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Occupational risk compensation

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Abstract

Workers are increasingly exposed to occupational risks, both in the work place and outside, jeopardizing their health, civil liability rules have proven inadequate in protecting the victims, of ten leaving them without legal recourse and at risk of losing their jobs. Systematic compensation for occupational risks has become a necessary response, distinguishing between workplace accidents and occupational diseases ,Algerian legislation has introduced a regime of systematic compensation aimedat protecting victims.

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1. INTRODUCTION

Workers are increasingly facing dangerous tasks and unreliable preventive approaches, thereby exposing them to a higher risk of bodily injuries and various diseases related to their work environment. In other words, this occupational hazard can manifest outside of the premises and working hours, making it even more complex.

Civil liability rules, initially in place to protect the interests of victims, have proven insufficient. Victims often find themselves unable to pursue legal action, either due to the absence of fault on the part of the employer or the inability to prove fault, whether of the employer or a third party. Consequently, victims often find themselves on their own, with the risk of losing their jobs due to their inability to work.

It is imperative for the legislator to establish an adequate legislative framework for compensation. The concept of systematic compensation in the event of occupational risk emerged in response to the failure of the civil liability system to effectively protect many victims of occupational hazards.

Occupational risk can be divided into two main categories: work accidents and occupational diseases. These two categories are mainly distinguished by the criterion of suddenness, as defined by Algerian legislation.

Legislation relating to work accidents and occupational diseases has profoundly changed the fault-based approach by establishing a system of systematic and limited compensation. The legislator's goal is to protect the interests of victims of occupational risks.

This regime is characterized by increased formal requirements for obtaining benefits, but it is important to note that the notion of fault is experiencing a growing resurgence in recent jurisprudential developments.

2. Section 1/ Different Types of Occupational Risks

2.1 Work Accident

2 Article 6 of Law n° 83-13 of July 2, 1983, states that as a work accident ¨is considered as a work accident, any accident that has caused a bodily injury, attributable to a sudden, external cause and occurred within the framework of the employment relationship, ¨ (Article 411 of the French Social Security Code has given a very general definition of a work accident, leaving it to jurisprudence to specify it: « The accident is considered as a work accident, whatever its cause »). According to this text, the mentioned prejudice must undoubtedly take the form of bodily harm, this term encompasses all forms of attacks on physical integrity, a fundamental right of the human being enshrined by the Universal Declaration of Human Rights and recognized by the various constitutions of our country. Regarding work accidents, the International Labour Convention n° 17 of 1925 deals with the compensation of these accidents, although it does not specify the criteria for such accidents. It is jurisprudence that has established the constitutive elements of these accidents. Indeed, it has been frequently emphasized that: "An accident is characterized by a violent

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and sudden action of an external cause, leading to an injury of the human body." (Ourab, 2012, pp. 54, 69)

2.2. Occupational Diseases

Article 63 of Law 83-13 stipulates « are considered as occupational diseases, intoxications, infections, and ailments presumed of particular occupational origin ».

According to Article 64 of Law 83-13:

"The list of diseases presumed of probable occupational origin, as well as the list of works likely to generate them and the duration of exposure to the corresponding risks, will be determined by regulatory means."

An occupational disease is an ailment resulting from the regular exercise of a profession. It can be classified into two distinct legal categories: compensable occupational diseases, which are listed in a limited number of tables, and diseases of an occupational nature, which encompass all other diseases of occupational origin not covered by these specific tables.

Consequently, a disease is automatically considered of occupational origin if it is listed in one of the tables of occupational diseases and if it has been contracted under the conditions provided by this table.

This definition is restrictive, as only the afflictions that meet the criteria of the tables qualify as occupational diseases and are compensated accordingly, meaning they are fully covered.

However, the broader concept of occupational disease encompasses ailments directly resulting from a worker's exposure to physical, chemical, biological risks, or arising from the conditions in which they perform their professional activity.

An occupational disease may result from prolonged exposure to a risk existing in the usual framework of the profession, for example, the daily absorption of small amounts of dust or toxic vapors, or repeated exposure to physical agents such as noise or vibrations.

It is often difficult to precisely determine the moment when the disease originated, especially since some occupational diseases may only manifest years after the beginning of the exposure to the risk, or long after the worker has ceased the incriminated profession. (INRS, TJ, legal memo, 2015)

According to the 2002 Protocol to the Convention (n° 155) on Occupational Safety and Health, 1981, the term « occupational disease » refers to any disease contracted following exposure to risk factors resulting from a professional activity.

Paragraph 6 (1) of the Recommendation (n° 121) on benefits in case of occupational accidents and diseases, 1964, defines occupational diseases as follows:

« Each member should, under prescribed conditions, recognize as occupational diseases those diseases known to result from exposure in processes, activities, or occupations to substances and dangers inherent in these processes, activities, and occupations ». Two important elements are contained in the definition of an occupational disease:

- The cause-and-effect relationship between exposure in the workplace or a professional activity and a disease.
- The fact that the disease appears in a group of exposed people with a frequency higher than the average morbidity of the rest of the population.

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The most commonly recognized pathologies in Europe are:

Hearing loss, Asbestos, Pleural plaques, Silicosis, Skin diseases, Chemical respiratory disorders, Infectious diseases, Musculoskeletal disorders, Occupational cancers, Lead poisoning, Obstructive respiratory tract diseases, Mesothelioma.

Pathology related to vibration (See Abdelmalek Nezzale, Occupational Diseases in Europe 16)

There are currently 85 tables of occupational diseases relating to several pathologies, which are classified into 3 groups:

(Decree 22/3/1968: 48 tables.

Decree 23/10/1968: 62 tables.

Decree 05/05/1996: 84 tables).

Group I: Acute or chronic intoxications : (56 tables).

Group II: Microbial infections : (16 tables).

Group III: Diseases resulting from environments or attitudes : (12 tables).

The first tables were created in 1986, the most recent in 1996. They are established by decree, with periodic updates, taking into account the evolution of medical and toxicological knowledge. Each numbered table concerns the affections corresponding to a specific hazard.

Each table includes three columns:

The left column is titled "Identification of Affections". Each hazard may be associated with one or several affections, which can often vary significantly depending on the nature of the work performed and the organs affected.

The middle column is designated as "Diagnostic Delay", specifying the maximum time intervals between the end of exposure to the hazards and the first medical observation of the affection.

These delays vary considerably, ranging from a few days to several decades (up to 40 years for certain types of cancers, such as primary ethmoid and facial sinus cancers, as well as primary bronchial cancer).

The right column is titled "Indicative or Restrictive List of the Main Works Likely to Cause These Affections".

If the list is restrictive:

only the affections whose origin is directly linked to the mentioned works can be recognized as occupational diseases.

If the list is indicative, then all affections resulting from exposure to the hazards can be taken into account, even if the works causing the pathologies are not explicitly listed in this column (Margossian, 2006, p. 16).

The procedures for recognizing occupational diseases allow workers to receive compensation in case of a confirmed diagnosis.

2.1/1 procedure for the recognition of occupational diseases

The procedure for recognizing occupational diseases can be complex, especially when trying to establish a "direct and indispensable" link between the manifestation of a disease and an employee's actions. This is particularly true for conditions like depressive disorders. To address this, an additional system for recognizing work-related diseases has been implemented, allowing for the examination of cases where the conditions do not meet all the criteria established by law. (Brun, 2011, p. 32)

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According to Article 66 of the social code « the tables mentioned in Article 64 will be established after consultation with a professional diseases commission, whose composition is determined by regulatory means ».

The interministerial decree of April 10, 1995, setting the composition of the commission of occupational diseases, amended and supplemented by the interministerial decree of May 5, 2010, article 1« The composition of the occupational diseases commission as provided for in article 66 of law n°83-13 mentioned above, includes :

- A representative of the minister in charge of social security as president.
- A representative of the minister in charge of labor
- A representative of the minister in charge of health
- Representatives of the ministers in charge of the National Social Insurance Fund for Salaried Workers.
- A representative of the National Council of Hygiene, Safety, and Occupational Medicine.
- A representative of the National Institute for the Prevention of Occupational Risks.
- A representative of the professional risk prevention body in building, public works, and hydraulics.
- A representative of the most representative national employers' trade unions.
- Three occupational physicians designated by the minister in charge of health.

« Members of the commission are appointed for three years, renewable by decision of the minister in charge of social security on the proposal of the authority to which they belong ».

« For the extension and revision of the tables, as well as the prevention of occupational diseases, all physicians are required to report any disease they believe to have a professional character ».

In the context of the occupational disease recognition system the occupational diseases commission must compile a file and send it to the ministry of health additionally law n° 83-13 of July 2nd allows for the revision and expansion of the tables article 68 of law 83-13 requires every medical doctor regardless of their status or mode of practice and thus concerned to report any disease that has an occupational character they must also report any symptom and any disease not included in the list but which in their opinion has an occupational character (legal memorandum,p.9)

In this process, the role of the occupational physician is crucial. Often the first or only professional to observe the damage caused to workers by their working conditions (whether physical, chemical, biological, or organizational), occupational medicine has significantly contributed to reducing these professional hazards, identifying early effects, and often preventing the onset of diseases.

Under Article 69 of Law n° 83-13 of July 2, 'any employer who uses work processes likely to cause occupational diseases mentioned in this title, is required to declare them to the social security organization, to the labor inspector or to the official who performs these functions under special legislation, as well as to the

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director of the wilaya health department and to the organizations responsible for hygiene and safety.'"

"Employers are required to inform those responsible for occupational diseases resulting from the use of work processes. It is the workers themselves, when they are victims, who must make the declaration to the social security fund (Article 67: from the date a worker has ceased to be exposed to the action of harmful agents listed in the above tables, the social security organization, under the provisions of this title, covers occupational diseases corresponding to these works only when they have been declared to the organization before the expiration of a deadline set for each table)."

"This includes a copy of the medical certificate issued by the treating physician. Unlike what is provided for work accidents, it is not the responsibility of the employer to make this declaration himself, as he is generally unaware of the nature of the illness that led to an employee's work stoppage."

"Once the occupational risk has materialized and the victim has been confronted with it, the legislator has established a specific mechanism for compensation."

3. Automatic Compensation for Occupational Risks

The compensation for occupational accidents is carried out in an automated manner through procedures designed to facilitate the indemnification of victims. Although the compensation process in this area is governed by strict formalities, it remains more advantageous compared to compensation in cases of civil liability. Victims or their beneficiaries must comply with all the declarations (1) and conditions related to the examination of files (2).

- **(1) The Formality of Declaration**

Firstly, it is imperative to emphasize that the declaration of a work accident or occupational disease is an unavoidable step, involving mandatory procedures. This series of declarations, formalities, and deadlines is established in accordance with Articles 13, 14, 15, 70, 71 of Law 83-13 dated July 22, 1983. This requirement is of crucial importance as it ensures legal security for both the employer and the victim of the work accident. Indeed, if the victim does not fulfill this formality within a period of four (04) years, they risk losing their legal rights. On the other hand, the employer, in case of negligence in fulfilling this obligation, faces criminal sanctions under Article 26 of Law n° 83-14 of July 2, 1998.

Furthermore, it is important to note that the declaration of the accident suffered by the victim constitutes a prerequisite for initiating legal action by the claimant before the courts. In the event of a dispute on this matter, judges are required to take this declaration into consideration in their decision. The Supreme Court has annulled a judgment of confirmation (The social chamber has specified in this regard: "Considering that it appears from the case file and the grounds of the appealed decision that there is nothing to prove that an accident was declared; That it is not even alluded to in the appealed decision ;- That therefore, the decision must be quashed without referral».)

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which had granted reparations due to the violation of Articles 13, 14, and 15 of Law 83-13 on work accidents and occupational diseases. (Dib, February 09, 1999, pp. 307,308)

Thus, as provided by the law (Article 13 of Law n° 83-13 of July 2, 1983), it is up to the victim, or their representatives in case of the victim's absolute incapacity or death, to inform the employer within 24 hours of the accident. In turn, the employer must notify the social security organization within 48 hours, from the date they became aware of it.

As well as notifying the social security agency and the labor inspectorate of the company's jurisdiction. When a worker is involved in a work-related accident, they are legally obligated to adhere to the deadlines for informing their employer. This notification must include precise details about the location of the accident, the surrounding circumstances, and the identification of any potential witnesses.

On their part, employers are also required to fill out a special form called "Declaration." correctly stating their contribution number. The essential element lies in the veracity of all the provided information, accurately reflecting the actual events.

The legislature has established severe penalties to deter anyone tempted to make false statements in order to unduly obtain benefits or reimbursements from the social security agency for themselves or others. These sanctions include a prison sentence ranging from six months to two years and a fine of thirty thousand (30,000) to one hundred thousand (100,000) Algerian Dinars (DA) (Article 83 of Law n° 08-08 of February 23, 2008, on social security litigation (J.O.R.A) No. 11 of March 02, 2003).

More severe penalties, ranging from six (06) months to two (02) years in prison and a fine of one hundred thousand (100,000) to three hundred thousand (300,000) dinars, may also be imposed on anyone who tries to manipulate or has actually manipulated a person who witnessed a work accident, with the aim of hiding or distorting the facts (Article 85 of Law n° 08-08 of February 23, 2008).

After carefully examining the provisions of Article 14 and Article 71 of Law 83-13, it is clear that the declaration of a work accident must be made promptly, within twenty-four (24) hours following the incident, except in cases of force majeure. Public holidays are not counted in this deadline. In other words, if the victim or their representatives need to inform the employer, they have a very short time frame to do so. It is important to note that this declaration is not subject to strict formal requirements; it can be made in writing or verbally, in accordance with the mentioned article.

However, the same article specifies that even if the victim fails to declare the accident without a legitimate or reasonable reason for the delay, their rights under the law cannot be restricted until four (4) years after the occurrence of the accident, namely the period of extinctive prescription. This contrasts with the obligations of the employer, who may incur a penalty for failing to report the work accident to the social security agency within forty-eight (48) hours from the moment they became aware of it, excluding non-working days."

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In this context, it has been suggested that this article establishes a rebuttable presumption of imputability, meaning that when a victim reports a work-related accident to the social security agency in the absence of an employer's declaration within four (4) years, there is a presumption that the accident is work-related, but this presumption can be refuted. Additionally, this possibility of declaration is also extended to the victim's legal beneficiaries, trade unions, and labor inspectors.

The employer cannot be compelled by judicial procedures to make the declaration of an accident, even though the law obliges them to do so. This was confirmed by the Supreme Court in a ruling on September 6, 2006. The social chamber of the High Court overturned a decision of the Court of Constantine dated July 9, 2003, which had ordered an employer to declare an accident, even if it exceeded the prescribed forty-eight-hour deadline. The judges justified their decision by referring to Article 14 of Law n° 83-13 of July 2, 1983, regarding work accidents and occupational diseases, which states:

« *In the event of the employer's failure, the declaration to the social security agency can be made by the victim or their legal beneficiaries, the trade union, and the labor inspection within a period of four (04) years from the day of the accident* ».

By setting a relatively long prescription period of four years and allowing, in addition to the victim and their legal beneficiaries, certain entities such as the trade union and the labor inspection to declare the accident to the social security fund, the legislator acts in a manner favorable to the victim.

All these rules regarding work accidents are applicable to occupational diseases, subject to the provisions of declaring an occupational disease (Article 71 of Law 83-13 on work accidents and occupational disease), which must be declared to the social security agency by the victim within a minimum of fifteen (15) days and a maximum of three (3) months following the medical diagnosis of the disease (Article 72 of Law 83-13 on work accidents and occupational disease).

The declaration of the work accident and occupational disease, whether made by the victim, the employer, the trade union, the labor inspection, or by the social security agency, is certainly an important administrative formality without which the social security agency cannot begin processing the accident claim for compensation

(2) Administrative Formalities

During the initial medical examination following the accident, the practitioner chosen by the victim issues certificates describing the victim's condition. Once the social security organization receives the work accident declaration and all other elements of the file, especially the medical certificates from the treating practitioner, it must comply with the law by making a decision on the occupational nature of the accident within twenty (20) days. This decision can be based on the nature of the accident and the circumstances surrounding it.

In this context, the legislator establishes a principle of presumptive attribution of the work accident in favor of the victim, which relieves the latter from having to prove the connection between the accident and work to receive workers' compensation.

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However, this presumption is not absolute, as it can be contested by providing contrary evidence, particularly by demonstrating the absence of a causal link between the accident and the work. It can also be invalidated if the victim's beneficiaries object to an autopsy requested by the social security organization before the courts, unless they can prove a causal link between the accident and the death.

Once the social security organization has all the necessary elements for its evaluation, but before communicating its decision to the victim or their beneficiaries by registered letter with acknowledgment of receipt, social insurance benefits are paid on a provisional basis. There are three possible scenarios that the social security organization must consider in making its decision

Within the twenty-day period:

1st Scenario:

If the professional nature of the injury is acknowledged, the victim, who provisionally received health insurance benefits, is reinstated in their rights to accident benefits.

2nd Scenario:

In the case of refusal, if the social security agency is not convinced of the accident's professional nature, as it may doubt and challenge it in certain situations:

- Accident declaration accompanied by reservations from the employer (2nd paragraph of Article 15 of Law n° 83-13 of July 2, 1983)
- Or when there is a first-time mention of a lesion or disease presented by the individual as related to a workplace accident (1st paragraph of Article 18 of Law n° 83-13 of July 2, 1983)

In this case, the social security fund must notify its decision, indicating the avenues and deadlines for appeal, to the victim or their beneficiaries by registered letter with acknowledgment of receipt within twenty (20) days from the date it became aware of the accident (1st paragraph of Article 17 of Law n° 83-13 of July 2, 1983).

To adopt a fair and lawful position, the social security agency will carry out administrative and medical investigative measures. An administrative investigation is conducted by specialized and sworn agents of the social security funds, tasked with gathering all relevant information about the causes and circumstances of the accident (1st paragraph of Article 19 of Law n° 83-13 of July 2, 1983).

Concurrently with this procedure, the social security agency requests from its attached medical services, particularly the consulting physician, to conduct expert evaluations and examinations of the victim, and in the event of their death, an autopsy ordered by the judge, to uncover the truth.

Thus, it is the medical expertise that must confirm the existence of a causal link between the injury and the accident, as well as between the accident and the work. The investigation of the workplace accident file is indeed oriented in this direction.

After the 20-day period

3rd scenario:

If the social security organization does not exercise its right to contest within twenty (20) days following the date of the accident (third paragraph of Article 17 of Law n° 83-13 of July 2, 1983), the occupational nature of the accident is definitively established in the relationship between the victim and the social security organization.

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The Supreme Court confirmed this position during an appeal in cassation brought by a medical controller working for the social security fund, who had suffered an accident while performing his duties. The doctor had reported the accident to the social security organization, but no action was taken in response, in accordance with Articles 16 and 17 of Law n°83-13 of July 2, 1983.

In such cases, the victim is compensated according to the provisions of the legislation governing occupational accidents. The compensation for victims of occupational accidents is notably different from the classic rules of civil liability, and even from the benefits paid by health insurance and disability insurance. This is due to the specific legal framework that establishes a distinct mode of reparation in this matter. Moreover, there is a specific modality that differs from that applied in civil liability.

It should be noted that the victim does not need to prove the employer's fault, and the burden of compensation is transferred to the social security funds. Therefore, the victim or their beneficiaries cannot file a lawsuit for compensation for occupational accidents and diseases under common law, except in exceptional cases where the victim may pursue a civil liability claim.

Thus, the break of any civil liability link between the victim and the employer has been established, except in exceptional situations where the victim is allowed to pursue common law action. This is why the principle of systematic and lump-sum compensation for occupational accidents, also adopted by Algerian legislation in social security matters, has been enshrined, while leaving the possibility of resorting to the rules of civil liability in case of fault by the employer or a third party.

Lump-sum compensation for occupational risks

(A)Benefits in kind

Article 27 establishes a general rule regarding benefits, regardless of their nature. In other words, the right to benefits in kind and in cash is accessible without the need for a prior period of work.

Care, that is, benefits in kind, include the total or partial reimbursement of medical, paramedical expenses, and hospitalization costs for the insured and their beneficiaries, including cases of occupational accidents. These benefits are provided as long as necessary, and reimbursement is made at 100% of the regulated rates of health insurance.

These benefits are covered by the social security organization and are due to a victim of an accident, whether or not there is an interruption of work and without any time limit. In other words, benefits in kind are granted beyond the date of consolidation, as long as the condition of the victim, resulting from an occupational accident or disease, requires continued treatment (according to Article 29 of Law 83-13). As per Article 30 of Law n° 83-13 of July 2, 1983, regarding occupational accidents and diseases.

The beneficiary also has the right to the provision, repair, and replacement of necessary prosthetic and orthopedic devices due to their disability, as well as all necessary expenses for their functional rehabilitation, accommodation, and travel expenses to a hospital for necessary rehabilitation sessions. Moreover, all necessary medical and pharmaceutical expenses for the care of the victim, whether

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carried out in a public or private accredited hospital, are covered.

Furthermore, in cases of non-consolidation, that is when the victim's traumatic state is not stabilized, they may receive daily allowances, or a portion of these, if consolidation has occurred and the accident victim was entitled to a permanent incapacity pension (under Article 31 of Law 83-13).

Additionally, if the victim, due to the accident, is unable to exercise their profession, or if they need professional retraining to learn a new profession according to their new capabilities, they are entitled to this retraining.

Compensation for occupational accidents also includes another category of benefits, namely cash benefits.

(b) Cash Benefits

Cash benefits refer to the replacement income paid to the insured to compensate for the loss of professional income in cases of work stoppage due to illness, maternity, or a work-related accident. The amount of this cash benefit varies depending on the degree of the victim's work incapacity.

In cases of temporary work incapacity, social security funds pay daily allowances to the injured worker, temporarily unable to earn income due to their health condition (a). Conversely, if the worker's incapacity is permanent, whether partial or complete, they are granted a pension (b), and this pension is extended to their dependents in case of death.

1) Daily Allowance for Temporary Work Incapacity

The worker who has been injured and thus unable to work due to the accident is entitled to daily allowances from the social security fund. Exceptionally, the responsibility to pay for the workday on which the accident occurred falls to the employer (Article 35 of Law n° 83-13 of July 2, 1983). During the entire period of work incapacity, including until complete recovery, wound consolidation, or death, daily allowance payments must be made to the victim, starting from the first day following the work stoppage resulting from the accident (Article 36 of Law n° 83-13 of July 2, 1983, these allowances are due for each day, whether a working day or not).

The allowances in question cannot be less than one-thirtieth (1/30) of the net monthly salary, after deductions for contributions and taxes. Additionally, they cannot be lower than one-thirtieth (1/30) of the monthly national guaranteed minimum wage (SMNG) (Article 37 of Law n°83-13 of July 2, 1983).

It is possible to revise the allowances in case of a general increase in wages occurring after the accident, and at intervals of three months during the first two years following the date of healing or consolidation of the injury, a reevaluation of the allotted compensations can also be considered, with a minimum of one year elapsed after the end of this two-year period (Article 59 of Law n°83-13 of July 2, 1983).

The principle of flat-rate compensation by social security also applies to the victim in cases of temporary work incapacity, regardless of the nature of this incapacity.

2) Pension, Compensation for Permanent Work Incapacity

Regarding the payment of daily allowances or pensions following a work accident, the law determines the date from which the victim can receive compensations (Article 59 of Law n° 83-13 states « the arrears of

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the pensions run from the day following the date of consolidation or that of the death)

judges have no discretionary power in this area. A precedent of the Supreme Court, dated March 8, 2006 (Supreme Court Judicial Review., 2006, p. 317), illustrated this principle by nullifying a decision of the Court of Appeal of Constantine of September 5, 2001.

This decision condemned the National Social Insurance Fund of the Constantine Agency to pay monthly pensions for permanent incapacity to a victim of a work accident, even though the date of consolidation of the injury had not been established. Additionally, allowances for temporary incapacity were to be paid from this same date, namely September 8, 1998.

In this case, the High Court concluded that the lower court judges had violated the law by incorrectly interpreting Articles 36 and 48 of Law n° 83-13 of July 2, 1983, which deal with the compensation for work accidents and occupational diseases. They confused these two provisions, neglecting the first (Article 36 of Law n° 83-13 of July 2, 1983),

which states that daily allowances are paid to the victim from the first day following the work stoppage resulting from the accident, with the second (Article 36 of Law n° 83-13 of July 2, 1983), which specifies that the monthly pension takes effect from the day following the date of consolidation of the injury or death.

The amount of the pension is established by multiplying the average salary that the victim earned in their profession during the twelve months preceding their work stoppage (Article 39 of Law n° 83-13 of July 2, 1983) by the degree of incapacity determined by medical opinion. The annual reference salary for calculating the benefit cannot be less than 2,300 times (Article 41 of Law n°83-13 of July 2, 1983) the legal minimum hourly wage. If the incapacity rate is less than 10%, a lump sum payment is made (Article 44 of Law n° 83-13 of July 2, 1983), and moreover, a 40% increase in the pension is granted if the victim requires the assistance of a third party to perform daily activities.

4. *Conclusion:*

From a socio-historical perspective, the regulation of occupational risks raised the question of responsibility throughout much of the XIXth century. The advent of social security has contributed to resolving a recurring problem related to attributing responsibility in situations where human actions seemed to be the cause of damage.

It is imperative to strengthen the existing preventive framework by combining both individual and collective actions aimed at preventing the emergence of work-related hazards or reducing their consequences, while seeking ways to eliminate them if possible, or at least mitigate them. It is essential to note that the involvement of all company stakeholders, including employers, risk prevention institutions, trade union representatives, and employees, is crucial in this approach.

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