Addressing OSH disparities among Latino workers

Safety Professionals and the Latino Workforce

ASSE Conference

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The findings and conclusions in this presentation are those of the authors and do not necessarily represent the views of the National Institute for Occupational Safety and Health.
Introduction

- National Institute for Occupational Safety and Health (NIOSH)
  - OSH Act 1970
  - Mission - Research
    - Generate new knowledge in the field of occupational safety and health
    - Transfer that knowledge into practice for the betterment of workers.

- Personal
  - Public Health Advisor
    - Training Research and Evaluation Branch
  - Anthropologist
  - Community Experience
Workforce Diversity

- Workforce is increasingly diverse
  - Focus on Latino immigrants but lessons are generalizable

Latino Population

- Currently there are over 50 million Latinos in the U.S.
  - Largest minority group
- Represents growth of 200% in past 30 years
- Almost half are foreign-born
- By 2050 Latino, making up 15% of the workforce.
Percent Latino Population by County
Census 2000

Percent change 1990 to 2000 in Hispanic or Latino population by county

- Gain of 200 percent or more
- 100.0 to 199.9
- 57.9 to 99.9
- 0.0 to 57.8
- -10.0 to -0.1
- Loss of more than 10 percent

No race data for Puerto Rico in 1990

Data Sources: U.S. Census Bureau, Census 2000
Reported on Data File: 5% Summary File
U.S. Census Data
Cartographic Population Division, U.S. Census Bureau.

No change

U.S. change is 27.3 percent

Department of Health and Human Services
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health

NIOSH
Occupational Health Inequalities

Rate of fatal workplace injuries:
- Latino Immigrants: 5.9 for 100,000 workers
- US born Latinos: 3.7
- All Latinos: 4.9
- All workers: 4.1
- 95% of fatalities are male

[2004; BLS CFOI]
Mission:
• Improve surveillance of vulnerable populations;
• Identify research methods, intervention approaches, and dissemination tools to better reach these populations.
• Focus of Presentation

1st National Conference on Health & Safety Disparities At Work
• 14-15 Sep 2011, Chicago
• Examining the research accomplishments and gaps related to the factors that create occupational health disparities, and
• Identifying and sharing promising practices for eliminating disparities through innovative intervention programs
Training Research and Evaluation Branch
Research with Immigrants

• Improve understanding of immigrant work experience in particular Occupational Safety and Health (OSH)

• Develop and evaluate OSH interventions for Latino immigrant workers

• Create evidence based, replicable models for disseminating OSH interventions to immigrants
Immigrant Work Experience

- Understanding the immigrant worker experience
- Identify what hinders and facilitates the adoption of safe practices at work
- Avoid unintended consequences
Current TREB Project

- Priority Populations Study
- 36 focus groups and 12 individual interviews with Latino immigrants
  - Established vs. Emerging communities
  - Gender, education, and time in US
- 12 additional focus groups
  - US born white workers
  - US born African-American workers
  - African immigrant workers (French speaking)
- Results
  - Rich understanding of immigrant worker experience
  - Compare with other workers
  - Informs development of surveys and interventions
Knowledge Gained

- Three types of barriers to OSH
  - **Knowledge**
    - Unfamiliar with materials, technology, safety procedures and regulations
    - Limited institutional knowledge of how to work with immigrants
    - Limited bilingual infrastructure
  - **Culture**
    - May Perceive Risks Differently
      - Border Crossing
    - Relationship with authority
      - Worker/boss relationship in Mexico?
    - Reputation as hard worker is marketable
  - **Structure**
    - Work Organization
    - Economic insecurity – Fear job loss
    - Immigration Status
    - Discrimination
Developing and Evaluating OSH Interventions Targeting Immigrants

- Evaluate existing interventions
  - Are they effective?
  - What elements contribute to improved OSH
- Develop theory based, culturally tailored new interventions (fill voids)
- Key elements
  - Layout
  - Format
  - Message
  - Dissemination
TREB Example

- Family of trench safety products
  - Print materials
  - DVD/ Interactive CD ROM
- Feedback on existing trench safety products
  - **Layout** – hard to read & understand, small print and few graphics, “regulatory” language
  - **Format** – Individual handouts impractical, users did not like
  - **Content** – Focus on knowledge transfer. Message lost due to “legalese”, technical language, and poor graphics
Suggested Changes

- **Layout**
  - Simple, common language, large pictures

- **Format**
  - Computer - Unfamiliar with computer
    - Design computer interface to facilitate use- add mouse training
  - Written materials - Didn’t like papers
    - Tool box magnet

- **Content**
  - Recognize and avoid hazards
  - Information on how to address problems at work

- **Dissemination**
  - Developing tailored dissemination plan with community organizations
TRENCHING AND EXCAVATION SAFETY

TRENCH COLLAPSE HAPPENS IN A SPIT SECOND... DON'T THINK YOU CAN MOVE OUT OF THE WAY.

EVEN A SMALL PILE OF DIRT IS HEAVY ENOUGH TO TRAP YOU IN A TRENCH...

THE DIRT FROM AN AVERAGE CAVE-IN WEIGHTS 10,000 LBS.

THAT'S THE WEIGHT OF TWO PICK-UP TRUCKS ON TOP OF YOU.

KNOW A SAFE TRENCH!

NEVER ENTER AN UNPROTECTED TRENCH!

EVERY TRENCHING JOB REQUIRES A COMPETENT PERSON TO BE ON SITE.

WHO IS THE COMPETENT PERSON AT YOUR WORK SITE?
Dissemination –
Reaching the “hard (for us) to reach”

- Identify important institutions serving this community
  - Community based organizations
  - Latin American Governments
  - Media Outlets
- Develop Collaborations
  - Advance NIOSH projects
  - “Sell” OSH – institutional buy-in
  - Research as part of larger vision
- Information and Access to Resources
  - Information is essential but not enough
  - Immigrant workers need institutional support accessing resources (information, workers’ comp, OSHA, etc.)
    - Partners can provide this support
Current TREQB Study

• **Mexican Consulates**
  • 50 consulates serve over 1 million Mexican immigrants a year
  • Ventanillas de Salud program VDS (health window) in waiting room of every consulate
    • Provide health education, screening, and referral
  • Protection Department
    • Provides legal advice and referral

• **Field study goals**
  • Determine most effective method of promoting OSH for immigrant workers using established consular infrastructure
  • Create replicable, evidence-based model for promoting OSH with immigrants.
  • Explore options to standardize VDS curriculum for OSH and other health issues
Impact

• Institutionalization of OSH in consulates
  • Increasing priority for Mexican Foreign Ministry
  • Expand scope: Information Dissimilation, Surveillance, Access to Resources
  • Capacity building
    • Training staff/community partners (meetings, webinars)
    • Improved access to resources for workers (Information, Legal etc.)
    • Improved knowledge about OSH and immigrants

• Improve NIOSH capacity with immigrants
  • Lessons learned from research
  • New web of relationships
    • Community Organizations
    • Other Government entities: CONAPO, Ministry of Health
  • Replicable model (Guatemala, Migrant Health Clinics, etc.)

• Limited resources
  • Use existing infrastructure
  • Expand impact, sustain intervention
  • Investment on building and maintaining partnership = High ROI
Recommendations for Adapting to a Diverse Workforce

- Quality vs Quantity
  - Evaluate and improve work with existing diversity
- Diversity requires change
  - Two-way street
  - Institutions and individuals
  - Different realities require different solutions/resources
- Recognize social divisions and heterogeneity
  - More than race/ethnicity
  - Choose partners/employees carefully
- Develop plan to build capacity
  - Short, medium, long-term
  - Personnel, Procedures, Partnerships
  - Promote common destiny
Thank You

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