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EDITORIAL

Dr. Dulce P. Estrella-Gust



The First Occupational Safety and Health Summit in the Visayas was an important event and a major step towards addressing OSH in a comprehensive manner. It has a rich program, with very substantive discussions and offered a potential for effective follow-up action in this dynamic region.

The Summit was attended by some 510 participants representing government agencies, employers' and workers organizations, academe and professional groupings. 62 technical papers were presented and 13 documentary films were shown during the two days' event.

The theme of the Summit "OSH in Human Resource Development" (HRD) rightly emphasized that OSH is an integral part of HRD. Healthy workers and a safe work environment stand for progressive working conditions, higher productivity and workers' welfare. To achieve best results, OSH cannot be practiced in isolation but must become the concern of the entire team in an establishment: the management, human resource personnel, labor, unions and safety and health practitioners.

The Summit owes much of its success to a close partnership among the DOLE Regional Offices VI, VII, VIII, the Occupational Safety and Health Center (OSHC), local government, firms and offices, employers' and workers' organizations, the academe, and professional associations.

Looking to the future, the Summit is also an important milestone in the formulation of a ZERO ACCIDENT Medium-Term Plan for the Visayan region and its implementation in the years to come.

FIRST OSH SUMMIT IN THE VISAYAS IN RETROSPECT

Even at the organizing mobilizing stage of the summit, there was general agreement that the Visayas has a dynamic economy driven by technological change. Not surprisingly, Human Resources Development in the area has moved to the center of management pre-occupation and practices. However, to be effective, essential human capability building in the technical and administrative fields must go hand in hand with skills development in Occupational Safety and Health. Construction engineers and workers, for example, must be well familiar with risk management in the industry. Call center managers and employees should know how to handle stress and ergonomic related hazards. Each industry and firm should therefore develop their own preventive OSH programs, in response to their specific needs and as an integral part of their overall human resources and workers' health policies.

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The presentations and discussions at the summit provided ample evidence that firms and offices that invest in OSH, through advocacy, training and cooperation between management and labor, have lower accident rates and higher productivity. They are often recognized, through the National Gawad Kaligtasan at Kalusugan and other awards, for decent working conditions and higher job satisfaction. In short, OSH has a high return on investment and has a high pay-back in material and human terms.

For the promotion of OSH, the Visayas can count on a solid OSH infrastructure; this includes the services of the OSHC and the DOLE Regional Offices. For example through the Zero Accident Program (ZAP), a network of government, workers, employers, professional associations and numerous firms and offices are committed to advance OSH practices. Building on this experience and the guidance embodied in the conference Resolution of the Summit, there is enormous scope for the exchange of experience and “good to best” practices. It is bound to make a most welcome contribution towards the spread of a culture of OSH to more and more firms and workers in the region.

More specifically, participants concluded that:

Occupational safety and health (OSH) is a basic worker’s right of all workers in the public and private sectors;

Efforts must be stepped up to cover underserved workers in the informal sector;

The Zero Accident Program (ZAP) should provide the effective framework for action at regional, local and enterprise levels;

ZAP should be implemented as an integral part of the National OSH Medium Term Plan for 2006 to 2010;

OSH policies, programs and systems on prevention, compensation, rehabilitation, enforcement should be harmonized;

Concerted and individual follow-up action is being taken by all stakeholders, including government, employers and workers organizations, LGUs, professional associations and academe;

DOLE in cooperation with establishments and concerned agencies in the private sector takes the lead in promoting and implementing regional and local programs with focus on prevention

Human resources development (HRD) should strengthen OSH capability building for the effective delivery of OSH technical services at national, regional and enterprise levels and at all industry sectors.

In line with the Summit Resolution, reproduced on page 20 participants agreed that as an immediate follow-up the Proceedings should be widely circulated to encourage practical action by stakeholders, jointly and individually. Moreover a directory will be issued of practitioners, association or agencies concerned with OSH to facilitate exchange of experience, facilitate technical advice and support as well as networking.

Keynote Speech of Honourable Arturo D. Brion

Secretary of Labor and Employment (DOLE)



It has always been the policy of the DOLE to have equal concern for job creation and workers protection.

I congratulate the Occupational Safety and Health Center, our people from DOLE Regions VI, VII, and VIII and our valuable partners from this part of the Visayas for spearheading the holding of this summit.

I can see from your program that you have lined up the presentation of technical papers from experts and highly respected resource persons that are focused on very significant areas of concern on occupational safety and health (OSH). Indeed, this Summit's theme on integrating "OSH in Human Resource Development" is a challenge especially now that most of the industry sectors that are represented here today have been identified as key employment generators under the Medium-Term Philippine Development Plan, 2006-2010. The MTPDP has identified sectors that would require a large number of workers equipped with specific knowledge and skills. These include information and communication technology, health services, education, tourism, mining, construction, and overseas employment, among others. To date, based on consultations with the concerned sectors, we have determined shortages of workers in these sectors.

With the holding of the National Manpower Summit in March 2006 and National Human Resource Conference on April 2007, these shortages in skills are already being addressed by the government, in partnership with worker organizations, its industry partners and all concerned stakeholders. However, what should also be looked into, as this Summit is doing, is to make sure that issues on safety and health for these workers are not left behind in the policy and program planning and implementation. It has always been the policy of the Department of Labor and Employment to give equal concern for job creation and workers' protection. We need to ensure that while we are facilitating employment generation, the workers that will fill in the much needed supply are not only equipped in terms of skills for this job but are also health and safety conscious. It is the duty of the government, employers,

and the workers themselves to create

an enabling environment for safety and health to be mainstreamed in the development of human resource in the country.

I am pleased to note that there is a session tomorrow on "Strategizing Human Resource Development on OSH in the Visayas Regions" where you will talk of investing on OSH, integrating OSH in the education curriculum, developing the national capacity for industrial hygiene, and strengthening the OSH program in the region. I anticipate the result of these discussions as well as those of the sector-specific sessions as inputs to improving our existing policies and programs on OSH and the formulation of a Regional Action Plan on Workforce Productivity and Competitiveness for 2007-2010 based on the human resource needs of the different regions.

Our thrust of integrating OSH in HRD is one big and significant step towards our goal of creating a culture of safety and health in all workplaces.

Creating a Culture of Safety and Health in All Workplaces

When I talk of a safety and health culture, I refer to a shared understanding within an organization of the significance of safety and health problems and the appropriateness of measures needed to tackle them. Both employers and workers continue to face OSH hazards everyday that make them continually at risk. This requires that they discuss these things together and agree on the steps that have to be taken.

We all know that safety and health has since become a global concern and we are one with other governments in this issue. According to ILO's global estimates, more than two million workers die every year from work accidents and diseases. Furthermore, more than \$1.25 trillion, which is equivalent to four percent of the world's gross domestic product, is lost each year due to occupational accidents and diseases.

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We are called upon to do something about issues and concerns on OSH for our Filipino workforce. Nobody else will do it for us, DOLE and you should continue to serve as catalysts in creating a culture of safety and health in all workplaces within our sphere of influence. As safety and health advocates and practitioners, we can only count on you to continue the process of building safe, healthy, environment-friendly and secure workplaces. Indeed the task before us is too much; the workers are not enough.

I am pleased to know that last year's survey of the Employers' Confederation of the Philippines on social accountability shows that majority of the respondents rated occupational safety and health highest among all labor standards that should be prioritized, demonstrating that many employers are supportive of our efforts and will facilitate what our health and safety committees will propose in terms of safety and health.

However, we are facing challenges in promoting occupational safety and health. In this regard, we want you to transcend the boundaries of your respective workplaces and sectors and partner with us in addressing them. Allow me to share with you some of these challenges.

OSH Challenges

First, there is a wide gap in protecting workers in about 750,000 small and micro enterprises. While large companies may have made significant strides in providing workers with global OSH standards, the poor working conditions of workers in small and micro enterprises as well as those in the informal economy have to be looked into by health and safety experts.

The second is the fragmented response to occupational safety and health issues. The country's network of safety professionals are not sufficient to deliver the OSH services required by our 35 million Filipino workers. A comprehensive and integrated approach needs to be developed to create more impact.

Third, there is a need for reliable statistics on occupational accidents and illnesses. At present, it is difficult to generate the data due perhaps to a lack of awareness on the value of such statistics or may be the unfounded fear of administrative sanctions in

reporting such incidences. I am glad to note that one related topic in your program today is about "Injury Statistics: Basic of Safety Performance?" a sharing from Timex Philippines, Inc.

And, finally, workers often lack the necessary information on OSH hazards because these are rarely covered by Collective Bargaining Agreements and taken up in Labor Management Councils as will be presented by PGEA.

Respecting these challenges, it should be interesting learning to listen to the presentation of Mr. Byung Gyu Kim of KOSHA when he tackles OSH Systems in Korea late this afternoon.

DOLE's Response to Address the Challenges

At the Department of Labor and Employment, we have adopted a multi-pronged strategy to address these challenges.

At the policy level, we are now using a new strategic framework to fulfill our mandate. It has four strategic goals that we want to achieve for the Filipino workforce. We want gainfully employed, globally competitive, secured, and healthy and safe and workforce.

To concretize the fourth goal, a Medium-Term Plan National Occupational Safety and Health Plan has been formulated. A product of close consultations among social partners, the Plan will serve as an important basis in the formulation of national development policies on OSH.

At the same time, it reflects the principles of ILO's Global Strategy on OSH that puts emphasis on preventive approaches and a safety culture covering all workers in both the formal and informal sectors.

More specifically, the Medium-Term OSH Plan is meant to achieve tangible results through improved multi-sectoral cooperation in the areas of prevention, compliance with occupational safety and health standards, through data collection, of compensation and rehabilitation as well as continuous updating of these standards and related policies.

This is one area where all of you can help. The promotion of the Plan through the conduct of

advocacy activities is needed at the national, regional, and local levels. We need to synchronize all our efforts to be more effective in preventing work-related illnesses and injuries.

In terms of monitoring compliance with OSH standards, the new Labor Standards Enforcement Framework was adopted in 2004 where self-regulation and voluntary compliance is encouraged. I hope that all of you have been oriented on this developmental approach to labor standards enforcement, including safety and health. I believe that this can be one area where the DOLE Visayas regions can strengthen partnership with the different sectors present here today. Our continuing partnership with them will largely help in promoting self-regulation and voluntary compliance with labor standards, including safety and health standards.

We have also revised our labor education modules to focus more on human relations in the workplace. I am convinced that good labor management relations plus good human relations in the workplace equals increased productivity. We see labor education of both employers and workers as a means to bring them to a higher level of understanding as partners in their respective firms, including taking action to meet safety and health standards.

We dream of a future when employers, workers and other civil society groups sit together, discuss workplace issues concerning them, especially health and safety concerns, and agree on the steps that have to be taken to resolve such issues with less need for government intervention.

Concluding Remarks

In closing, let me state in no uncertain terms that the protection of our workers is non-negotiable and we see all of you as DOLE's foremost partners in realizing this. I hope that after this Summit, all of us shall be further motivated to renew our commitment to help, to advocate and to promote safety and health in all workplaces, as part and parcel of decent work, or perhaps raise that commitment to a level one notch higher!

I wish you all a fruitful Summit.

Daghang salamat sa tanan!

CLOSING MESSAGES FROM SELECTED PARTICIPANTS

Mr. Carlo Fortuna Vice Mayor of Mandaue City

Vice Mayor Fortuna stated that the two-days' conference had created a desire for more champions on OSH. This was also a major concern of the LGUs. Industrial peace had been the subject of the advocacy of LGUs for the past 10 years, through tripartite partnership between labor, management and DOLE. There should be harmonious relations and cooperation in the workplace concerning workers' rights, working conditions, labor standards, and benefits.



The happiness index of the Filipinos was focusing on family and health. To be productive and to contribute to the family, health was a major concern. The management's concern was productivity. Many accidents and man-hour losses translated into enormous cost. Many establishments were therefore concerned with safety; especially multi-nationals put a premium on sound OSH practices. Mandaue in partnership with DOLE has been implementing programs of industrial peace, in all sectors. LGU should take an active involvement in preventive OSH because accidents created a lot of social and economic pressures and unemployment. Not many workers can afford hospitalization. There should be an established structure for LGUs to produce champions on OSH. "Prevention was better than cure".

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Usec. Austere Panadero, DILG

In his closing remarks Usec. Panadero congratulated the OSHC and DOLE for convening the Summit which had turned out to be a very successful and inspiring event. This appreciation was shared by all the participants. He also commended the resource persons for sharing their expert knowledge and experience for the benefit of the OSH practitioner and establishments in the Visayas.

He observed that, regrettably, OSH was sometimes neglected or taken for granted in many workplaces. There was an urgent need for propagating OSH standards and enforcing their compliance. The time had come to step up advocacy on OSH and to move forward. The culture of “Bahala na”, “Pwede na”, or “Okey na” should be changed because it only implied application of minimum standards. There was ample room for improvements. For example, only 4 out of 10 firefighters had fire coats and firefighters took turns in wearing fire coats in time of duty. He also said that it took too much time to put out a fire and rescue people in high-rise buildings because firefighters did not have enough breathing apparatus to help them in getting inside the building. Firefighters were ill equipped because of the cost of acquiring proper protective equipment. Practices and equipment needed upgrading to enable firefighters to improve their services to the public.

The forum had provided an excellent opportunity to learn and be inspired by the “best practices” of progressive companies. The challenge was to replicate this exemplary experience and to convince all managers to invest in effective OSH programs. Prevention was cheaper than acquiring an insurance; we should therefore find ways and means to apply cost-effective practices and equipment. Also the Summit had served to clarify certain issues particularly on health matters like HIV/AIDS and how to handle affliction in the workplace.

He hoped that the Summit would provide a roadmap for better OSH programs and policies particularly among LGUs. He said that OSHC together with LGUs could join efforts to raise the standards on OSH in the workplaces and to translate available knowledge and experience into action and programs.

LGUs, especially the local councils or Sanggunian should play a major role in the implementation of OSH through the passage and application of ordinances on OSH. He would enlist the local governments as partners in all-out efforts to raise standards and promote OSH in the workplaces.



S Y N O P S E S

of OSHC Produced Videos

The Blight in the Footwear Industry

TRT: 05:45

The video depicted the various hazards and risks faced by the workers in the footwear industry in Binan especially its child laborers. Due to such unacceptable risks to the child, the film towards its end, called for the elimination of child labor in this industry.

Hope for the Children of Biñan

TRT: 10:40

“If there’s a will, there’s a way” could very well describe the circumstances in this video. It shows a community that faced the problem of child labor in backyard shoe production, did something to solve and eliminate the problem using the occupational safety and health approach with the help of partners – government and non government organizations. Thus literally providing a brand new hope both for the shoe industry and the child laborers of Biñan.

It is the companion video to the film, “The Blight in the Footwear Industry”.

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Farm Perils

TRT: 07:41

The film depicted farm practices in the vegetable gardens of Benguet, Mt. Province known as the "Salad Bowl of the Philippines." It also showed the deleterious effects of the improper and unwarranted use of pesticides in the farms, including their effects on the children who also help out in farm work. Featured also were the interventions of the OSHC and the DOLE in helping farmers respond to such hazards. Cited were the results of the medical examinations of adults and children exposed to such risks.

Real Price of Gold

TRT: 10:12

The film depicted the work processes in the small scale mining sites of Paracale, Camarines Norte and Sibutad, Zamboanga del Norte which are among the Philippines' richest source of gold reserves. These sites were characterized by the use of child labor who assist their parents in the mining activities. It exposes the dangers faced by child laborers as borne out by the results of the medical examinations conducted by the OSHC in these communities.

Mga Panday ng Albay

TRT: 12: 24

Tabaco City in Albay is famous for its hand crafted cutlery products and blacksmithing industry dating back during the early 1920's. The film shows the various safety and health hazards faced by the blacksmiths or "panday". It features local officials who discuss some of the problems faced by the industry and the measures they are taking to help them. It also shows interviews by OSH experts on the possible effects of such hazards and suggests measures to control them.

Tobacco, Workers and Workplaces

TRT: 14:47

The film is an in depth documentary on tobacco use with focus on workplace conditions. Tobacco use is undeniably prevalent among the Filipino population. A Lung Center of the Philippines survey estimated that 47% of the population smoke. Smoking prevalence among the productive age group of 22 - 65 years of age was found to be high. Equally alarming is that tobacco smoking accounts for about 30% of all cancer deaths in the Philippines and directly affects more than half of all households in the Philippines.

With interviews from several specialists from the Lung Center of the Philippines, smokers and past smokers, this documentary thoroughly tackles the different issues that deal with tobacco use, workplace and workers' productivity.

Sea Worthy: A Video on Filipino Seafarers

TRT: 14:43

More than a quarter of the world's seafarers are Filipinos. Living on a floating vessel for months and even years away from his family, a Filipino seafarer faces safety, health and psycho - social problems while on board the ship which includes but are not limited to fire and electrical hazards, exposure to chemicals at the workplace and in the cargoes; drugs and alcohol use, stress brought about by working with people from different cultures and background. As in other OSHC-produced films, this also offers suggestions and comments from different sectors on how the seafarers and their employers, cope with these health and safety threats.

Site Safety Inspection

TRT: 17:00

The film is a comprehensive informational video on site safety to minimize the hazards, prevent accidents and deaths in the construction industry which is listed as one of the most hazardous jobs. Workers are exposed to several hazards such as physical hazards (falling debris, sharp-pointed tools and equipment; vibrations from drilling work, etc.) ; chemical (as paints and solvents); biological (contaminated food and lack of potable water on site) and ergonomic (awkward positions) . The film points out that a safety and health program is necessary to respond to such risks. It offers pointers for those planning to develop such programs and features interviews with safety officers from a prominent construction company.

The ASEAN OSHNET

TRT: 05:06

The video introduces the ASEAN OSHNET, an organization composed of national centers on occupational safety and health in the ten-country members of the Association of South East Asian Nations (ASEAN). It gives the background and the rationale for the organization, as well as the aims and objectives of the organization summed up in simple terms - solidarity as well as the promotion of human resources development and a more productive, safe and healthy work force in the ASEAN. It shows the various OSH and OSH - related organizations working in the different countries of the ASEAN.

A Safe and Healthy Workplace: The OSHC Agenda

TRT: 22:55

This video introduces the Occupational Safety and Health Center, its thrust, mandate, and services especially to vulnerable sectors not usually covered by government programs. It features the late Kiko Evangelista as narrator and commentator. It takes the viewer to a tour of the OSHC facilities while explaining the functions of such and how these can be accessed.

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Seen are the laboratory facilities for: work environment measurement; health surveillance, testing of ventilation systems, personal protective equipment and video production facilities. It stresses that the OSHC also develops and conducts OSH training programs as the BOSH and Construction Safety. Included are interviews with some of the OSHC trainers and a few participants. It explains the Zero Accident Program.

Kabataang Manggagawa: The OSHC Report

This documentary features the youth which makes up the pillar of the country's workforce and who are often unprepared and vulnerable to unsafe and unhealthy work condition. The youth comprises 16 million of the country's labor force who work in homes, fields, streets and industries often exposed to psychological, physical, personal and environmental hazards. The film comprises of five segments which tackles the youth today equipped with a study of the youth's profile conducted by the UP Population Institute, hazards at work, the role of institutions such as TESDA that provides proper trainings and teaches basic occupational safety and health skills to the young workers, the occupational safety and health standards and the OSHC vision of providing a better workplace for the young entrant together with its stake holders.

Safe, Sure, Secure: Are You Safe, Sure and Secure While Working?

TRT: 39:44

This documentary presents the different occupational hazards that can be found in the workplace even in the comfort of the office. Example of which are the physical, ergonomic, chemical and even psychological hazards such as harassments, stress, professional rivalry and gossips. The documentary highlights various industries which employ hazardous works with their workers everyday such as the manufacturing, hotel and restaurant, construction, call center, school, overseas work etc. Comprehensive statistical surveys and studies regarding work related fatalities, injuries and illnesses are also featured.

Violence on the Job

TRT: 27 minutes

(A film by the National Institute for Occupational Safety and Health, Centers for Disease and Prevention, Department of Health and Human Services United States of America)

The film tackles violence at the workplace in the USA. It showed that from 1993 - 1999, workplace accounts for 18% of all violent crimes. Half of such violence occur in the service sector such as in stores, taxis, and gas stations. Such workplaces are characterized by workers working alone; delivering goods or rendering services and are located in high crime areas.

Another group found to be the subject of violence on the job are those rendering medical services as well as social workers in their rounds.

At present, there is no national legislation on workplace violence. However, the Occupational Safety and Health Administration (OSHA) and the NIOSH have developed voluntary guidelines for the various sectors most seriously affected: 1) taxi and livery services; 2) late-night retail; and 3) health care.

The film also presents three strategies in general, for the prevention of workplace violence: 1) environmental ; 2) administrative; and 3) behavioral.

Environmental strategies include: 1) reduction of cash on hand, especially in retail trade; 2) separate the workers from the clients; 3) increase visibility and lighting; 4) select safety devices such as alarms and key-card system; and 4) control of access to workplaces in terms of number and location.

Some of the administrative strategies involve: 1) revising of staffing patterns; 2) revision of work practices that encourage assaults; and 3) developing policy on violence at the workplace.

Behavioral strategies on the other hand, would involve employee training on: 1) non - violent response and conflict resolution; 2) proper use of safety devices; and 3) adherence to administrative controls.

Furthermore, the program would need management commitment and employee involvement to work.

The video stresses that violence at the workplace is not just a social issue but a workplace one as well and thus, demands focused attention.

SELECTED PAPERS OF THE SUMMIT

ANALYSIS OF SYSTEMS AND OCCUPATIONAL SAFETY AND HEALTH PROGRAMS IN ASEAN COUNTRIES

Dr. Dulce P. Estrella-Gust
Executive Director
Occupational Safety and Health Center (OSHC)
Department of Labor and Employment (DOLE)

Background:

The paper discusses current trends in occupational health care in selected Asian countries with focus on ten ASEAN countries.

Methodology:

- ✦ Primary data gathered from active participation as DOLE representative to the ASEAN-OSHNET Coordinating Board meetings held from Y 2000 to 2007. Review of the National Occupational Safety and Health Profiles or situationers from Laos, the Philippines, Singapore, Thailand, Vietnam
- ✦ The multisectoral consultations from 2005 to 2007 for the drafting of the NOSH-MTP 2006-2010

Directional Changes in OSH Systems and Services:

The study has observed that OSH is widely accepted as a basic workers' right; and that it is recognized as a means of achieving the full protection of workers from work-related hazards and risks, the development of safe and healthy work environment and the promotion of productivity. In the wider context of the Asian Decade for Decent Work, 2006-2010, adopted at the ILO Regional Conference in Pusan, the promotion of OSH has emerged as a common goal for all social partners subject for rigorous review, exchange of experience and technical support.

The paper recognizes the immense diversity of the ASEAN countries.

There are several OSH challenges and issues that require collective or individual responses by the countries, individually and/or collectively, for example:

- ✦ the promotion of an OSH culture for the prevention of occupational hazards and risks for all sectors of society and the establishment
- ✦ the extension of OSH coverage underserved sectors

- ✦ the development of human resources in OSH in the areas of diagnosis, treatment, training, research, advocacy and administration.

Initiatives by ASEAN countries are highlighted in operationalizing the ILO Convention on the establishment of a national OSH Framework (Philippines, Vietnam, Malaysia), and examples of joint regional initiatives by ASEAN in promoting OSH in small and medium enterprises (SMEs) through JICA supported activities.

HEALTH ASSESSMENT ON THE EFFECTS OF MT SOLAR I BUNKER OIL SPILL AMONG EXPOSED RESIDENTS IN GUIMARAS PROVINCE

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Background:

In August 11, 2006, the oil tanker MT Solar I sank in Guimaras Strait along the waters of the Municipality of Nueva Valencia resulting to the release of volatile organic solvents and sulfur-containing compounds into the environment and severely affecting 14 barangays. The objective of the study was to assess the acute health effects of bunker oil among high-risk populations in the affected barangays in the province of Guimaras.

Methods:

This was a descriptive, cross-sectional evaluation of adult residents (directly/indirectly exposed) living within 100 meters from the shoreline and who were staying in the communities for at least 15 days/month.

Results and Conclusions:

Seven hundred twenty seven residents from 14 barangays were examined last September 5-7, 2006, majority of whom were males. Three hundred fifty three were directly exposed (DE) and 353 were indirectly exposed (IE). The DE group composed of clean-up workers whereas the IE individuals were non-clean up workers. The routes of exposure were generally

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HEALTH ASSESSMENT...(from page 9)

inhalational (61.5%) and dermal (26.6%). Mean duration of symptoms were longer among the DE group. The clinical manifestations were dizziness, paresthesias, tinnitus, weakness, chest pain, palpitations, cough, difficulty of breathing, joint pains, tearing and sweating. Pertinent physical examinations were anosmia and abnormal pulmonary findings among the DE group. Blood samples for sulfhemoglobinemia and methemoglobinemia collected from 594 individuals showed elevated methemoglobin in 91% of DE group and 87.9% of the IE group. Ninety six percent of DE group had sulfhemoglobinemia in comparison to 98% among the IE group. Mean methemoglobin and sulfhemoglobin levels were statistically significant among the DE and IE groups. The mean sulfhemoglobin levels were lowest among residents who were relocated and highest among those who stayed in the affected communities. The clinical findings among residents living in the affected areas were consistent with acute bunker oil exposure.

Recommendations:

The following were the recommendations: (1) conduct an immediate follow-up of residents with abnormal physical and laboratory findings; (2) establish an effective medical surveillance system to monitor the long term effects of bunker oil on the exposed residents; (3) strengthen the technical capabilities of the health care providers in addressing toxicologic health issues related to oil spill; (4) ensure the provision of the necessary medical interventions; maintain a multidisciplinary, multi-sectoral approach in the conduct of the surveillance system and rehabilitation programs.

OCCUPATIONAL SAFETY AND HEALTH SYSTEM FOR NOTIFICATION, REPORTING OF WORK-RELATED ILLNESS & INJURIES IN KOREA

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Background:

The official statistics of occupational accident (work-related illness and injury) of Korea are based on the workers compensation system and annual workers' special medical screening programs. These systems may exclude cases which are not reported to legal systems, however, Korea Occupational Safety and Health Agency (KOSHA) has been operating several occupational surveillance systems to detect not reported occupational diseases.

OCCUPATIONAL HEALTH RISKS AMONG BARANGAY HEALTH WORKERS IN ILOILO CITY

Dr. McDonald D. Beldia
West Visayas State University

Background and Objectives:

This study aims to determine the extent of occupational health risks in the workplace of barangay health workers (BHWs). It described the personal characteristics of BHW's and determined their level of knowledge, practices, and attitudes about occupational health risks and the preventive measures they employed against health hazards. Lastly, it analyzed the factors associated with the occupational health risks.

Methodology:

One hundred sixty-two (162) BHW respondents were randomly selected from 180 barangays in the 6 district of Iloilo City. The study employed descriptive statistics in analyzing the characteristics of BHWs by degree of occupational health risk. Spearman rank order correlation was used to determine the relationship between the characteristics of BHWs and the degree of occupational risk.

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Objective:

This paper aims to present the statistics on work-related injuries and illness from KOSHA.

Results:

Compensated work-related accident were decreasing to 0.77 % in 2006, 2-3% of them was fatal cases. About 90 % of accidents was due to work-related injury. The most common cause of fatal injury were falls (32.8% of all injury). Work-related illness of Korea are composed of occupational diseases and work-related diseases. Compensated work-related illness has been increasing from 1,838 cases of 1998 to 10,235 of 2006. Pneumoconiosis (76%) and noise-induced hearing loss (NIHL) (11%) were majority of occupational diseases reported. In 2005, the results of special medical screening program showed that 0.37% of workers (2,398 cases from 646,892 workers) were suspected to be suffering from occupational disease; i.e., 86% of them were NIHL, and 11% from pneumoconiosis.

KOSHA has been operating 6 Disease surveillances and 4 regional surveillances. According to the results of these surveillance, many additional cases of musculoskeletal diseases (MSDs), occupational asthma, skin disease and some cancer which had not reported to the legal reporting system, were detected.

Keywords: Work-related illness, work-related injury, Statistics, Surveillance, Korea

Results:

The study revealed the BHWs exhibited similarities in their socio-demographic characteristics such as age, sex, civil status, work experience and source of income.

Statistical tests showed that education and training attended by BHW respondents and the knowledge about prevalent diseases such as PTB, diarrhea, dengue H-fever and respiratory diseases were significantly correlated to the level of occupational health risk including health practices of BHW respondents. There was an inverse relationship between service rendered and the level of occupational health risks. Community factors as well as institutional factors were found to be correlated to the level of occupational health risks. The lesser the knowledge of the BHWs on the prevalence of communicable/infectious diseases, the higher the chance of theirs being afflicted.

Conclusion and Recommendations:

The study provided insights on the status of occupational health risks of BHWs in Iloilo City. The effective delivery of health services to the community by the BHW respondents and their protection against the incidence of communicable and infectious diseases is hindered by the inability of the local government unit to provide protective mechanisms and devices. The study recommends that sufficient trainings should be provided to BHWs specially those assigned high-risk areas including provision of protective devices for BHWs to safeguard them from diseases. It also recommends strengthening management capability programs of the Barangay District Health Clinic by establishing Occupational Health Risk and Management Program for the BHWs and the people in the barangay through the assistance of Local officials as well as health officials.

ASBESTOS MONITORING IN THE PHILIPPINES

Melba F. Marasigan
Occupational Safety and Health Center

Background:

Asbestos is a mineral that was used for many years in construction materials and in many products due to its tensile strength and resistance to fire and acid. Buildings, schools and other structures built in the early 1900's utilized asbestos containing materials (ACM) such as roofing, walls, ceilings etc. Renovation and removal of these structures create problems for disposal of ACM and threats to human health. It is during these activities that asbestos fibers are disturbed and that workers and non-workers alike become more at risk of exposure to the fibers.

The Occupational Safety and Health Center (OSHC) provides technical assistance for asbestos analysis: Qualitative by determining the presence of asbestos in the samples submitted, while quantitative analysis determines the asbestos fiber content that may be present in indoor air.

Objective:

This paper aims to provide information on the asbestos monitoring conducted by the OSHC from 2002 up to March 2007 as well as the current practice of waste handling and disposal of asbestos containing materials.

Scope and Methodology:

The data gathered was taken from the asbestos monitoring conducted by OSHC from 2002 - 2007. X-ray Diffraction method and Fourier Transform Infrared Spectroscopy were used for qualitative analysis, and Filter Membrane method by Phase Contrast Microscope was used for analysis of ambient monitoring on asbestos.

The waste handling and disposal procedures were developed in compliance with the provisions of the "Chemical Control Order for Asbestos" under Republic Act 6969 which is known as the "Toxic Waste and Hazardous and Nuclear waste Control Act of 1990"

Results and Discussion:

From January 2002 up to March 2007, a total of 134 companies had requested the OSHC for technical assistance on asbestos monitoring. One hundred thirty four different materials used for roofing, ceiling boards, partition wall boards or panels and insulation materials were analyzed for the presence of asbestos. Results showed that about 61 different types of materials or 45.5% were found to contain chrysotile type of asbestos, mostly roofing and ceiling boards. No amosite or crocidolite types of asbestos were found. On the other hand, indoor air monitoring results carried out in 31 companies did not exceed the Occupational Safety and Health Standards Threshold Limit Value of 2 fibers per cubic meter.

From 2005 to 2007, a total of 119 workers conducting removal and disposal activity were given awareness training on asbestos handling and disposal.

Any demolition or renovation work involving asbestos follows a set of logical pattern: 1) the identification and location of asbestos-containing materials (ACMs); 2) submission of a plan and program by the contractor illustrating the scope of work, schedules and work program; 3) site preparation activities to contain asbestos and minimize airborne exposure of workers; 4) the removal of ACMs; 5) proper decontamination of tools, equipment used for the activity; 6) transporting of dismantled ACMs and 7) acceptance of ACMs by the disposal facility.

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Measures to protect the workers handling the ACMs should be put in place which begins with a plan and program detailing the scope, schedule and work program after identifying where the ACMs are located. The measures include the containment and decontamination procedures at all phases of the demolition or renovation. Equally important are the provision of personal protective equipment (such as hazard suit complete with breathing masks and apparatus).

In addition, the necessary permits or notices should be obtained from the government authorities involved.

Conclusion and Recommendation:

Asbestos waste management requires technical knowledge and strict compliance with the "Chemical Control Order on Asbestos". Every phase of asbestos disposal requires adequate information and training for personnel that will handle the activity. It is in the identification stage of asbestos and awareness training of personnel handling removal and disposal activities where OSHC plays an important role in partnership with the key players involved such as the public, private organization, DENR, and asbestos waste service providers.

OCCUPATIONAL SAFETY AND HEALTH CONDITIONS OF TRICYCLE DRIVERS FROM A SELECTED COMMUNITY IN QUEZON CITY (Preliminary Report)

Dr. Ronaldo M. Fajardo
Occupational Safety and Health center

Overview:

In the Philippines, motorcycles and tricycles consist of more than one-third of vehicle volume. They are very visible in most cities of the country providing an alternative mode of transport for short distances. Tricycles play an essential function in the transport system - they are less expensive than other vehicles and can access through small road networks.

Tricycles often generate a significant amount of noise and emissions. Tricycles are used commercially; thus, their operation is often extended beyond their useful life. This is worsened by practices or malpractices of owners and drivers such as poor maintenance, lubricant misuse, and fuel adulteration.

This study aims to assess the working and health conditions of tricycle drivers from a selected community in Quezon City. This is part of the initiatives of the Quezon City local government to improve tricycle conditions and regulations in the city.

Methodology:

Fifty tricycle drivers of from Bago Bantay, Quezon City underwent socio-demographic profiling and occupational health examinations to assess possible health effects from noise and emissions. Noise and environmental pollutants measurements were performed to document the level of exposure.

Results:

The tricycle drivers ages range from 23-73 years old (mean = 41). They have been driving for an average of 11 years - 6 days a week, 15 hours per day. Two-thirds still use two-stroke engine type motorcycles. Seventy-two percent (72%) were smokers or were ex-smokers.

They perceive the presence of dust/pollutants, poor driving skills, and improper hygiene as the major factors which put their health and safety at risk. The drivers also put noise as a health hazard to some extent. Major health complaints of the drivers are back pain, easy fatigability, dizziness, and joint stiffness. A number also reported "fullness" in the ears and difficulty hearing. Respiratory complaints such as breathlessness, cough with phlegm, and wheezing were also reported. Seventeen drivers underwent audiometric and pulmonary function tests. Hearing test results showed 13 out of the 17 drivers show signs of hearing impairment. Pulmonary function test results revealed abnormal findings in nine out of the 17 workers examined.

Noise level, carbon monoxide, sulfur dioxide and nitrogen dioxide measurements, both at the terminal and while driving, did not exceed the allowable levels based on the Occupational Safety and Health Standards (OSHS) of the Philippines.

Discussion and Recommendation:

Exposure to excessive duration and levels of noise has been shown to cause noise-induced hearing loss (NIHL). The drivers' hearing test results revealed that a very large proportion of those tested are already suffering from hearing loss. The pulmonary function test also showed respiratory effects that may be attributed, at least partly, to environmental exposure. Although the environment measurements showed that the drivers' exposure to noise and pollutants are below allowable occupational limits, it should be noted that the exposure to noise and environmental emissions may be compounded by non-occupational factors such as smoking.

Occupational health and safety concerns should be addressed as part of the comprehensive program to improve the tricycle transportation system. Programs should be initiated to reduce the hazards and protect the workers from the ill-effects of tricycle driving. Interventions should include information and education on occupational health and safety such preventive maintenance, proper use of personal protective equipment and smoking cessation.

2007- A Banner Year for the OSHC !

The year 2007 was another banner year for OSHC, but certain activities were distinct and apart since they opened up possible areas of cooperation, both here and abroad, thus extending OSH protection in special areas. Here are some of the more distinct activities held during the year:

Assistance to DAR's OSH-WIND Program – January - December 2007

Throughout the year, OSHC provided technical assistance in the development of the Training Manuals under the Department of Agrarian Reform's program, Occupational Safety and Health – Work Improvement in Neighborhood Development (OSH-WIND) for three crop areas: sugar cane, banana and coconut. Usec. Gerundio Madueño requested to continue these partnership in CAR for the vegetable farmers and small scale miners in Camarines Norte.

DOLE Single Agency Approach Convergent Programs in Marinduque and Bicol- February - March 2007

In 2007, the DOLE Secretary started the year with a call for DOLE's collective strength to move towards a new and higher level by adopting a Single Agency Approach, integrating DOLE's different programs into a cohesive strategy for more efficient programming.

With this in mind and the push for the Zero Accident Program in the regions, the OSHC and the Regional Coordinating Council (RCC) of DOLE Region IV-B launched the DOLE Programmes and Services through the implementation of short-term interventions in the Province of Marinduque from February 22 – 24, 2007.

An orientation on Construction, Farm and other Safety and Health concerns in the different aspects of work was given for the Barangay Captains and Councilors of Sta. Cruz, Marinduque and discussions were held with stakeholders in Marinduque State College (MSC), Boac who requested for the integration of Basic Occupational Safety and Health in their program.

A Focus Group Discussion on health and safety of fisherfolks, farmers, teachers and other workers was held in Maniwaya Island, Sta. Cruz, Marinduque as well as Focused Group and Key Informant Interviews of Fisherfolks in Torrijos, Marinduque.

From March 5 to 8, 2007, OSHC staff and the members of the Regional Coordinating Council (RCC) of DOLE Region V conducted OSH related activities in Bicol. A film "Mga Panday ng Albay" produced by the OSHC shows the various safety and health hazards faced by the blacksmiths or "panday". Tabaco City, Albay's famous for its hand crafted cutlery products and blacksmithing industry dating back during the early 1920's. The film brings out some of the problems faced by the industry and the measures the local government is taking to help them. Interviews by OSH experts on the possible effects of such hazards and suggests measures to control them are also shown. OSHC's recommendation from the findings of the Safety and Health Audits was for a possible relocation of all members of the Cooperative to a separate area so as to protect the families form exposure to metal fumes, noise among others

Occupational Disease Prevention and Working Environment Improvement Japan, May 29 – August 5, 2007

Engr. Lauro C. Canceran, Senior Industrial Hygienist of the Environment Control Division of the OSHC participated in this training course upon the invitation of the Japan International Cooperation Agency (JICA). The training syllabus included industrial hygiene principles, monitoring of work environment and technology on work improvement lik local exhaust ventilation.

International Training Programs to Promote National Policy Framework on OSH at the Korea Occupational Safety and Health Agency (KOSHA), Incheon, South Korea, July 1-14, 2007

In line with the formulation of the Philippine National Profile on Occupational Safety and Health and the National OSH Medium Term Plan (2006-2010), Dr. Maria Beatriz Villanueva of the Health Control Division attended the International Training Programs to Promote National Policy Framework on OSH at KOSHA. Key concepts and approaches to strengthen national OSH programmes and policies as well as innovative ideas were tackled in providing OSH protection to small enterprises and migrant workers.

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Second Mindanao Summit on Occupational Safety and Health, Cagayan de Oro, August 16-17, 2007

The 2nd Mindanao Summit on OSH was held last Aug 16-17, 2007 at the Pearlmont Inn, Cagayan de Oro. The event is a continuation of the First Mindanao Summit on OSH held in May 2006 jointly conducted by the OSHC and ROs 10, 11, 12 and Caraga. Dr. Dulce Gust, presented the proceedings of the First Mindanao Summit on OSH in 2006. The OSH Network 10, now an organization of more than 50 OSH practitioners established as a result of the 1st Mindanao Summit. OSH Network 10 has played a key role in the organization and conduct of the 2nd OSH Mindanao Summit, as well as follow-up training and information activities.

1st OSH Summit in the Visayas, Marco Polo Hotel, Cebu City, October 11 – 12, 2007

The First OSH Summit in the Visayas was a multi-sector partnership spearheaded by the Occupational Safety and Health Center of DOLE and DOLE Regional Offices VI, VII and VIII in partnership with employers, unions and professional associations - to develop a culture of Occupational Safety and Health in the Visayan region. It gave focus to OSH in Human Resource Development+as its theme.

It was aimed at providing an opportunity for experts and stakeholders from the regions to share their experience in the prevention of occupational hazards, injuries, illnesses and death, to encourage research-based policies and programs on OSH; to strengthen capability building programs on OSH in priority sectors; and to share OSH practices and interventions.

Preparatory meetings in key cities in the Visayas were conducted since February 2007 by the OSHC with the DOLE ROs VI, VII and VIII and their respective stakeholders.

The Summit was attended by some 510 participants representing government agencies, employers' and workers organizations, academe and professional groupings. There were 62 technical papers presented and 13 documentary films shown continuously during the two day activity. The presentations and discussions at the summit provided ample evidence that firms and offices that invest in OSH, through advocacy, training and cooperation between management and labor, have lower accident rates and higher productivity.

Twentieth Year OSHC Anniversary Celebrations, November 2007

The OSHC was inaugurated in November 1987 by H.E. President C. Aquino, in North Avenue, Quezon City with the substantial financial and technical assistance by the Japanese government through JICA which lasted for a total of seven years.

The establishment of the Center reflected the will of the social partners - government, labor and management- of making this basic workers right a greater reality for Filipino workers everywhere.

To celebrate 20 years of progressive work on OSH including the National OSH Medium Term Plan and ZAP, the OSHC invited past and present OSH champions during the celebrations.

2007 Annual Conference of Occupational Physicians and Health Nursing of the Japan Society for Occupational Health, Tokyo, Japan, November 3-4, 2007

OSHC Executive Director, Dr. Dulce P. Estrella-Gust presented a paper on the Trends in Occupational Health Care in Asian Countries. With the theme "Health Control and Occupational Health in the Future", the conference highlighted the important role of occupational health professionals in preventing work-related illnesses in view of the growing worldwide social concerns about workers' protection work. Some 500 experts attended the meeting.

Training Program on Industry and Environmental Protection for ASEAN – GHS Instructors, Tokyo, Japan, October 29 – November 9, 2007

The GHS Instructors Course organized by the Overseas Technical Scholarship (AOTS) was participated by Engr. Nelia Granadillos, Division Chief, Environment Control Division (OSHC). Designed to equip developing countries like the Philippines with specialized knowledge in chemical substance management to implement the Globally Harmonized System (GHS) of Labeling Chemicals, the participants were also provided information on the various measures undertaken by Japan and other ASEAN countries on GHS.

The program will enable OSHC to strengthen its current GHS training module to build the capabilities of both government and private sector on GHS implementation.

2nd Conference of Asian Occupational Safety and Health Research Institutes, Incheon, South Korea, November 20-22, 2007

Dr. Dulce P. Estrella-Gust, OSHC Executive Director and Dr. Ma. Teresita Cucuceco, Chief - Health Control Division participated in the 2nd Conference of Asian Occupational Safety and Health Research Institutes last November 20 to 22, 2007 in Incheon, South Korea.

Two papers, the Research Agenda on Occupational Safety and Health (Philippines) and Developing Smoke-Free Workplace Programs in the Philippines were presented during the conference by Dr. Gust and Dr. Cucueco respectively.

SummitPhotos



Speaking on behalf of LGU's Acting Mayor Michael Lopez Rama pledge to full support to OSH policies and programs at the local level.



Resource persons, session chairs and guests at the Summit
From left to right: Dr. Gert A. Gust, President of the ILO Association of the Philippines, Inc. (ILAPI), Comm. Vladimir Tupaz of TUPAS, Bobbit Librojo Of UNI-APRO, Director Domingo Bagaporo of DTI-BOI and Fr.Savino Bernardi, CS from Apostleship of the Sea



Speaking during the closing ceremony, Undersecretary Austere Panadero of DILG pledged support to the implementation of the Zero Accident Program (ZAP)



During the plenary Session, Dr. Dulce P. Estrella-Gust, Executive Director of the OSHC spoke on the "Systems and OSH Programs in the ASEAN"; Undersecretary Dionisio R. Santiago of PDEA on "Risk Management in PDEA Work" and Plenary Chair Vladimir Tupaz of the Trade Union of the Philippines and Allied Services.



Some of the participants during the Closing Ceremony

OSHC EXECUTIVE DIRECTOR PRESENTS

the Philippine Research Agenda on OSH in South Korea

Dr. Dulce P. Estrella-Gust, OSHC Executive Director and Dr. Ma. Teresita Cucuceco, Chief - Health Control Division participated in the 2nd Conference of Asian Occupational Safety and Health Research Institutes last November 20 to 22, 2007 in Incheon, South Korea

Organized by the Occupational Safety and Health Research Institute, Korea Occupational Safety and Health Agency, the Conference was held to 1) facilitate exchange of occupational safety and health experiences and knowledge of each country; 2) to make the necessary preparations by engaging in discussions on pending matters and sharing methods of solving OSH problems; and 3) to discuss ways of mutual cooperation among occupational safety and health research institutes in Asia.

Thirty-three professionals of seventeen research institutes from ten countries took part in the Conference. The participating countries include China, Indonesia, Japan, Malaysia, Mongolia, Chinese Taipei, Thailand, Vietnam, Philippines and South Korea.

Two papers, the Research Agenda on Occupational Safety and Health (Philippines) and Developing Smoke-Free Workplace Programs in the Philippines were presented by Dr. Gust and Dr. Cucueco respectively.

Research Agenda on Occupational Safety and Health (Philippines)

Drawing primarily on the work of the OSHC as the lead agency on OSH under the Department of Labor and Employment (DOLE), Executive Director Gust presented the Philippine Research Agenda on

OSH showing the trends in research in Occupational Safety and Health (OSH) during the past 15 years and the priorities under the Philippine National Medium Term OSH Plan, 2006-2010.

As mandated by Executive Order 307 and its Implementing Rules and Regulations, the OSHC serves as the authority on Occupational Safety and Health in the areas of research, training and information dissemination and technical services. The Center coordinates the formulation of a national OSH research agenda in cooperation with other key research institutions in the academe, government organizations, and NGOs.

The OSHC has been undertaking action research and medical surveillance programs necessary to achieve the goal of prevention and reduction of occupational and work-related injuries and illnesses. The studies and researches in occupational safety and health focus on:

- o continuous review and updating the list of occupational illnesses as prescribed in PD 626, the Employees' Compensation and State Insurance Fund;*
- o research on standard setting and enforcement of OSH standards;*
- o the early detection of occupational diseases, medical examination and biological monitoring of workers exposed to different occupational hazards;*
- o determining the presence of harmful environmental contaminants that affect worker's safety and health in enterprises, government offices and the informal sector*
- o conducting health safety audits with emphasis on hazardous machines, processes, and operations;*
- o providing technical advice and developing technical guidelines to correct unsafe conditions in workplaces.*

Several research projects have been carried out by the OSHC since it started its operations in 1987. Examples are case studies on the development of low cost equipment, the evaluation of workplace

the Philippine Research Agenda... (from page 16)

policies and programs related to specific hazards such as drugs, HIV, tobacco or violence as well as database analyses of compensation claims.

The OSHC also undertook research on OSH in specific sectors specifically construction, manufacturing, agriculture, small scale mining and the service sector. It has also paid considerable attention to OSH of specific, often underserved groups of workers including women workers, working children and young workers. Special attention was being given to OSH in the informal sectorⁱ as well as to child labor in different hazardous settings, and to OSH concerns of young workersⁱⁱ.

The OSH Research Agenda 2006 to 2010

On research priorities under the OSH Plan, Dr. Gust presented the needs and interests expressed in extensive nationwide consultation by OSH stakeholders from government, employers' and workers organizations, academe and NGOs. In 2006, the OSHC had developed a draft priority research agenda in cooperation with its partners in the private and public sectors for inclusion in the National Medium Term OSH Plan, 2006 to 2010ⁱⁱⁱ. The formulation and implementation of a national research agenda is a dynamic process involving the OSHC and a network of institutions, firms and practitioners.

In the next few years, the bulk of OSH research by OSHC and its partners in the public and private sectors will be action-oriented. It will focus on finding solutions for current and potential OSH problems at the workplace in the context of the National Medium Term OSH Plan, 2006-2010.

ⁱ Occupational Safety and Health among Informal Sector Workers, an ILS/OSHC publication, DOLE, 1999

ⁱⁱ Case Studies on Child Labor in Small Scale Mining, in Footwear, in Deep-Sea Fishing, Pyrotechnics, from 1997 to 2003, The OSHC Research.

ⁱⁱⁱ The National Occupational Safety and Health Medium Term Plan 2006 - 2010

OCCUPATIONAL SAFETY AND HEALTH SYSTEM IN SOUTH KOREA

South Korea, a booming East Asian country has been transformed to a highly industrialized economy. With its increasing and varied industries, the safety and health of all its workers in the labor force comes to the forefront of concerns.



During the First Occupational Safety and Health Summit in the Visayas, the OSH System in South Korea was presented by representatives of the Korea Occupational Safety and Health Agency (KOSHA). Byung Gyu Kim, Eun A. Kim and Seong-Kyu Kang from the Department of Occupational Health and Center for Occupational Disease Research, Occupational Safety and Health Research Institute (OSHRI) of KOSHA were at hand to share their country's OSH experience.

Occupational Safety and Health System in Korea

In South Korea, the national organizations involved in occupational safety and health are the Ministry of Labor (MOL), the Korea Occupational Safety and Health Agency (KOSHA) and private non-profit organizations. The Industrial Safety and Health Bureau of the MOL enforces the Industrial Safety and Health Act (ISH Act) and deputizes the technical tasks to KOSHA. KOSHA has performed tasks endowed by MOL as well as autonomous projects to strengthen the foundations of occupational safety and health. Private organizations have provides the service for commonly small and medium-sized enterprises (SMEs).

The Industrial Safety and Health Act, enacted as an independent law on December 30, 1981, is a spin off from the Basic Labor Act. It consists of the law itself, a Presidential Order as its enforcement ordinance and four MOL Orders - enforcement regulation; industrial safety regulation; industrial health regulation and regulation related to the restriction on employment of hazardous and dangerous nature. The main objective of the ISH Act is to maintain and improve employee safety and health by establishing the guidelines for industrial safety and health and clarifying the responsibility for a safe and comfortable work environment.

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SMOKE-FREE WORKPLACE PROGRAMS *in the Philippines*



Dr. Ma. Teresita S. Cucueco, Chief, Health Control Division of the OSHC presented the paper "Smoke Free Workplace Programs in the Philippines" at the Second Conference of Asian Occupational Safety and Health Research Institutes in Incheon, South Korea last November 20 to 22, 2007.

Data provided by the Department of Health on smoking prevalence among adults in the Philippines shows that 56.3% of male and 12.1% of female are smokers. Similarly, the current use of tobacco products among adolescents is: boys – 26.5 and girls – 13%. This alarming numbers bring into focus the problem of smoking in the country.

Smoking was highest among the poor where tobacco spending accounts for 2.6% of monthly family expenditure. It is given monetary priority more than education (1.6%) or health (1.3%).

Occupational hazards and smoking are common in most workplaces – both of these pose risks to workers. What is being done about smoking in workplaces?

Among the workplace interactions are rapidly increasing health costs; smoking interacts with

occupational exposures and increases the risk disease, disability and premature death.

Tobacco-Free Workplace Policy and Program

The development of a Tobacco-Free Workplace Policy and Program is aimed towards reducing diseases in the lungs: malignant and non-malignant, cardiovascular disease, urologic (bladder, kidney) diseases as well as injuries and mortality. Disability and death are often related to tobacco use and exposure to second hand smoke.

Workplaces may be either enabling or discouraging to health behaviors such as smoking cessation. Integrating tobacco control program or smoking cessation into a comprehensive occupational health and safety program may be more effective than having separate programs.

Studies of smoking among employees after implementation of workplace smoking bans show reduced total cigarette consumption in employees. Other benefits include reduced active smoking and reduced passive smoke exposure to non-smokers.

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SMOKE-FREE...*(from page 18)*

In a survey study conducted by the OSHC in 2002 on workplace-based interventions for prevention of tobacco-related diseases, it showed that only 30% of companies surveyed had smoking cessation programs. 75% respondents were from private companies; 43% are small enterprises. Among the activities of a workplace tobacco program included seminars and trainings, production of motivational and information materials, counseling and support groups, nicotine replacement and intensive smoking cessation program.

What difficulties can a company expect to encounter in implementing a smoking cessation program? The negative attitude of employees who smoke would have to be expected as well as issues on budget for implementation. Another potential difficulty in implementation is when management persons are also smokers.

The OSHC recommends the following for a tobacco free workplace program:

- develop the programs at enterprise levels with the least possible cost;
- integrate into existing health and safety program and other welfare programs
- a health service referral system must be in place for companies who wish to access counseling and other modes of interventions provided by experts
- get managers, supervisors and worker leaders to sustain the smoking cessation program

The annual databasing of establishments' policies and programs on smoke-free workplaces will be sustained and will have a wider coverage.

Tobacco Control Actions in Philippines:

The Philippines ratified the Framework Convention for Tobacco Control (FCTC) on September 2003. This Convention has provisions on tobacco control measures which aim to reduce the supply and demand for tobacco. Locally, Republic Act 2011 or the Tobacco Regulatory Act of 2003 is also in place. Under this law, smoking in public places is prohibited, public information on health risks of tobacco use has to also be intensified. Regulation and subsequent ban on tobacco advertisements and sponsorships will also be implemented as well as proper labeling of tobacco products. Assistance to tobacco farmers for alternative agricultural crops should also be provided in accordance to RA 2011. This legislation also strengthens penalties on sale of tobacco to minors.

Workplaces have banned tobacco through local ordinances, voluntary efforts of establishments and established smoking areas in many places which shows strong advocacy for smoke-free environment.

DEPARTMENT ORDER...*(from page 23)*

c. The employer shall require their workers to undergo an Orientation Course on OSH.

d. The employer shall provide the applicable number of safety and health personnel such as safety officer, occupational health nurse, occupational health physician and qualified first-aid staff as required by Rules 1030 and 1960 of the OSHS, and the required training for each category.

e. The workers are enjoined to take an active role in education and training, in developing and implementing joint continuing programs and information campaigns on safety and health.

SECTION 6. SOCIAL POLICY. - The employer shall make available occupational safety and health and welfare facilities needed by qualified individuals with specific needs for workers such as pregnant or lactating women, young, older and differently-abled workers.

SECTION 7. PROGRAM IMPLEMENTATION. - In line with the Zero Accident Program (ZAP), the Occupational Safety and Health Center (OSHC) of the DOLE shall coordinate the provision of training, information and technical assistance in the implementation of the safety and health program at enterprise level.


SECTION 8. ENFORCEMENT AND MONITORING. - The Labor Inspectorate of the DOLE Regional Offices shall be responsible for the enforcement and monitoring of the provisions of this Circular.

SECTION 9. EFFECT ON EXISTING ISSUANCES AND AGREEMENTS. - This issuance shall serve as policy and procedural guidelines for the DOLE and its agencies in the administration and enforcement of applicable labor and social legislations and their implementing regulations.

Nothing herein shall be construed to authorize diminution or reduction of benefits being enjoyed by the employees at the time of issuance hereof.

SECTION 10. EFFECTIVITY. - This Circular shall take effect fifteen (15) days after its publication in a newspaper of general circulation.

Manila, Philippines, February 27, 2008.


ARTURO D. BRION
Secretary
Dept. of Labor & Employment
Office of the Secretary

000311

OSHC at 20: *Two Decades of Keeping Workplaces Safe and Healthy*



By: Rosanna M. Tubelonia

All workers have a right to safe and healthy workplaces and it is everybody's concern to prevent and eliminate hazards and risks at work. "These concerns had prompted the creation of the Center 20 years ago and they are still our guiding principles today and in years to come", said Dr. Dulce Estrella-Gust, Executive Director of the Occupational Safety and Health Center (OSHC). Clearly, the establishment of the Center reflected the will of the social partners - government, labor and management- of making this basic workers right a greater reality for Filipino workers everywhere. A tripartite Governing Board is providing policy guidance to the Center in implementing its national "Zero Accident Program" (ZAP), a flagship program of the DOLE.

The OSHC was inaugurated in November 1987 by H.E. President C. Aquino, in North Avenue, Quezon City with the substantial financial and technical assistance by the Japanese government through JICA, the latter lasting for seven years.

With its state-of-the-art facilities and a team of OSH experts and specialists, the Center has, over two decades, made its mark in the world of work; since its inception the focus has been on preventing accidents, injuries and death at work, through a package of training and skills development, studies and research, information campaigns and technical assistance as well as PPE testing. Moreover the Center's specialists are regularly being called for the assessment of specific work-related calamities like the outbreak of Stevens Johnson Syndrome (SJS) among OFWs in Taiwan, oil spills in Guimaras or the recent Glorietta 2 explosion.

The Center takes pride that some 65,000 supervisors, managers, workers and OSH practitioners have been trained to promote a culture of OSH in the private and public sectors. OSH program offerings include courses ranging from "Basic OSH" to specialized tailor-made programs on prevention of TB or Drugs at the workplace. In addition to its primary concern for workers in the Philippines the Center offers pre-employment OSH training for OFWs. Several research projects have covered OSH related topics which were used in policies, technical guidelines and training

programs, among others. Regular Radio and TV programs, in English and in the vernacular, alert a wider public to OSH issues.

To ensure professional development and capacity building the Center has been closely cooperating with professional associations, like PCOM, academic institutions, employers organizations like ECOP and trade union organization including TUCP, FFW, TUPAS, public sector unions as well as agencies concerned with social protection like GSIS and SSS. The close cooperation with the media remains vital for reaching a wider audience on OSH issues. Ten National OSH Conferences have served as fora for OSH practitioners from here and abroad, to exchange information and share research findings and "good and best practices". The biennial Gawad Kaligtasan Kalusugan (GKK) events are being held to recognize outstanding achievements of organizations and individuals in different fields of OSH. To share experiences with specialized agencies abroad, the Center maintains close contacts with the JICA, ILO, WHO, NIOSH, KOSHA. As a long-standing member the regional association of national OSH institutions (ASEAN OSHnet), the Center acts as the lead agency on OSH training.

"Achievements, however gratifying, are no cause for complacency. In a very dynamic world of work we must face, several major challenges includes:

- ☺ A main challenge will remain the progressive extension of effective OSH services to an increasing number of workers. At present a very limited number of workers in the formal sector of medium and large enterprises enjoy effective OSH protection and services. The larger part of the Philippine workforce, mostly located in the small enterprises, the informal economy and agriculture are all begin to be reached to enjoy such favorable working conditions. To strengthen the outreach in the regions the Center and DOLE's regional offices have organized in 2006 and 2007 several training

and information courses, conferences and technical services in Mindanao and the Visayas to enlist stakeholders for setting regional priorities and strengthening local networks for coordinated action.

- ☺ Another challenge relates to emerging and re-emerging illnesses like the exposure to toxic substances and materials and chemicals known as Persistent Organic Pollutants (POPS). Other OSH concerns relate to the international movement of labor, the rise in female employment and the flexibilization of work, to biological hazards, like TB and HIV, or lifestyle diseases like drugs, alcohol and tobacco. In response to these special OSH challenges the Center is stepping up its public awareness and advocacy campaigns in cooperation with employers' and workers' organizations, the media and academe. An important contribution has been the publications and wider circulation of guidelines related to the prevention of TB, HIV, drug, alcohol abuse, and cost-effectiveness of OSH prevention.

Looking to the future the Center has been taking stock of the OSH conditions in the country; based on extensive consultations with all its partners it has published a National OSH Profile that identifies achievements and gaps and highlights priorities for action. The outcome has been the formulation of a draft National Medium Term OSH Plan, 2006-2010 setting specific priorities for preventive action at national, regional, industry and establishment levels.

"The prevention of work-related accidents, illnesses and deaths is and will remain a legal and moral obligation under the Plan, Dr. Gust said. There is ample evidence that firms and offices investing in preventive programs experience lower rates of absenteeism due to fewer accidents and work-related illness while facing lower cost for recuperation and rehabilitation. Most importantly, a safe and healthy work environment contributes to workers moral and productivity. The direction for the Center and its partners is clear and holds great promise for major strides in making workplaces safer and healthier.

**Note for the National OSH Profile 2006 on OSHC publication.*

This includes the installation of protection device, inspection/verification, and safety certification to prevent accidents by securing the safety of dangerous machineries, equipment, and facilities such as the press and lift.

Management of Toxic Substances:

This stresses compliance of accomplishing the Material Safety Data Sheet (MSDS) of substances whose manufacture or usage is prohibited or restricted for the methodical management of the toxic substances and provision of safety and health information to employees.

Management of Employees' Health:

Regulations concerning work environment testing, employee health examination, health management pocketbook, and work hour restriction to manage and protect the health of employees exposed to toxic substances and hazardous elements (noise, etc.) at the work site.

The importance of setting up a legal system as well as detailed strategies to enhance OSH in workplaces is seen in the implementation of South Korea of occupational safety and health. The experts for OSH should be highly trained and supported with information and training provided by concerned agencies to guide their OSH practice.

Based on their mandate in securing the health and safety of workers, the roles of the MOL and the Ministry of Health could be simply compared to international bodies like the International Labour Organization and World Health Organization.

Trends of Industrial Accidents and Occupational Diseases:

Presently in South Korea, the rate of industrial accidents is roughly 0.7%. But as the number of workers increase, the number of injuries and illness is also increasing. Industrial accidents happening in Small and Medium Enterprises (SMEs), those with less than 50 workers account for around 70% of the total. Specifically, unskilled workers have contributed to approximately more than the half of the industrial accidents. Crushing (21.2%), slips and trips (19.3%), falls (13.9%), impact (11.7%), struck by flying objects are still five major causes in industrial injuries.

In occupational diseases, musculoskeletal disorders and cardio-cerebrovascular diseases are the most common. Reports of traditional diseases caused by chemical intoxication or long term exposure are around 100 cases every year. Of the chemical substances, asbestos has the full attention of occupational specialists, workers, and NGOs. Current issues of immediate concern are 1) the increasing of older workers with the aging society and the 2) increase participation of women workers in the labor force.

Management Systems in South Korea:

Safety and Health Management System:

Carried out efficiently and methodically by a qualified safety and health manager with sufficient authority to provide assistance and serve in an advisory capacity for specialized issues.

Safety and Health Management Standard:

Guidelines specific to each work site and contains general safety and health management activities and practices.

Safe Management of Machineries, Equipment, Facilities, and Protection Gear:



ZAP

ZERO ACCIDENT PROGRAM

CORNER

FORMATION OF OSH NETWORK-10

By: Atheneus A. Vasallo & Elnie Balaba-Cagas

"An improved Occupational Safety and Health environment has been proven to be an important strategy towards attaining higher productivity, better product quality and well motivated workers."

This has been the rallying call on the Safety Practitioners and Stakeholders of Region 10. To strengthen this passion, DOLE Regional Office No. 10 has initiated the organization of Occupational Safety and Health Network-10 (OSH Network-10).

Initially, the OSH Network-10 was composed of 20 Safety Officers who responded positively to the challenge posed before the participants who attended the 1st Mindanao Occupational Safety and Health Summit in Davao City last May 2006. At present, the membership has ballooned to more than 60 establishments and catering to about 8,000 workers from all provinces in Region 10. This growth in membership is an indication that occupational safety and health consciousness in the region is improving.

The major objective in the creation of OSH Network-10 is "Building a Culture on Occupational Safety and Health in Region-10."

Despite the 'infancy' stage, having been organized in less than a year, the group has boldly taken the big step of sponsoring the 2nd Mindanao Occupational Safety and Health Summit held at Pearlmont Restaurant last August 16-17, 2007. The summit drew more than 300 participants from all over the island. It was a milestone in the pursuit of promoting workers' welfare in the field of occupational safety and health. Sharing of OSH best practices has encouraged many to engage in benchmarking. The outcome of the 2-day session was an Action Plan for the Mindanao Occupational Safety and Health.

Notable in the process of the formation of OSH Network-10 was the increase in the accreditation of Safety Practitioners.

OSH Network-10 has also produced, among its members, winners in the national search for the Gawad Kaligtasan at Kalusugan sponsored by the Occupational Safety and Health Center. Among the 31 entries in the Establishment Category, Del Monte Philippines, Inc. was declared 1st Place, Labor Secretary's Award. The National Power Corporation, Pulangi Hydro Electric Plant garnered 3rd Place, Special Recognition Award. For the Individual Category, 21 entries were submitted. Engr. Rudy Brioso of the NPC Pulangi Hydro Electric Plant was awarded 2nd Place. The awarding ceremony was held at the OSHC on October 27, 2006, which was the last day of the 10th NOSH Congress.



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**POLICY GUIDELINES GOVERNING THE OCCUPATIONAL SAFETY AND HEALTH OF
WORKERS IN THE CALL CENTER INDUSTRY**

Pursuant to the rule-making authority of the Secretary of Labor and Employment under Article 5 of Labor Code, as amended, and to ensure the protection and welfare of workers employed in the call center industry, the following Guidelines are hereby issued for the guidance of and compliance by all concerned:

SECTION 1. COVERAGE. - These Guidelines shall apply to all establishments, workplaces, operations and undertakings in the call center industry.

SECTION 2. DEFINITION OF TERMS. - As used in these Guidelines, the following terms shall mean:

- a. "Call or Contact Center" refers to a central customer service operation where agents - or customer care specialists or customer service representatives - handle business-related telephone calls and other IT-related activities on behalf of a client.
- b. "Occupational Safety and Health Program" refers to planned activities aimed prevent, eliminate, reduce or control occupational risks and hazards.
- c. "Safety and Health Committee" refers to a group of employees and management representatives concerned with the planning, policy-making, implementation and evaluation of all matters pertaining to safety and health.
- d. "Safety and Health Personnel" refers to a qualified first-aid staff, nurse, dentist, physician or safety officer engaged by the employer to provide occupational safety and health service.
- e. "Occupational Safety and Health Standards (OSHS)" refers to the set of Rules issued by the Department of Labor and Employment (DOLE) which mandates the adoption and use of appropriate practices, means, methods, operations or processes, and working conditions reasonably necessary to ensure safe and healthful employment.

SECTION 3. WORKPLACE POLICY ON OCCUPATIONAL SAFETY AND HEALTH - An occupational safety and health policy shall be formulated by each establishment addressing the priority safety and health concerns in workplaces and worksites classified as call or contact centers, in accordance with the Occupational Safety and Health Standards (OSHS) and other related OSH issuances.

SECTION 4. COMPONENTS OF THE OCCUPATIONAL SAFETY AND HEALTH PROGRAM. - The OSH program shall include:

- a. Hazard and Risk Prevention and Control to reduce the extent of exposure to hazards and to decrease the likelihood for those hazards to cause illness or injury.
- b. Capability building for members of the Safety and Health Committee to undertake risk management activities through information, training, and work environment safety and health interventions.
- c. Referral and Access to Medical and Welfare Services - Appropriate services as required under Rule 1960 of the OSHS shall be made available which would address the physical, ergonomic and psychological aspects of the work environment as well as the health and safety needs of the workers.

SECTION 5. ROLES AND RESPONSIBILITIES OF THE EMPLOYERS AND WORKERS. - The parties herein shall have the following roles and responsibilities:

- a. The employer shall formulate and implement a suitable OSH program based on its policy and in accordance with the OSHS and other related OSH issuances, and with the Technical Guidelines on OSH for the Call Center Industry.
- b. The employer shall organize a safety and health committee pursuant to Rule 1040 of the OSHS in every workplace whose function is to develop and oversee the implementation of OSH program to include workers orientation and awareness on hazards identification, risk evaluation, prevention and control.

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SUMMIT JOINT RESOLUTION

WHEREAS, the First Summit on OSH in the Visayas was organized by the DOLE ROs VI, VII and VIII and the Occupational Safety and Health Center (OSHC) as a follow up to the ZAP (Zero Accident Program) Regional Planning workshops in 2005 to 2006;

WHEREAS, Occupational Safety and Health is being generally accepted as a basic worker's right that calls for concerted action by all stakeholders, including government, employers and workers organizations, LGUs, professional associations and academe;

WHEREAS, the ZAP is an integral part of the National OSH Medium Term Plan for 2006 to 2010 that call for implementation through comprehensive OSH policy and programs at the regional, local and enterprise levels;

Whereas, formulation of sustained and effective implementation of regional and local OSH systems require high level commitment and support all stakeholders;

Whereas, occupational safety and health (OSH) protection and services must be provided for all workers in the public and private sectors, and efforts must be stepped up to cover underserved workers in the informal sector;

Whereas, there is an urgent need to harmonize and consolidate OSH policies, programs and systems on prevention, compensation, rehabilitation, enforcement;

Whereas, regional and local programs should be attuned to the full spectrum of OSH management such as prevention, compensation and rehabilitation of work-related injuries and illnesses as well as effective enforcement mechanisms of all OSH laws and regulations;

Whereas, collaboration with international organizations and institutions, should be strengthened for the exchange and sharing of experience and research for benefit of national and regional OSH systems and programs;

Whereas, human resources development is a key to OSH capability building for the effective delivery of OSH technical services at national, regional and enterprise levels and at all industry sectors.

We, the participants to the First Summit on Occupational Safety and Health in the Visayas Regions I, representing stakeholders in the private and public sectors and civil society support the vision, goals and strategies of the Medium-Term National Occupational Safety and Health Plan 2006-2010 and commit ourselves to actively participate in the formulation and implementation of Zero Accident Programs attuned to the requirements and need at the regional, local and establishment levels.

Signed by all participants



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