

# VISION ZERO FUND

Occupational Safety and Health Tool for Temporary and Seasonal Coffee Workers





The present document presents factors to be taken during application of the Occupational Safety and Health Tool for Temporary and Seasonal Coffee Workers by bodies that collect information and data on these workers, defined as those who perform occasional work associated with specific aspects of the production process. They may also perform this work on different coffee farms and in alternation with the farming of other crops.

The document describes the methodological aspects of application of the related survey, taking into account the limitations identified and recommendations made during the approval and modification process. It also includes a brief summary of the process of developing and approving the tool, carried out by the ILO's Vision Zero Fund project in Colombia, under the auspices of the European Union.

The document is based on the study entitled "Working and health conditions of temporary or seasonal coffee workers".

# Considerations with a view to implementation of the survey

The survey is implemented in three stages: (i) planning; (ii) execution; and (iii) outcome analysis. It is important to ensure the existence of tripartite forums for social dialogue at all three of these stages in order to report on its implementation and so that its outcomes can be approved.

# Stage 1: Planning

This stage of implementation will require the following steps:

- 1. Setting objectives
  - **a.** Establish a methodological framework for describing the people who perform temporary and seasonal work in the coffee sector.
- 2. Setting parameters and general activities

Fieldwork will require support, ideally from a research institution or stakeholder with influence in the coffee-growing region to be surveyed and with the capacity to perform the following tasks:

- **a.** develop the criteria for the fieldwork and for processing data with a view to implementation of the survey:
- review of the survey's language and format and adaptation to the local context;
- final determination of the areas in which it will be implemented;
- establishment of a sampling frame for the pilot survey and for implementation of the survey;
- identification of sampling estimators;<sup>2</sup>

<sup>1.</sup> Available at: <a href="https://www.ilo.org/lima/publicaciones/WCMS\_764244/lang--es/index.htm">https://www.ilo.org/lima/publicaciones/WCMS\_764244/lang--es/index.htm</a>.

<sup>2.</sup> Based on these estimators, it must be determined whether the sample will be representative. If for any reason (e.g. budgetary) the survey cannot be implemented in such a way that its outcomes are representative of the sector, this must be justified in the methodology and specified in the final document. While the outcomes may still be useful in informing programmes and policies, it must be borne in mind during their analysis and use that they are not representative and thus cannot provide a basis for extrapolation at the sectoral and/or national level.

- establishment of fieldwork criteria;
- development of an information analysis plan.

At this stage, it is important to take into account, among other factors, age, sex and country of origin so that the sample will reflect the diverse nature and situations of temporary and seasonal coffee workers.

- **b.** design the field operation:
- preparation of the capture system;
- training of the survey team;
- planning of fieldwork;
- collection of data;
- **c.** prepare a final report on the implementation outcomes of the survey of the OSH conditions of temporary and seasonal workers in the coffee sector:
- consolidation of the database;
- creation of data output tables;

- analysis of the information using the established data analysis plan;
- preparation of conclusions.

## Stage 2: Implementation

The survey should be implemented according to the established sample of temporary and seasonal coffee workers. This will entail quantitative research and the collection of data during the harvest season in the regions identified. It is recommended that the survey be implemented using an electronic device, such as a tablet, and that a field test - also known as a pilot test - be carried out in order to ensure clarity in the wording of questions and identify redundant ones, calculate application times, prepare for implementation of the instrument in the selected sample, determine whether the capacity-building/training provided to the survey team was effective, verify the quality and consistency of the data and specify the codification and statistical processing plan.

### Stage 3: Analysis

At this stage, the information gathered should be exported to a flat file for data cleaning. The method used to measure the study is described in Table 1.

Table 1. System for measurement of the study

Criterion	Description
Universe	Specify the coffee production regions in which the survey will be implemented.
Sampling unit	Temporary and seasonal coffee workers, i.e. people who perform occasional work and are involved in specific aspects of the production process
Sampling frame	Explain how the size of the sub-population of seasonal workers involved in the coffee harvest in the survey regions was determined.
Sample size	Specify the percentage of the surveys to be implemented on farms and at worker recruitment or selection locations, respectively.  Specify the maximum number of people to be surveyed at each recruitment location.  Specify the reliability of the sampling plan and the maximum permissible error (as a percentage).
Data source	The data source will be primary, i.e. temporary and seasonal coffee workers.
Data processing techniques	Descriptive statistics will be used to present the findings based on the data obtained. A multivariate analysis of the factors included in the three sections of the survey will be considered:  general demographic data social health determinants accidents and health problems.

# Procedure for developing the survey in Colombia

The first version of the survey was developed based on a review of existing national occupational safety and health (OSH) instruments and was implemented between July and October 2019. It was submitted for approval by experts in the coffee-growing sector and at a tripartite dialogue workshop organized by the Vision Zero Fund project. This dialogue revealed the need to modify the wording of the survey, reorganize the questions in order to avoid confusion between the subjects covered, and pilot-test the instrument in order to ensure its internal reliability. Based on these outcomes, a second version of the survey was developed and submitted for review by seven experts in the fields of public health, OSH and comprehensive management who had experience in the coffee-growing sector or in an academic environment, resulting in a third version of the instrument.

This process culminated in the pilot test, which led to changes in the language of the questions, measurement of the survey's application times and adjustment of the estimators to the sample sizes.

The survey was implemented with 625 temporary workers in the departments of Antioquia, Caldas and Risaralda (which, together, account for 31 per cent of the Colombia's production) during November and December 2019.

The following are some of the findings of the survey:

- The vast majority (95 per cent) of the temporary and seasonal coffee workers surveyed in the
  departments of Antioquia, Caldas and Risaralda were men with an average age of 44, an average level of education equivalent to primary school and an illiteracy rate (12 per cent) higher
  than the national average (5 per cent).
- The workers surveyed consider that they are in good health although they begin to have health
  problems associated with manual labour as they age. Seven out of ten believe that their overall
  health is good, very good or excellent. This is particularly true of workers under 30 years of age
  and tends to be less so among those over the age of 60.
- Their primary work involves growing, and particularly picking, coffee. Most of their work falls within the harvest season; during the remaining months they supplement their income with other agricultural or urban work (construction or trade).
- According to the workers surveyed, their primary risks are inherent in the work of picking: physical risk from exposure to ultraviolet radiation (the sun) (95 per cent); biological risk from insect and other animal bites (74 per cent); and biomechanical risk from long hours of standing, kneeling or squatting (83 per cent) and repetitive hand and arm movements (82 per cent).
- The reported accident rate was only 9 per cent: 7 per cent for minor accidents (superficial injuries, wounds, bruises, sprains and lacerations) and 2 per cent for serious accidents (broken bones, internal injuries and dislocations).
- Given the nature of the occupational hazards identified, the low reported accident rate may be explained by the fact that either the workers tend to minimize the seriousness of their accidents or, since most such occurrences are minor, do not define them as accidents.

• Although the workers surveyed reported many ailments associated with prolonged manual labour, the incidence of diseases is low; fewer than 10 per cent of them have been diagnosed with a disease. However, about 30 per cent of them have undiagnosed diseases, pain or complaints (neck, shoulder, collarbone, knee, shoulder, foot, hand or joint pain). Workers normally handle such illnesses and pain without drugs or with rest.

The study's findings demonstrate the importance of further research on and identification of the health and working conditions of temporary and seasonal workers and, on the basis of the outcomes, of developing programmes to improve their health and prevent illness in cooperation with bodies such as the Ministry of Labour, the Ministry of Health and Social Protection, the national healthcare services, the National Federation of Coffee Growers and other key stakeholders in the coffee value chain. These OSH strategies and intervention plans may also be shared with tripartite bodies such as the National Occupational Safety and Health Committee for the Agriculture Sector with a view to better compliance with OSH regulations.

A detailed description of the Colombia experience and its findings and recommendations is available at: Working and health conditions of temporary and seasonal coffee workers (ILO, 2020).<sup>3</sup>



# Survey on the health and working conditions of temporary and seasonal coffee workers

Purpose: To understand the health and working conditions associated with coffee production	
Date (day, month, year):	_Start time:
Confidentiality	
This work is the property of the ILO. It may not be shared, reproducten consent. Workers are free to decide whether to fill out this form. treated with absolute discretion.	
Do you authorize the use of your data for the aforementioned purpo	se? Yes / No
Signed:	_ c.c
i. Do you meet any of the following conditions?	
a. I am involved in the production of coffee.	Yes / No
b. I work on a discontinuous basis.	Yes / No
c. I work seasonally during harvests or when production increases.	Yes / No

# Section 1. General sociodemographic information

# A. Identification 2. Full name of the worker: 1. Place of residence 3. Sex a. Country: b. State: c. Municipality:

<b>4. Age:</b> years old
5. Country of birth
1. (country in which the survey is being conducted)
2. Another country:
6. In which state were you born?
6a. In which municipality were you born?
6b. How long ago did you arrive in the country in which the survey is being conducted?

7. How long ago did yo	ı arrive in	the	municip	a
lity?				

- 1. Less than 6 months ago
- 2. 6 months to a year ago
- 3. 1–3 years ago
- 4. 3-10 years ago
- 5. More than 10 years ago
- 6. I have always lived here.

# 8. Why did you come here?

- 1. In search of work
- 2. Family relocation
- 3. For the harvest
- 4. Forced displacement
- 5. Other: \_\_\_\_\_

# Section 2. Social health determinants

\_\_months

9. What is the highest level of education that you have completed?
1. None
2. Primary Last year successfully completed:
3. Secondary  Last year successfully completed:
4. Vocational training  Last year successfully completed:
5. University  Last year successfully completed:
6. Postgraduate Last year successfully completed:

10. Can you read?	Yes / No	
11. Can you write?	Yes / No	
11a. Can you use a computer?	Yes / No	
11b. Can you use a mobile phone?	Yes / No	
11c. Which of the following social media networks do you use often?		
a. Facebook	Yes / No	
b. WhatsApp	Yes / No	
c. Internet	Yes / No	
d. Another social network:	_Yes / No	
e. Text messaging	Yes / No	
f. None of the above	Yes / No	

12. What is your civil status?	17. Where o
1. Single	1. In my
2. Married	2. In a r
3. Domestic partnership	3. With
4. Separated/Divorced	4. In ho
5. Widow(er)	5. Othe
13. Describe your household (the people living with you):	18. Which o
1. A couple	a. Electr
2. A family consisting of parents and one or more children	b. Drink
3. A family consisting of one parent and one or more children	c. A sew d. A gas
4. An extended family, including parents, children, grandparents, uncles and aunts, cousins	e. Telep
and other relations by blood or marriage	f. Interr
5. I live alone.	g. Telev
6. Other:	h. Cellul
14. The head of household is:	19. Where i
1. Myself	a. State
2. Someone else	b. Town
15. How many people are economically dependent on you?	20. What is
16. With whom do you share financial responsibility for your family?	(List the eth which the s genous", "A option for "r
1. My spouse	σρασιτίοι τ
2. No one	
3. Other:	

# do you normally live? own home

- ented home
- a relative
- using provided by my employer

# of the following are available in the e you live?

a. Electricity	Yes / No
b. Drinking water	Yes / No
c. A sewage system	Yes / No
d. A gas system	Yes / No
e. Telephone	Yes / No
f. Internet	Yes / No
g. Television	Yes / No
h. Cellular network	Yes / No

## is your current residence?

/ City

# your ethnic / tribal affiliation?

hnic / tribal groups of the country in survey is being conducted, e.g. "indifrodescendant", "mixed race". Add an none of the above".)

# **Section 3. Social protection**

21. Do you have health insurance?	24. Are you entitled to any of the following oc- cupational risk system benefits?
1. Yes:	
(continue with question 21(a))	a. Disability benefits
2. No (continue with question 23)	b. Funeral expenses
3. I don't know. / No reply (continue with ques-	c. Hospitalization
tion 23)	d. Drugs
21a. Does your health insurance cover occupa-	e. Prostheses and other devices
tional accidents or diseases?	f. Medical care
1. Yes	g. Travel costs
2. No	h. Therapy
3. I don't know. / No reply	i. Rehabilitation
22. Under your health insurance scheme, you are a:	j. None of the above
1. Beneficiary	k. I don't know.
2. Contributor	25. Are you entitled or a contributor to an old
23. Are you entitled to paid annual leave (vaca-	age benefit scheme?
tions)?	1. Yes To which one?
1. Yes	2. No
2. No	3. I don't know.

## Section 4. Access to healthcare

26. Have you required treatment a	at a health
centre in the past few months?	Yes / No

# 27. What is the travel time from your workplace to the health centre that you use?

- 1. Less than 30 minutes
- 2. 30 minutes to an hour
- 3. 1-2 hours
- 4. More than 2 hours
- 5. I don't know.
- 6. I don't use a health centre.

# 28. How long do you wait before receiving the requested healthcare?

- 1. Immediately
- 2. The same day
- 3. The next day
- 4. Two or three days
- 5. A week
- 6. A month
- 7. More than a month

29. What are your out-of-pocket costs when receiving healthcare?	30. What is your primary means of transport from the farm where you work to the health centre?
1. Transport	1. Public transport
2. Food	2. A private vehicle
3. Housing	3. Walking
4. Medicines / Drugs	4. A horse, mule or similar animal
5. Photocopies	5. Other:  31. On average, what are your out-of-pocket
6. Co-pays	costs for healthcare per month?
7. Other:	1. \$ (in the local currency)
8. None of the above	2. I don't know.
Section 5. Health conditions	
32. Generally speaking, how is your health?	34. To which of the following do you have access in the place where you normally live?
1. Excellent	a. Specialist doctors Yes / No
2. Very good	b. Specialized medical tests Yes / No
3. Good	
4. Fair	
5. Poor	d. Rural health programmes Yes / No
33. Which of the following statements is true for you?	e. Other: Yes / No
a. I can't work the way I used to do.	
b. I am in a great deal of pain all the time.	
c. I cannot perform moderate or heavy manual work.	
d. I cannot work as much as I used to.	
e. Other:	

# Section 6. Lifestyle

35. How often do you engage in physical activity other than work (walking, running, stairs, housework, gardening, other)?	41. On average, how many cigarett smoke per day?	es do yo
1. Often	42. Do you drink alcoholic beverages?	Yes/N
2. Sometimes	43. Which of the following do you norm On average, how many drinks do you h	-
3. Never	time and how often do you have them	
36. A balanced daily diet includes (describe a balanced diet for the region in which the census	1. Spirits Yes /	No
is being conducted, e.g. "fruits and vegetables,	Number of drinks:	
fish, rice, etc."). Do you think your nutrition is balanced?	Frequency: daily / weekly / monthly	/ other:
1. Often		
2. Sometimes	2. Rum Yes /	No
3. Never	Number of drinks:	
37. Do you think you eat a lot of sweet, salty, junk or high-fat food?	Frequency: daily / weekly / monthly	/ other:
1. Often	3. Wine Yes /	No
2. Sometimes		INO
3. Never	Number of drinks:	
38. How much do you weigh (in kilograms)?	Frequency: daily / weekly / monthly	/ other:
	4. Beer Yes /	Nie
39. How tall are you (in metres)?		NO
40. Do you smoke cigarettes or other tobacco	Number of drinks:	
products?	Frequency: weekly / monthly / other	:
1. Never		
(continue to question 42)	5. Other:	
2. Not in the past five years		
(continue to question 42)	Number of drinks:	
3. Not in the past year (continue to question 42)	Frequency: weekly / monthly / other	:
4. Yes, during the current year		

45. Which drug(s) do you use?
a. Marihuana Yes / No
b. Pasta base Yes / No
c. Cocaine Yes / No
d. Other:Yes / No

# 46. Please check the appropriate boxes

	1. Always	2. Sometimes	3. Never
a. Do you sleep well and feel rested?			
b. Do you feel able to handle stress or tension in your life?			
c. Do you enjoy free time?			
d. Do you feel that you are always in a rush?			
e. Do you feel annoyed or angry?			
f. Are you a positive thinker / optimist?			
g. Do you feel tense?			
h. Do you feel depressed or sad?			
i. Are you satisfied with your work or activities?			

# 47. How do you take prescription and non-prescription drugs?

- 1. Exactly as indicated
- 2. Fewer than indicated
- 3. More than indicated

# **SECTION 7. PSYCHOSOCIAL RISKS**

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48. During a normal working day, how often do you...

	1. Always	2. Sometimes	3. Never
a. Do you have to work very fast?			
b. Your job requires you to keep track of many things at the same time?			
c. Your job requires you to hide your emotions or feelings?			
d. Your job allows you to apply your knowledge and/or skills?			
e. Your job allows you to learn new things?			
f. You can influence the amount of work you are given?			
g. Receive help from your superiors or immediate bosses in carrying out your work?			
h. Do you receive help from your colleagues in carrying out your tasks?			
i. Your salary is fair in relation to your work performance?			

# 49. For each of the following statements, please choose the answer that best describes your situation at work.

	1. Always	2. Sometimes	3. Never
a. Your co-workers help you and support you			
b. Your boss helps you and supports you			
c. You are consulted before setting your work objectives			
d. You are involved in improving the work organisation or the work processes in your department or organisation			

	1. Always	2. Sometimes	3.Never
e. You have a say in the choice of your co-workers			
f. Is able to take a break when he/she wishes to do so			
g. You have enough time to do your job			
h. Your job provides you with the feeling of a job well done			
i. You can put your own ideas into practice in your work			
j. You have the feeling that you are doing useful work			
k. You know what is expected of you at work			
l. You are treated fairly at your place of work			
m. You experience stress at work			
n. You can influence decisions that are important to your work			
o. Your job requires you to hide your feelings			

# 50. For each of the five statements, which best defines how you have felt during the last two weeks: How often have you...?

	1. All the time	2. Occasional	3. Never
a. I have felt cheerful and in a good mood.			
b. I have felt calm and relaxed			
c. I have felt active and energetic			
d. I have felt fresh and relaxed			
e. My everyday life is full of things that interest me			

# Section 8. Working conditions and hazards

# 51. Over the past 12 months, what types of work have you performed? Indicate the number of months.

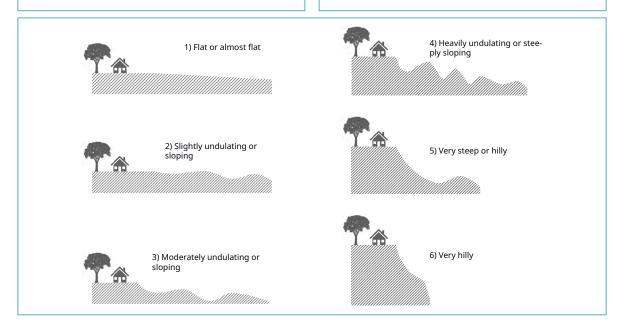
	Months
a. Coffee production	
b. Another type of agricultural work	
c. Another economic activity	

# 52. What coffee-related tasks do you perform on the farm?

- a. Weeding
- b. Pest control
- c. Pulping
- d. Administration
- e. Planting
- f. Picking
- g. Drying
- h. Loading, transporting and unloading sacks
- i. Fertilizing
- j. Pruning
- k. Storage

# 53. What is the predominant topography of the farms where you normally work? (see figures)

- 1. Flat or almost flat
- 2. Slightly undulating or sloping
- 3. Moderately undulating or sloping
- 4. Heavily undulating or steeply sloping
- 5. Very steep or hilly
- 6. Very hilly



53 a. For how long (in years) have you been picking coffee?	59. In addition to your wages, do you receive any of the following while on the farm?		
53 b. On average, how many kilos of raw coffee to you pick in a day at the height of the harvest	a. Breakfast Yes / No		
season? kilos	b. Lunch Yes / No		
54. How many days a week do you work?	c. Dinner Yes / No		
1 2 3 4 5 6 7	d. Lodging Yes / No		
55. How many hours a day do you work?	e. Transport Yes / No		
1 2 3 4 5 6 7 8 More than 8 hours	f. A share of the coffee produced Yes / No		
56. How many months out of the year are you normally involved in coffee production?	g. Bonuses Yes / No		
E F M A M J J A S O N D	h. Other: Yes / No		
57. How are your wages calculated?	i. None of the above		
1. Per full (working) day (continue to 54 a)	60. When are your work tools replaced?		
2. Per kilo of coffee picked (continue to 54 b)	1. When they are worn out		
3. I don't know (continue to 55)	2. When they are damaged		
57 a. On average, how much are you paid per full (working) day?	3. Other:		
\$	4. They are never replaced.		
57 b. On average, how much are you paid per	61. In what condition are your current work tools?		
kilo of coffee picked?	1. Excellent		
\$	2. Good		
58. How often are you paid?	3. Fair		
1. Every day	4. Poor		
2. Once a week	62. Are you given personal protective equip-		
3. Every two weeks	ment or other ítems?		
4. Once a month	1. Yes		
5. By the job	2. No (continue to 59c)		
6. Other:			

# 20

# 62 a. Which personal protective equipment or other items do you receive?

a. Boots (black)	Yes / No
b. Pail or basket	Yes / No
c. Cap	Yes / No
d. Plastic	Yes / No
e. Eye protection	Yes / No
f. Gloves	Yes / No
g. Mask or face shield	Yes / No
h. Overall	Yes / No
i. Boots for use with agrochemicals	Yes / No
j. Tools	Yes / No

# 62 b. Which of the following can you say about the personal protective equipment and other work-related items that you receive?

a. They are adequate and provided	
in sufficient numbers	Yes / No
b. I know how to use them	Yes / No

c. I have been taught how to use them Yes / No

d. None of the above Yes / No

# 62 c. Which personal protective equipment and other work-related items do you use?

a. Boots (black)	Yes / No
b. Pail or basket	Yes / No
c. Cap	Yes / No
d. Plastic	Yes / No
e. Eye protection	Yes / No
f. Gloves	Yes / No
g. Mask or face shield	Yes / No
h. Overall	Yes / No
i. Boots for use with agrochemicals	Yes / No
j. Tools	Yes / No

### 63. As a coffee worker, how often do you believe that you are exposed to the following hazards?

Type of hazard	1. Often	2. Sometimes	3. Never
a. Parasites			
b. Insect and other animal bites			
c. Snake bite			
d. Fluids and excrement			
e. Noise			
f. Vibration			
g. The sun			
h. Fertilizers, pesticides, fungicides, and herbicides			
i. Conflicts with co-workers or with the owner of the farm			

	1. Often	2. Sometimes	3.Never
j. Long working hours			
k. Standing, kneeling or squatting for more than two hours during the working day			
l. Above-the-head arm movements or repetitive hand movements			
m. Lifting or carrying loads (bags or sacks of coffee) or pushing objects			
n. Use of machinery or hazardous items that can wound, bruise or crush body parts			
o. Electrical contact or shock			
p. Inadequate order and cleanliness			
q. Work at heights			
r. Landslides, floods, fires and other natural disasters or emergencies			
s. Perceived physical assault or sexual/psychological harassment by co-workers or farm-owners			
t. Inability to decide when to take a rest			

64. Have you received	training	on occupati	ona
safety and health ma	tters?	Yes / No	

# 65. In the event of an emergency, do you have:

a. A first aid kit	Yes / No
b. Training	Yes / No
c. Transport	Yes / No
d. Emergency contacts	Yes / No
e. Fire extinguishers	Yes / No
f. Emergency protocols	Yes / No
g. A stretcher	Yes / No
h. Other:	Yes / No
i. None of the above	Yes / No
i I don't know	Yes / No

### 66. Are there enough sanitary facilities (toilets or latrines) in your workplace? Yes / No

# 67. What is your primary source of drinking water?

- 1. A public or communal supply of piped water
- 2. Rainwater or a river, stream or spring
- 3. Bottled water
- 4. Other: \_\_\_\_\_

# Section 9. Accidents and changes in health

# 68. During the past year, have you had any accidents while engaged in coffee production?

- 1. Minor
- 2. Serious
- 3. None (continue to 80)

## 69. What type of injuries have you had while at work?

a. Superficial injury	Yes / No
b. Bruise/crushing	Yes / No
c. Sprain, tear, etc.	Yes / No
d. Internal injury	Yes / No
e. Amputation	Yes / No
f. Loss of an eye	Yes / No
g. Acute intoxication	
or poisoning	Yes / No
h. Electrical shock	Yes / No
i. Burn	Yes / No
j. Fracture	Yes / No
k. Dislocation	Yes / No
l. Wound	Yes / No
m. Sun exposure (heat stroke)	Yes / No
n. Choking	Yes / No

# 70. Have you had to stop work as a result of any of these injuries?

- 1. Yes, permanently
- 2. Yes, temporarily
- 3. No

### 71. Have you had to modify or adapt your work as a result of any of these injuries?

- 1. Yes, permanently
- 2. Yes, temporarily
- 3. No

### 72. How long ago was your last occupational accident?

- 1. Less than a month ago
- 2. 1-6 months ago
- 3. 6-12 months ago

### 73. What parts of your body were affected by this type of accident?

### 74. When did the accident occur?

- 1. At the beginning of the working day
- 2. In the middle of the working day
- 3. At the end of the working day

### 75. What were you doing at the time?

a. Weeding	Yes / No
b. Pest control	Yes / No
c. Pulping	Yes / No
d. Administration	Yes / No
e. Planting	Yes / No
f. Picking coffee	Yes / No
g. Drying coffee	Yes / No
h. Loading, transporting	
and/or unloading sacks	Yes / No
i. Fertilizing	Yes / No
j. Pruning	Yes / No
k. Storing coffee	Yes / No

Yes / No

I. Other: \_\_\_\_\_

76. By what were you injured?			d. Family	(continue to 81)				
a. Machinery and equipment b. Transport vehicles			e. Other:	(continue to 81)				
		80.	. Why did you not report th	e accident?				
·	1.		a. Fear	Yes / No				
c. Tools, implements or utensi	IS		b. Ignorance	Yes / No				
d. Materials or substances			c. Repercussions	Yes / No				
e. Sun exposure			·					
f. The work environment (surf	aces, furniture)		d. Didn't think it was important Yes / No					
g. Animals (or animal product	s)		e. Distance	Yes / No				
h. Other:			f. Other:	Yes / No				
77. What types of accident have you had?			81. Who treated you for the work-related accident?					
a. Falls			1. Myself or my family					
b. Struck by falling objects			2. A pharmacy or drugstore	2				
c. Trips, bumps and bruises d. Jamming e. Overexertion or clumsiness f. Electrical shock		<ul> <li>3. A physician in private practice</li> <li>4. A traditional healer</li> <li>5. Other:</li> <li>82. How many days were you off work as a result of the accident?</li> </ul>						
					g. Exposure to or contact wit tances	h harmful subs-	83. Who covered the costs associated with the work-related accident?	
					h. Other:			
						- ****	a. /	A group of workers
78. Did you report the work-rela	ted accident?	b. I	b. Myself					
1. Yes		c. N	c. My family					
2. No (continue to 80)		d. Health insurance						
79. Which person or agency did you inform that you had had a work-related accident?			Other:					
a. My employer	(continue to 81)							
b. A health centre	(continue to 81)							
c. The agency that handles occupational accidents	(continue to 81)							

# Section 10. Changes in health

# **84.** Have you been diagnosed with any illness over the past year? Yes / No (continue to question 88)

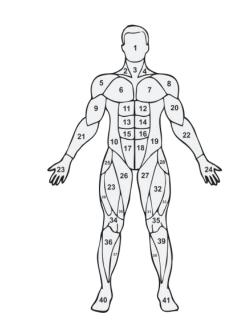
### 85. What type of illness?

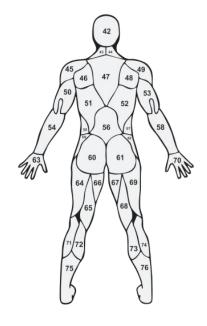
- a. Infectious or parasitic disease
- b. Cancer
- c. Mental disorders
- d. Eye conditions
- e. Hearing problems
- f. Cardiovascular or cerebrovascular system
- g. Respiratory system
- h. Digestive system or liver
- i. Muscles, bones and joints
- j. Genitourinary system
- k. Poisoning
- l. Other: \_\_\_\_\_

# 86. How many days were you off work as a result of the illness?

- 1. 2 days or less
- 2. 3-7 days
- 3. A month
- 4. More than a month
- 5. None

# 86 a. What part of your body has been affected by illnesses or ailments? (see figure)



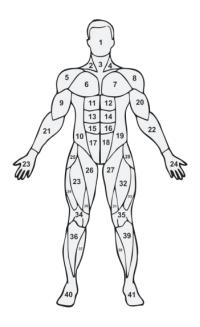


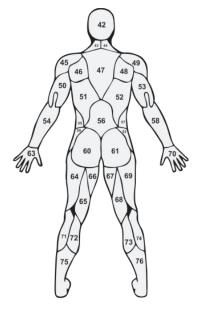
87. In the past year, have you had any other type of undiagnosed illness or ailment?

Yes / No (continue to question 91)

87 a. Which undiagnosed illnesses or ailments have you had?

87 b. What part of your body has been affected by this illness or ailment? (see figure)





88. How did you deal with the illness or ailment (if you answered "Yes" to question 75 or 76)?

- a. Drugs
- b. Rest
- c. Therapy
- d. Change of work
- e. Surgery
- f. Other: \_\_\_\_\_
- g. Nothing

# 89. What medical restrictions resulted from the illness or ailment?

- a. Avoid contact with chemicals
- b. Avoid heavy lifting
- c. Avoid direct sun exposure
- d. Avoid remaining in the same posture for more than two hours at a time
- f. None

90. Over the past 12 months, have you been or are you in the process of being diagnosed with any illness related to your coffee production occupation or work?

Yes / No

# Section 11. Impact of accidents and changes in health

91. Do you have any type of disability as a result of a coffee-production-related accident or changes in your health?	92. What was the economic impact of the accident or change in health on your family?
a. Sensory	a. Change in household income
b. Motor	b. A move (leaving the area)
c. Mental	c. A relative had to support the family finan- cially
d. None of the above	d. Sale of property
e. I have not had any accidents or changes in	e. Other:
my health. (end the survey here)	f. None

Survey data	
Time completed:	
Interviewer:	
COMMENTS	
Record any important facts that will facilitate interpretation of the data or location of the interview the next survey is conducted.	vee when



# **International Labour Organization**

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