Risk assessment and health promotion in the workplace are two important strategies of the protection of female workers’ health now and in the future.

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Public policy: Health and safety promotion mechanism of workers in Thailand

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Public policy refers to the practices or activities of the government launched with the intention to solve the problems of the people. Plans and projects shall be established and implemented to support the policy in order to achieve the objectives defined. How the government chooses to act or not to act may result in both positive and negative outcomes.

According to the Constitution of the Kingdom of Thailand, the Cabinet's Administration Policies must be in accordance with the Directive Principles of Fundamental State Policies. Prior to the administration, the cabinet is required to make a policy statement to the parliament announcing their plans to be implemented for the country's prosperity and benefit of the people.

The public policy can be classified based on objectives in three areas:

1. Problem-solving policy
   Public policy shall be implemented to reduce or eliminate the problems to improve people's quality of life. For example, the agricultural land reform policy is set to solve the landlessness of farmers, the motor insurance act and the helmet wearing policy is established to solve the traffic or road safety problem. Additional examples include the universal healthcare policy of the national health security, the bureaucracy reform policy, e-Government policy, the money laundering prevention and anti-corruption policy etc.

2. Development policy
   The development policy is aimed at system improvement

References

such as the free trade agreement policy to improve the global trading competitiveness; the information technology development policy to improve the implementation of high technology; the new airport construction policy, the underground train construction policy, the high speed train policy, and the water management policy to improve the country’s infrastructure etc.

3. Sustainable development and problem solving policy

The sufficiency economy policy developed by King Bhumiphol of Thailand is one of policies for sustainable development and problem solving. Other examples include the education reform policy; the state enterprise reform policy; the problem solving policy for the three southernmost provinces of Thailand, amongst others.

Prime Minister Yingluck Shinawatra delivered a Policy Statement to the National Assembly on 23 August 2011. The Cabinet’s Administration Policy has three objectives, "Firstly, to bring about a strong and balanced economic structure for the country, which will be an important basis for sustainable, quality growth. The development in the quality of life and health of Thai people of all ages is also a determining factor for survival and competitiveness of our country. Secondly, to bring about a Thai society that is reconciled, based on the rule of law which meets international standards, whereby all Thai people are treated equally. Thirdly, to prepare Thailand for the arrival of the ASEAN Community in 2015, by strengthening the country in economic, social, cultural, political, and security aspects.”

The key public policies include an urgent policy to be implemented in the first year, the National Security policy; the Economic policy; the Social and Quality of Life policy; the Land, National Resources and Environment policy; the Science, Technology, Research and Innovation policy; the Foreign Affairs and International Economic policy; and the Good Governance policy. The relevant minister shall be responsible for implementation to achieve the objectives of the public policy.

This paper discusses the public policy for workers. According to a survey by the National Statistics Office (NSO), there are 39.3 million people in the labour workforce. Of those, 24.6 million (62.6%) are informal workers, who are neither protected by the existing labour protection laws nor by the social security laws, and the rest 14.7 million (37.4%) as so called formal workers, who are protected by various public policies, for example the social security system launched by the central government. Both groups of workers, formal and informal workers are not taken care equally, which shall be further explained in this article.

More than half of informal workers, 15.1 million (61.4%), are in agricultural sector while 7.3 million (29.7%) of those are engaged in the service sector, and 2.19 million workers (8.9%) are engaged in the manufacturing sector.

Apparently the majority of workers in Thailand are in the agricultural sector. Farmers, nowadays, are exposed to many kinds of risks or hazardous substances during their working activities such as physical, chemical, biological and ergonomics hazards. In order to increase productivity, various chemicals including fertilizers, herbicides and pesticides as well as machinery have been used in agricultural production processes. Hazardous activities which may lead to severe injuries, or chronic diseases, or death from their production processes include cutting injuries, repetitive work, and inappropriate posture when carrying the heavy loads and drilling fertilizer. These farming activities affect farmers’ health, therefore, occupational health and safety must be considered carefully.

However, it is interesting that there is no policy concerning the occupational health of farmers. However, there are clear policies to take care of formal workers’ health which are mainly launched by the Ministry of Labour, Ministry of Industry and Ministry of Public Health as with these examples:

The Occupational Safety, Health and Environment Act B.E. 2554 (A.D. 2011) is intended to provide workers with a better quality of life by regulating and controlling the management of occupational health and safety in the workplace environment to the workers in the production, construction and service sectors. These workers’ duties may involve using high technology machines, various chemical substances and toxic chemicals and their working activities might have risks of injuries, accidents, disabilities, diseases, or death.

Factory Act B.E. 2535 (A.C. 1992) is intended to control the factory to create a safe work environment and cause no pollution to the workers and the community. The act covers all stages of workplace activities: pre-
construction, during construction and during operation processes in the factory.

The Public Health Act B.E. 2535 (A.C. 1992) issued by the Ministry of Public Health in 1992 focuses on people's health, the prevention of nuisance and measures to control workplaces that may be hazardous and affect the health of employees.

Therefore, public policy for farmers' healthy and safe environment is urgently required in which to work as well as reducing risks involved in work activities. The Research Center for Informal Workers, Mahidol University, MURI, conducted Occupational Health and Safety training for three groups of farmers. The objective of the project was to improve occupational health and safety situations of farmers using Participatory Action Oriented Training (PAOT). PAOT is a productive tool to be employed in promoting the occupational health and safety of workers. Manothum A. et al. studied a participatory model for improving occupational health and safety: Improving Informal Sector Working Conditions in Thailand. The results demonstrated that the working conditions of informal workers had improved to meet necessary standards. This participatory model encouraged the use of local networks, which led to cooperation within the groups to create appropriate technologies to solve their problems. It was suggested that this model could effectively be applied elsewhere to improve informal working conditions sector on a broader scale. The participatory programme was implemented to minimize cost of occupational health and safety management of Thai rubber tappers (Arphorn S.). It was revealed that this programme raised the health awareness of rubber tappers and strongly encouraged health promotion for the community.

As a result of its success, the PAOT was selected to be rolled out with three groups of farmers in Phranakhon Si Ayutthaya, Rachaburi and Nakorn Phranom during November 2012 to March 2013. However, we will only discuss the activity implemented in Nakorn Pranom province in this article. The training was conducted in various working groups including academic instructors, public health officers from the provincial and local area as well as public health volunteers. The PAOT was later introduced to public health volunteers, who were involved in agricultural activities and public health activities.

The training encouraged the understanding of occupational health risks of farmers' working protocol. The content of training topics related to working and living conditions. The action checklist from the Working Improvement in Neighborhood Development (WIND) was introduced to farmers. Farmers discussed accidents, injuries and occupational diseases. Health protection using personal protective equipment, as well as the safe use of chemicals was also demonstrated. Setting a good local example and group discussion could promote health protection awareness of farmers. The result demonstrated recognition of risks and the improvement of working behaviours. Technical sessions detailing action plans developed by the farmers for improving behaviours, living, and working conditions were as follows:

The project outcomes from Nakorn Phanom seem linked to the public policy. The achievement of the project emphasizes the "Equality in occupational health of formal and informal workers." The proposed project is intended to develop the guidelines to provide appropriate occupational health for informal workers, which represent the majority in the community. To implement the project, health volunteers can work effectively in promoting the message alongside their existing responsibilities, whereas the local public health officer is the technical supporter and the local administrative
office is the fund provider. Through this arrangement, the occupational health of informal workers can reach the same standard as formal workers.

The proposed "Na-Bau Model" would be implemented in accordance with the Health Security Act, 2002, which states that the local administrative office is responsible for helping local people in supporting and setting up the regulation for communities, the private sector and non-profit sector to operate and manage the community fund. A support and cooperation committee working with the local administrative office must be appointed. This committee shall support and manage the health security system and welfare facility in the local area focusing on health promotion, disease prevention and rehabilitation for health and well-being. The additional objective is to promote the opportunity for farmers to have welfare facility in the community and facilitate their access to health service using the participatory approach.

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