



POLICY BRIEF on Occupational Safety and Health

MAY 2009

Towards Occupational Safety and Health Services For Women and Men in the Informal Economy ¹

Like workers in the formal sector, women and men in the informal economy experience occupational hazards. However, women workers in the informal economy face double hazards as informal workers and as women. Likewise, poverty and the burden of reproductive work make them doubly vulnerable to illness.



OSH standards should also apply to women and men informal workers, given their substantial contributions to the economy. Women in particular should be given special attention given the double hazards they face. However, such standards need to take into account the heterogeneity of informal work in both its physical and psychological aspects in order to provide adequate protection.

Introduction

Estimated to comprise 76 percent of total employed, ² the informal sector has been increasing in number. It has become the survival option for the under-employed and unemployed population. From more than a decade of invisibility, informal workers now get some attention from the government and policy makers not only due to their continued growth and significant contribution to the economy, but also due to the strong advocacy of their organized groups. The National Statistical Coordination Board (NSCB) stated that in 2007, 43 percent of the country's Gross Domestic

Product (GDP) came from the informal sector ³. For many women, informal work is the most available option for employment. The flexible work arrangement of homebased work, for example, is compatible with the domestic responsibilities especially of women with small children. It serves as fallback for those affected by retrenchment in formal workplaces. It is also the primary source of work for women who have little education and limited skills.

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¹ Written by Teresita Villamor Barrameda with inputs from Homenet Philippines and MAGCAISA (Magna Carta for the Informal Sector Alliance) members, as well as proceedings of various workshops, meetings, and dialogues with officials of the Occupational Safety and Health Center (OSHC).

² See Table 1. Comparative Sizes of the Formal and Informal Sectors: 1999 and 2005, based on NSO Labor Force Surveys; and Annual Surveys of Philippine Business and Industry as interpreted by the Employers' Confederation of the Philippines (ECOP), using the residual methodology, and presented during its 2007 National Conference, on p. 2 of separate policy brief on Social Protection.

³ National Commission on the Role of Filipino Women (NCRFW), Multi-stake Holder Forum on Social Protection of Women in the Informal Economy (2008). Retrieved Dec. 5, 2008 from: http://www.ncrfw.gov.ph/inside_pages/project_spaces/cida_great/multi_stakeholder_forum_on_social_protection_d1_synthesis.pdf; Factsheet on Filipino Women, March 2008. Retrieved on Oct. 13, 2008 from: www.ncrfw.gov.ph/inside_pages/downloads/factsheets/factsheets_on_filipino_women_03_2008.pdf

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Women and the Informal Sector ⁴		
Estimated Number of Women in the Informal Sector	Year 2007	
	14.6 million	
Unregistered Self-Employed Women Family Workers	Year 2007	
	10.6 million	
Unpaid Women Family Workers	Year 2006	Year 2007
	2.4 million	4 million
Labor Force Participation Rate of Women	Year 2006	
	48.8%	
Women-led/managed Microenterprises ⁵	96%	



1. What are the OSH-related issues of women and men in the informal economy?
2. What are the gaps and challenges in the existing OSH laws in relation to informal workers?
3. What are the current OSH initiatives that are of relevance to informal workers?
4. What recommendations may be made to improve the OSH conditions of women and men in the informal economy?

Given the scant literature on the subject and its increasing importance to advocacy groups, this briefing aims to provide an understanding of OSH-related issues of women and workers in the informal economy. In particular, it seeks to answer the following questions:

Informal Workers in the Philippine Economy

The National Statistical Coordination Board (NSCB) offers an operational definition of the informal sector that covers unincorporated household enterprises consisting of both informal own-account enterprises and enterprises of informal employers.



Informal own-account enterprises are owned and operated by own-account workers, either alone or in partnership with members of the same or other households, employing unpaid family workers and occasionally hired workers. On the other hand, enterprises of informal employers are owned and operated by own-account workers, either alone or in partnership with members of the same or other households that employ one or more employees on a continued basis.

The varied types of work performed by informal workers show the heterogeneous nature of the informal economy. One source ⁶ provides various categories of the informal economy based on the following:

Geography (rural and urban-based)

Work premises (home-based and non-home-based, public and private)

⁴ Ibid.

⁵ Microenterprises comprise 98 percent of the informal economy

Vulnerability (e.g., children and persons with disability)

Sector (industrial, commercial, services, and agricultural)

Occupation (fisherfolk, farmers, workers in non-corporate construction and small-scale mining, small-scale transport operators and drivers, vendors, labourers, workers in repair shops, variety store and small eatery operators)

Nature of employment (casual, contractual, seasonal, permanent/regular, commission, piece-rate, boundary system)

The 2001 ILO report ⁷ notes four areas of exclusion of workers in the informal economy. First is exclusion from the

national registry which only covers establishments with ten or more workers. Cumbersome business registration procedures discouraging informal businesses to register worsen this problem. Second is exclusion from social protection programs. The lack of knowledge about these programs and the irregularity of income discourage informal workers from joining. Third is exclusion from labor legislation. Laws on workers' rights, including health and safety standards, are limited to those with employer-employee relations, thereby excluding a significant portion of informal workers, many of whom are self-employed. In addition, small enterprises employing lower than five workers are not monitored or covered by appropriate policies. Lastly, informal workers suffer from lack of access to resources, especially social credit, because they have no property for loan collateral.



EXCLUSION OF WORKERS IN THE INFORMAL ECONOMY INVOLVES EXCLUSION FROM THE NATIONAL REGISTRY DUE TO CUMBERSOME BUSINESS REGISTRATION PROCEDURES, FROM SOCIAL PROTECTION PROGRAMS, FROM LABOR LEGISLATION, AND FROM GAINING ACCESS TO RESOURCES
— 2001 ILO REPORT

The OSH-Related Problems of Informal Workers

Occupational safety and health is about making the physical conditions of work safe, thereby preventing short- or long-term illnesses. Further, it is about ensuring that workers who have contact with hazardous substances and machines are trained in their safe use. Workers in the formal sector are protected by laws that provide health and safety standards. But these laws do not cover informal workers. ⁸

Occupational hazards can be classified into five major categories: physical, psychological, chemical, radiation, and reproductive. Women workers also consider sexual harassment an occupational hazard.

Reproductive hazards are a combination of the other categories cited. ⁹ Further, OSH hazards are present not only in the work itself but also in the workplace. For instance, noise levels in the workplace pose health hazards to workers even when the work itself is not hazardous. ¹⁰

The marginal income from informal work compels women and men in the informal economy to set aside safety and health concerns in the performance of their work. The absence of OSH standards for women informal workers exposes them to double hazards as informal workers and as women. Likewise, poverty, poor nutrition and reproductive burdens increase their risk of illness.



⁶ E. Lao, J. Inocian, and M. Belarmino, The Future of the Workers in the Informal Sector: Towards Fulfilling the Constitutional Mandate of Social Justice and Human Rights in the Informal Sector. Thematic Paper 3. *The Way Forward. A Policy resource Book on Legal Empowerment of the Poor in the Philippines* (Quezon City: ESCR-Asia, 2008) 195; 197-200

⁷ As cited in G. Litong, R. Lao, and J. Apolonio. An Assessment of the Situation of the Informal Sector in the Philippines: A Human Rights Perspective. (Manila: UNDP. June 2002)15-18; 23.

⁸ F. Lund and J. Nicholson, J. (2006). Tools for Advocacy: Social protection for informal workers (booklet). Thailand: WEIGO and Homenet Thailand, 2006, 28-29.

⁹ M. Kemp, "The Wages of Work: Occupational Health and Women," *Women in Action*. No.2, 1999, ISIS International: 92-95.

¹⁰ Lund and Nicholson, 2006.

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The focus group discussions on OSH risks conducted among vendors and home-based workers in October 2008 identified hazards inherent in the nature of work, the work environment, the resultant physical and psychological symptoms, and the illnesses that such hazards triggered or reinforced. These specifically include the following:

Sewers and Cottage Industry Workers in Homebased Work¹¹

- cramped work spaces and poor ventilation leading to headaches
- poor lighting leading to eye strain
- very focused work causing eye irritation
- use, storage and handling practices of chemicals and other hazardous substances posing fire hazards
- physical fatigue from extended work hours
- exposure to chemicals, fibers, and dyes causing skin allergies, respiratory and neurological disorders
- chemical ingestion and burns in cases where chemicals are kept within the reach of children
- increased pace of work leading to physical and mental stress



Street Vendors¹²

- harassment from authorities causing mental stress
- exposure to extreme weather conditions
- lack of access to potable water and restrooms leading to urinary tract infections, typhoid and hepatitis
- carrying of heavy loads causing head, neck and back strain and pain
- exposure to dust and dirt causing eye irritation and respiratory problems
- exposure to vehicle fumes causing respiratory problems, nausea and dizziness



These OSH issues are affirmed by the results of other studies on informal workers in the garments, handicraft, and food processing industries:

Subcontracted Garment Workers¹³

- poor ventilation causing headaches
- respiratory problems from dust and textile fibers
- poor lighting causing eyestrain and irritation
- extended work hours causing joints strain, fatigue, and physical and mental stress
- congested work areas that hasten the spread of communicable diseases like flu, colds and cough
- substandard equipment causing neck, waist and back pains
- increased pace of production leading to physical and psychological stress



Workers in Bamboo and Other Handicrafts and Food Processing (Crab Paste & Pili Nut Making)¹⁴

- accidental cuts from the use and handling of tools during work operations
- joint pains and headaches due to ergonomic stress from long hours of static sitting, standing and squatting positions and extreme positions of bending, hand flexing and doing repetitive movements
- high sound levels of more than 90 decibels in cramped work areas
- insufficient lighting
- exposure to dust and fumes
- muscle pains, joint pains, headaches, breathing difficulty, numbness and dizziness



As a whole, safety and health conditions and measures are very poor in informal workplaces. Survival, not OSH, is the primary concern of informal workers and informal enterprises. Both women and men informal workers experience occupation-related safety and health risks, though in varying degrees. However, for women informal workers, stress is a common health risk in informal work, brought about by the physical environment, tedious fine work, fast-paced production, coupled by the burden of reproductive work. As a result of stress, women informal workers experience changes in blood pressure and heart rate, ulcers, migraines, and menstrual irregularities.

¹¹ Based on three focus group discussions conducted by Teresita V. Barrameda 26 October 2008 in Rosario, Cavite

¹² Based on three focus group discussions conducted by Teresita V. Barrameda 16 October 2008 in Antipolo, Rizal

¹³ S. Jamoralin, and A. Montejo, Labor Subcontracting sa Industriya ng Garments: Karanasan ng mga Kababaihang Manggagawa sa Signal Village, Taguig City, fieldwork report submitted to the Department of Women and Development Studies, College of Social Work and Community Development, University of the Philippines, Diliman, Quezon City, 2006.

¹⁴ D. Estrella-Gust, "Occupational Safety and Health in the Informal Economy in the Philippines," *Asian-Pacific Newsletter on Occupational Health and Safety*. Women and Work Vol. 15, No.3, December 2008.

Rural Work: Farmers¹⁵

- eye and skin irritation from pesticide and fertilizer spray mists
- skin disease from prolonged exposure to agricultural chemicals
- cuts and wounds from weeding and harvesting tools
- back pain
- difficulty in breathing due to exposure to agricultural chemicals
- snake bites
- heat stroke
- fever, cough and colds due to sudden weather change
- no personal protective equipment



Rural Work: Fisherfolk¹⁶

- splinters from fish fins
- respiratory problems caused by cold and windy nights
- fungal infection
- hazard from extreme weather conditions
- prolonged immersion of hands and feet in water leading to wounds
- exposure to polluted water (e.g. red tide)



Construction Work¹⁷

- injury from fall due to absence of safety nets and hard hats
- splinters from rough lumber
- cuts and wounds from nails
- hammer and saw accidents
- electrocution from live wire
- breathing difficulty and respiratory problems due to exposure to paint and thinner
- eye and lung irritations from cement dusts
- high sound levels from mixers and other construction machines



Waste/Garbage Pickers¹⁸

- cuts from broken glass and cans
- punctured wounds from nails and other sharp objects
- breathing difficulty due to noxious methane gas emitted by decomposing garbage
- poisoning from eating spoiled food
- fungal infection
- tetanus from rusty nails, blades and steel
- back pain
- heat stroke
- infection from medical wastes
- no personal protective equipment



Likewise, the risk of double exposure is high when the home is the workplace. The safety and health of other family members are often endangered. As homework taps a pool of unpaid family labor, child labor is often involved. Further, the physical exhaustion brought about by the nature of the productive work itself is aggravated by the burdens of reproductive work.

Occupational Safety and Health Laws and Standards: Gaps and Challenges

OSH standards in the Philippines have been in place since 1978 and were amended in 1989. The standards aim to protect individual workers from injury, sickness and death through safe and healthy working conditions towards the prevention of damage and loss of lives and properties. In addition, the standards contain compliance requirements of all establishments such as registration, the training of personnel on first aid, the formation of workplace safety committees, the provision of safety and health services, and notification and keeping of records on accidents and occupation-related illnesses. They also specify workplace requirements, environmental control,

and standards for personal protective equipment and devices. They further define specifications for dealing with hazardous materials and the conduct of work in hazardous processes. To ensure compliance, the Bureau of Working Conditions is mandated to monitor and inspect every establishment and workplace at least once a year.

However, existing laws and OSH standards cover only the workers in formal employment and lack substantive measures to address the concerns of workers in the informal economy, especially the special needs of women informal workers.

¹⁵ Based on the consultation with MAGCAISA members, College of Social Work and Community Development, University of the Philippines, Diliman, Quezon City, 3 February 2009.

¹⁶ Ibid.

¹⁷ Estrella-Gust, op.cit.

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Current Initiatives

The Occupational Safety and Health Center (OSHC), an attached agency under the Department of Labor and Employment (DOLE), has become increasingly supportive of the informal sector and informal workers' groups even if its mandate covers only the formal sector workers. Services for workers in the informal economy now form a significant portion of the National OSH Profile and the national Medium-Term OSH plan for 2006-10. However, OSH programs for the informal economy still rely on external funds. Another initiative is the integration of OSH research in the DOLE-OSHC livelihood project on bamboo, handicrafts, crab paste, and *pili* processing. The research results were utilized in designing OSH training and capability building of workers in these

sub-sectors, and in producing materials for information, education, communication, and advocacy.

The proposed Magna Carta for Workers in the Informal Economy (MACWIE), a current initiative of organized groups to empower the working poor, spells out the special needs of the informal workers. It focuses on the extension of labor, social protection, safety and health standards to informal workers.



Supporters of MACWIE

Conclusions and Recommendations

The following conclusions and recommendations come from various studies as well as conferences, meetings, and focus group discussions on occupational safety and health for workers in the informal economy:

- Considering the heterogeneous nature of informal work, it is imperative to study each subsector or industry to identify specific OSH-related problems of women and men informal workers.
- There is a need to expand the coverage of current laws and OSH standards to cover women and men in the informal economy.
- PhilHealth benefits should cover occupation-related illnesses and injuries of both formal and informal workers ¹⁹ (See separate brief entitled "Health Insurance for All Filipinos?")
- Job-related stress poses as primary hazard to women. The definition of work hazards should not be limited to the physical aspect but should be expanded to include the psychological aspect of work.
- Women must have adequate representation and participation in the formulation of interventions related to their concerns as women workers and as members of the informal economy.
- Management of the OSH policies and programs would require effective mobilization of stakeholders, with local government units and informal

sector associations taking the lead ²⁰. They should draw on "good practices" and ILO-developed programs such as WISH (Work Improvement for Safe Homes) and WIND (Work Improvement in Neighborhood Development).

- The mandate of the Occupational Safety and Health Center (OSHC), Bureau of Working Conditions (BWC), Employees Compensation Commission (ECC) and similar bodies should cover both formal and informal workers; resources should be made available for them to develop their programs and services for the informal economy. Such programs and services should also be institutionalized in the local government units through budgetary allocations in their local health development plans. These should include the training of trainers among homeworkers and other informal workers as well as continuous awareness-raising to prevent and minimize work-related accidents.

- ILO Convention (ILC) 177 on Home Work should be immediately ratified, together with ILC 155 on Occupational Safety and Health and ILC 167 on Safety and Health in Construction.

¹⁹ The National Comprehensive Occupational Rehabilitation Program (NCORP) provides disturbing figures on injuries acquired at the workplace. There is need to advocate for inclusion of types of injuries not yet covered by PhilHealth benefits, especially if the injured are informal workers who have no other protection.

²⁰ D. Estrella Gust, "Occupational Safety and Health in the Informal Economy in the Philippines," 2008.