

Risk and vulnerability of sanitation and waste workers during COVID-19 pandemic



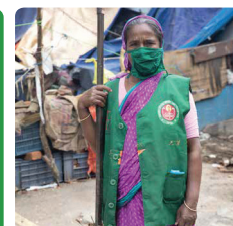
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Overview



Sanitation and waste workers in Bangladesh are generally marginalised, living in congested colonies, slums or informal settlements with limited access to basic services. Lower caste and religious minorities are more likely to engage in collecting garbage and cleaning toilets, emptying pits and septic tanks, often face social exclusion and rampant discrimination. These workers face a greater risk of infection, injury and death, and hardly have insurance coverage or access to health services. Given the nature of their work and living conditions, the waste workers are at a higher risk of contracting COVID-19 as they are exposed to a large population and little possible to maintain physical distancing than other occupations. In the overwhelming demands during the pandemic, it is important that waste worker's rights to health, safety and dignity should not be overlooked and their voice gets heard.

Objectives



- To understand the knowledge, practices and concerns of sanitation and waste workers in the COVID-19 pandemic.
- To find out the gaps and come up with recommendations to improve the health and safety of waste workers.

Methodology



A total of 123 sanitation and waste workers from five major cities of Bangladesh – Dhaka, Chattogram, Khulna, Rangpur and Rajshahi were interviewed for the study. Additionally, 15 employers of both public and private sector entities were interviewed to understand whether they are aware of the risk and vulnerability of the workers, the provision of support and to know about the future to improve the health and safety of the workers. Around 51% of non-medical waste workers were interviewed for the study. At least 11% of medical cleaners responded whereas 24% of non-medical cleaners were interviewed. Also, 14% of medical waste workers responded to the study.



Major findings



Access to water and sanitation services:

Most of the waste workers share water points, which are usually unimproved and accessed illegally.

- 30% workers share a water point with over 100 users
- 11% workers share a water point with over 300 people
- In 60% cases, one toilet chamber is used by an average 25 people
- In 15% cases, one toilet chamber is used by an average 50 people

Employment and income:

Most workers have a long-term employment contracts and receive a monthly salary. The remaining workers are contracted on a daily basis, and do not get any payment if they are absent or are not called for work on any particular day

- 89% workers receive a monthly salary
- 90% workers receive a monthly income of less than \$250

Access to information, knowledge and practice:

All the waste workers had already heard about COVID-19 or coronavirus. Access to electronic media is widespread amongst respondents. 85% of workers heard about this deadly virus from radio and television. Word of mouth is reported as a common way of receiving information about the virus.

Knowledge about personal safety:

Almost 87% respondents mentioned that the use of masks can keep them protected followed by 69% mentioning frequent washing of hands with soap. Maintaining social distance was mentioned by 41% and 14% respondents maintaining distance with a COVID-19 patient. 37% workers do not know where to go for testing if they have

symptoms, or how to access treatment if they show symptoms or test positive.

Practice of safety measures

97% non-medical workers use some kind of safety materials during work. 100% of workers work in hospital use safety materials during work. 48% workers do not feel comfortable using safety materials

Hygiene Practice at work:

69% wash their hands with soap and water when they are at work . Only 22% of all waste workers do not clean hand after removing safety gear at work

Use of masks:

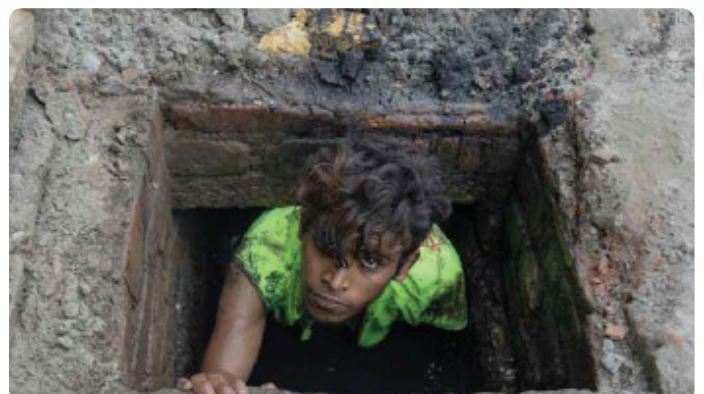
97% of sanitation and waste workers mentioned that they use masks while they are at work, out of which 79% of workers use reusable masks and 18% use disposable masks. The use of disposable masks is much higher (54%) among cleaners who work at different hospitals. Surprisingly, compared to other categories, the prevalence of non-use of mask (8%) is also higher among this category.

Suppliers of safety gears:

The study shows that half of the waste worker (50%) self-purchased safety gears.

Training received:

Most workers know about basic precautionary measures while few received any focused training on COVID-19. Only 3.25% of workers reported receiving any kind of training on health and safety issues. These are mainly the waste workers engaged in medical waste management or cleaning workers working in hospitals.



Conclusion



The study reports highlight that the knowledge gap persists among the sanitation and waste workers about the use of safety gear and managing it. It is important to provide training to the waste workers about handling safety measures properly. Different stakeholders should work together in a coordinated manner under the leadership of the relevant government department to bring a change in the existing scenario which not only risks the life of the workers but also remains a major source of further spread of the virus.



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