



Women in Informal Employment Globalizing and Organizing

Why should occupational health be a concern of local government?

Road sides, public markets, homes and landfill sites – all are sites where informal workers work and all are sites that mark an unexamined intersection between urban health and safety and occupational health and safety. Occupational health and safety is generally confined to national level labour institutions, and informal work sites usually fall under municipal health regulation – which is often insufficient to protect the health and safety of informal workers. Moreover, while municipalities play a crucial role in the regulation of many informal urban workplaces, urban health regulations as they exist at present in many countries do not recognize the needs of workers to earn a living in urban spaces and can often actively work against that need.

In 2009, Women in Informal Employment: Globalizing and Organizing (WIEGO) began a five country, six city project on Occupational Health and Safety for Informal Workers (Lima, Peru; Salvador, Brazil; Accra, Ghana; Dar es Salaam, Tanzania; Ahmedabad, India; and Pune, India). The main aim of the project was to think, in collaboration with organizations of informal workers, about ways in which



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to extend workplace health and safety protections to informal workers who work in municipally regulated sites, especially in instances where urban health regulations currently act against workers' needs to earn a living. The project found that poorer informal workers across sectors cannot easily prioritize their own health above their need to earn better incomes and thus may not invest in improving the health and safety of their working conditions or their work's impact on the general public. For example, industrial outworkers earning piece rates for stitching garments may not take regular breaks; waste pickers may not use personal protective equipment if it slows their work down, and food service providers may not have the ability or the incentives to maintain clean and healthy environments.

This was particularly clear in the case of the chop bar operators in Accra, who sell indigenous cooked food to the citizens of that city. Traditional urban health institutions were originally designed to protect the "public" health. In relation to sellers of cooked food – like chop bar operators – this means that urban health regulations focus on protecting the public from unhygienic food. The regulations punish food sellers who do not stick to prescribed guidelines and contribute towards the public seeing these food sellers as responsible for the high levels of gastro-intestinal disease in the country; the food sellers themselves frequently have to pay fines to environmental health officers.

This is not to say that informal food sellers do not contribute to gastro-intestinal disease, but there is another side to the story if we look at it from



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a worker perspective. The chop bar operators contribute significantly to the urban economy. They provide jobs, they produce local food at affordable prices, and are located in spaces that are convenient for people. They also pay various forms of taxes and license fees to both national and local governments. Moreover, a survey by WIEGO of 20 chop bar operators showed that they incur significant costs in trying to maintain a clean and healthy environment around them. Keeping a sanitary environment in Accra is particularly difficult to achieve as the city's provision of basic services is notoriously bad and most services are privatized. Open drains run through the city and are often clogged with refuse; modern sewage systems cover only a small proportion of the city, the rivers are polluted with rubbish, and water and electricity outages are common, meaning that people have to rely on private water sellers to obtain clean water. Even though chop bar owners are paying to maintain a clean and healthy environment and even though they are also paying taxes and license fees for inadequately provided services, they can still be fined for not adhering to health and hygiene regulations.

As the table on the next page shows, the chop bar operators interviewed spent an average of just over US \$1000 per year to maintain a clean and healthy environment for their business. This is a significant annual cost for what are essentially very small businesses. In a country where the average income in urban areas is estimated to be US \$1.50 a day, it is not surprising that food sellers – many much poorer than the more established operators interviewed in this study – cannot afford to cook their food in a sanitary environment.

Annual costs to chop bar owners of maintaining a safe and healthy work environment, averaged across the study group.

Services/equipment	Annual cost to business owners, averaged across study group: US Dollars (\$)
Water	286
Refuse removal	198
Toilet	141
Cleaning equipment	277
Employee health test (run by municipality at \$14 per employee)	107
TOTAL	1009

By re-formulating urban health regulations to be more supportive of informal workers, local authorities can provide an environment where healthier and safer conditions are possible to achieve. More attention could be paid to the ways in which to incentivize health and safety, rather than punishing workers for operating in an environment where it is difficult to maintain adequate hygiene standards. It would also mean paying more attention to the provision and control of basic services in and around informal workplaces.

There have been some good examples of this type of supportive urban health regulation. In 1994, the eThekweni Municipality's City Health Department in Durban, South Africa devised a set of minimum health standards for informal traders selling perishable and non-perishable food items. A code of good trading practice was also developed. Health officials then provided interactive training sessions where issues of personal, food and environmental health were discussed and the code of good trading practice disseminated. Once traders had been through the training, environmental health officers visited them at their sites to assist them in applying the principles that they had learned. If the traders applied the minimum standards, they were awarded a certificate endorsed by the Chief Health Inspector. There was an award ceremony every few months in which the mayor handed out the certificates.

Not only does this type of supportive regulation enable a better-managed city, but it also achieves better results in public and worker health. This, in turn, can allow authorities to “see” people as workers making an economic contribution instead of as public health nuisances.

More information:

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