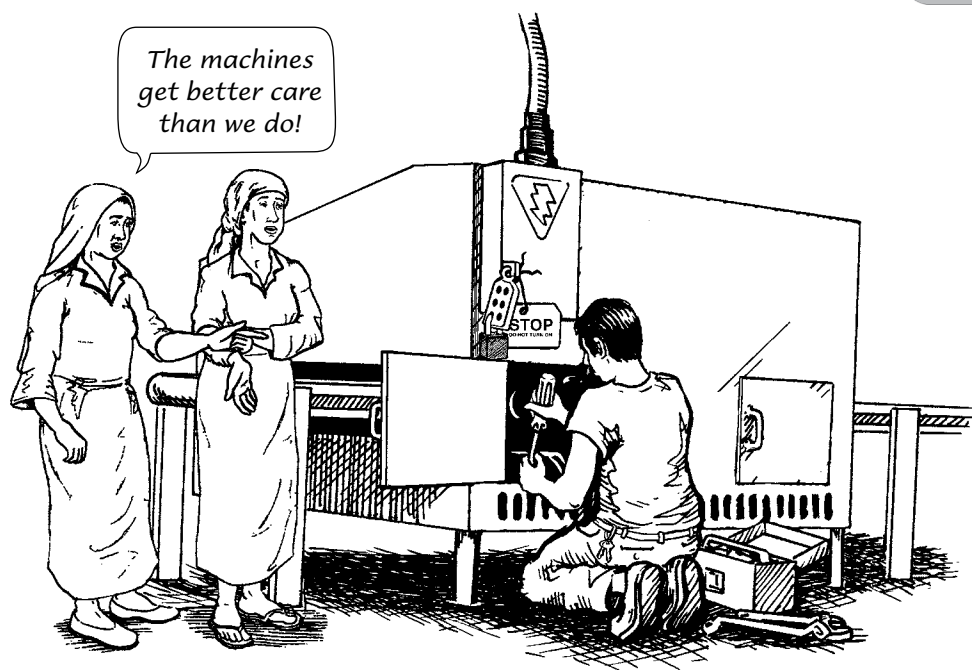


Access to health care

25



In most factories, workers do not have access to appropriate health care. Many factory owners see access to health as an extra, costly burden instead of an investment that will pay for itself in healthier workers, resulting in fewer missed working days, less turnover, and increased efficiency. Even when national laws guarantee access to care either in the factory or in the greater community, there is often no way to enforce these laws and get access to care.

In order to change the promise of health care from a goal to a reality, workers need:

- access to care for accidents or emergencies in the factory.
- access to a quality, appropriate, and affordable local clinic open during hours that make it easy for workers to get care.
- access to care for workers' families.
- national policies that recognize and support health and access to care as a human right.
- support for training of health and safety promoters to monitor and advocate for the health of factory workers.

Health care in the factory

Many factory owners do not offer on-site medical services. When they do, services may be limited, and sometimes not very good. Factory-paid doctors and nurses, although not part of management, may be pressured to prioritize production over improving workers' health. But conscientious health workers can be important sources of information and valuable allies for workers.

Without adequate care, minor illnesses or injuries can become major problems. Factory policies around health care can make problems worse. These include rules that make it difficult for workers to get time off or that dock their pay when they go to a doctor, when they need time to recover from an illness or injury, or to care for illness in their families. Expensive health services also prevent workers from getting the care they need.

Care and support for injured workers

The factory should pay medical costs for workers injured on the job. This includes emergency transport and care for injuries, chronic strain and overuse problems, and problems from chemicals, noise, and heat or cold.

Health education classes

Some unions and employers arrange for worker education during the workday on HIV and AIDS, tuberculosis, reproductive health, nutrition, and other health issues. Factory owners support this because it reduces worker illness, absence, and turnover, and so increases worker productivity.

Health promotion in factories

The HERproject of Business for Social Responsibility has been trying to improve health by training workers and supervisors as “peer health educators.” They developed a 12-part curriculum to train workers on many health topics, including women's health. Workers then share it further with their co-workers.

In Ciudad Juárez, Mexico, where hypertension and diabetes is common, 50 peer educators were trained to share knowledge with 1,000 co-workers in an electronics factory during breaks, meals, and on commuter buses. The factory clinic then provided checkups to support the health education, including screenings for diabetes, breast and uterine cancer, and high blood pressure, as well as vaccinations, a health fair, and pregnancy and childcare counseling. One of the participants said, “the program provided a way for women to become spokespersons to workers with factory management about important health issues.”

First aid and emergency care

Even if there is no clinic in the factory, it is important that every workplace has first aid supplies and provides training to help you and your co-workers respond to emergencies. Training should happen regularly so that if a trained worker leaves, there will be others ready to take her place.

First aid supplies should be kept in safe, clean places throughout the factory. Workers should be able to access them easily. The contents of your first aid supply kit will depend on the kinds of work you do, but all kits should include materials to treat common injuries such as burns, cuts, falls, and other injuries. The materials themselves will not be useful if the factory does not ensure that workers and supervisors have been trained in how to do first aid and stabilize an injured person until they can get to help. Each set of first aid supplies should also include the telephone numbers for local ambulance companies as well as hospitals and clinics.

Activity

An emergency plan for your factory

Use the activity Draw a map of your factory, on page 43 to identify some of the dangers workers face.

Then organize a discussion to find answers:

- Where on their bodies are workers getting hurt most often?
- What machines are the most dangerous?
- What kind of attention and help do injured workers receive?
- What actions do the factory owners take to resolve problems?

Use this information along with known risks such as fire, electrical failures, earthquakes, and so forth, in your campaign to create with your employer an emergency plan for your factory.

An emergency plan not only includes first aid kits and immediate treatments, such as eye washes or showers, but also a detailed response system that answers:

- Who is responsible for responding first to an emergency?
- What should the person do? For example: Should they cut power to machinery? or How should they deal with blood if a worker is bleeding?
- Where can they get additional help from a health worker?
- When and how should they transport an injured worker to the clinic or hospital?

Getting good care at a clinic or hospital

Workers often have a hard time getting good health care. Hospitals and clinics may charge a lot for services or medicines, be difficult to get to, be crowded or not open when you can go, or be unfriendly to migrant workers or women.

Illness due to work creates additional problems, since many health problems are not easy to see or to prove were caused by work. For instance, strain and overuse injuries from repeating the same movement too many times without rest, and short- and long-term effects from chemicals are caused by work and can be lessened or stopped when work conditions are improved. But most employers refuse to accept that workers' back pain, headaches, skin rashes, breathing problems, and cancers are caused by their jobs. Most doctors and nurses do not learn about occupational health or know about conditions in export factories, so workers do not get good treatment.

Often workers who are disabled or injured from work receive no support from their bosses. They might be fired and if their sickness is chronic and they need medicine or special equipment, they often are forced to pay for it themselves. Many cannot afford to do this.

The health workers are nice but they really don't know anything about our work. They don't even know where to look up the chemicals we are working with to see if they are dangerous.

Yeah. I started getting headaches when we switched chemicals but the doctor keeps saying there's nothing wrong with me!



Recognition of work-related injuries and illnesses

Some doctors tell workers that their health problems are not related to the work they do. They blame the worker by saying she had a previous condition that caused the problem, or the problem is due to her bad habits or home life, or is a result of unhealthy conditions in her community.

But work injuries and illnesses are caused by poor working conditions, exposure to dangerous chemicals and machines, lack of training, and no access to emergency care.



We made big posters about our co-workers who were killed in the factory. We talked about who they were, how they died, how their families are suffering now. We take the posters to city events, parades, company picnics, and to churches on Sundays.

Find out how occupational diseases and injuries are defined in your country. This may be useful to you and your group in convincing health, employer, and government authorities that they must recognize injuries and illnesses as work-related, cover the costs of treatment, and include them in workers' compensation systems.



The right to be compensated for injuries caused by work



The **ILO Employment Injury Benefits Convention (No. 121)** says governments should provide care, rehabilitation, and compensation to workers who suffer from occupational diseases, including:

- diseases caused by dusts.
- diseases caused by exposure to particles in the air.
- diseases caused by exposure to chemicals.
- problems and injuries caused by noise, vibration, and other dangers.

Also see the **ILO List of Occupational Diseases Recommendation (No. 194)**.

The **Employment Injury Benefit Convention** also says that governments should offer compensation for:

- workers who can no longer work because of their disease or injury.
- families of workers who lose their life at work or because of work.

The benefits provided must cover the medical care and rehabilitation of the worker, but should also include cash benefits, depending on the injury or disease.

The roles of the UN, ILO, and other international organizations that promote workers' rights are explained in Appendix A.

Our clinics are funded — not owned — by the employer

Many organizations in Bangladesh offer affordable and accessible health services. But many people who work in factories cannot use these services because they do not have time or permission to leave the factory. To reach them, the Marie Stopes International organization established “factory health services.” These clinics operate within the factory and are funded by the factory owners, though they remain independent. Workers can seek medical help as they need it but the clinic also offers regular checkups and monitors workers’ health while they work at the factory. The clinics are open long after the workers finish their workday and the boss pays for every worker to have free service at the clinic. Many more people now have access to health services.

We worked with many workers and organizers to address the distrust that they had of company-paid clinics like ours. We showed them how the doctors and nurses work for us, not the boss. Even if the boss pays us to let workers use the clinic, the doctors and nurses are independent.



Workers with special needs

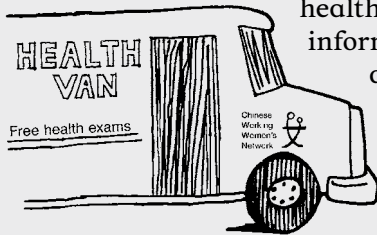
All workers are different and we bring these differences to work with us. Usually the workplace is made more productive by our differences. When our health needs differ, we have to make sure everyone gets the attention they need. Workers with HIV can continue to live healthy, productive lives when they have access to the medicines, nutrition, rest, and respect they need (see chapter 30: HIV). With medical support and job flexibility, workers with disabilities also can continue to work productively for many years.

Women workers and women’s health

Even though women are half the population, and often most of the workers in a factory, women’s health needs often are not considered part of basic care nor occupational health. Since many chemicals affect women’s reproductive systems, pregnant workers need to have checkups (prenatal care) to find and care for problems with the mother’s health and with the baby. If work cannot be made safe, many countries give pregnant women the right to transfer to jobs that are safe for them or grant them paid leave if no safe job can be found.

Women's Health Express

The Chinese Working Women's Network (CWWN) has created new ways for women factory workers in China to meet and talk about health issues. They started the Women's Health Express, a mobile van that stops outside factories in the Pearl River Delta industrial zone. Women who visit the van are checked for signs of many illnesses and given general



health information and treatment, as well as information about health problems caused by dangers at work. Staffed by women health promoters, the Women's Health Express is a place where women workers feel comfortable talking about their concerns and problems.



The right to health care



The **UN Convention on the Elimination of Discrimination against Women** says men and women must have equal access to health care information and services, including family planning. To learn more about the conventions to eliminate discrimination in the workforce, see *The right to equality*, on page 309.

Several **ILO conventions (Nos. 102, 121, 130, 183)** say governments must provide for the health, health care, and social security of workers and their families, including:

- medical care for workers, their partners, and their children.
- paid time off for illness.
- medical care in case of injury at work.
- rehabilitation services to help a disabled worker return to her previous work, or a suitable job for her ability.
- injury benefits paid to workers who are hurt or made ill by work.
- disability benefits paid to workers who are injured and cannot work, or who earn less money than they did before the injury.
- survivor's benefits paid to the family of a worker who dies.
- recognition of work-related illnesses and injuries, including diseases caused by chemicals, dust, noise, vibration, and other dangers.

The roles of the UN, ILO, and other international organizations that promote workers' rights are explained in Appendix A.

How to

Get better care

Health workers are trained to recognize signs of illness, identify problems, and treat them. But many health workers have never been inside a factory. Health workers may know very little about factory work and the conditions that affect workers' health. If possible:

- arrange for them to visit factories and see conditions for themselves.
- take health workers to visit people's homes and community activities.
- organize a meeting or workshop where factory workers tell or act out their stories to help educate health workers.

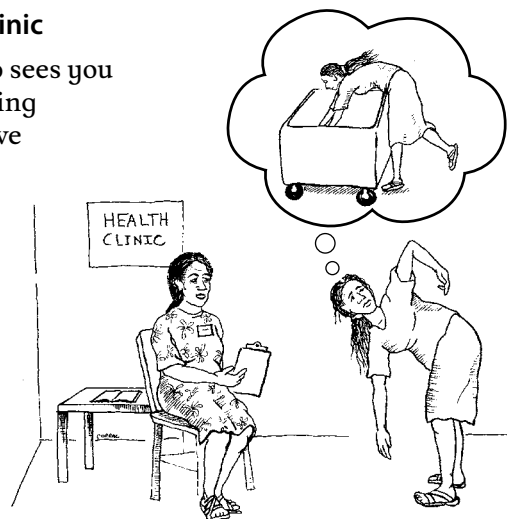
At the clinic

The doctor, nurse, or health worker who sees you should ask about the problem you are having now and about your past health. Try to give complete information, even if you feel uncomfortable, so the health worker can learn as much as possible about your health. Always tell the health worker about any medications you are taking, including aspirin or family planning methods, because some medications affect how other medicines work.

These questions can help you prepare to explain your problem:

- When did you first notice the problem?
- What signs made you think something was wrong?
- How often do you have these signs?
- Have you ever had these signs before, or has anyone in your family or community had them before?
- What makes the signs better or worse?

If you suspect that your problem is related to chemicals at work, bring as much information as you can: the chemical name or brand name; what it is used for; its color, smell, or texture; and anything else that might help the health worker find out what it is (see pages 157 to 163).



Most health workers are not trained to treat illnesses and injuries caused by factory work. Show the health worker exactly what you do at work.

(continued)

How to**Get better care** *(continued)*

You should also ask as many questions as you need to make a good decision about how to solve your health problem. Make sure the health worker explains so you understand:

- What are the different ways this problem can be treated? Are there home remedies?
- What will the treatment do? Are there any dangers?
- When will I get better?
- Will I be cured? Or will the problem come back?
- How much will the tests and treatments cost?
- Are there home remedies?
- Why did the problem happen? Can I prevent it from happening again?

Many doctors and nurses are not good at giving information. Or they may be busy and not want to take time to answer your questions. Be respectful, but firm. Do not feel intimidated by them — your health depends on the services they provide, and you should be satisfied with the services you receive. They should explain until you understand. If you do not understand, it is not because you are not smart enough, but because they are not explaining well.

The health examination

In order to know what is wrong with you and how serious your problem is, you may need an examination. The exam may include looking at, listening to, and feeling the part of your body where the problem is. For most examinations, you need to uncover only the part of your body where the problem is.

- If you would feel more comfortable, ask a friend or family member to stay in the room with you during the exam.

Tests

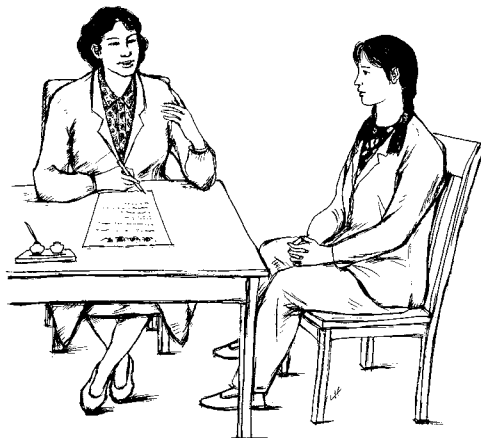
Tests can give more information about a health problem. Many tests are done by taking a small amount of urine, stool, or coughed-up mucus and sending it to a laboratory. Or, a needle is used to take a small amount of blood from your finger or arm.

- Ask the health worker to show you and explain how he will take the test.
- Ask about cost before you have any test.
- Ask what the health worker will learn from the test and what would happen if the test is not done.

Health care with respect

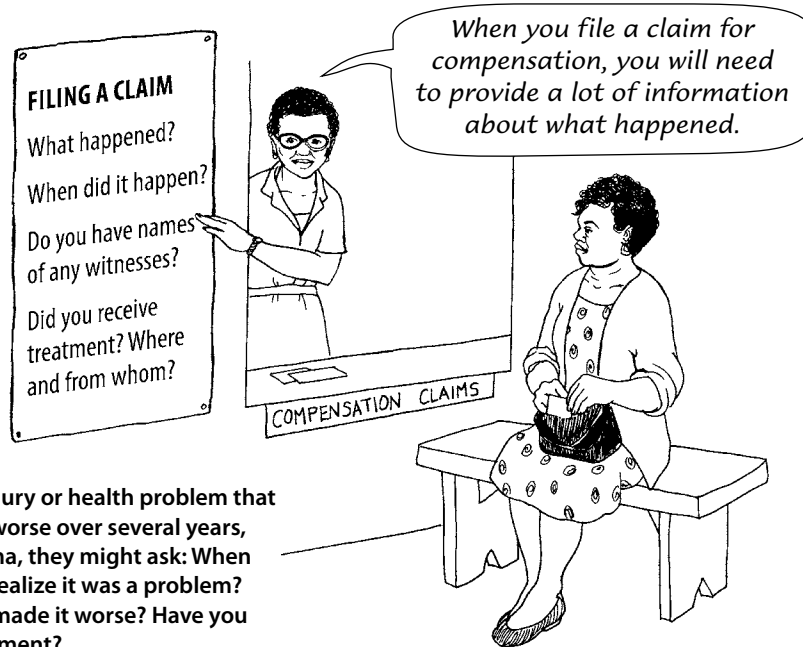
All people who give health care should do their best to provide you with:

1. **Access:** If you need medical care you should be able to get it, no matter where you live or where you come from, how much money you have, your religion, your language, your age, your skin color, your political beliefs, or what health problem you have.
2. **Information:** Your health problem and the possible treatments for it should be explained to you. Your health workers should help you understand what you need to do to get better, and how to prevent the problem from happening again.
3. **Choice:** You should be able to choose whether or not you are treated, and how. Also, if there are different choices, you should be able to choose where to go for treatment.
4. **Safety:** You should be given information to avoid harmful side effects or new problems that result from treatment.
5. **Respect:** You should always be treated with respect and courtesy.
6. **Privacy:** Things you say to a doctor, nurse, or other health care worker should not be overheard by others or repeated to anyone else. Exams should be done in privacy, where others cannot see your body. If there are other people in the room, you should be told who they are and why they are there. You have the right to tell them to leave if you do not want them there.
7. **Comfort:** You should be made as comfortable as possible during an exam. You should have a good place to wait and not have to wait too long.
8. **Follow-up care:** If you need more care, you should be able to go back to the same person, or be given a written record of the care you have received to take to a new doctor, nurse, or health worker.



Workers' compensation and social services

Too often, companies do not want to take responsibility for the injuries they cause, and refuse to support disabled workers. While many countries have workers' compensation, rehabilitation, and disability benefit programs to support workers who have been injured at work, the forms and processes for filing a claim can be difficult to complete. Many worker organizations offer support for workers filing their claims. People working in the claims office can be very helpful too.



If this is an injury or health problem that has become worse over several years, such as asthma, they might ask: When did you first realize it was a problem? What things made it worse? Have you had any treatment?

Besides keeping your own information, it is helpful to keep records of injuries, illnesses, and compensation paid to other workers, especially if more than one person was affected. Make this information known to your union, the health and safety committee, the boss, and interested community organizations. Being able to show that work dangers were so serious that they resulted in compensation being paid to workers can help you motivate people to get involved and take action to improve conditions.

The factory might be unwilling to recognize that harm was committed and refuse to pay compensation. You may need to involve lawyers, government officials, environmental, worker, and women's organizations, reporters, and even the large companies whose products are being made in your factory.

Support groups for injured workers

Injured workers benefit from meeting and sharing their experiences about health care providers, treatments, recovery, social services, and returning to work. Workers with experience can help newly injured workers apply for benefits and give emotional support to workers with a difficult recovery or a permanent injury. When employers and co-workers only see the injury but not the person with it, a support group can help you recover your sense of self-worth and belief in your own abilities.

Social insurance and services for injured workers

Ill or injured workers recover more quickly and completely when the health system trains doctors to listen to workers and to identify work-related injuries. Services should include physical and occupational rehabilitation and back-to-work programs if the job no longer poses a danger to the worker. For a worker who can no longer do his job, programs should give job training appropriate to the worker's disability. The employers and government should also provide a social insurance program for permanently disabled workers, including compensation and accommodation at work and in the community.

Each country has different laws regarding health care, from universal health care to private hospitals. Learn what the health care laws are in your country, then help workers decide which issues are most important to them, such as the cost of health insurance, time off to see a health worker, the cost of medicines, or specific health coverage for work-related health problems.

Health care is a union priority

The SITRACOR garment workers' union in Honduras started a campaign for better access to health. They fought for workers' right to time off for medical appointments, and to make sure that every worker was registered in the national health insurance system. They got a lot of support from the government and NGOs when one worker had a miscarriage on the job after she was denied permission to go to her pre-natal appointments.

SITRACOR has also worked on expanding other medical benefits for workers. For example, they found that many garment factory workers needed eye care for irritation, injuries, and eye strain, but the full cost of eye exams and glasses was not covered by the national health insurance. SITRACOR campaigned to get the factory owner to pay for workers' eye care. They also won similar battles to make sure the factory pays for tests for lung problems, HIV, and cancer.

Workers as health promoters

Factory workers can become health promoters in the factory. Forming or joining a safety committee can be a good place to start, since they often help prevent injuries at work. But worker health promoters can do even more by educating others about health dangers, and helping people find solutions and get care when they have a health problem. Worker health promoters develop a better understanding of the problems in the factory and can help others learn to treat the problems, to think about how to prevent them from happening again, and to organize for better and healthier work conditions. Workers often feel more comfortable getting advice from people who share their experiences than from “outsiders.” See chapters 2 and 3 for more on becoming a worker health promoter.

By finding out what workers believe are their most important health problems, you can create trainings and materials that they will be interested in and pay attention to. Use the information in this book to create health education materials that explain:

- how conditions in the factory threaten health.
- how to prevent health problems.
- how to recognize signs of problems caused by dangers at work.
- how to fight for workers’ right to health care.



Friendly health workers or community groups may be able to help produce booklets or posters, or organize discussion groups or workshops on different health problems. Make sure that talks and materials are in the languages that workers speak and reflect the conditions of their jobs and lives.

Workers’ health and safety trainings

The Asia Monitor Resource Center (AMRC) holds occupational health and safety workshops with organizers in Asia. Through training and activities such as mapping dangers, these organizers become health and safety promoters, sometimes even forming national occupational health and safety organizations. Although they do not have all the training or equipment a professional might have, they often have better local knowledge and practical workplace experience. This lets them have a real impact on workers’ lives. In Cambodia, Indonesia, and China they organize to remove dangers from the factory, train workers and employers on basic safety, and lobby for personal protective equipment.

Common health problems

Many of the health problems workers have are common in their communities. They may not be caused by factory work, but conditions in the factory make them worse by affecting:

- How they get sick and how often: Dangers at work, including bad ventilation, breathing in chemicals, bad food, and unhygienic toilets can weaken the body's ability to fight illness and infection.
- How sick they get: Chemicals and dusts in the air can make respiratory problems worse. Bad food and unclean toilets spread germs.
- How quickly they get healthier: Not having time to rest or go to the doctor will prevent them from getting better quickly.
- How easily they spread contagious illnesses to others: Not having time or clean water to wash hands regularly, and ventilation that just moves dirty air around the workplace instead of replacing it with clean air contribute to the spread of germs in the factory.

Because workers spend most of their time at work, the factory is a good place to do health promotion. Improving workers' health inside and outside the factory may be something the boss is willing to support. Healthy workers miss less work and are more efficient at work. Healthy workers are able to take better care of themselves and their families, and they participate more actively in the community. Involve workers from the start in the design and implementation of any health promotion program.

Health and hygiene trainings and workshops: Talk with workers or do a survey to find out which health problems are the most common. Bosses might make time for health trainings if they do not focus on how work affects health. Be creative in finding ways to incorporate work-related problems into your sessions. Hold separate trainings for women where women's health can be discussed more openly.

Supply drives: Basic supplies can help prevent common health problems. Find sponsors and donors, such as a health post or a local store, and ask the boss to contribute towards soap, sanitary napkins, pain medications, and rehydration drinks, among other useful supplies.

Free cancer, HIV, and STI screenings: Health clinics or local non-profits often organize early cancer detection screenings, such as pap smears to check for cervical cancer. STI screenings are helpful when workers are guaranteed privacy, confidentiality, and free treatment.

Vaccination campaigns: Invite the health department to provide free vaccinations in the factory, before and after work, or during lunch.

Treat common health problems

Treat most illnesses with rest, nutritious food, and drinking lots of liquids. You can learn to recognize when you need to see a doctor.

Common colds are caused by a virus and cannot be cured by antibiotics, which work against infections caused by bacteria. Drink plenty of water, soups, and juices, and rest. Some companies sell expensive tablets for colds but you get the same relief from plain aspirin or acetaminophen tablets, and they are less expensive. Colds are easily passed from one person to another. Wash your hands often, cover your mouth when you sneeze or cough, and tell others to do the same.

Urinary tract infections (UTIs) and bladder infections affect women more than men because their urine tube is short and more germs can get into it. Germs can get into the urinary system when a woman has sex, does not drink enough water, or goes a long time without urinating. Drink a lot of water, or teas known in your area to treat them. Do not drink sweet drinks. If you do not feel better in 2 days just by drinking liquids, you may need to take an antibiotic (cotrimoxazole or others). See a health worker or *Where Women Have no Doctor*, page 368.

Diarrhea can be caused by many things, and usually no medicine is needed. However, if a person loses so much water as to become dehydrated, it is more important than ever that the person drink lots of water and eat nutritious foods. If you have trouble keeping anything in you, make and slowly drink at least 3 liters of a home-made rehydration drink. Mix 1 liter of water with half a teaspoon of salt and 8 level teaspoons of sugar. Make sure you do not add more salt, because it could dehydrate you more.

Conjunctivitis, also called “pink eye” is an infection caused by bacteria. Treat it right away with an antibiotic eye ointment (usually tetracycline). See *Where There is No Doctor*, page 378.

TB (tuberculosis) can spread to co-workers and family if you don’t get medical treatment. For information about TB , see chapter 31.

Read *Where There Is No Doctor*, *Where Women Have No Doctor*, and other Hesperian books to learn more about health problems and how to treat them. But remember: Medicines are not a substitute for good health care. Good health care involves explaining why someone has a health problem, what she can do to get better, and how she can prevent that problem in the future.



Health
Info

Women workers organize through health promotion

Our organization, the Self-Employed Women's Association (SEWA), is a trade union of 1.3 million women workers in India. We fight for better working conditions for women workers.

One of the biggest problems women workers were facing was that they did not have access to health care. So we organized many meetings with women where they talked about how expensive doctors were, how they didn't have enough time or money to see a doctor, and what kind of health services they really wanted. We decided that we needed to bring health services closer to women for easy access. We first worked in a small, rural community to help build a community primary health care program.

At first the women saw us as just another organization that did family planning, because many organizations in the past were only interested in family planning. As we gained people's trust and learned about some of the issues women were facing, we soon realized that the people who knew the issues the best were the women themselves. So we started training local women as health workers to respond to the community's needs. We got help from the Center for Health Education, Training, and Nutrition Awareness (CHETNA), and they helped us begin training the first group of 10 women.

At the beginning, the women felt discouraged. They said, "But we have never been to school! How do you expect us to become health workers for the community? People will laugh at us." But then the women realized that they already knew some traditional medicine, they knew the culture, and they knew what the problems were. We always started with what the women already knew and then we asked them what they wanted to learn and what was important to them and their communities. They have now formed a cooperative that helps other women become health promoters, provides low cost medicines, runs TB centers, and offers health insurance and other services.

