations, the European employers' *Union des Industries des pays de la Communauté européenne*, UNICE, and at the global level within the framework of the International Organization of Employers (IOE), particularly with the ILO and the other UN bodies.

The central organizations of trade unions similarly collaborate with their European and global organizations, i.e. the European Trade Union Confederation (ETUC), and the global trade union organization, the International Confederation of Free Trade Unions (ICFTU).

Finnish Institute of Occupational Health

EU

Participation in the EU collaboration has been carried out in the form of the following activities: representing Finland in the official bodies of the EU, participating in the standardization work, participating in the risk assessment tasks of the EC, participating in the Framework Programmes of research and the networks of the EU, and carrying out joint projects with both the Dublin Foundation for Improvement of Living and Working Conditions and the Bilbao Agency for Safety and Health at Work. Also, the Ministry of Social Affairs and Health assigned certain tasks to FIOH in the EU collaboration.

UN Special Organizations, WHO and ILO

One of the main priorities and forms of the FIOH international activities has been the collaboration with the international organizations, WHO and ILO. This support has been channelled through FIOH contributions to both **strategic and technical activities of the organizations**. The contributions to the work of both ILO, as well as of the International Programme on Chemical Safety (IPCS), and the International Agency for Research on Cancer (IARC), have also been emphasized because they provide a forum for bringing about a global and system-wide impact on occupational health and safety.

Providing **information support** for the occupational health and safety experts has been one key area where FIOH has collaborated actively with ILO and WHO by editing and publishing the African and Asian-Pacific Newsletters on Occupational Health and Safety. The Newsletters have been integral elements in the Regional Programmes of ILO in South-East Asia, and of WHO/ILO joint efforts in Africa.

<http://www.ttl.fi/Internet/English/Information/Electronic+journals/>.

The topics in WHO collaboration have been development of occupational health services, prevention of exposure to environmental tobacco smoke, mental health, as well as OSH profiles and indicators.

Nordic collaboration

FIOH takes part in Nordic collaboration both within the Nordic Council of Ministers and directly among the five Nordic sister institutions. The Nordic Institute for Advanced Training in Occupational Health and Safety, NIVA, is located at the FIOH premises and it organizes complementary training to occupational safety and health experts both in the Nordic countries and elsewhere.

Collaboration in the neighbouring regions and twinning

FIOH has traditionally collaborated with its neighbouring regions, i.e. the Kola Peninsula, Karelia, and Estonia. This collaboration has been strengthened from 1995 on, as FIOH, at the request of the WHO Regional Office for Europe Consultation, started building the Baltic Sea Network on Occupational Health and Safety. In addition to the network of occupational health and safety experts in the Region, also an Internet network was created (www.balticseaosh.net). The Barents Newsletter on Occupational Health and Safety (www.ttl.fi/BarentsNewsletter) was established in 1998 to help bring together the Kola Peninsula, Karelia and other Barents regions on an information basis to the Baltic Sea Network. Two EU PHARE Twinning Projects have been carried out in collaboration with the Estonian colleagues, one is about to start in Estonia and another in Latvia.

Development collaboration

FIOH has collaborated with the East African countries from the beginning of the 1970s. The collaboration in the developing countries has continued during the past few years in two ways: preparation of indicators and profiles, and publishing of the regional newsletters. This work has been financially supported by the Finnish Ministry for Foreign Affairs, FIOH, WHO, and ILO. The regular publishing of the African and Asian-Pacific Newsletters on Occupational Health and Safety (www.ttl.fi/AfricanNewsletter and www.ttl.fi/Asian-PacificNewsletter) has continuously contributed to the information support of the occupational health and safety personnel in these regions.

International professional associations

FIOH experts have traditionally been strongly involved in the work of international professional associations, such as the International Commission on Occupational Health (ICOH), the International Occupational Hygiene Association (IOHA), the International Ergonomics Association (IEA), the International Commission on Non-Ionizing Radiation Protection (ICNIRP), and the European Union of Medical Schools, just to mention a few.

A summary of the key international activities is presented in Table 8.2.

Table 8.2. The most important international activities in the field of occupational safety and health

International organization	Activity	Actors in Finland	Comments
ILO	International Labour Conference (ILC)	ILO Committee; Ministry of Labour, social partners	<ul style="list-style-type: none"> • Preparation of the Finnish position to the items of the ILC Agenda
	Implementation of Joint ILO/WHO Committee on Occupational Health decisions	FIOH	<ul style="list-style-type: none"> • BOHS • Asbestos • Prevention of silicosis
	Supporting SafeWork technical projects	Ministry of Social Affairs and Health, FIOH	<ul style="list-style-type: none"> • Information support to the DCs – joint publishing of regional newsletters
	World Day on Safety and Health at Work	Centre for Occupational Safety	<ul style="list-style-type: none"> • Organization of the event of the Day
WHO/ILO/UNEP IPCS	EHCs, CICADs, ICSCs	FIOH	<ul style="list-style-type: none"> • Statements on the Criteria Documents • Preparation of ICSCs
IARC	Cancer risk evaluation	NPHI, FIOH	<ul style="list-style-type: none"> • Preparation of monographs
WHO	Global Network of WHO Collaborating Centres in Occupational Health	FIOH	<ul style="list-style-type: none"> • Contribution to the Planning Committee • TF 13: National and Local Profiles in OH • African Joint Effort • Information support to DCs – joint publishing of regional newsletters
WHO/EURO	European Network of WHO CCs in OH	FIOH STAKES, NPHI, FIOH	<ul style="list-style-type: none"> • BOHS • Mental health at work • Evidence base in OH • Environmental tobacco smoke
OECD	HPV Chemicals	FIOH, STTV	<ul style="list-style-type: none"> • Risk assessment
EU, Bilbao	Administration Topic Centres Information	Ministry of Social Affairs and Health, social partners, FIOH	<ul style="list-style-type: none"> • Mainly information
EU, Dublin	Research	Ministry of Social Affairs and Health, Ministry of Labour, social partners, FIOH	<ul style="list-style-type: none"> • Mainly research
NGOs	Special programmes for OSH	FIOH, professional associations	<ul style="list-style-type: none"> • Mainly research, meetings, publications

9

General data

9.1 Demographic data

9.1.1 Total population

At the end of 2003 the total population of Finland was 5.2 million, of whom 48.9 % were males and 51.1% were females.

(http://www.stat.fi/tup/suoluk/taskus_vaesto.html#Väestöiänmukaan)

Statistics Finland carries out periodically a labour force survey, which represents the total Finnish labour force. Also the population groups in the 15–74-year-old age range, that do not participate in work life, are studied. The concepts and terminology have been harmonized in line with the ILO recommendation, thus enabling comparisons with other Member States. The present data are based on the survey of 2003 (Statistics Finland. Labour market 2004:13).

The total Finnish labour force consists of 2,600,000 persons, i.e. precisely 50% of the total population. 2,365,000 (91%) of them are actively employed, while 235,000 (9%) are unemployed. The rate of unemployment is slightly below the EU average and has been declining for the past 10 years. The labour force participation rate (the percentage of employed out of the total population of working age) is 66.2% (69.0% for men and 63.5% for women).

Total population 5 213 000 100%		
Population at working age (15–74 yr) 3 926 000 75% of total population		< 15 yr 924 000 18%
		>75yr 363 000 7%
Labour force 2 600 000 50% of total population		Persons 15–74 yr not in labour force 1 327 000 25% of total pop.
Employed 2 365 000 45% of total population		Unemployed 235 000 5% of total pop.
Agri-culture 120 000 2% of tot. pop.	Industry & construction 621 000 12% of total population	Services 1 624 00 31% of total population

Figure 9.1. Population and working population in Finland in 2003 (Statistics Finland 2004)

The Finnish workforce is ageing rapidly due to the demographic developments of the post World War II baby boom age cohorts. The rate of ageing is earlier and quicker than in the EU on average. The ageing process in Finland is currently in its fastest phase (Table 9.1) and will level off by 2015 when the baby boom generation has retired. As the shortage of labour will be substantial in the forthcoming years, active policies for lengthening the active working years of the working-aged population from both the younger and older ends have been launched.

It is likely that the young age groups are not going to replace quantitatively the retiring large age cohort, and therefore the shortage of workforce will be considerable. The Government and the Social Partners have jointly initiated several actions for responding to the rapid ageing:

- a) Launching research programmes on ageing and work ability
- b) Launching a Government's National Programme for Ageing Workers
- c) Establishing a new paradigm for promotion and maintenance of work ability
- d) Reform of work pension schemes conducive to working at older age
- e) Offering age management training programmes for company managers
- f) Adjustment of work to ageing workers and improvement of rehabilitation services
- g) A special action programme to prepare for the smooth integration of young workers to work life
- h) Amendments in the pension legislations to encourage longer working careers and providing incentives for later retirement.

9.1.2 Total economically active population

At the end of the year 2003 the total economically active population of Finland was around 2.6 million, and the total employed population was 2.365 million.

At the moment the only growing age group is that of ageing workers, while especially the number of young female workers (aged 20–24 and 25–29 years) is on the decline. One of the reasons is the enrolment of young women in longer-term studies compared to the young men, who on average are under-represented in the university study programmes.

Table 9.1. Distribution of the economically active population by gender and age in 2003, in thousands (Statistics Finland. Labour market 2004:13)

Age group	Men	%	Women	%	Both sexes	%
15–19	45	3.33	54	4.32	99	3.80
20–24	116	8.58	104	8.33	221	8.50
25–29	147	10.88	123	9.85	271	10.42
30–34	151	11.18	123	9.85	274	10.53
35–39	176	13.02	153	12.25	329	12.65
40–44	175	12.95	167	13.38	342	13.15
45–49	173	12.80	174	13.94	347	13.34
50–54	177	13.10	172	13.78	350	13.46
55–59	133	9.84	137	10.98	270	10.38
60–64	42	3.10	35	2.80	77	2.96
65–74	15	1.11	5	0.40	20	0.76
Total	1,351	100	1,248	100	2,600	100
Larger age groups						
15–74	1,351	100	1,248	100	2,600	100
15–64	1,337	98.9	1,243	100	2,580	100
15–24	161	11.91	159	12.74	320	100

The Government has launched several actions, including the changes in the pension legislation, to lengthen the working careers of both the younger and older age groups.

The ratios of people 65+ in relation to the total labour force in 30 OECD countries in the years 2005 and 2020 are given in Figure 9.2.

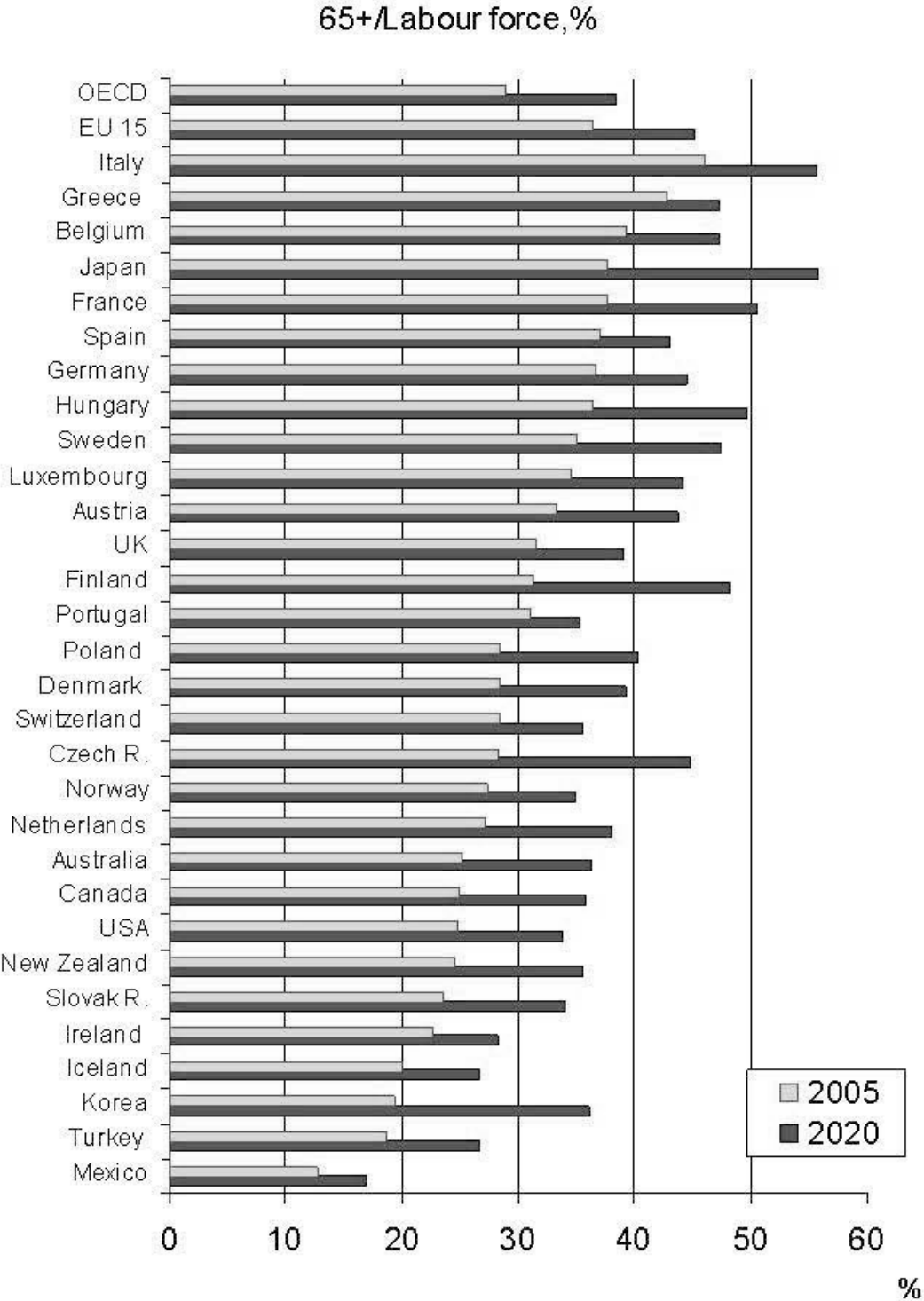


Figure 9.2. Ratios of people 65+ in relation to the total labour force in 2005 in 30 OECD-countries (OECD 2005)

Groups outside the labour force

The groups outside the labour force (1,326,000, 25% of the 15–74-year-old population) are shown in Table 9.2. The largest and growing group is that of pensioners, due to the growing average age of the workforce.

Table 9.2. Persons aged 15–74 years who were outside the labour force in 2003

Group	Number
Students	332,000
Conscripts and others	127,000
In domestic work	88,000
Disabled and pensioners	779,000
Total	1,326,000

The number of persons (16–64 years) outside the workforce because of work disability was 267,140, i.e. about 10% of the total labour force.

Labour contracts and part-time work

Long-term permanent work has been traditionally the mode of employment in Finland as in other Nordic countries. Shorter-term contracts have, however, become more common since the mid-1990s. The prevalence of fixed-term contracts is given in Figure 9.3. The most active users of fixed-term contracts are people in public and other services, followed by workers in agriculture and forestry, and in the hotel and restaurant sectors. In public and other services this trend is associated with constricting public budgets, while in private services and in the agriculture and hotel and restaurant sectors it is due mostly to the seasonal variation in the business volumes of these sectors.

In the year 2003 a total of 12.5% of the total number of employees worked on a part-time basis. Altogether 74.9% of the Finnish employees worked on a continuous full-time basis.

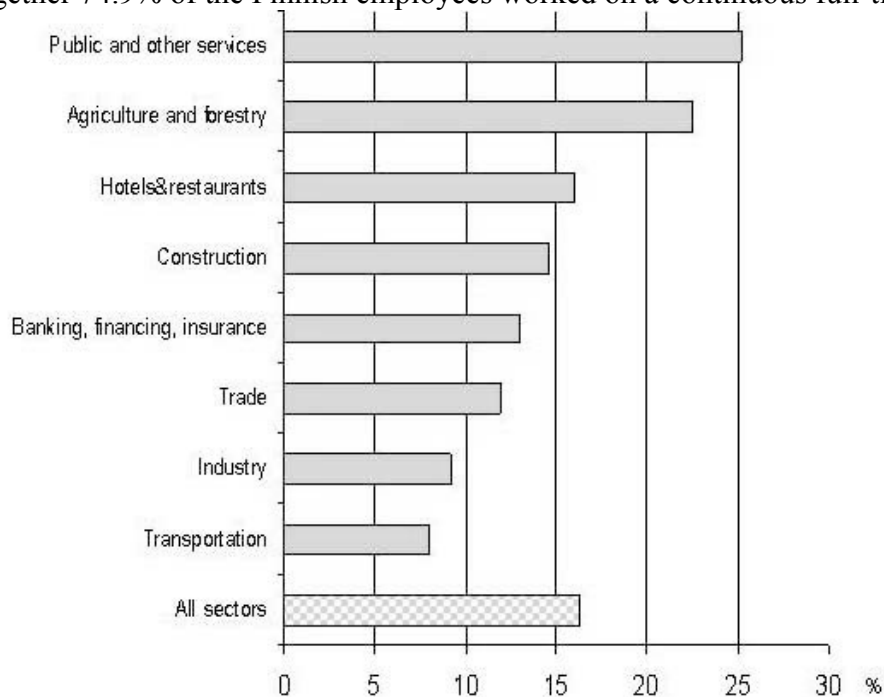


Figure 9.3. Fixed-term contracts among Finnish employees in 2003 as of % of all work contracts (Statistics Finland 2004)

Unemployment

In the early 1990s Finland experienced the highest ever rates of unemployment, i.e. close to 20%. The recovery was nevertheless fast, and since the mid-1990s continuous improvement of the employment situation and a decline in unemployment has been recorded. The employment levels of the pre-recession period have, however, not yet been reached, and unemployment particularly among the oldest age groups is still high. The unemployment of young persons, on the other hand, has declined rapidly. The overall unemployment has been on the decline. In October 2005, the number of unemployed was 185,000 and the unemployment rate was 7.2%. The participation rate in work life was 67.9%.

Table 9.3. Numbers of unemployed in various age groups and change in percentage points during one year: February 2004–February 2005 (Statistics Finland 2005)

Per cent	2005/02	2004/02	2005/02–2004/02 <i>Change, percentage points</i>
<i>Total unemployment rate, %</i>	9.2	9.0	0.2
Age 15–24	21.6	21.6	0.0
25–54	7.4	7.9	-0.5
55–74	9.0	5.9	3.1
15–64	9.2	9.1	0.1

References

http://www.stat.fi/tup/suoluk/taskus_vaesto.html#Väestöjänmukaan

http://www.stat.fi/tup/suoluk/taskus_tyolama.html

<http://laborsta.ilo.org/cgi-bin/brokerv8.exe>

9.2 Levels of literacy

Of the whole Finnish population, 100% can read at the age of 15 and over. The PISA (Programme for International Students Assessment) is a joint research programme of the member countries of OECD. In the PISA study from the year 2003, the mathematical knowledge and skills of Finnish students were the best among the OECD-countries, as was also literacy performance. Their knowledge and skills in natural sciences are top class, and problem-solving skills are among the best.

9.3 Sectors of economic activity

Enterprises

228,000 enterprises are registered in Finland (2003). The industrial, construction, transport and technical services sectors had the largest numbers of enterprises and industry, trade and technical services the largest numbers of personnel (Table 9.4).

Table 9.4. Distribution of Finnish enterprises between sectors of economy (Statistics Finland 2005. http://www.stat.fi/tup/suoluk/suoluk_yritykset.html)

Sector of economy	Enterprises	%	Personnel 1,000	%
Agriculture, hunting, forestry and fishing	7,640	3.3	20	1.5
Industry	24,964	10.9	404	30.9
Construction	30,803	13.5	123	9.4
Trade	46,561	20.4	236	18.0
Hotels and restaurants	10,126	4.4	49	3.8
Transport, storage and communications	23,097	10.1	149	11.4
Financial intermediation and insurance	3,166	1.4	43	3.3
Real estate and renting activities	11,810	5.2	27	2.1
Technical services and other business activities	33,481	14.7	164	12.6
Other branches	36,774	16.1	93	7.1
All branches	228,422	100	1,308	100

As in most other countries the size distribution of enterprises is very skewed for the favour of the smallest sizes. Close to 99% of enterprises are small, employing fewer than 50 persons and 93% of the entire enterprise population are microenterprises, employing fewer than 10 persons. Altogether 44% of the Finnish workforce works in small or microenterprises and 34% in large enterprises with a staff of 500 or more.

Table 9.5. Size distribution of Finnish enterprises (Statistics Finland 2005) http://www.stat.fi/tup/suoluk/suoluk_yritykset.html

Number of personnel	Number of enterprises	%
0–9	212,428	93.0
10–49	13,154	5.8
50–249	2,265	1.0
250–499	316	0.1
500–	259	0.1

Workforce in various sectors of economy

The tertiary sector (services) covers more than two-thirds of employment in Finland, the secondary sector (manufacturing) about a quarter and the primary sector (agriculture, forestry and mining) about 5% (Figure 9.4). Thus, Finland is typically a service society. As about one third of the workforce is working in the information sector, Finland can also be called as an information society.

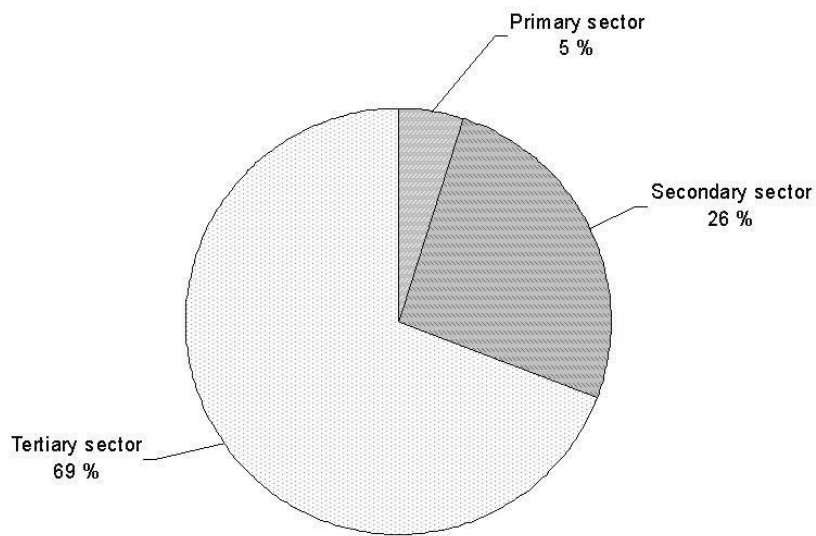


Figure 9.4. Employment by the main sector of economy (Statistics Finland 2004)

Various kinds of private and public services constitute the largest sector, followed by manufacturing industry, trade and the hotel and restaurant sector, financing and insurance, transportation, construction, and agriculture and forestry. The rough distribution of the employed population according to the industry is given in Figure 9.5.

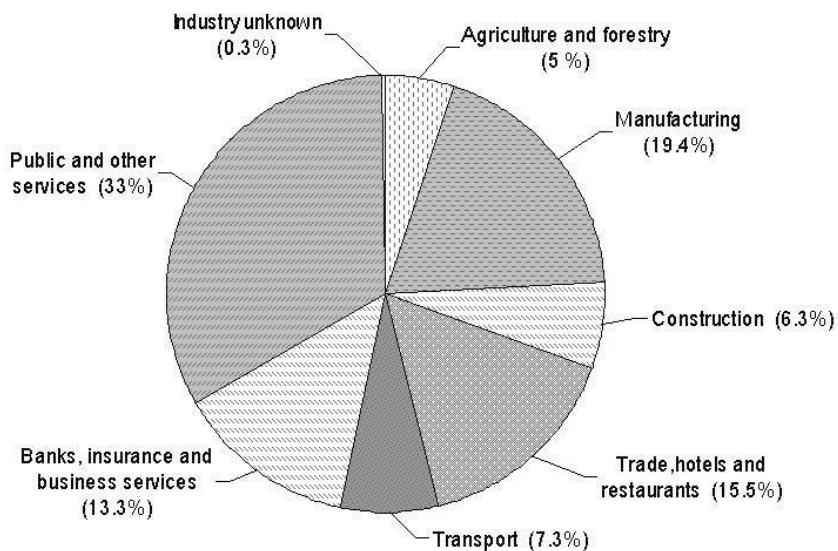


Figure 9.5. Employment by industry (Statistics Finland 2004)

Traditionally the proportion of self-employment out of total employment is low in Finland. During the 1990s and 2000s the proportion has, however, turned to growth. At present some 300,000 people (12.7% of the total workforce) are either self-employed farmers (70,000) or other entrepreneurs. Self-employment is most common in agriculture and in commercial services and in hotel and restaurant services (Figure 9.6).

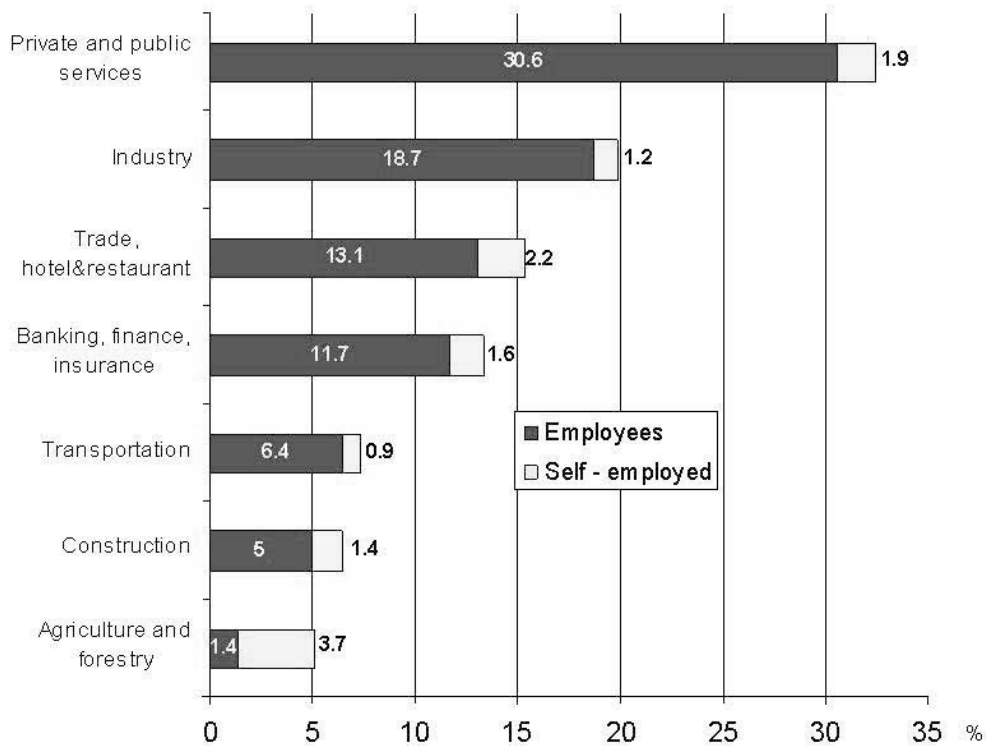


Figure 9.6. Employment and self-employment by sector of economy in Finland (Statistics Finland 2004)

Employment by type of employer and employment

The private sector is by far the biggest branch, employing 1,709,000 people (72.3% of the employed), the municipal sector the second with 507,000 employees (21.4%) and the government the smallest with 144,000 employees (6.1%). Of the 2,365,000 employed, 2,061,000 are employees and 304,000 self-employed, of whom about 100,000 in agriculture.

The distribution of workforce by the type of employer is given in Figure 9.7.

Out of the total number of employed persons, 529,000 (25.7%) are upper level white-collar employees, 780,000 (37.8%) are lower level white-collar employees, and 747,000 (36.2%) are blue-collar workers.

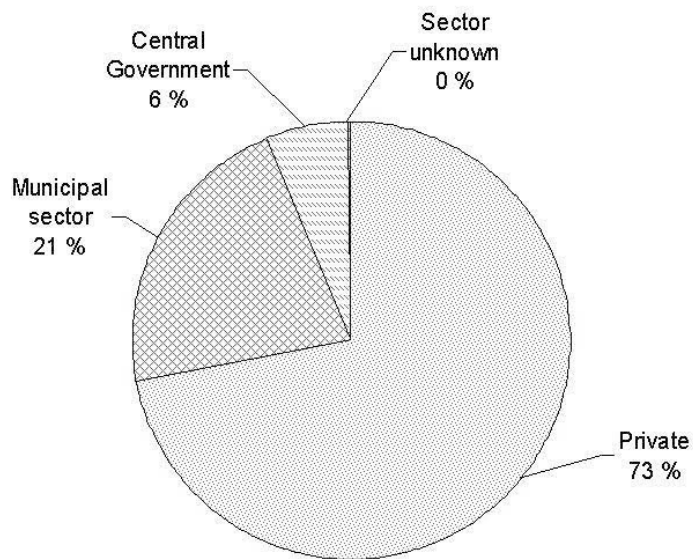


Figure 9.7. Employment by type of the employer (private and public) (Statistics Finland 2004)

Gender equality

Women account for a larger proportion of the labour market in Finland than in any other OECD-country. In comparison with many other Western countries, women's career tracks in Finland are similar to those of men, including the fact that they are uninterrupted. Women work full-time – the mothers of pre-school aged children, too. Child care services for working parents are ensured by legislation. Maternity leaves and job security during maternity leave are guaranteed by legislation. Mothers of small children can stay at home temporarily if the child is ill. Finnish women have also achieved a number of important benchmarks of equality. They are on average better educated than men. The degree of unionization, between 70 and 80%, is higher than that of men and their proportion in top managerial positions is in a rapid growth. On the other hand, jobs are still widely segregated between genders and women earn 22 to 28% less than their male colleagues and they are over-represented in part-time jobs.

(<http://virtual.finland.fi/netcomm/news/showarticle.asp?intNWSAID=25779>)

The Finnish Equality Act originating from the year 1986 (609/1986) was amended in April 2005 to put more emphasis on equality plans at the workplace. The plans must report, among other things, on how women and men are placed in different tasks and on pay levels. The new law is expected to improve awareness of equality measures in the workplace. Every workplace with at least 30 employees is obliged to draw up an equality plan, according to the Equality Act of 1995. The amended Act (2005) outlines in more detail what these plans should include. The new law also tightens the regulation, making the obligation on the employer stricter than before. An equality plan must include:

- an analysis of the situation regarding gender equality in the workplace
- a breakdown of the placement of women and men in different tasks, and an analysis of men's and women's tasks, pay, and pay differentials

- measures, planned or implemented, to promote equality and equal pay
- an evaluation of how measures in the existing equality plan have been implemented, and what results they have produced.

If an employer fails to meet the obligation to draw up an equality plan, the Ombudsman for Equality will set a deadline for making the plan, after which the employer may be ordered to do so under penalty of a fine.

The trends in equality are followed through national surveillance. Data are widely publicized and they also indicate the needs for further development (see Figure 9.8).

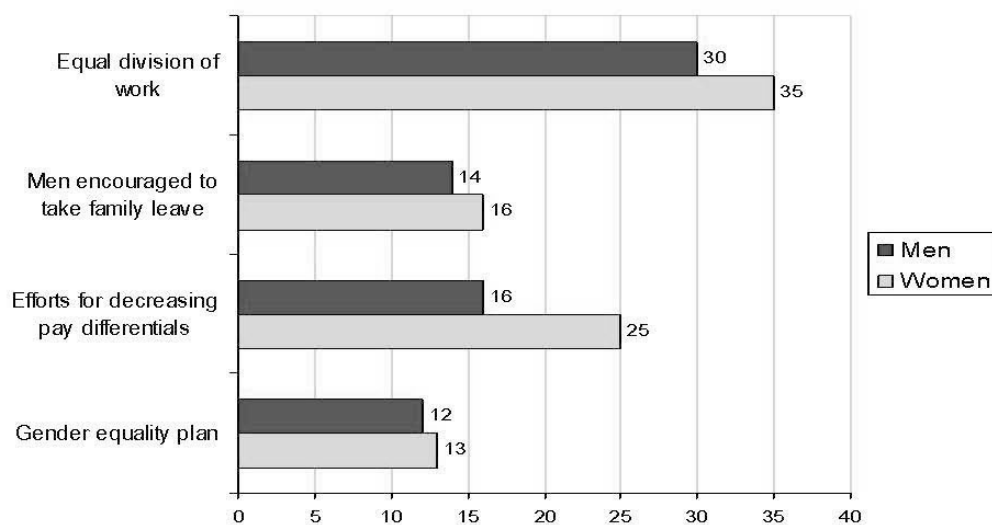


Figure 9.8. Rates of respondents (%) replying "yes" when inquired on equality actions at the workplace (Lehto and Sutela 2003)

In addition, there is a special Act on anti-discrimination (21/2004) which transposes the principles of the European Council Directive No 2000/43/EY (32000L0043); EYVL N:o L 180, 19.7.2000, s. 22, Neuvoston direktiivi 2000/78/EY (32000L0078); (EYVL N:o L 303, 2.12.2000, p. 16) into the Finnish legislation.

9.4 Economic data

The gross domestic product (GDP) of Finland in 2004 was 149.7 billion euros. The annual per capita income was 28,643 euros. Finland was No. 11 in the ranking of GDP/capita; slightly less than the average of the OECD high-income countries and slightly higher than the EU15 average.

The growth competitiveness as measured by the World Economic Forum was for the fourth year and for the third consecutive year the highest in the world (Table 9.6).

Table 9.6. Growth Competitiveness Index rankings 2005 and 2004 comparisons (World Economic Forum 2005)

Country	2005 Rank	2005 Score	2004 Rank	Changes 2004-2005	Changes 2004-2005
Finland	1	5.94	1	→	0
United States	2	5.81	2	→	0
Sweden	3	5.65	3	→	0
Denmark	4	5.65	5	↗	1
Taiwan	5	5.58	4	↘	-1
Singapore	6	5.48	7	↗	1
Iceland	7	5.48	10	↗	3
Switzerland	8	5.46	8	→	0
Norway	9	5.4	6	↘	-3
Australia	10	5.21	14	↗	4
Netherlands	11	5.21	12	↗	1
Japan	12	5.18	9	↘	-3
United Kingdom	13	5.11	11	↘	-2
Canada	14	5.1	15	↗	1
Germany	15	5.1	13	↘	-2

The UNDP Human Development Index in Finland was No. 13 in the world ranking and the ranking position was elevated by three sites by the non-economic factors.

10

Results of a questionnaire survey to the OSH actors in Finland

A survey was conducted among all stakeholders of OSH by sending a structured questionnaire to three ministries, all the key social partner organizations, and to the associations of OSH professionals. The response rate was 100%. The values of the respondents focussed very much on safety and health, well-being, work ability and the availability of services, as well as equity in work life. The respondents reported five main topics of concern, namely, coping with work life, stress, mental well-being at work, musculoskeletal disorders, and occupational accidents and diseases. Service infrastructures, tripartite collaboration, modern legislation, the competence of experts and the high quality of research were recognized as strengths of the Finnish OSH system. The recognized weaknesses were the uneven distribution of occupational health services, the lack of information, lack of good practices regarding psychosocial issues, lack of resources in municipal health care centres, and the lack of curative health services. The variation in responses was surprisingly narrow, demonstrating wide consensus among the stakeholders on key issues of OSH in the country.

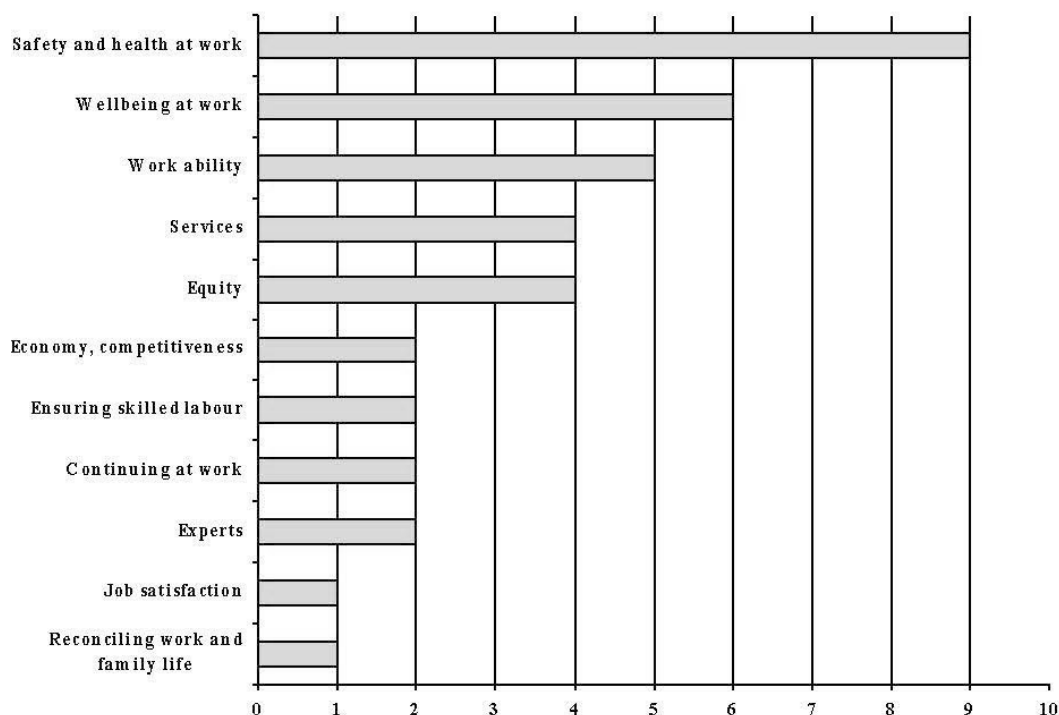


Figure 10.1. The values of occupational safety and health activity in Finland as reported by the 16 organizations in the survey

Respondents: Ministry of Social Affairs and Health, Ministry of Labour, Ministry of Education, Confederation of Finnish Industries, EK, State Employer in Finland, Local Authority Employers in Finland, Central Organisation of Finnish Trade Unions, SAK, The Finnish Confederation of Salaried Employees, STTK, Confederation of Unions for Academic Professionals in Finland, AKAVA, The Central Union of Agricultural Producers and Forest Owners (MTK), The Finnish Association of Occupational Health Physicians, The Finnish Association of Occupational Health Nurses, The Finnish Occupational Hygiene Association, The Finnish Association of Safety Chiefs, Federation of Accident Insurance Institutions, and Centre for Occupational Safety

11

Inputs to situation analysis

Data and experience from numerous statistics, reports, surveys, special research reports and programme outcomes can be summarized to a traditional SWOT analysis recognizing the most important strengths, weaknesses, opportunities and threats related to the Finnish OSH system and work life in a wider perspective.

Table 11.1 SWOT analysis of the Finnish OSH System

Strengths	Weaknesses
<ul style="list-style-type: none"> • Comprehensive and modern legislation on OSH • Government policy programme addresses positively to OSH • Wide consensus on national key strategic objectives in OSH • Well trained OSH officials, inspectors and employers' and workers' representatives • Positive trends in the past 3 decades in safety and health • Successful actions for safety, health and work ability of ageing workers • Strong research support to OSH Administration and workplace level activities • Wide coverage of occupational health services with a modern content • Active EU and international as well as Nordic collaboration in policies, authorities activities, research, training and information 	<ul style="list-style-type: none"> • Difficulties to keep abreast with the rapidly changing work life and the emergence of new risks • Lack of coverage of about 300,000 entrepreneurs who are not covered by OSH legislation • Levelling off of the declining trends of occupational accidents during the past few years (residual risk) • Lack of coverage of OSH and OHS services of the smallest enterprises • Difficulties to control the working conditions and employment contracts of guest and migrant workers, mobile workers and informal workers • Declining interest of employees to serve as safety and health representatives • Reconciliation of work life and family life particularly for parents of small children and of workers having other dependants (e.g. old family members) • Less successful outcomes from attempts to manage job insecurity, stress and unreasonable working hours
Opportunities	Threats
<ul style="list-style-type: none"> • Effective implementation of new OSH legislations • Development of working conditions to be conducive to work ability and coping with work (particularly among ageing workers) • High renewal of workforce in the next 10 years with new skills, competence and attitudes • Development of new managerial cultures and modern leadership giving high value to OSH and well-being at work • Understanding OSH as a factor for improved well-being, job motivation, productivity, quality, innovation and competitiveness • Effective use of new technologies for safer and healthier workplaces 	<ul style="list-style-type: none"> • Turning of risks to a growing track as a consequence of weakening control of working conditions • Exclusion of ageing workers through imbalance between capacity and demands • Disappearance of the OSH tacit knowledge through retirement of baby-boomers • Decline of innovation under too high short-term demands • Threat of global pandemic and risks of front-line workers in several sectors of work life (frontier guards, travel occupations, international workers, health care workers) • New unexpected risks of new technologies and substances • New occupational hazards related to terrorism

In general, the basic safety and health issues are relatively effectively managed and show a positive trend, while the fast changes in the work life structures, work organization, employment patterns, job demands and growing competition and productivity demands challenge both safety and health as well as well-being at work. There are several opportunities to respond to the new challenges, which, however, need new approaches and new innovations for the overall social dimension in the work life including safety and health cultures.

Finland with its well developed OSH policies, modern legislation, social dialogue, infrastructures and human resources, however, has good perspectives to generate new responses and solutions to the problems and challenges.

Several national surveys on the OSH situation in the country are carried out periodically by various institutions. Examples of national surveys are given below:

Quality of Work Life Survey. *Lehto A-M, Sutela H. Uhkia ja mahdollisuuksia. Työolotutkimusten tuloksia 1977–2003. Statistics Finland. (Threats and opportunities. Results of the Quality of Work Life Surveys 1977–2003) (<http://www.stat.fi/til/tyoolot/>)*

Work Life Barometer. *Ylöstalo P. Työolobarometri 2004. Työministeriö2005 (Work Life Barometer. Ministry of Labour 2005. In Finnish) www.mol.fi/mol/fi/99_pdf/fi/06_tyoministerio/06_julkaisut/10_muut/tyoolobarometri2004.pdf*

Work and Health in Finland. *Kauppinen T, et al. Työ ja Terveys Suomessa 2003. (Work and Health in Finland 2003. In Finnish with Swedish and English summary). Finnish Institute of Occupational Health, Helsinki 2004, 377 p.*
<http://www.ttl.fi/Internet/Suomi/Aihesivut/Tyoterveyshuolto/Tiedonlahteet/Kirjallisuus/tyo+ja+terveys.htm>

Occupational Health Services in Finland. *Räsänen K. (ed.) Työterveyshuolto Suomessa vuonna 2000. – 1990-luvun kehitystrendit. (Occupational health services in Finland in 2000 – Development trends in the 1990s). Finnish Institute of Occupational Health and the Ministry of Social Affairs and Health, Helsinki, 2000, 172 p.*
Manninen P, et al. Occupational Health Services in Finland in 2004. Finnish Institute of Occupational Health. To be published.

Barometer of Maintenance of Work Ability. The survey covers 1000 workplaces, 800 managers, an equal number of workers and about 750 occupational health service staff members, altogether 2400 persons, who are interviewed by telephone using the CATI system. The Barometer focuses on prevalence, content, implementation, benefits and economy of MWA activities and the resources and trends over time. Two surveys are available, from the years 1988 and 2001.
Peltomäki P, et al. TYKY Barometri. Työkykyä ylläpitävä toiminta suomalaisilla työpaikoilla vuonna 2001. Finnish Institute of Occupational Health and Ministry of Social Affairs and Health, Helsinki 2002, 402 p.

Occupational Diseases 2002. *Riihimäki H, et al. Ammattitaudit 2002 (Occupational Diseases 2002. In Finnish with English and Swedish summary). Finnish Institute of Occupational Health, Helsinki, 2003, 93 p.*

Työtäpaturmat 1999 = Accidents at work 1999. *Helsinki: Tilastokeskus, 2002. 76 p. Työmarkkinat (SVT), ISSN 0785-0107; 2002, 1). ISBN 951-727-974-4.*

ASA Register. *Saalo A, et al. ASA 2003. Register of workers at risk of being exposed to carcinogenic substances and processes. Finnish Institute of Occupational Health, Helsinki 2005, 87 p.*

12

Summary

1. Finland has adopted a strategy of the Nordic welfare model based on knowledge and competence, innovation and productivity, and a strong social dimension maintained by the public sector. The Government Programme for parliamentary tenure contains several elements for strengthening the welfare society. The programme elements for the development of the quality of work life, encouragement for longer working careers, and promotion and development of work ability and occupational safety and health are important elements in the Government Programme.

In the strategy of the Ministry of Social Affairs and Health, the principle of universality is emphasized in the organization of public services in general. Services for occupational safety and health constitute a part of the general strategy for social and health services. A high level of safety, health and well-being at work are natural consequences and important arenas of implementation and development of such a policy.

2. The Finnish legislation on occupational safety and health and on occupational health services has been renewed during the past five years and corresponds well to the requirements of both the ILO Conventions on safety and health and the EU Directives.

The National Strategy on Occupational Safety and Health is periodically evaluated, and it aims at the implementation of the renewed legislation, and at the continuous improvement and development of conditions of work, health, safety and well-being at work. It also contributes to the implementation of the Government Programmes and the Ministry's general strategy in all aspects of work life, work environment, safety and health.

3. A strong Nordic principle is the so-called consensus society characterized by solidarity, mutual responsibility and willingness to make agreements on future development of work life and the society at large. On the labour market all this is realized in the process of social dialogue, including collective bargaining, collective agreements and tripartite collaboration. All the strategies and programmes dealing with safety and health at work are drawn up and implemented within the framework of tripartite collaboration.
4. Safety and health at work was given the highest value in the questionnaire survey of all the key partners representing virtually all the key stakeholders of Finnish work life. OSH goes clearly ahead of the economic and other material values.
5. The priority problems identified by the various partners were very parallel. Stress, mental well-being, musculoskeletal disorders, occupational accidents and diseases, and the development of occupational health services and equity were the top five priorities.
6. The weaknesses of the Finnish OSH system are associated with rapid changes in work life, the fragmentation of enterprises, discontinuity of work contracts, and low

coverage of occupational health services among small-scale enterprises and the self-employed.

7. Economic appraisal and economic aspects of occupational safety and health are considered important in addition to the substantive aspects of safety and health. The research data show the positive economic impact of good working conditions. Numerous incentive systems are inherent in the Finnish pension schemes, accident insurance schemes, and in the occupational health service system. The governmental programmes for the development of work life provide support for the parallel development of modern production and the workers' safety and health.
8. Globalization and the growing internationalization of Finnish work life also call for active participation in international activities in the field of safety and health. Good preparedness for such activities should be ensured through intensive research, training and through participation in international programmes, particularly those of ILO, WHO and other inter-governmental organizations, as well as in the EU programmes for safety and health.

National Occupational Safety and Health Profile of Finland

The National OSH Profile of Finland, with selected indicators is presented in Figure 12.1.

- | | |
|--|---|
| 1) Ratification of ILO OSH Standards (100–0%) | 2) OSH Inspectors, number (0–10/100 000) |
| 3) Coverage of OSH Inspection (0–100%) | 4) Coverage of Workers' Compensation (0–100%) |
| 5) Coverage of Occupational Health Services (0–100%) | 6) National Policy, Strategy, Programme, Action Plan, Targets, Deadlines (0–100%) |
| 7) National Profile made (0–100%) | 8) Asbestos banned (0–100%) |
| 9) National System on Chemical Safety based on Convention No. 170, GHS, CSDC, ICSCs (0–100%) | 10) Management Systems, implementation of ILO-OSH 2001 (0–100%) |
| 11) Recording and Notification System for Accidents/Diseases (0–100%) | 12) Knowledge Management and Information Centre, ILO/CIS (0–100%) |
| 13) Fatal Accidents Index (based on fatality (100–AI/100,000)) | 14) Occupational Accidents Index (based on accident rate (100–AI/1000)) |
| 15) List of Occupational Diseases and Compensation Criteria (0–100%) | 16) Awareness Campaigns, such as April 28 (0–100) |

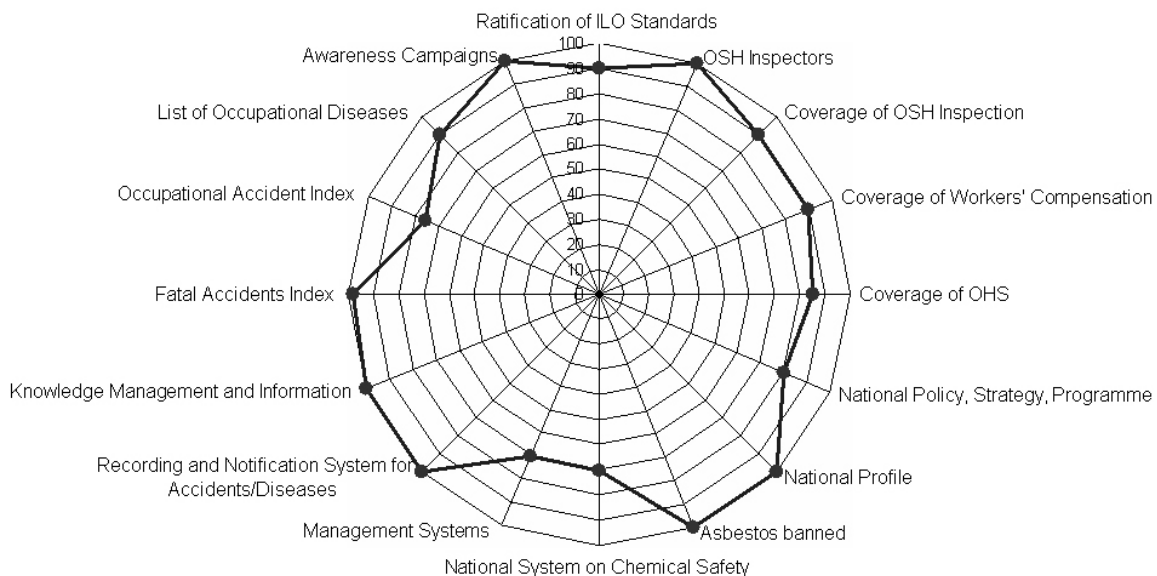


Figure 12.1. The National OSH profile of Finland (J. Rantanen 2006)

- 2006: 1 Sosiaaliturvan suunta 2005-2006.
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Toim. Anu Kallio, Pirjo Sarvimäki.
ISBN 952-00-2004-7 (nid.)
ISBN 952-00-2005-5 (PDF)
- 7 Rekommendation om kompletterande utbildning inom socialvården. Handbok för kommuner och samkommuner. Red. av Anu Kallio, Pirjo Sarvimäki.
ISBN 952-00-2006-3 (inh.)
ISBN 952-00-2007-1 (PDF)
- 8 National Occupational Safety and Health Profile of Finland.
ISBN 952-00-2010-1 (print.)
ISBN 952-00-2011-X (PDF)