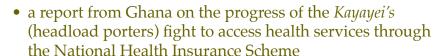
Occupational Health and Safety for Informal Workers

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elcome to this last edition of the OHS Newsletter for the year. 2012 has been a busy year for informal workers in their struggle to improve their working conditions and access to basic health services. In this issue, we report on some of the activities – and successes! – in which informal workers have been involved during the year. In particular:





- a new approach to extending OHS to waste pickers by KKPKP, the union of waste pickers in Pune, India
- an update from Accra, Ghana on struggles over sanitation in Makola Market
- news from Brazil, India and Tanzania, and upcoming **OHS** events



The WIEGO OHS Project's Peruvian team – Anita Luján and her colleagues from the Consorcio por la Salud, Ambiente y Desarollo (ECOSAD) – and in collaboration with WIEGO's Latin America regional coordinator Carmen Roca, held a National Event on Occupational Health & Safety for Informal Workers on the 12th of September 2012. The event attracted over 90 people: many of them informal workers – waste pickers (recicladores), newspaper vendors (canellitas), and market porters (estibadores) – who had been involved in the research stages of the project. Speakers at the event included Margarita Petrera of the Consorcio de Investigacion Economica y Social (CIES), who gave a detailed profile of informal workers and



their access to social protection in Peru, and Anita Luján, who reported on the findings of the OHS project research. Francie Lund, WIEGO's Social Protection Director, concentrated on some of the advances made internationally in extending OHS to informal workers. She concluded: "It is possible to have an occupational health that is inclusive of informal workers. This is not just a dream."

Photograph: Sally Roever





Responses were then invited from representatives of the worker organizations who were there. Alejandro Dias spoke for his association of market porters (Federacion de Estibadores Terrestres y Transportistas Manuales de Peru - FETTRAMAP), saying that health protection was of real importance to these workers. He explained that market porters work daily from midday through to 6 a.m., transporting heavy loads on their backs in Lima's markets. They have fought for and won a law regulating their employment, and which limits the weight they carry to 50 kg per load. However, the law is not yet well enforced, so often porters carry loads of more than 100 kg. As a result many of the porters develop severe back problems in later life. Alejandro Dias stressed the need for better enforcement of the laws protecting market porters, as well as training in occupational health for the workers themselves.



Juan Herrera spoke for La Federacion Nacional de Recicladores del Peru (FENAREP), one of the three waste picker associations which participated in the OHS project. Responding to Francie Lund's discussion on the development of ergonomically designed carts for waste pickers in India (see OHS Newsletters 2 & 3 for more information), Juan stressed the importance of international exchange and learning between informal worker organizations. He shared how workers from FENAREP had, in consultation with ECOSAD, developed excellent mechanized carts for collecting waste. He said they would be happy to share their learning from this process with the Indian workers, some of whom are still in the process of developing their carts.



Finally Simon Mitma spoke for the association of newspaper vendors (Federacion National de Vendedores de Diarios Revistas y Loterias del Peru - FENVENDRELP), and highlighted some of the poor working conditions that can lead to ill health amongst these workers, including the fact that they start very early in the morning, and some finish late at night. During the 1950s FENVENDRELP won a major victory when the government set up a healthcare facility specifically for its members. The facility was initially funded by state contributions, as well as contributions from the newspaper companies. It was governed by a tripartite committee of government, private sector and workers. However, over the years the contributions from the newspaper companies have decreased, and the management of the facility has been very poor. As a result the newspaper vendors have been left without access to good healthcare.

Top: Alejandro Dias of FETTRAMAP spoke about the OHS challenges for Lima's market porters. Middle: Juan Herrera of FENAREP stressed the importance of international exchange and learning. Bottom: Simon Mitma of FENVENDRELP highlighted poor working conditions that can lead to ill health for newspaper vendors. Photographs: Sally Roever



The OHS event signalled the start of the dissemination phase of the OHS project in Peru. This phase will involve more targeted multi stakeholder workshops, platforms for dialogues, seminars aimed at policymakers, and incorporating OHS for informal workers into OHS courses in universities.

WIEGO comes to Lima! Pictured here from left to right are WIEGO Team members Francie Lund (Social Protection Director), Laura Alfers (Social Protection Officer), Carmen Roca (Latin America Regional Director), Sally Roever (Urban Policies Street Vending Specialist), with Anita Lujan of ECOSAD and Sidney Evans, our star translator. Photograph: Ruth Arroyo

Ghana: Kayayei win commitments at Health Policy Dialogue

A Health Policy Dialogue was held in Accra, Ghana on July 26, 2012 to identify ways in which to help *Kayayei* (headload porters) better access health services, and to help integrate these workers into the Ghanaian National Health Insurance Scheme (NHIS). The Ghana dialogue was organized as a follow up to the WIEGO/HomeNet Thailand Health Policy Dialogue, held in Bangkok in January 2012 (see Newsletter 5 for more details). At the Bangkok Dialogue, WIEGO's Laura Alfers presented a case study of the Ghana NHIS, which showed that the *Kayayei* – who are usually very poor migrant women workers from northern Ghana – were unable to easily use the health services in Accra. The findings of the case study showed that:

- A large number of *Kayayei* were not registered with the NHIS. Most could not afford the premium. Although the scheme's minimum annual premium is set at \$5, in reality \$15-\$20 is charged as a minimum in urban areas. Many *Kayayei* earn \$2-3 or less a day, making this unaffordable for them.
- Those few who could afford to join complained that they were mistreated or ignored when they went to use the health services.
- Reliable, good information on health programmes such as free care for pregnant women – was not reaching the *Kayayei*. They were often paying for health services, though legally, these services should be free to them.

This Health Policy Dialogue in Ghana was attended by about 100 *Kayayei*. They shared their experiences and asked direct questions of 12 key policymakers from the Ministry of Health and NHIS. According to Dorcas Ansah, Accra Focal City Coordinator, the Kayayei "amazed the officials present" with their confidence and their ability to pose critical questions. "Their anger at being unable to access health services even when they had saved to buy the NHIS card was very strongly expressed," said Dorcas.







Two important commitments emerged from the discussions. First, NHIS officials asked for WIEGO's assistance in registering associations of Kayayei with the scheme. Dorcas Ansah assisted the Kayayei organizations in negotiating a significantly reduced annual premium of \$2.50. The NHIS then held a special registration for the *Kayayei* on the 9th of September. Over 1,500 people registered with the scheme on that day. One thousand of those who registered were *Kayayei*. The others were community members who demanded that they be allowed to register under the same conditions, and the NHIS agreed, once the *Kayayei* were done, to register 500 additional people.

The second important commitment was from the Ministry of Health, which has indicated a willingness to enter into discussions with the *Kayayei* associations and WIEGO on the poor quality of care received by these workers when accessing health services. Suggestions which were put forward by the MoH officials were that clinics and hospitals in areas where *Kayayei* live and work would have doctors and nurses specially mandated to look after their needs.

The *Kayayei* still have a long fight ahead in their struggle to get decent healthcare, but things are certainly looking more positive. Dorcas Ansah, assisted by Kweku Kyere, will now be working towards setting up a low cost monitoring system for those *Kayayei* now registered with the scheme. Evidence collected from this will be used in advocacy campaigns to push the Ghanaian health system to better serve poor workers.

Top: Kayayei spoke of their anger at not being able to access health services even when they had saved to buy the NHIS card. Middle: A special NHIS registration of Kayayei was set up in Accra. Bottom: Local community members demanded that they should be allowed to register at the reduced rate and NHIS officials agreed to register an additional 500 people at this rate. Photographs: Dorcas Ansah

India: Waste pickers argue for extended responsibility to apply to manufacturers of sanitary pads

(This article is based on a draft policy brief developed by the SWaCH, the solid waste collection and handling cooperative located in Pune India. See www. *swachcoop.com for more information.*)

It is estimated that only 12 per cent of India's women have access to sanitary pads when menstruating. In response to these low numbers, the Indian government has made efforts to manufacture and distribute sanitary pads at low cost. As SWaCH points out, however, this isn't a simple story about improving women's health. Sanitary pads protect women during menstruation. However, when they are carelessly disposed of, they can pose a real health threat to workers who recycle waste – workers who are also mainly women. Although 12 per cent is a low number, India's large population means that waste pickers around the country are coming into contact with the used sanitary pads of over 36 million women. A small study of health data collected by the union of waste pickers, KKPKP, showed that these workers are prone to getting cuts on their hands while sorting through waste. This creates a significant risk for them when they come into contact with the bodily fluids on sanitary pads, and can lead to possible infection with hepatitis, tetanus, E. coli, salmonella, and/or staphylococcus.

In response to this, SWaCH has developed a low-cost, environmentally friendly solution: ST-Dispo Bags. The bags are made by SWaCH members from recycled paper, and are small, clearly marked envelopes with a string which allows them to be securely tied to prevent the contents from spilling out into the general waste. Waste pickers are easily able to identify the bags and can then channel them into a different waste disposal stream. The bags cost as little as 1 rupee (less than two cents U.S.), and sales directly benefit old, destitute waste pickers who have no other means of income, as well as those who are unable to work temporarily due to pregnancy, injury or ill-health. SWaCH has been promoting the use of ST-Dispo Bags among the communities for whom they provide waste management services. They are now trying to get more Indian women to use the bags.



SWaCH argues that an effective way to do this would be to encourage or even compel manufacturers of sanitary pads to promote their use. This could be done through the concept of "extended responsibility." Extended responsibility essentially places a duty on manufacturers to deal with their products at the end of the product's life. This is meant to promote the manufacture of environmentally friendly products, which can more easily be broken down. Sanitary pads are not environmentally friendly – the materials they are made from are not

SWaCH Sathis collect waste in Pimpri Chinchwad, Maharashtra, India. Photograph: Laura Alfers

biodegradable or recyclable. While ST-Dispo Bags are not the answer to the larger question of environmental impact, SWaCH argues that manufacturers should "at the very least" assume a "more proactive role" in the domestic disposal of sanitary pads by promoting the use of the bags to the people who buy the products.

SWaCH and the WIEGO OHS Project will be working together over the coming year to explore these ideas further. Watch for more news!



Update from Accra, Ghana: No improvements in sanitation in Makola Market

In Newsletter 4 (November 2011), we reported on the Multi Stakeholder Workshop (MSW) held in Accra, which involved traders and local government representatives. One of the commitments made by the Accra Metropolitan Assembly (AMA) representatives at the MSW was that a large, clogged drain in Makola Market would be cleared. The drain, located close to the textiles section of the market, is a breeding ground for mosquitoes and the source of terrible smell. It also floods regularly during the rainy season.

A year later, however, it seems that little has changed. Traders in the market report that after the MSW, some attempt was made by the AMA to clear rubbish from the drain. However, although the traders have continued to complain to the environmental health officers in the market, nothing has been done to de-silt the drain, meaning that it is still full of stagnant, unhealthy water. WIEGO is now planning to facilitate action on this, as well as on other commitments made by the AMA in



last year's MSW. This will include a follow-up dialogue, which will allow traders and AMA officials to communicate in a structured away about these issues, as well as engagement with the media.

Before and After: The top photograph shows the blocked drain before the MSW; the bottom photograph is the same drain one year later. The worst of the rubbish has been removed, but the cause of the blockage hasn't and the stagnant water remains. Photographs: Laura Alfers and Kweku Kyere

News snippets ... from Brazil

On the 24th of August, 2012, the Brazilian Government officially signed into law a new National Policy on Worker's Health (Ordinance No. 1823). The policy highlights the fact that all workers are to be included as workers within the Unified Health Scheme (SUS), whether they are formal or informal, rural or urban, public or private employees, and whether they are independent contractors, temporary workers, cooperative workers, apprentices, trainees, domestic workers, retired workers, or unemployed. The aim of the policy is to lay down guidelines, principles and strategies in order to strengthen the surveillance of workers' health through the Unified Health System (SUS). The policy can be downloaded in Portuguese here: http:// www.cerest.piracicaba.sp.gov.br/site/images/PORTARIA N 1.823 -Politica_Nacional_de_Saude_do_Trabalhador_e_da_Trabalhadora.pdf

... from India

Pharmbiz.com reports that the Self-Employed Women's Association (SEWA) has sent a delegation to the Indian Ministry of Health requesting urgent interventions to protect the health and safety of informal workers. This comes after controversy generated by the January 2012 release of the High Level Expert Group (HLEG) Report on Universal Healthcare in India, which recommended increased state spending on healthcare, strengthening of primary healthcare systems, as well as the integration of occupational health services into primary healthcare. The report was highly regarded by international public health experts when it was released. However, an article in *The Hindu* dated August 8th, 2012 reports that the National Planning Commission of India now seems to be moving away from the recommendations contained in the report, and is instead planning to strengthen existing health insurance systems such as the RSBY Scheme (see Newsletter 5), and to increase private sector involvement in the health system. None of this seems positive for occupational health, which is certainly not given priority under health insurance schemes or by private sector health providers.

... from Tanzania

Vicky Kanyoka, of the International Union Federation (IUF) and the International Domestic Workers Network (IDWN), reports that OHS issues have featured prominently in recent tripartite debates held in Tanzania on the ratification of the ILO's new Domestic Workers Convention. In particular it has prompted discussions about how the Occupational Safety and Health Authority (OSHA) could work more closely with the Labour Inspectorate. It was also agreed that OSHA, along with the Conservation, Hotel, Domestic and Allied Workers Union (CHODAWU) and the Commission for Mediation and Arbitration (CMA), should jointly set up a system for monitoring OHS abuses involving domestic workers.

¹ http://www.thehindu.com/health/article3742403.ece

Upcoming events

In **Salvador**, **Brazil** Vilma Santana and her colleagues at the Federal University of Bahia's Institute of Public Health host a national symposium from the 25th to the 26th of October 2012. The symposium is entitled "Primary Health Care and the Workers' Health – Possibilities and Challenges for Informal Workers' Safety and Health Care." It is aimed at disseminating knowledge and successful experiences in relation to Brazil's Network of Workers' Safety and Health Care (RENAST), which is part of the Universal National Health System (SUS).

In **Durban, South Africa**, a group of OHS experts, experts in public health, and urban and economic policy experts from around the world are being brought together to advise us on strategies to influence and reform for a more inclusive occupational health and safety discipline for informal workers. The dates of the meeting are the 27th to the 29th of November 2012. We will report on this meeting in the next Newsletter.

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OHS microsite as a resource: We will be developing the OHS microsite, which you can find on WIEGO's website at www.wiego.org/ohs. We hope it will become a valued resource of information for people interested in and studying OHS for informal workers. Let us know what you would like to see there! Send us references and toolkits you know about!



About WIEGO: Women in Informal Employment: Globalizing and Organizing is a global research-policy-action network that seeks to improve the status of the working poor, especially women, in the informal economy. WIEGO helps to build and strengthen networks of informal worker organizations; undertakes policy analysis, statistical research and data analysis on the informal economy; provides policy advice and convenes policy dialogues on the informal economy; and documents and disseminates good practices in support of the informal workforce. For more information see **www.wiego.org**.