



OCCUPATIONAL HEALTH

Issue 139. April 2009

How to encourage workers to participate in the improvement of Occupational Health and Safety?





Editor's note

Protecting Workers' Health following the Financial Tsunami of 2009

Policy and Social Issues

Evaluation of Existing Problems Associated with Occupational Safety and Health Statistics and Related Suggestions for Amelioration

China Highlight

The 2nd Mainland & Hong Kong Work Injury Prevention & Occupational Rehabilitation Symposium



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OH Issue 139

Protecting Workers' Health following the Financial Tsunami of 2009

As the world economic situation worsens under the impact of the global financial crisis, the number of workers facing unemployment or underemployment continues to increase. Given the severity of the situation, the role of the Hong Kong Workers' Health Centre in promoting an awareness of occupational health protection for workers in Hong Kong and South China has become all the more vital.

The Centre recently succeeded in persuading the Hong Kong government to compensate workers suffering from mesothelioma, an occupational disease caused by contact with asbestos. Centre staff members conducted walk-through surveys of old private buildings in Hong Kong and performed lab tests on the building materials. Not surprisingly, many of these buildings contained asbestos, and the Center subsequently alerted local labor unions, professional organizations and the government to the need to protect the health of maintenance workers. The issue was particularly pressing given the Hong Kong government's intention of launching a subsidy scheme for owners to renovate 1,000 older private buildings in May 2009 as part of an effort to create job opportunities.

In addition to its advocacy on the issue of asbestos, the Hong Kong Workers' Health Centre completed an action research study of aircraft baggage handlers at the Hong Kong International Airport last year. More recently, it completed a study of musculoskeletal disorders suffered by massage practitioners. In both cases, workers face a high risk of work injury associated with manual handling or problem in ergonomics. Earlier this year, the Centre invited Dr. Kazutaka Kogi, of the Institute for the

Science of Labour, to deliver a participatory work stress management training workshop and a participatory training on occupational health in both Hong Kong and in South China. The feedback from these workshops and trainings were both very positive. Dr. Kogi was recently elected President of the International Commission of Occupational Health (ICOH). The Hong Kong Workers' Health Centre extends its congratulations to him and affirms its intention to continue promoting the participatory occupational health training model in Hong Kong and South China.

As part of its effort to promote work injury rehabilitation, the Center has set up a team of four persons in Chengdu to provide social and occupational rehabilitation services injured survivors of the 512 earthquakes in China's Sichuan province. Based on our previous experience of serving people with work injury in urban and rural settings in China, we believe that the project will help improve the quality of life for approximately 150 injured survivors in the coming year.

We ask for your blessings and support so that we may continue to pursue our vision of protecting workers' health during this time of financial crisis.

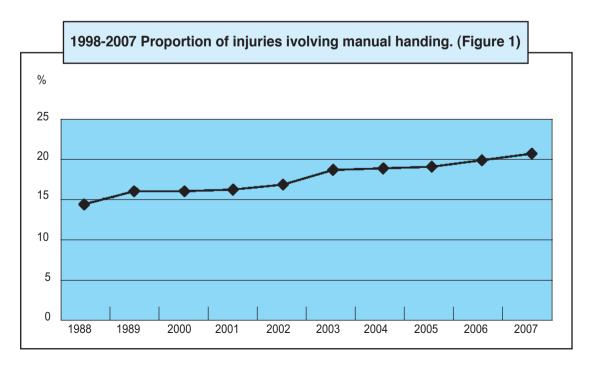
Evaluation of Existing Problems Associated with Occupational Safety and Health Statistics and Related Suggestions for Amelioration

The Hong Kong (HK) government and relevant authorities recently announced that the local rate of occupational injury has dropped significantly in the past ten years. This downward trend has also been evident in statistics for the first half year of 2008. In light of this, we take this opportunity to review the occupational safety and health statistics for the past ten years, analyze once again the local statistics and, for reference purposes, gather related statistical information about the occupational safety and health statistics from other countries. While we are pleased with this recent local downward trend, there remain three issues of concern in the statistical pattern of occupational injuries in Hong Kong.

Cases of injuries involving manual handling continue to increase

Injuries incurred in manual handling were the

second highest type of accident resulting in death or injury between 2005 and 2007. When compared with death or injury figures from 1998 to 2007, the percentage of total death or injury numbers in this category increased from about 14% to over 20% (See Figure 1). The percentage increase was nearly 15% when compared with the death or injury figures from the past five years, (i.e. 7893 persons in 2002 and 9074 persons in 2007) (See Figure 2). The Occupational Safety & Health Regulation promulgated by the HK Government in 1998 set in place preventive measures to deal with hazards related to manual handling and operation. The subsequent rise in such injuries during the past 10 years highlights the failure of such regulatory efforts to guarantee effective protection for workers. Given that current guarantees are insufficient, the HK Government should re-evaluate the feasibility of



Year	Total no. of occupational injuries and deaths at all working place	No. of manual handling injuries case	Total %
1998	63562	8983	14.1
1999	58841	9214	15.7
2000	58092	9185	15.8
2001	53719	8579	15.9
2002	47023	7893	16.7
2003	42022	7816	18.5
2004	44025	8195	18.6
2005	44267	8375	18.9
2006	46937	9337	19.8
2007	43979	9074	20.6

(1998-2007) Occupational Safety and Health Statistics. (Figure 2)

enforcing the current regulations, and strengthen supporting measures in the areas of publicity and education. Only then will it be possible to reduce the dangers of manual handling and operation, and ensure occupational safety and health for such workers

Statistics still do not reflect the occupational safety and health conditions for the self-employed

According to the current definition, only cases involving injured employees are included in statistics on occupational injury while the self-employed are excluded. Data collected in the General Household Survey Quarterly Report from 2004 to the third quarter of 2008, showed that there was an average of over 230,000 self-employed persons in HK representing a large percentage of the total labor population. The number of "fake self-employed" persons in HK has increased in recent years, especially in industries such as transportation, construction, express delivery, installation, etc. In part, this phenomenon may be the

result of poorer economic conditions and the tendency among employers to avoid the expenditures due to regular employees such as MPF, labor insurance, annual leave, etc. Self-employed or "fake selfemployed" persons also tend to engage in industries such as construction and transportation which have a high-risk of occupational injury. If figures for occupational injury do not reflect the real conditions among these injured workers, should not the government carefully consider improving its existing methods of data collection so that its statistics offer a better reflection of reality?

Consider the method adopted by the British Government as a reference: In addition to the occupational injury numbers submitted by employers, the Health and Safety Estimate (HSE) also includes the Labor Force Survey which allows workers to submit a self-report regarding their work-related illnesses. This survey is conducted yearly and includes a total of approximately 53,000 self-employed individuals. Although this selfreport method cannot provide absolutely accurate and reliable figures, it does make provision for the selfemployed in the statistics, and reflects cases in which employees leave work or take leave to see a doctor for reasons unrelated to workplace injury or illness.

Still lacking a clear and definite goal for long-term solutions to problems of occupational safety and health

Although the rate of occupational injury in Hong Kong is falling each year, the HK government still has no long-term plan to ameliorate the situation commensurate with human cost of these injuries. In contrast, a good number of countries have made considerable efforts to gather local workplace safety and health statistics, make them publicly available, and list the criteria for achieving their goals and the criteria used as a basis for regulations. Let's consider an example from the United States:

In its 2005 financial year, the United States Department of Labor established a plan whose central focus was to bring about improvements in several labor sectors. One of the proposed measures dealing with safety and health proposed a series of projects aimed at improving the occupational safety and health situation. For example, through the revision and strengthening of the enforcement of regulations related to workplace safety and health, it sought to improve cooperation between employers and employees, and provide a plan for education and support. The plan clearly listed several indicators and goals. For example, it prescribed a 5% drop in work-related deaths in 2011 compared with 2005, and a drop in accident rates in workplace settings involved in the Voluntary Protection Programs (VPP) to half of the national accident rates for their industry category.

As we can see from the above examples, any effective improvements in workplace safety and health will require the government to set clear goals for itself. In addition, it will need to establish cooperative measures and regularly assess their effectiveness and progress. Only in this way will resources be used more efficiently and will more evident improvements be reached.

With the global economy depressed and the economy in Hong Kong under a dark cloud, there is the possibility of a weakening of labor welfare and benefits. In the context of a depressed employment situation there may be a relative increase in workers neglecting their health and taking greater risks in order to preserve their jobs. This confronts the system guaranteeing workplace safety and health with a severe test. As we view this situation, we hope the government will undertake an expansion of more efficient policies and measures to guarantee workplace safety and health. We also hope that related organizations will cooperate and collaborate to create a much safer and healthier working environment and establish a more harmonious community.

Reference data

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POSITIVE Training Workshop — "How to encourage workers to participate in the improvement of Occupational Health and Safety"

The POSITIVE training workshop entitled. "How to encourage workers to participate in the improvement Occupational Health and Safety" was held at the Shenzhen Seaview O.City Hotel from June 11 to June 12, 2008. The event was organized by the Hong Kong Worker's Health Centre in collaboration with the Shenzhen Hospital for the Prevention and Treatment of Occupational Diseases and the Shenzhen NanShan Centre for Disease Control and Prevention. The two speakers, Dr. Kazutaka Kogi from Japan and Dr. Yu Tak Sun from The Chinese University of Hong Kong, were strong proponents of the POSITIVE training model for enhancing worker health and safety. Dr Kogi has had a great deal of experience promoting POSITIVE training in Southeast Asia for the International Labour Organization, and has achieved especially significant results in the Philippines. Conversely, this model of training has only recently been introduced in China.

The workshop attracted participants from a wide variety of backgrounds and occupations. Over 40 professionals from governmental and social services organizations attended, including the International Brands' corporate social responsibility staff, medical experts from the Centre for Disease Control and Prevention, and hygienists from the Hong Kong Institution of Occupational and Environmental Hygiene.

During the course of the workshop, Dr. Kogi and Dr. Yu demonstrated instructive games, on-site inspection techniques, and how to keep the focus on occupational health and safety. The expectation was that participants would take what they learned and apply it in their workplaces. Stress was placed on the POSITIVE training model's effort to involve frontline workers on both the factory floor and in managerial improvements in occupational health and safety. The use of an on-site checklist was demonstrated by having the speakers and participants visit a printing factory in Shenzhen for a mock on-site inspection. Participants were asked to mark the POSITIVE training checklist while examining six aspects of the factory: (1) Storage and handling of materials (2) Job details (3) Machinery safety (4) Work environment (5) Welfare facilities and (6) Environmental protection. Following the inspection, participants were formed into groups to evaluate the findings. Each group then identified, discussed and evaluated the positive and negative findings and concluded with a proposal for improvements.

Many participants expressed their appreciation for the workshop and to Dr. Kogi and Dr. Yu for sharing their expertise in this field. They found the mock inspection and group discussion particularly helpful in helping them gain a better understanding of the POSITIVE training model and growing more confident about applying it in their own workplaces. Plans are under discussion to have Dr Kazutaka Kogi return to China and Hong Kong in the near future to hold the POSITIVE training workshop. For those interested in attending, information will be placed in our bi-monthly journal and on our website.



Dr Kazutaka Kogi guides the participants to visit a factory for a mock on-site inspection.



Workshop participants pose for a photo with the speakers after the training workshop.

Occupational Rehabilitation

From injured worker to comic and animation producer

When workers have recovered from work injury they may, for various reasons, not be able to return to their original work position. Not surprisingly, this can result in some of them becoming depressed and losing interest in living life to the full. As occupational social rehabilitation workers, it is our role to help them to renew their confidence, learn new skills, and be willing to re-integrate into society.

In November 2007, The Guangdong and Hong Kong Work Injury Prevention and Rehabilitation Resource Centre (the Resource Centre) began receiving support from the Hong Kong Workers' Health Centre and the Guangdong Provincial Work Injury Rehabilitation Center. Through this collaboration, the Resource Center began introducing programs to help injured workers regain work skills

after rehabilitation; rebuild their confidence to return to work, and engage in community action. It also started the so-called "New Capability New Competition-Work Injury Workers Computer Training Class".

In January 2008, the Resource Centre initiated a free six-month Information Technology (IT) training class for eight injured workers interested in comic books and animation. The focus of this class was on practical training in the theory and skill of comic book design and animation production.

Six months later, the delicate and beautiful animated cartoon "Chinese Story" appeared, with characters like the lovely YY and the knowledgeable and kindhearted Ah Koo who talked about interesting

idioms. Viewers found it hard to imagine that the cartoon had been produced by eight medium-level injured workers who, months earlier, had no basic computer knowledge and knew nothing about comic book design and animation. The training class helped these injured workers create a miracle.

The process was not, however, without its ups and downs. During the course of these six months and under the tutorship of their instructors, these students had to move from confusion to clarity, from immaturity to maturity, and from doubt to confidence. Let us listen to some of their comments:

Yuen Yuen observed, "If you want to succeed, you have to face each obstacle with a peaceful mind and see the experience as a preparation not a failure."

Xiao Bai urged other workers, "Please don't give up even though you are disabled. You have to find a way out."

Yan Zi said, "We have to signal society that we will not give up because of our disability. Once we

are offered an opportunity, we will try our best. Besides, we have to let injured workers know that not everything is lost after injury. If we do not give up, society will not abandon us."

In having the opportunity to express their feelings, these workers underwent a metamorphosis. Although their wounds still exist, they are happier than before and have found new freedom and confidence in living with their disability.

Following half a year of practice, the first batch of training class workers is now a qualified animation team. They have set up their own workshop -"Bai Guang animation workshop" in order to produce more animated cartoon series that talk about Chinese stories. We are not sure what kind of difficulties they will encounter in the future, but we believe self-confidence and a resolute will are the best means to overcome the challenges of disability..

If you are interesting in their animation production, please contact the Resource Centre directly at (8620)3765 2162.



The "Chinese Story" with its characters the lovely YY, and the knowledgeable and kindhearted Ah Koo.



They are the first batch of qualified animation team members, now working at their own workshop - "Bai Guang animation workshop"

The 2nd Mainland & Hong Kong Work Injury Prevention & Occupational Rehabilitation Symposium

The Second Mainland & Hong Kong Work Injury Prevention & Occupational Rehabilitation Symposium was held in Changsha, Hunan, from June 13-16, 2008. The Hunan Province's Department of Labour & Social Security was the principal organizer with assistance from The Hunan Provincial Board of Social Insurance, The Hunan Medical and Occupational Injury and Maternity Insurance Research Association, The Hong Kong Workers' Health Centre, and The Guangdong Provincial Work Injury Rehabilitation Center. The Symposium gathered more than 300 international participants and Hong Kong and Mainland experts from areas such as medical rehabilitation, work injury prevention, work injury insurance policy, and occupational rehabilitation.



Dr. Ip Fu Keung of the Hong Kong Workers' Health Centre gave the opening remarks at during a ceremony on June 14. Two additional guest speakers were

invited to address the symposium's central topic of "Work Injury Prevention & Occupational Rehabilitation Development". The first was Dr. Kazutaka Kogi, former International Labour Organization Occupational Safety and Health Branch Chief, and a renowned occupational health specialist from Japan. Also invited was the chief medical adviser to the Royal Mail Group and Director of Corporate Social Responsibility, Dr. Steven Boorman. Both are well-known experts and the titles of their talks to participants were "The Trend and Summary of Experience on Participatory Occupational Health and Safety Education Development" and "How Enterprises Support Workers who Suffer From Work Injury Returning to Work."

In addition to the contribution from foreign experts, talks were also given by Dr. Tang Dan from The Guangdong Provincial Work Injury Rehabilitation Center, Mr. Chen Gang, Chief Officer of Work Injury Insurance, Ministry of Human Resources and Social Security of the People's Republic of China, Mr. Ding Chun Ting, Director of The

Hunan Provincial Board of Social Insurance and Professor Chan Chi Hin from Department of Rehabilitation Sciences, The Hong Kong Polytechnic University. These experts shared their experience of establishing a work injury rehabilitation system, the development of work injury rehabilitation in China, the application and discussion of work injury rehabilitation, and drew comparisons with international occupational rehabilitation services.

On June 15, the Symposium provided prevention education and occupational rehabilitation experts from Hong Kong and Mainland with an opportunity to share their experience. Colleagues from the Hong Kong Workers' Health Centre spoke about their recent work on occupational rehabilitation and work injury prevention and focusing on the following topics: "Occupational Rehabilitation: The Training and Occupational Support Services Mode of Helping Work Injury Workers Returning to Work", "Hong Kong Case Management Mode on Work Injury Workers", "POSITIVE Training: The Application to Mainland Enterprises and the Outcomes of Sustaining Promoting Improvement" and "Rehabilitation Counseling: How to Help Work Injury Workers face and accept disability".

Beginning on April 1, 2004, the "Industrial Injury Insurance Regulations" of China which had been put into practice 3 years earlier, instituted a series of rules for the purpose of establishing a work injury rehabilitation model. Hunan province combined insurance funds with social resources to set up the Hunan Province Work Injury Rehabilitation Centre, providing work injury workers with a complete set of rehabilitation services. After the Symposium, around 20 Hong Kong participants paid a visit to this centre. In addition to the facilities offered by the centre to work injury workers, visitors were also impressed by the cross embroidery items made by the self-help workers group

In general, one can speak of a discrepancy in the economic development between Mainland provinces and Hong Kong. This requires that promoting work injury rehabilitation in these two contexts be pursued in different ways. The Symposium provided participants with a platform to share experience and learn from one another.

Guangzhou Work Injury Rehabilitation Self-help Group "Work Injury Workers' Self-help, Helping Others and Returning to community"

In 2003, the Guangzhou Work Injury Rehabilitation Self-help Group (Self-help Group) was set up with the support from the Guangdong Provincial Work Injury Rehabilitation Center and the Hong Kong Workers' Health Centre. The purpose of the group was to support injured workers in helping fellow workers who had suffered from work injury. When founded, the Self-help Group had only 4 core members and 50 registered members. Five years later, those numbers increased to 18 and 480 respectively. Such rapid growth and the diversification of its services were firm indications that the Group had succeeded in establishing itself as a stable and effective organization.

From April 2006 to May 2008 and with the funding support of "Partnerships for Community Development"; the Self-help Group launched the "Work Injury Workers' Self-help, Helping Others and Returning to community Scheme". In the article that follows, we would like to share with you how the Self-help Group has consolidated its early successes over the past two years and enabled workers to develop their full potential.



After years of effort, the members of the Self-help Group have increased their membership and diversified their services. Group members took this group photo after a function.

Show Concern for Community, Get In Touch with Others' Lives by Helping Others and Self-Help

The Self-help Group was set up to offer injured workers a platform for communicating and exchanging ideas. Those having had the experience of work place injury are often in a better position to encourage newly injured workers and help them deal with the difficulties of re-entering the community following treatment. Regular visits were scheduled, not only to express care for injured workers, but also to enhance their quality of life and sense of connection with society (particularly for those with serious injuries). Such visits are an opportunity for injured workers to stay in touch with the outside world rather than becoming isolated at home. For seriously-injured workers who do not have access to an elevator where they live. regular visits offer an opportunity to get out and have contact with society. The Self-help group has visited nearly 70 seriously-injured workers and their families to extend support since the scheme was launched.



Self-help Group members pay regular visits to injured workers and their families to give them support and help them reintegrate into the society.

A group of enthusiastic core members pays regular visits to the Guangdong Provincial Work Injury Rehabilitation Center. There they share information with injured workers and discuss topics such as accepting disability, community resources, policy consultation, and issues involved in reintegrating into community. The sincerity of their care often touches these workers deeply and many have been encouraged to join the Self-help Group accounting for the large increase in membership. Over the past two years, they visited 172 injured workers. With this kind of promotion and the addition of new members, the number of core members paying regular visits to the hospital has increased from three to six, and the workers being visited by each has grown from six to ten.



Self-help Group members who have finished the paper-cut training exhibited their works at the Guangdong Provincial Work Injury Rehabilitation Center.

Enhance capability and Self- Development

Good core members are the most important asset and strength of the Self-help Group and offering them training is a vital part of the program. To date, eight coremember trainings have been carried out as a way of enhancing their development and management skills. Following the trainings, core membership increased from 12 to 18 members, and there was a significant rise in their capabilities and levels of enthusiasm. Major portions of the program were subsequently initiated, organized, executed and summarized by core members as they took on more responsibility. They had gone through an

unforgettable learning process, one that empowered them to take on more responsibility.

Apart from the core-member training, training in paper-cutting has also been held regularly with paper cuttings being sent to foreign countries. Injured workers participating in this training class sell their products and donate the money to the Self-help Group.

Experience Sharing, Stepping Up for Growth

During the second year of the program, the Self-help Group members travelled to Hunan Province to meet with a local work injury rehabilitation organization known as "Dream Home". The Guangzhou Self-help Group led this exchange in a sincere, confident and humble manner, expressing heartfelt appreciation for the Hunan Self-help Group's work. The Guangzhou Self-help Group shared with their Hunan colleagues their experience in setting up and sustaining the Group, and the benefits they obtained from their participation. They also comforted the Hunan injured workers by sharing their own experience and encouraging them to help themselves and others through active participation in their own organization. There was a general sense of satisfaction and gratification among all the participants after this encounter.

Conclusion

Thanks to the support of "Partnerships for Community Development", the Guangdong Provincial Work Injury Rehabilitation Center and the Hong Kong Workers' Health Centre, the Guangzhou Work Injury Rehabilitation Self-help Group has made great progress and received wide recognition for its service. The Group is still, however, at the developing and consolidating stage, and there remains room for core members to improve their organizational skills and act more independently. In the future, we hope to initiate new projects to further strengthen the foundations of the good work that has already begun, and help core members explore ways to expand the already wonderful contributions they have made.

On the Road to Rehabilitation in Sichuan

On May 12, 2008, an earthquake measuring 8 on the Richter scale hit Sichuan Province. The earthquake not only brought physical damage but also psychological trauma to the survivors. With the loss of family members and homes, many have become desperate as they look to the future. Most of the survivors want to return to their homes but often face the prospect of having to reside in temporary camps or in log cabins if they do so. Most of the survivors need the care of family members and this can represent a great deal of stress for care-takers looking after the seriously injured.

The Guangdong Work Injury Rehabilitation Center (Rehabilitation Center) is one of the organizations that responded to the earthquake and offered 3-month rehabilitation treatment to those suffering its consequences. The Rehabilitation Center received 37 Sichuan earthquake sufferers ranging from 15 to 74 years old, though the majority was in their 30s and 40s. The level of seriousness of their injuries varied (e.g. fractures



of the backbone, pelvis, thigh, shank, ankle, etc.) and required d i f f e r e n t interventions with some undergoing surgery while others received

injections or medication. Their levels of adaptation to disability and ability to endure pressure also varied. For the front line workers at the Rehabilitation Center, the care of those who suffered in Sichuan was added to their regular task of caring for workers suffering from occupational accidents. With such a heavy workload and the emotional intensity that was part of the tragedy in Sichuan, workers at the Rehabilitation Center also came under severe psychological pressure. It was for this reason that from August 11 to August 29, 2008, I went to Guangdong in the company of another colleague to help with the situation.

During these three weeks, we used case counseling and working groups to help survivors deal with their disability and care-givers to manage the pressure of caring for so many patients. The purpose of the case counseling was to establish a relationship with the patients from Sichuan. Although we experienced cultural and language differences, we could still communicate well with each other through body language and eye contact, and they were able to voice out their worries about the challenges ahead and the difficulties in adjusting their lives in the future. During the process, we were deeply moved by their resilience. They did not blame the disaster for bringing them misfortune; on the contrary, they focused their energies on recovering fully. I remember one sufferer who cried sadly as she worried about her future. Thanks to the care of her husband, she was able to think positively and try her best to rebuild her life. Of course, there were some survivors who were not able to fully accept their disability, and we sincerely hope that they will find a way to accept their limitation in a way that allows them to move forward in a positive manner.



Care-takers support group: providing care-givers with a better understanding of the symptoms of stress, learn how to deal with it, and how to relax and express oneself.



People who embrace same experience are much easier to have mutual understanding and support. After four sessions of group sharing, care-takers had a positive move that they were willing to accept this mode of communication and express their feelings.

The working groups aimed at conveying positive messages through interaction among group members. Over the course of three weeks and with the collective effort of all the rehabilitation team's colleagues, we put forward a "care-takers support group" and a "quake survivors' adaptation group".

The "quake survivors' adaptation group" provided an opportunity for those who had suffered to express their innermost fears and emotions, realize their limitations, and equip themselves for a better future.

To conclude, the approach taken by the working group utilizing such interventions as games and discussion was quite new to both care-givers and those who suffered from the earthquakes. For this reason participants remained quiet and passive during the initial sessions, with some crying and expressing worry and anxiety. After four sessions however, their active participation increased

notably, and they were much more willing to express themselves. I remember one session at which care givers voiced their concerns and fears about living arrangements. Clients, however, were able to accept the reality of the situation and not respond with negative feedback.

Measures to address both the physical and psychological well-being of those who suffered from these earthquakes are equally important. At this time, these survivors are striving hard to overcome their difficulties and cooperate with the process of rehabilitation. The need to find new living arrangements and supports in coping with disability are not just urgent but critical and will require sustained long-term support. It is our hope that, together with others, we might contribute to helping these quake survivors maintain hope and confidence as they face the challenges ahead.

The situation of Worker's Health

Show Our Care for the Victims of the Earthquake in Sichuan

On May 12, 2008, an earthquake measuring 8 on the Richter scale hit Sichuan Province. After the earthquake, some of the victims were sent to various hospitals in different provinces to receive medical treatment and rehabilitation. The Guangdong Work Injury Rehabilitation Center (Rehabilitation Center) is one of the organizations in Guangdong province which took in injured survivors. Dr. Ip Fu Keung, one of the directors of the Center, together with our rehabilitation team paid a visit to the rehabilitation center from July 19 to July 21, 2008. The aim of the visit was to gain an understanding of the latest situation and the recovery progress of the victims, and to provide advice concerning their rehabilitation. Our center also made use of this opportunity to have an in-depth discussion with the Rehabilitation Center about ways in which the two Centers might collaborate in the coming two years

to provide victims with occupational social rehabilitation services and help them reintegrate into the community.



One of our directors, Dr. Ip Fu Keung, reviewing the latest situation including the recovery progress of the victims

2008年 7至 9月訓練課程

職業安全健康局致力為各界人士及企業,提供高質素又多元化的職安健訓練課程,職安局因應當前社會的需求,舉辦合適 的課程。本季新增課程包括叉式剷車導師重溫課程及環境衛生業技能提升計劃課程,以下為 2008 年度第三季職安局主要課 程,歡迎大家踴躍報讀。

1 一般職業安全及健康課程	1.66 個人防護設備	4 職業安全及健康管理課程
1.1 安全使用磨輪	1.67 復甦器材及自動外置式心臟去纖維顫動器的使用 1.68 起重裝置及吊掛的安全操作	4.1 建造設計管理工作坊
1.2 安全使用磨輪(英文班)	1.69 復甦器的使用	4.2 持續進步安全管理確認計劃(安全審核員)
1.3 職業意外調查	1.70 道路工程工作安全	4.3 危機管理
1.4 職業意外調查(英文班)	1.71 會議展覽行業工作安全	4.4 職業安全約章工作坊
1.5 職業意外調查(醫護業)	1.72 斜坡維修工作安全	4.5 教育機構的安全管理制度
1.6 室內工作場所的空氣質素	1.73 斜坡維修工人的基本安全	4.6 工作噪音管理
1.7 職業安全健康大使	1.74「如何減少工作壓力」	4.7 工作噪音管理(建造業)
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(建造業平安咭重溫課程)	3.10 電力裝置安裝及維修工作安全	香港北角馬寶道28號華匯中心18樓(北角港鐵站A4出口
1.57 貨櫃業強制性基本安全訓練課程	3.11 家務助理員的職安健訓練員課程	電話: 2311 3322
1.58 貨櫃業強制性基本安全訓練重溫課程	3.12 化驗室安全	
(貨櫃業平安咭重溫課程)	3.13 安全使用激光	觀塘職安健訓練中心
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1.60 人力提舉及搬運(管理階層)	3.16 輻射防護合格證書課程	電話: 3106 2000
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1.62 安全視察(英文班)	3.18《建造業工作安全文化指數調查》工作坊	電子郵件:trg@oshc.org.hk
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POHSI Service Hong Kong and Mainland China Summary Report 2009

Beginning in 2004 and together with working partners in Hong Kong and Mainland China, the Hong Kong Workers' Health Centre launched an ambitious effort to promote POHSI (Participatory Occupational Health and Safety Improvement) service. This service emphasizes the active involvement of both management and frontline workers in occupational health and safety (OHS) issues, and the enhancement of labor-management communications to ensure sustainable OHS development.

Having promoted and implemented the POHSI service for some years now, the Centre has issued a summary report describing for the general public the challenges and achievements made in implementing this model of intervention in both Hong Kong and the southern Mainland China. We believe that this report will not only serve as a useful reference for enterprises, but also increase the awareness among managers in factories and enterprises of the positive outcomes that may follow the application of this model. We hope too, that they will see POHSI service as a significant contribution to the sustainable enhancement of OHS to help create healthier and safer working environments for all workers.

For free copies of the POSHI summary report, please fill out the slip below and return it to Room 1429-1437, 14/F, Beverley Commercial Centre, 87-105 Chatham Road South, Tsimshatsui, HONG KONG or fax to (852) 2728 6968 or e-mail to info@hkwhc.org.hk



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