



Promoting Safer and Healthier Homes, Workplaces and Communities in the United States and Latin America

Potential Actions

Hispanic Forum on a Safe and Healthy Environment
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Rosen Plaza Hotel
Orlando, Florida



**National
Safety
Council**



Pan American Health Organization
Regional Office of the
World Health Organization



INTRODUCTION

The Hispanic Initiative

The regional integration that is reshaping the social, political, legal, and economic landscapes of the Americas is creating an unprecedented opportunity to improve environmental health and working environments for Hispanics. To achieve this goal, the *Hispanic Forum on a Safe and Healthy Environment* is bringing together representatives of national, international, and community-based organizations to identify common challenges, forge new partnerships, and collaborate in the development of model strategies.

The Issues

Throughout the year, three distinct but complementary sub-groups have joined their efforts and shared their resources to discuss problems and potential solutions with relevance to the environmental and occupational safety and health issues that Hispanics face in the north and south hemispheres of the region. These sub-groups and their overarching themes are, respectively:

Occupational Safety and Health

A Safer, Healthier Workplace for a Diverse Workforce

Environmental Health

Healthy Children, Living in a Safe Environment

International Workers' Health

Protecting Worker Health: Forging a Common Agenda for the Americas

Potential Actions

For each sub-group, three to four issues have been selected and background information provided for needed actions. For each of the issues discussed within each breakout group during the forum, several potential actions will be suggested to generate a fruitful exchange of ideas, experiences, and opinions. These potential actions will be captured and consolidated in model strategies that will allow all stakeholders to move forward and to continue their drive to expand existing partnerships and build new ones. It is our vision that through consensus-building, a common agenda containing model strategies and priorities for action will be agreed upon by all interested parties during the Hispanic Forum of October 2000.

Thank you in advance for your interest and active participation in this initiative.

Sincerely,

The Sponsor Organizations.

- U.S. Environmental Protection Agency
- Pan American Health Organization
- National Safety Council
- National Alliance for Hispanic Health

POTENTIAL ACTIONS OCCUPATIONAL SAFETY AND HEALTH ISSUES

Hispanic Women and Occupational Health

- Increase funding for in-depth research on the hazards and exposures specific to occupations associated with Hispanic women workers as well as the predisposition of women for particular illnesses.
- Fund, develop and deliver better training and education targeted for Hispanic women both in terms of rights as well as hazards and exposures expected in the workplace.
- Support adoption of an ergonomic standard.
- Develop recruitment strategies for Hispanics in occupational safety and health professions.
- Support increased funding for affordable childcare and eldercare.
- Support increased access to health care for all.
- The short-term initiatives should be started immediately and continued until completed.

Pesticides

The following steps should be taken to protect farmworkers from pesticide exposure:

- Establish demonstration projects and best practices models and publicize model programs which can be followed by employers and workers in the area of pesticide safety.
- Establish public education/public relations campaigns to bring pressure on employers and government to enforce pesticide protections.
- Work to strengthen worker and employer training on pesticide hazards and protections.
- Promote scientific research on the effects of pesticide exposure.
- Establish and promote grants/funding to develop model programs, research, and public awareness/public relations campaigns.
- Federal and state agencies responsible for enforcement of pesticide regulations must significantly strengthen their efforts.
- Federal law should be amended (1) to allow a private cause of action for farmworkers to bring actions against those who violate federal legal protections and (2) to include worker exposure standards (including child workers), not just consumer standards.

- Standards for the cancellation of pesticide registration under the Food Quality Protection Act should be tightened. As stated in the preceding item, amended standards must include the risk posed to workers, as well as consumers.
- Agencies should implement the recent recommendations of the EPA's Children's Health Protection Advisory Committee to improve data collection pertaining to farmworker injuries and illnesses resulting from pesticide exposure, including comprehensive worker surveys.

Falls as a Specific Risk

We know that there are increasing numbers of Hispanic workers in the construction industry, and it appears that these workers are experiencing a disproportionate share of fatalities, such as those related to falls. We do not know why this is occurring or the most effective way to reverse this trend. The following examples of recommendations are provided to spur discussion of the types of steps needed to improve our knowledge of these issues and to take appropriate actions:

- Create a network of interested groups and individuals to further explore these issues. This paper provides a starting point for thinking about these issues, and additional participation from a cross-section of government, union, industry, academic, professional, and community organizations interested in these issues could provide important direction to further identify issues and priorities for follow-up. Participation by international representatives from Mexico and other countries would be an important step towards improving practices across borders. A network of individuals and groups who are most affected by these issues are most likely to create the sustained effort and action plan needed to improve the situation over the long term.
- Develop a prevention effort to specifically identify and address the concerns and needs of Hispanic workers. Additional research and surveillance can help identify where the problems are and the most promising areas for reducing injuries and illnesses among Hispanic workers. Research can guide the development of improved approaches, ranging from better designs for worker training materials to improved work practices. Improvements in understanding and targeting might allow better targeting of a range of resources, from consultation to enforcement.
- Increase the amount of Spanish language safety and health materials available on construction hazards and controls. All groups, from employers to unions to government agencies, need to sharply increase the creation of Spanish language materials available for use. This includes written materials, web-site content, and recognizing the critical need for development of Hispanic trainers and worker-employer-public educators.
- Provide a clearinghouse to make it easier to obtain Spanish language materials. A one-stop-shopping clearinghouse might make it easier to obtain Spanish language safety and health materials, and would encourage cross-fertilization among federal and state agencies, employers, unions, and community groups. For construction, this should involve expanding the current Spanish language materials on the electronic library for construction occupational safety and health <<http://www.elcosh.org>> which is a joint effort of NIOSH and the Center for Protecting Workers' Rights (CPWR).
- Target and involve Hispanic Contractors. Hispanic workers in construction include managers. Although some may be self-employed and combine management with production work, managers were

among the top five Hispanic construction occupations by number. Hispanic managers and contractors are an important group for future partnering. They are likely partners for Spanish language safety and health materials, and they can help to develop, test, and disseminate best practices to help raise the standard of safety practice in the industry.

- Support efforts to pilot new programs at the community level to disseminate successful approaches. Community groups provide an important function for Hispanic and immigrant workers, and community centers, legal aid clinics, health clinics, union locals, community newspapers, and church groups provide an underutilized resource for getting information on worker and safety rights to underserved worker populations. For example, while day laborers might not learn about their OSHA rights from those hiring them for short term jobs, some communities provide buildings or centers for day laborers. These may provide a mechanism for providing Spanish language posters, safety and health materials, and videos. Local OSHA Area offices should be encouraged to have construction inspectors who can speak Spanish, and to pilot different approaches for providing outreach at the community level and enforcement on smaller job sites. Hispanic workers, through their labor unions and community groups, have been effective agents of change in Southern California and elsewhere. These efforts could be expanded to directly address working conditions from falls to noise, sanitation and drinking water.

POTENTIAL ACTIONS ENVIRONMENTAL HEALTH ISSUES

Asthma and Hispanic Children

- Efforts should focus on mitigating the risk factors that trigger or exacerbate asthma in Hispanic children. These efforts could include the support and expansion of environmental justice programs/grants, such as those that target brownfields and urban industrial centers; support and funding for federal/state programs that are working to lessen poverty and substandard housing; and support of programs working to alleviate distressed living conditions in *colonias* along the U.S./Mexico border.
- In Latin America, efforts should also focus on reducing the use of leaded fuels and wood burning stoves.
- More studies need to be conducted to identify the risk factors and social reasons contributing to the high incidence of asthma in Hispanic children. Additional drug and clinical research, as well as monitoring studies of asthmatic patients in Hispanic communities, also are critical.
- Many Hispanic children have asthma that is undetected or under treated. These children need access to proper health care, treatment, and clinical trials. Health professionals that treat Hispanic children also need to be educated on asthma diagnosis and management techniques as well as the cultural and social factors that could influence their patients' treatment.
- Education within the Hispanic community is of critical importance. Education is needed to help individuals recognize asthma symptoms, understand the health effects of asthma, and seek and maintain treatment. Education campaigns should also help people understand the factors that trigger or exacerbate asthma, and could also be linked to related issues (e.g., ozone alert days, substandard housing, anti-smoking campaigns).
- Research has shown that outreach should focus on educating not only the child asthmatic, but also the child's primary care givers. Day care centers, schools, and community and youth organizations are prime targets for reaching children and their care givers. In addition, teenagers might be recruited to help educate younger children and to form support groups within their own age groups. Other strategies could focus on increasing the promotion of successful programs and tools within the Hispanic community, such as The American Lung Association's Open Airways for Schools and EPA's Indoor Air Quality Tool Kits for Schools. In addition, attention should be paid to translating into Spanish the most useful educational materials now being published by the many organizations dedicated to asthma and allergy issues.

Lead Poisoning and Hispanic Children

In the United States, the interagency President's Task Force on Environmental Health Risks and Safety Risks to Children has proposed a coordinated federal program to eliminate childhood lead poisoning, focusing on lead paint hazards (*Eliminating Childhood Lead Poisoning: A Federal Strategy Targeting Lead Paint Hazards* [at www.hud.gov/lea]). The Task Force makes the following recommendations:

- Act before children are poisoned: Increase the availability of lead-safe dwellings by increasing federal grants for low-income housing and leverage private and other non-federal funding; promote education for universal lead-safe painting, renovation, and maintenance work practices; ensure compliance with existing lead paint laws.
- Increase awareness of lead glazed pottery and home remedies as sources of exposure for Hispanic children: More work needs to be done to alert families, health care providers, schools and day care centers about the danger posed by use of lead glazed pottery and home remedies.
- Identify and care for lead-poisoned children: Improve early intervention by expanding blood lead screening and followup services for at-risk children, especially Medicaid-eligible children.
- Conduct research: Improve prevention strategies, promote innovative ways to drive down lead hazard control costs, and quantify the ways in which children are exposed to lead.
- Measure progress and refine lead poisoning prevention strategies: Implement monitoring and surveillance programs.

Implementation of this program would result in the creation of 2.3 million lead-safe homes for low-income families with children over the next 10 years. This could significantly benefit Hispanics in the United States, about 27 percent of whom are poor and who make up about 22 percent of the poor people living in the United States. Continued outreach and education work to address lead-glazed ceramics and lead-based remedies will also benefit Hispanic families.

A strategy for reducing childhood lead poisoning in Latin America needs to address a variety of sources of lead, and will vary from country to country. Foremost in any strategy should be the elimination of lead in products with potential for broad exposure: gasoline, paint, plumbing supplies, ceramic glazes, food cans, printing ink, fertilizer, children's toys). The following recommendations were made by the Committee to Reduce Lead Exposure in the Americas (Board on International Health of the Institute of Medicine, USA, and National Institute of Public Health, Mexico, *Lead in the Americas: A Call for Action*, 1996):

- Move toward the elimination of lead in gasoline, ceramic glazes, paints, and food can solder.
- Make more public information in Spanish available about source of lead exposure and easy steps that can be taken to reduce exposure.
- Train health care providers, school personnel and governmental officials about common sources of exposure and policy recommendations to reduce population exposure.
- Strictly limit workplace exposures to lead and releases from macro- and microindustrial (family-based) industries.
- Implement surveillance of high-risk populations and environmental monitoring.
- Focus on interventions that have been shown to be cost-effective and sustainable in countries of the Americas and elsewhere in the world.
- Conduct evaluation research, so that the success and cost-effectiveness of prevention and control strategies can be assessed on a regular basis.

- Ensure the involvement of all parties having a direct interest in reducing lead exposure, including government agencies, large and small industries, organized labor, health care providers, and community groups.

The hemispheric conference *Preventing Lead Poisoning in the Americas: Health, Environment, and Sustainable Development* (Santiago, Chile, 1998 <www.globalleadnet.org/pubs>) set forth recommendations to strengthen community right-to-know activities to give the public information about the harmful effects of products containing lead; monitor and control products containing lead as part of regional efforts to establish a Free Trade Area of the Americas; and establish and enforce protective standards to limit lead exposure. The Alliance to End Childhood Lead Poisoning's Global Lead Network advocates that progress on lead poisoning prevention be included in indicator programs, which are becoming an important tool for measuring achievement of environmental protection and sustainable development. This would provide a means for non-governmental organizations to hold policy makers accountable for implementing commitments on phase-out and environmental source control.

Consumer Product Safety

- Adopt injury prevention as an overall goal of your organization or community: Then set a specific, achievable goal in one area. For example, inform and educate new and expectant parents and child care providers about how they can reduce the risk of SIDS; use CPSC's safety information or hold one or more baby safety showers. When you meet that goal, set another one.
- Network widely with other organizations: local, state, federal (such as CPSC and EPA), and private (such as the National Safety Council and SAFE KIDS) that are concerned about safety. Find out what resources they offer information, expertise, programs, publications and other materials, money that could help you achieve your goal.
- Develop partnerships with other organizations to help you achieve your goal. A partner may be obvious, such as the local office of a national safety group or the local health department; less obvious, such as a religious organization; or an organization with no stated or obvious interest in safety, such as a union or a retailer. Don't limit yourself to one partner in achieving your goal.
- Use grassroots programs to help you achieve your goal and adapt them to suit your circumstances. Because they involve more people working together at the local level, grassroots programs can increase the likelihood of achieving your goal and reducing preventable injuries and deaths in your community.

Hispanic Farm Children and Pesticides

- EPA has proposed updated guidelines for assessing the risks of cancer-causing substances. It has also recently issued guidelines for assessing potential neurotoxic effects in humans.
- EPA is expanding its research program on pesticides in children. Scientists are surveying children's exposures to pesticides through air, water, food and in house dust in schools, day care facilities, and other places children may encounter pesticides. Researchers are studying activity patterns and examining how the health effects of pesticides differ for children and adults. They are especially interested in how pesticide effects differ at critical periods of neurological and immunological development.

POTENTIAL ACTIONS INTERNATIONAL HISPANIC WORKER'S HEALTH ISSUES

Agricultural Industry

The following approaches can be taken to improve the health and safety status of agricultural workers, and particularly Hispanic workers, in the Americas:

- **Make Structural Changes to the Labor Force:** Provide adequate minimum wage; improve housing; promote the right of farm workers to organize labor unions and engage in collective bargaining; assure workers right to know what chemicals and other hazards are used at work; strengthen legal protection against premature re-entry onto fields sprayed with pesticides; ban pesticides that are known carcinogens, reproductive toxicants or neurological toxicants; and promote transition from toxic pesticides to sustainable pest control methods.
- **Establish a National Policy on Agricultural Health and Safety:** Each country should have a national policy that addresses the protection of its workers and includes preventive measures to minimize or eliminate hazards. Consideration should be given to the environmental impact of agricultural policies and support given to a primary health care and public health system. The national policy should include appropriate compensation plans for agricultural worker illness and injury, with a component for rehabilitation services. Also, there needs to be support for an improved system of monitoring occupational injuries and illnesses. Support for an adequate enforcement and inspection system is very important. A national policy also needs to include a sustainable approach to agriculture that stresses safer pesticide use, the use of integrated pest management practices, protection of the environment, and the assurance of agricultural worker occupational health and safety.
- **Endorse Safer Pesticide Use in Agriculture:** National agricultural policies should support: the development of less toxic pesticides; the use of safer pesticide formulations; the use of safer application techniques; the development of adequate toxicity testing and risk assessment; and the development of suitable exposure and biological monitoring techniques to assess impact on humans and the environment. In addition, national agricultural policies should: support training and supervision for pesticide application; require certification and training of pesticide applicators; restrict the sale of highly toxic products; promote proper health risk management and health surveillance at the work site; educate pesticide users; train workers on pesticide hazards, safe work practices and personal protective equipment use; and plan for pesticide medical emergencies.
- **Develop Collaboration Among Stakeholders:** There are numerous examples of cross-national public health initiatives that address international occupational health issues. These initiatives deal with: training health care providers, health and safety professionals, workers and farmers; providing technical assistance regarding health care delivery and preventive technology; providing collaboration on research projects; and facilitating information exchanges and education campaigns. There is a need for collaboration among all the stakeholders and affected groups in tackling the issue of occupational health and safety among agricultural workers. The occupational health and safety professionals, grower and farm worker representatives, governmental officials and other non-governmental groups from all countries of the Americas need to come together to discuss issues of common interest and formulate actions plans and national policies.

The Informal Sector

There have been several case studies and international meetings on the issue of social security and social protection for the informal sector (including, inter alia, Tockman, Mesa-Lago, Urmeneta, and PAHO-ILO). Such attempts have been even more limited when dealing with the informal sector in the area of health promotion and protection, and they have traditionally not been developed with a comprehensive strategy. Hence, the protection of the health and welfare of informal sector workers is a challenge which should be faced with an integrated approach to health promotion, social protection, and quality employment creation and, therefore, has to be part of a strategy to improve the basic living conditions of the urban poor.