

## ANSWERS FROM BELIZE

### GUIDING QUESTIONS

#### **Theme 1- Promotion of safety and health in the workplace and worker protection: guaranteeing decent work**

- 1 Is there a national policy on OHS in your country in line with ILO Conventions 155 and 187? Is there a national strategy/plan of action on OHS in your country? What are the strengths, challenges and lessons learned of their design, implementation, and enforcement?

#### ANSWER

The National OSH policy was developed and approved by the Government of Belize (GOB) in 2003. Simultaneously a national strategy and action plan was forged by the then National Occupational Safety and Health Committee (NOSHC); and a proposed OSH Act developed. However, to date the draft OSH Act has still not been approved by government.

**Strengths:** The policy plan and legislation was designed by a committee that was tri-partite in nature and included special interest groups such as the Belize Pesticide Control Board, Belize Social Security Board (BSSB), PAHO Belize, Department Of Environment, Public Health Department, Belize Sugar Industries, Banana Growers Association, Citrus Products of Belize Limited, Association of Petroleum Importers, Belize Electricity Limited, and followed formats found in Guyana and Canada.

The design of our National Plan of Action was later copied by a regional group of Caribbean Countries, namely Barbados, Antigua and Barbuda, and St. Vincent, and Dominica that was part of an OAS Development Program for these countries.

**Challenges:** The major challenge is political will. The movement from the stage of development, to legislation, to implementation and enforcement.

**Lessons Learnt:** I would believe one of the major lessons learn is the engagement of the general public. It was two fold. One, the public involvement is key to the later acceptance of the policy, and secondly there needs to be innovative ways of engaging the public as they generally view the effort as one that will soon be 'swept under the carpet' because it was spear headed by a government department.

**Implementation and Enforcement:** At present the country has a policy and a plan of action but no OSH legislation therefore, we are focusing on efforts such as training and conformity instead of compliance. Training continues locally and internationally and several companies in key industries have voluntarily developed their OSH program for their workplace and others are now indicating that they intend to develop theirs.

- 2 Were situational analyses and/or country profiles used in developing OHS policies/plans of actions and how were they used?

#### ANSWER

Our project was funded and monitored through a Central American Program called

FUNDACERSSO. Through this program Dr. Shal Gewurtz was hired to guide us through the development of the policy and proposed legislation. Situational analyses were conducted using statistics (such as those from the Belize Social Security Board) and broad consultations were held with employers, workers and the general public. These consultations were done in every city and major town in the country.

- 3 Have actions on OHS at the national level (e.g. legislation, policies and programs, technical and promotional activities and training) used existing international guidelines from the ILO, PAHO/WHO or other, as a reference? Please provide examples.

#### ANSWER

All our programs policies and draft legislation followed ILO's guidelines. The development execution had full tripartite involvement and also always included other relevant stakeholders. The steps taken in both OSH and HIV/Aids in the Workplace are: a) situational analyses b) consultations c) training d) policy/legislation formation.

- 4 Are you aware of the commitment assumed by ILO member States to comply with decent work in the context of OHS, as outlined in the *Hemispheric Agenda for the Americas 2006-2015*? What are some of the decent work indicators related to OHS that are currently implemented at the country level? How are these indicators evaluating OHS actions and their contribution to policy development?

#### ANSWER

Yes, Belize has committed to the decent work agenda. The department is presently undergoing consultations with the social partners to identify the country's three priority areas. We had a late start because of the change of government and thus a change of key personnel. However, although there is not a set plan specifically for decent work, there is constant activities by the department to engage the interested parties. We continue to conduct social and safety inspections, exercises are underway to amend and develop legislations, and the social partners are constantly engaged in social dialogue.

- 5 Within your country, is there coordination among various Ministries to implement OHS interventions and policies? Is there an institutional mechanism for inter-Ministerial coordination to take place? What are the strengths and challenges of coordination?

#### ANSWER

The coordination among the various ministries is spearheaded by the Ministry of Labour (MOL), through the National Occupational Safety and Health Committee, whom sits as chair of this committee. Ministries represented on this committee are as follows: Ministry of Health, Ministry of Environment, Ministry of Agriculture, Ministry of Human Development, Ministry of Tourism and The National Fire Service.

**Strengths and Challenges:** The major strength of the inter-ministry coordination is that the program has commitment from the highest levels of the Ministry of Labour. The Chief Executive Officer of the MOL is the person who sits as the Chair of the NOSHC.

- 6 How have employers, workers and their representatives participated in the definition, implementation and/or evaluation of OHS policies?

#### ANSWER

As mentioned before all efforts have had full tri-partite involvement. This we believe gave strength to the design and development of the National Policy, National Action Plan and Proposed Legislation.

- 7 What successful experiences demonstrate the commitment of employers, workers and their representatives to enhance OHS in the workplace? This may include their participation in national tripartite bodies dealing with this issue, such as OHS National Councils, as well as committees in the workplace and initiatives that promote healthy workplaces.

#### ANSWER

The involvement of the stakeholders in the various programs has resulted in approximately six of the largest employers in Belize voluntarily developed Workplace OSH Programs. Other results could be seen as the number of workers being proponents of OSH have grown and their training and studies have intensified.

To add to the success the Belize Social Security Board recognizing the need for pro-active actions and has created an OSH inspectorate to encourage conformity.

In collaboration with:

### **Theme 2 - Expansion and strengthening of schemes to prevent and control occupational hazards**

- 1 Describe effective programs and occupational health services in your country designed to prevent and control work-related injuries and diseases. Have these programs been expanded or strengthened during the last 5 years?

#### ANSWER

The Labour Department has continued to lobby companies to provide health services for their employees and through the NOSHC has lobbied the Social Security Board to possibly set up an occupational health hospital or clinic. To date we have been unsuccessful with the establishment of either but we are hopeful that with the passage of the OSH ACT it will become a reality.

- 2 What is the role of information systems in these preventative interventions? How effective are they in providing accurate information that allows for the monitoring and assessment of the interventions?

#### ANSWER

The only Information system that is geared towards collecting occupational health related information is that of the Social Security Board. The Ministry of Health has an information system but they are not focused on occupational diseases and injury. As it is, we are unable to say that the physicians in Belize are trained to focus on occupational injuries or illnesses.

In terms of interventions, it can be said that the information collected by the Social Security Board is being used to convince the parliamentarians that there is a dire need to pass the OSH ACT and related regulations and establish a well equipped osh inspectorate.

- 3 Which institution(s) have OHS information systems in your country? Do they share or coordinate the exchange of information? What are the characteristics of OHS information systems in your country? Do they focus on work-related injuries, diseases or both? What are the strengths and challenges of the systems?

#### ANSWERS

As mentioned above, BSSB is the only agency that collects OSH information. This information is shared publicly and is focused mainly on injuries than on illnesses. The strength of the system is that it collects shows directly what is the cost to our national insurance scheme and is an indicator of the man-hours lost by companies. However, it has two major weaknesses; 1) being that it may grossly understate the seriousness of the situation as it relates to injuries as only those injuries that is classified by a physician as OSH related, and later claimed by the insured person, is recorded in this system. 2) the information lacks data about OSH illnesses.

- 4 How is labor inspection helping strengthen a culture of prevention and control of occupational hazards in your country?

#### ANSWER

Labour inspection is presently insuring that those health and safety issues that are covered by present legislations are enforced and additionally the inspections are used as a means of educating both employers and workers on improving certain practices.

- 5 How can the quality and sustainability of information systems be maximized for the use in OHS interventions and programs?

#### ANSWERS

A sustainable information system would help identify the areas of priority for training, intervention, and enforcement.

### **Theme 3- HIV/AIDS in the workplace**

- 1 Is there a specific legislation, policy or strategy in your country that addresses the issue of HIV/AIDS in the workplace?

#### ANSWER

There is a National Workplace Policy on HIV/AIDS; this was accepted by the Cabinet in December 2005. The country is currently in the process of developing a legal frame work for the drafting of a Discrimination Act which would be HIV/DIS driven and would effect the amendment of several pieces of national legislation.

The Ministry of Labour is the agency responsible for the workplace response to HIV/AIDS and currently utilizes the workplace strategy developed by the ILO to deal with the workplaces. The strategy entails providing workplaces with preventative education and assistance in voluntarily developing their workplace policies.

- 2 If so,

- how was it designed? Was it based on a diagnostic of the labor, social and economic conditions of people living with HIV/AIDS? Is it a national or a sectoral response? Has it been agreed upon by various sectors, public and private institutions?

#### ANSWER

The Ministry of Labour participated in the ILO HIV/AIDS Workplace Education Project 2003 - 2006; along with Guyana. Through this participation the National Workplace Policy was developed by a local consultant. The design of the policy was based on the ILO Code of Practice and the WHO Guidelines. The process utilized to develop this policy included a mapping exercise to access national workplace information. The response to HIV/AIDS in Belize is multi-sectoral; likewise the ILO project had a multi-sectoral/tripartite Project Advisory board which assisted in the management of the project. Hence, national consultations of all stakeholders including public sector, private sector and Persons Living with HIV/AIDS were conducted during the process of the policy development. (Additional information on Belize participation with the ILO Project can be found on the ILOAIDS web page. The programme continues to be very active and successful).

- how is it being implemented? Are there any programs directly implemented by employers, workers and their representatives, or are they just participating through the national policy or strategy?

#### ANSWER

The policy is being implemented by the Ministry of Labour with assistance from the National Trade Union Congress and the Belize Chamber of Commerce and Industry. Through the Ministry of Labour HIV/AIDS Workplace Education Program; individual work places receive assistance in the training of key persons/committee's; a section of this training targets policy/programme development and implementation. After this training the participants return to their individual companies to implement their own programs.

- Are there any mechanisms in place to measure the cost effectiveness of interventions in the workplace that respond to HIV/AIDS?

#### ANSWER

Baseline information and final assessment data from the ILO Project is used as a measure of cost effectiveness. Information from individual participating companies is also utilized. As a cost saving measure the length of the education initiatives have been reduced and the process "fast tracked". This method of "fast tracking" as a cost effectiveness measure is also currently employed by the ILO with countries such as Suriname who were not participants in the first or second wave of countries in the project. The entire programme is cost effective as many of the materials utilized were developed under the ILO Project and have been tested and proven adequate for use in the workplaces.

- 3 How are the *ILO Code of Practice on HIV/ AIDS and the World of Work* and the *ILO/WHO Guidelines on HIV/AIDS* currently implemented in your country?

#### ANSWER

As mentioned previously; the National Workplace Policy was developed by adopting the ILO Code of practice and the ILO/WHO Guidelines on HIV/AIDS. Therefore; both the Code and the Guidelines are implemented through the National Workplace policy. Despite this almost identical adaptation; the National Workplace Policy is always discussed/presented to stakeholder/companies along with the Code and the Guidelines.

- 4 What are some of the challenges that your organization/country have faced in implementing the aforementioned Code and Guidelines? What are potential solutions to address these challenges?

#### ANSWER

The major challenge is that the Code and the Guidelines are not conventions and therefore are not viewed as legally binding. Similarly, the National Policy is not law. The absence of national legislation and an international legally binding document is one of the greatest hindrances to successful implementation.

- 5 In your experience, what are some effective interventions to reduce discrimination/stigmatization in the workplace for people living with HIV/AIDS?

#### ANSWER

One of the most successful interventions has been the development and implementation of a Behaviour Change Communication Strategy (BCC). BCC goes beyond basic sensitization; it is aimed at personalizing the issue of HIV/AIDS allowing persons to view themselves in the situation and provides a better understanding of how stigma and discrimination hurts. For example; two local interventions include a session titled "Until I Know for Sure" which shows a professional person contracting HIV. We also use the "wildfire exercise". These exercises are not conducted in isolation; a number of educational presentations accompany them.

- 6 In your experience, what are some effective preventative interventions to protect workers at elevated risk of contracting HIV/AIDS due to the nature of their work?

#### ANSWER

One intervention which could be identified is one employed by the local electric company. This company was a participant under the ILO Project and they developed several BCC materials for their staff. The staff included Lines Men who were extremely mobile and were exposed to high risk of HIV infections given their mobility both within and outside the country. Through their workplace programme, the company developed posters, conducted education sessions, distributed condoms, and organized family oriented events where the message on HIV was prominent. The company also encouraged voluntary counseling and testing both on site and away from the workplace. This intervention through BCC proved very successful to the point that some of the staff even participated in a National television add aimed at emphasizing that a worker's HIV status is not a criteria for success in the workplace.

- 7 In your experience, what are some effective interventions to prevent HIV/AIDS in the workplace and to promote healthy workplaces in relation to HIV/AIDS?

#### Answers

The local electricity has a major occupational safety and health; they have an existing OSH committee. This made it very easy to incorporate HIV and AIDS into its company safety perspective. In an effort to promote a healthy workplace they integrated HIV and AIDS into

health presentations; safety fairs and even workplace activities such as dance and banquets held during the Valentine season. Some of the methods used to get the preventative message across were very subtle but effective. For example; during the Valentine dance the decorations included red ribbons with different HIV messages like “use a condom every time”; “stick to one uninfected partner” and “safety at work and play”.