

ORIGINAL RESEARCH

Occupational Safety and Health in Venezuela

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Abstract

INTRODUCTION Venezuela has pioneered a preventive-focused and comprehensive movement for Occupational Safety and Health (OSH) in Latin America. However, despite being an oil-rich country, it has some of the lowest salaries for their workers and highest levels of hyperinflation, devaluation, crime, and violence of the world.

OBJECTIVES Review the current status and challenges on relevant aspects of OSH in Venezuela.

METHODS Review of literature and documents from national governments, UN agencies, NGOs, and the Venezuelan government concerning OSH and related topics since 1986.

RESULTS Reformed in 2005, the Organic Law on Prevention, Conditions and Environment (LOPCY-MAT) was a fundamental moment of change for OSH. Factors which have impacted OSH the strongest are (i) the creation of the National Institute of Occupational Safety and Health (INPSASEL) and (ii) the socioeconomic crisis Venezuela is going through.

Venezuela's laws are innovative and yet non-compliance is enormous. Almost half of the population works in the informal sector. Following the International Labor Office projections, 5 people die per day in Venezuela due to occupational accidents or diseases, making health and safety at work a luxury rather than a right. The quality of life for the average worker has deteriorated, affecting not only health but the overall well-being of all Venezuelans. The political and socio-economic situation has led to a mass exodus of more than 1.6 million highly qualified and talented professionals. Many statistics concerning OSH are not updated and are unreliable regarding occupational accidents and diseases.

CONCLUSIONS There is a substantial difference between what is written to protect individual Venezuelans in the workplace and the reality of workplace conditions. Substantial governmental actions are needed in the immediate future to improve occupational safety and health of Venezuelan workers.

KEY WORDS occupational medicine, occupational health, social security, Venezuela

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INTRODUCTION

Workers represent half of the world's population and are the major contributors to the economic and social development of a contemporary global society.^{1,2} Usually "oil countries" are considered wealthy because oil is one of the most profitable

businesses in the world. Venezuela has the world's largest oil reserves and has been one of the world's leading exporters of oil and activities related with oil and other minerals; however, fewer than 2% of the workers are employed by these industries.³ Venezuela may be considered a privileged country in terms of oil, minerals, water, diamonds, gold,

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aluminum, and other natural resources, but the paradox is that at least 48% of its population live in extreme poor conditions.⁴ Unfortunately, with the dropping price of oil and increased social, economic, and political instability in 2014, Venezuela entered an economic recession.⁵ In addition, the country's internal turmoil is evident in the extraordinarily high body count statistics for the decade preceding this economic decline, with the 2014 alone surpassing 24,980 deaths and a rate of 82 murders per 100,000 people.⁶ These numbers mimic that of the Iraq War and at some points surpass them, even though the population is in peacetime.⁷ These numbers make Venezuela the second highest in the world for homicides.⁸ The declining economy and increasingly dangerous environments have significantly decreased the quality of life for Venezuelan workers and their families to the point where not even the workplace is exempt from becoming a crime scene. Based on a university study, the troubled population and overall negative situation in Venezuela has led to a migration of an estimated 1.6 million Venezuelans since 1999; however, official statistics have not been published.⁹

As is well known, the health of the workers is determined by a number of factors, including hazards in the working environment, social factors, individual behaviors, and access to health services.¹⁰ All these factors and risks are easier to control in the formal economy. Unfortunately, large portions of the working population are part of the informal workforce and therefore excluded from a number of social security rights. Many work in extremely hazardous conditions that are physically demanding and adversely affect their health.¹¹

This article is a snapshot of what occupational safety and health (OSH) in Venezuela looks like today. Many of the socioeconomic factors, legislation, regulations, health system, education system, training, and research that affect OSH in Venezuela are discussed for their impact on the field at present and prospectively in the future. Ultimately we shed light on the difference between Venezuela's attempts to improve the occupational health (OH) standards for the country's workers and the current reality of unsafe working conditions.

CHARACTERISTICS OF THE BOLIVARIAN REPUBLIC OF VENEZUELA

The current Venezuelan population makes up approximately 30 million people of whom 49.8% are males and 50.2% females.¹² The economically active population in January 2015 was 14.2 million

people and the working population was 13.1 million people (including informal economy), 61% males and 39% females. The unemployed population was 1,100,000, equivalent to 5.5% of the economically active population.¹³ According to PAHO, the life expectancy in Venezuela is estimated at 72 years for men and 80 years for women.¹⁴ Between 2001 and 2011 the rate of aging in the Venezuelan population has increased from 21.3% to 32.4%, representing the percentage of persons older than 59 years per 100 persons under 15 years.¹⁵ It has been confirmed that there is an overall decline in the crude birth rate over the last 15 years: in 2010 the rate per 1000 inhabitants was 24.6, and in 2015 the rate was dropped to 18.6.¹⁶ Between 1990 and 2000, the percentage of adults and elderly individuals in Venezuela increased by almost 17%.¹² All data indicate an aging working population and a potential problem in future.

By the end of 2008, the working population by economic sector was distributed as follows: commerce 37.9%; manufacturing 18.2%; hotels and restaurants 9.3%; transportation 8.1%; community services 7.5%; real estate 5.9%; construction 5.6%; health and social services 4.0%; education 2.8%; electricity, gas and water 0.8% (Fig. 1).¹⁷

In Venezuela there are 427,173 enterprises; 99.49% are medium and small enterprises (<100 workers), 75.5% have between 1–4 workers, and only 0.5% are large enterprises (>101 workers).¹⁷ At least 40.8% of the working population works in the informal sector.¹³ As previously stated, there is a total working population of 13.1 million people, and out of the formal sector 21% work in the public sector and 79% in the private sector.¹³ On the other hand, it is important to mention an example of the low salaries¹⁸ in Venezuela: a full-time university professor gets paid 7.854 bolívares per month, equivalent to \$37.70 (according

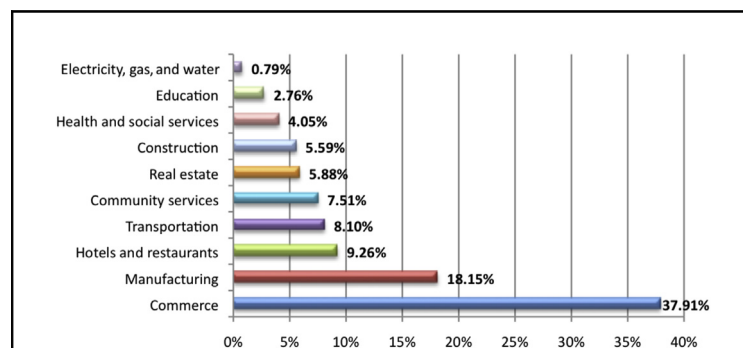


Figure 1. Worker population by economic sector. (Source: Chart translated by the author with numbers from the *Instituto Nacional de Estadísticas. IV Censo Económico 2007–2008.*¹⁷)

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