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Health insurance for garment workers: A window towards sexual and reproductive health and rights (SRHR)

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Statement of the Problem: Healthcare costs usually stand in the way to access quality health services by the poor, especially when there is no structured govt. support to bear the financial burden. In Bangladesh 66% of the expenses are out of the pocket. The support services available even for rural poor is not available for the urban garment worker due to long and confined working hours. So who should provide the support? What modalities are feasible?

Methodology & Theoretical Orientation: Health Insurance can reduce the financial burden. A new insurance scheme for garment workers was introduced; collaboration between an insurance company and a healthcare service provider was built. The premium was set as BDT 500 per worker with an annual coverage of BDT 15,000. This was piloted in 3 factories.

Findings: Workers started accessing the services under the cashless transaction modality. The highest service accessed annually by a single worker amounted to BDT 5500, and the lowest being BDT 650. This information was enough to convince the workers of the benefit received with a minimal annual premium-pay of BDT 500. In the first year, the insurance premium was paid by the donor funds, but in the second year the factories and workers are sharing BDT 200 and now buyer and brands are coming forward to support the initiative.

Conclusion & Significance: The question which I raised in the problem is leading to the solution. A collaborative model where the main stakeholder's factories and buyer's join hands in ensuring healthcare, especially SRHR, in a more affordable manner for workers – because it is a cyclic effect – if the worker is healthy, she is productive and less absent from work, leading to meeting shipments and orders by factories, which in turn leads to buyer retention. At the broader level a sustained international market for Bangladeshi garment and thus better living for workers.

Biography

Farhtheeba Rahat Khan is a Development Professional with experience backed up by private sector interventions and development sector working realities and challenges. As the Lead of private sector health project, she undertook studies to understand private sector healthcare market dynamics and simultaneously worked on the policy front with Ministry of Health and Family Welfare and its directorates in addressing the supply side issues of healthcare market. She has provided technical assistance for formulation of policy framework, guidelines and accreditation systems in the health training, and emphasized on avenues for women employment in the health sector. Currently, she is the Team Leader for the 'Working with Women' project implemented by SNV, where she is facilitating interventions in garment factories, following a gender sensitive and gender-specific approach to ensure equity in healthcare service provision for female garment workers.

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