Improving social protection for sanitation workers in Bangladesh
Introduction

Sanitation workers play a key role in keeping the environment clean and protecting human health. They empty septic tanks and pits, unblock clogged sewer lines and maintenance holes, clean dry latrines and drains, and perform various operations at the treatment sites. The safety and wellbeing of sanitation workers is paramount to achieve safely managed sanitation by 2030, under the Sustainable Development Goal (SDG) 6 on clean water and sanitation, and specifically target 6.2, which requires human waste to be safely managed along the entire sanitation chain. In Bangladesh, as in other countries in South Asia, social stigma attached to sanitation professions is common as it is considered to be polluted work. Sanitation workers face poor working conditions and social exclusion, stand on the lowest ladder of the social hierarchy and are paid poorly for their services. They suffer from frequent occupational health hazards impacting their incomes and health, such as sometimes fatal injury, without significant compensatory support. There is a high level of informality in their work, including short-term contracts, daily wages and even ghost employment, which increases the precarious situation of sanitation workers, with unstable income and limited legal and social protection. Well-designed and targeted social security schemes for sanitation workers can help to build resilience, enhance productivity, ensure decent jobs, and end intergenerational poverty and deeply entrenched social exclusion. In this context, a study was conducted on access to social protection by sanitation workers in Bangladesh to identify the barriers they face and to provide practical recommendations.1

Methodology

The research methodology is aligned with the National Social Security Strategy’s lifecycle framework, which includes five life stages (pregnancy and early childhood, school age, youth age, working age and old age). The framework helped assess the risks and vulnerabilities faced by sanitation workers at each stage of the lifecycle and traced schemes that could be applicable. The study then assessed the accessibility of these schemes for sanitation workers.

A total of 144 households were selected (approximately 30 households per target location based on random sampling), with interactions held to understand the household profile, working conditions, access to schemes and challenges faced by sanitation workers in two

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1 The study was carried out by Murad Bin Aziz (Lead Consultant), Atiqur Rahman and Trisandha Rani Dey (Field Researcher) for WaterAid. The policy brief is finalised by WaterAid based on the findings of the study.
Findings on access to social protection schemes

In Bangladesh, social protection is mandated by Article 15(d) of the constitution. There is no targeted social protection scheme designed specifically for sanitation workers or their families, however, various social protection schemes exist for the general population, which are also applicable to sanitation workers. There are several types of targeted, non-contributory social assistance schemes which are mostly linked with direct cash transfers or food coupons/rations. Most of these schemes are not universal. Contributory social protection schemes, such as health and life insurance, retirement benefits and pensions are only applicable to those formally employed. The various schemes applicable to sanitation workers at different life stages are shown in Table 1. Communities identified ‘working age’ as the most vulnerable life stage requiring social protection, followed by pregnancy and early childhood.

**Non-contributory schemes**
Sanitation workers and their families are eligible for various non-contributory social schemes across the various lifecycle stages, such as school stipends, adolescent girl stipends, child disability allowance, old age allowance, Vulnerable Women's Benefits and cash transfers (workfare-based). However, only 31% of widows of sanitation workers reported accessing the widow's allowance scheme; nine per cent of households reported having access to child benefits; 26% of older sanitation workers reported having access to old age allowances; 46% of children were reported to have access to a school stipend, although only five per cent of girls could access the adolescent girl's stipend scheme.
Findings on barriers to accessing social protection

Contributory schemes
Sanitation workers employed by city corporations and municipalities are entitled to health, maternity allowance and death insurance benefits. In Chittagong, informal workers benefited from retirement packages designed for informal workers supported by the Mayor’s Fund.

The insurance policy is not yet institutionalised at the national level or within LGIs. There are some pilot projects providing insurance to sanitation workers that are led by NGOs, such as Practical Action and WaterAid, in collaboration with insurance companies. These pilots offer discounted costs for medical facilities (under participating private clinics of insurance companies), however, these remain much more expensive than those available at government operated hospitals and NGO clinics.

Increasing Informality
Informal arrangements for sanitation workers are increasing due to privatisation of services. Sanitation workers are employed in the public and private sectors, but employment arrangements increasingly consist of a sub-contracting chain, leaving the workers vulnerable with unstable and irregular wage employment. The vast majority of sanitation workers are temporarily hired by households or on informal terms by public and private institutions. Those who are employed in city corporations and municipalities are registered in a muster roll and become regular informal sanitation workers. Although they are given uniforms and ID cards, wages are calculated on a
‘per-day’ basis and they are paid monthly. They are not entitled to any regular government benefits, therefore, if any sanitation worker is sick or injured, or if women sanitation workers take pregnancy leave, they are replaced without benefits or leave for the short period until they are able to return to work. Their replacement is arranged on informal terms with the respective sanitation worker during their leave, and the wage shared between the absent worker and their replacement. In all five study areas in Bangladesh, sanitation workers wanted to become permanent staff in the city corporation or municipality. Their fear of risking any job security and their lack of skills prevented them moving into other professions. These informal working arrangements, which increase with privatisation, erode their social protection benefits.

**Caste-based social stigma, gender and marginalisation:**
Sanitation workers come from specific castes and ethnicities, which are considered to be low in the social hierarchy. They also face the social stigma attached to their profession seen as ‘polluting work.’ The social isolation faced by sanitation workers also impacts on their communication and the ability to approach relevant authorities to access various schemes. The study team identified two ethnic groups, the Hela and Horizon scheduled castes working in the profession. The Horizon caste has been engaged in sanitation for a longer period than the Hela caste, who are ultra-poor Muslims and new arrivals in this sector. Intersectionality of gender with caste further hinders access as many social security schemes, such as educational stipends, child benefits, widow’s allowance and skill development programmes, are targeted towards women. However, women sanitation workers or women from the families of sanitation workers face social stigma and constraints related to information access and the mobility to pursue an application. Furthermore, there were no women leaders in sanitation in the study area. Most women in sanitation or wives of sanitation workers reporting access to antenatal checkups and delivery of babies in hospitals did not have access to the maternity health voucher scheme or maternity leave.

**Lack of awareness of schemes**
Sanitation workers reported a lack of awareness of the various schemes, and neither do they know about eligibility criteria, application processes and documents required to access these. The citizen’s charter is displayed in the respective offices to inform about social protection, although this has limited impact. There is no comprehensive list of eligible social protection schemes displayed in LGI offices. Although there are grievance boxes in these offices and in relevant safety net regulatory offices, sanitation workers do not know how to use them to file complaints.

**Poor identification and selection of beneficiaries and exclusion of sanitation workers**
In Bangladesh, the reform process as envisaged in the National Social Security Strategy is yet to be fully operationalised. As household profiling in the single registry system is yet to be completed, the directorate of social security schemes solicits lists of beneficiaries from ward councillors of city corporations and municipalities who verify these data based on household surveys from the Statistics and Informatics Division. This process of targeting beneficiaries excludes many, including sanitation workers. Furthermore, schools operated by NGOs and the private sector are not eligible to nominate students for stipends. Similarly, migrant sanitation workers who have come from other districts are ineligible to access the safety net programmes of the district where they are employed.

**Ghost employment**
Workers reported anonymously working for other more influential workers who are on the municipality roll, although they do not carry out
the work themselves. Rather, the work is done by these vulnerable workers on low wages, while they take their commission. Ghost employment impacts access to social security schemes provided institutionally.

Unclear government roles and responsibilities
In the absence of a comprehensive database at local government level, the ward councillor defines the selection process. The district office of the social welfare and women-child welfare department, directly communicates with ward councillors regarding the implementation of their respective social safety net programmes. The conservancy officers in local government are in charge of the supervision and welfare of sanitation workers, although the relevant central departments engage directly with ward counsellors, thereby diluting the role of local government (conservancy officers) in social protection governance.

Recommendations

1. Improve employment security and the formalisation of sanitation workers

   • National government, specifically ministries dealing with labour, employment and social justice, should reform and enforce labour regulations and provide support for the formalisation of informal sanitation workers. This will result in municipal authorities and companies employing sanitation workers on a long-term basis and ensure their access to social protection benefits related to pensions, maternity leave, insurance etc.

   • Municipal corporations should enumerate and register all sanitation workers, including formal and informal workers, keep an up-to-date database, include sanitation workers in social security schemes, provide occupational safety training and deter ghost employment. There should be a comprehensive citizen’s charter for sanitation workers, including the identification of vulnerabilities at each stage of the lifecycle and applicable schemes.

2. Maximise access to existing schemes

   • The national government, departments and authorities responsible for managing various schemes should identify appropriate eligibility criteria that facilitate inclusion of sanitation workers for the existing targeted schemes.

   • National government and local authorities should disseminate information on social protection widely and simplify the application procedures, so that low-income groups including sanitation workers are encouraged to apply. With support from municipal governments, and civil society organisations, they should also build the capacity of sanitation workers to apply and to use available grievance mechanisms.
3. Initiate new schemes to improve safety and compensate for work-related risks

- Insurance regulatory bodies and ministries dealing with social justice, labour and employment should expand or complement the contributory schemes (medical assistance, life insurance and pensions) to cover both formal and informal workers. They should develop mechanisms to finance these schemes, which relieve some of the burden on sanitation workers, for instance by ensuring partial payment of premiums by respective municipal corporations, boards and companies or through the national or local government.

- Municipal corporations, urban bodies and the private sector should allocate resources for specific grants for all formal and informal registered sanitation workers, such as a ‘risk and hardship allowance’ or ‘PPE allowance’.

It is important that these recommendations to strengthen social protection are not implemented in isolation, but as part of a wider set of measures to protect the rights of sanitation workers, and in particular, those aimed at ensuring their health and safety (indirectly reducing their need to use social security schemes) and those promoting OHS training, creating local Emergency Response Units to rapidly assist in times of physical or social crisis. It is also important to eliminate intergenerational exclusion and stigma, by providing children of sanitation workers, especially girls, with educational stipends and scholarships for postgraduate or higher degree courses; reserving public and private jobs for discriminated castes engaged in the sanitation profession; and educating people against discrimination due to caste, ethnicity, profession or religion.

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